

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Health Resources and Services Administration**

Bureau of Health Workforce
Division of Nursing and Public Health

Nursing Workforce Diversity (NWD) Program

Announcement Type: New and Competing Continuations

Funding Opportunity Number: HRSA-16-064

Catalog of Federal Domestic Assistance (CFDA) No. 93.178

FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2016

Application Due Date: November 16, 2015

*Ensure SAM.gov and Grants.gov registrations and passwords are current immediately!
Deadline extensions are not granted for lack of registration.
Registration in all systems, including SAM.gov and Grants.gov,
may take up to one month to complete.*

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Authority: Section 821 of the Public Health Service Act (42 U.S.C. 296m), as amended by
Section 5404 of the Patient Protection and Affordable Care Act (P.L. 111-148)

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA), Bureau of Health Workforce, Division of Nursing and Public Health, is accepting applications for the fiscal year (FY) 2016 Nursing Workforce Diversity program. The purpose of this Nursing Workforce Diversity (NWD) program is to strengthen and expand the use of evidence-based approaches that have been shown to increase retention of students from disadvantaged backgrounds (including racial and ethnic minorities) from schools of nursing.

Funding Opportunity Title:	Nursing Workforce Diversity (NWD) Program
Funding Opportunity Number:	HRSA-16-064
Due Date for Applications:	November 16, 2015
Anticipated Total Annual Available Funding:	\$4,000,000
Estimated Number and Type of Award(s):	Up to 12 grants
Estimated Award Amount:	Up to \$350,000 per year
Cost Sharing/Match Required:	No
Project Period:	July 01, 2016 through June 30, 2017 (1 year)
Eligible Applicants:	<p>Eligible applicants include accredited schools of nursing, nursing centers, academic health centers, State or local governments, and other private or public entities determined appropriate by the Secretary. Faith-based organizations, community-based organizations, and Tribes and Tribal Organizations that are otherwise eligible can apply for these funds. Individuals are not eligible to apply for these funds.</p> <p>See Section III-1 of this funding opportunity announcement (FOA) for complete eligibility information.</p>

Application Guide

All applicants are responsible for reading and complying with the instructions included in HRSA's *SF-424 R&R Application Guide*, available online at <http://www.hrsa.gov/grants/apply/applicationguide/sf424rrguide.pdf>, except where instructed in this FOA to do otherwise. A short video for applicants explaining the *Application Guide* is available at <http://www.hrsa.gov/grants/apply/applicationguide/>.

Technical Assistance

A technical assistance webinar has been scheduled to help applicants understand, prepare and submit a grant application. The webinar is scheduled for:

Thursday, October 1, 2015 from 11:30 a.m.- 1:30 p.m. EST

Adobe Connect Link: <https://hrsa.connectsolutions.com/nwdfoa2016/>

Call-in Number: 888-790-3360 Participant Code: 5726044

Table of Contents

I.	PROGRAM FUNDING OPPORTUNITY DESCRIPTION.....	1
1.	PURPOSE.....	1
2.	BACKGROUND	2
II.	AWARD INFORMATION	3
1.	TYPE OF APPLICATION AND AWARD.....	3
2.	SUMMARY OF FUNDING	3
III.	ELIGIBILITY INFORMATION	4
1.	ELIGIBLE APPLICANTS.....	4
2.	COST SHARING/MATCHING	5
3.	OTHER	5
IV.	APPLICATION AND SUBMISSION INFORMATION	6
1.	ADDRESS TO REQUEST APPLICATION PACKAGE.....	6
2.	CONTENT AND FORM OF APPLICATION SUBMISSION.....	6
i.	<i>Project Abstract</i>	7
ii.	<i>Project Narrative</i>	7
iii.	<i>Budget</i>	12
iv.	<i>Budget Justification Narrative</i>	12
v.	<i>Attachments</i>	13
3.	DUN AND BRADSTREET UNIVERSAL NUMBERING SYSTEM (DUNS) NUMBER AND SYSTEM FOR AWARD MANAGEMENT.....	16
4.	SUBMISSION DATES AND TIMES.....	17
5.	INTERGOVERNMENTAL REVIEW	17
6.	FUNDING RESTRICTIONS	17
V.	APPLICATION REVIEW INFORMATION	17
1.	REVIEW CRITERIA.....	17
2.	REVIEW AND SELECTION PROCESS.....	21
3.	ANTICIPATED ANNOUNCEMENT AND AWARD DATES	22
VI.	AWARD ADMINISTRATION INFORMATION	23
1.	AWARD NOTICES	23
2.	ADMINISTRATIVE AND NATIONAL POLICY REQUIREMENTS.....	23
3.	REPORTING	23
VII.	AGENCY CONTACTS.....	24
VIII.	OTHER INFORMATION.....	25
IX.	TIPS FOR WRITING A STRONG APPLICATION.....	28

I. Program Funding Opportunity Description

1. Purpose

This announcement solicits applications for the Nursing Workforce Diversity (NWD) program.

Program Purpose

The NWD program increases nursing education opportunities for individuals from disadvantaged backgrounds, including racial and ethnic minorities that are underrepresented among registered nurses by using social determinants to guide the selection of evidence-based approaches that have been successful in retaining students from disadvantaged backgrounds in schools of nursing. The program supports projects that provide student stipends or scholarships, stipends for diploma or associate degree nurses to enter a bridge or degree completion program, student scholarships or stipends for accelerated nursing degree programs, pre-entry preparation, advanced education preparation, and retention activities.

Program Requirements

Eligible institutions must identify and describe the root causes of attrition among students from disadvantaged backgrounds. The description should include a discussion of the social determinants that inhibit student achievement and success. Applicants must document how an understanding of the social determinants will be used to guide the selection of appropriate evidence-based approaches¹²³⁴⁵ that have been successful in retaining students from disadvantaged backgrounds (including racial and ethnic minorities) in schools of nursing. Next, applicants must propose a feasible plan to apply evidence-based strategies to increase retention of students from disadvantaged backgrounds in schools of nursing student. Successful evidence-based strategies to address student retention should include various combinations of:

- Academic and peer support
- Mentoring
- Institutional and community partnerships
- Student financial support

To accomplish the program goal, applicants are expected to demonstrate that a combination of academic/peer support, mentoring, institutional and community partnerships, and/or student financial support will be effectively used to retain students from disadvantaged backgrounds with low academic achievement who are at risk of failing in schools of nursing.

¹ Noone, J. (2008). The diversity imperative: Strategies to address a diverse nursing workforce. Nursing Forum, 43(3), 133-143.

² Beacham, T., Askew, R.W., & William, P.R. (2009). Strategies to increase racial/ethnic student participation in the nursing profession. ABNF Journal, 20(3), 69-72.

³ Degazon, C.E. & Mancha, C. (2012). Changing the face of nursing; reducing ethnic and racial disparities in health. Family & Community Health, 35(1), 5-14.

⁴ Harris, R.C., Rosenberg, L., & O'Rourke, G. (2014). Addressing the challenges of nursing student attrition. Journal of Nursing Education, 53(1), 31-37.

⁵ Loftin, C., Newman, S.D., Gilden, G., Bond, M.L., & Dumas, B.P. (2013). Moving toward greater diversity: A review of interventions to increase diversity in nursing education. Journal of Transcultural Nursing, 24(4), 387-396.

Specifically, applicants must utilize social determinants that affect their target student population's achievement and success in schools of nursing by:

1. Implementing at least one partnership with an internal (i.e., institutional) and external (i.e., community) organization to improve academic achievement of students from disadvantaged backgrounds, academic enhancement, science and math instructional enrichment, and mentoring, and
2. Identifying and addressing institutional structures within schools of nursing that function as barriers to student achievement and academic success.

For this funding opportunity, successful applicants must be well positioned to implement institutional and community partnership models, approaches, and/or strategies that incorporate the social determinants into the design, implementation, and evaluation of student retention programs. Highly competitive applicants will demonstrate an organizational commitment to diversity, particularly within the field of nursing, document historical challenges with retaining students from disadvantaged backgrounds, present an analysis of the root causes behind those challenges (to include social determinants), and highlight discrete actions (e.g., hired staff, established internal programs and external partnerships) both planned and in progress as part of an evidence-based strategy to increase the retention of students from disadvantaged backgrounds.

2. Background

This program is authorized under Section 821 of Public Health Service Act; 42 U.S.C. 296m, as amended by section 5404 of the Patient Protection and Affordable Care Act (ACA), P.L. 111-148.

Nursing Workforce Diversity

The nation requires an adequate supply and distribution of well-educated and well-prepared nursing professionals. Professional nurses should reflect the cultural and social values and needs of the communities in which they serve. Diversity in the nursing workforce is necessary to achieve the goal of high-quality, safe, and accessible care. Diversity in nursing has been linked to improvements health care delivery, increased cultural competence⁶, and increased patient satisfaction.⁶

Furthermore, evidence shows that underrepresented racial/ethnic minority providers more often practice in underserved areas and thereby improve access to health care for the most vulnerable communities.⁶ Diversity in the health care workforce is cost effective and increases value-based care.⁶

The most recent nursing data show that the current nursing workforce is not representative of the population as a whole as 81% of the nursing workforce is white and female⁷. While schools of

⁶ Sullivan, L.W. (2004). Missing persons: Minorities in the Health Professions. A Report of the Sullivan Commission on Diversity in the Healthcare Workforce. Located at: <http://www.aacn.nche.edu/media-relations/SullivanReport.pdf>

⁷ National Council of State Boards of Nursing. (2013). The National Council of State Boards of Nursing and The Forum of State Nursing Workforce Centers 2013 National Workforce Survey of RNs. *Journal of Nursing Regulation*, 4(Suppl.), S1-S72.

nursing are able to recruit a diverse student body, many have had challenges in retaining students from disadvantaged backgrounds.⁷

Social Determinants and Evidence-based Practices

The social determinants literature consistently report that multiple factors including social, environmental, and structural determinants have powerful effects on an institution's ability to retain students from disadvantaged backgrounds. For example, the social and cultural climate of an institution can effect a student's decision to continue their education – students who feel a part of the campus social and cultural environment through acceptance from peers and faculty are more likely to succeed.⁸ Institutional partnerships between schools of nursing and offices of diversity and/or student affairs can assist the school with framing student program activities in a way that are socially and culturally inclusive. In addition, community partnerships (e.g., with Area Health Education Centers) can provide students with exposure to clinicians, health providers and patient populations that are racially and ethnically diverse. Providing academic and clinical practices experiences for students from disadvantaged backgrounds could contribute to student retention.

Several evidence-based models have been shown to successfully retain students from disadvantaged backgrounds—including underrepresented racial and ethnic minorities—in nursing programs. Successful models include various combinations of:

- Academic and peer support both before admission and during nursing school;
- Institutional and community partnerships;
- Mentoring and social support; and
- Student financial support.

For this funding opportunity, the applicant must focus on the social determinants while also deploying a combination of evidence-based strategies to address student retention and subsequently nursing workforce diversity.

II. Award Information

1. Type of Application and Award

Types of applications sought: New, Competing Continuations

Funding will be provided in the form of a grant.

2. Summary of Funding

This program will provide funding for federal fiscal year (FY) 2016. The project period is one year. Approximately \$4,000,000 is expected to be available to fund 12 awardees. Applicants may apply for a ceiling amount of up to \$350,000. The actual amount available will not be determined until enactment of the final FY 2016 federal budget. This program announcement is

⁸ Gilchrist, Kathleen L and Cherie Rector. "Can you keep them? Strategies to attract and retain nursing students for diverse populations: Best practices in nursing education." *Journal of Transcultural Nursing* (2007): 277-285.

subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds can be awarded in a timely manner.

Effective December 26, 2014, all administrative and audit requirements and the cost principles that govern federal monies associated with this award are subject to the Uniform Guidance, [2 CFR part 200](#), as codified by HHS at [45 CFR part 75](#), which supersede the previous administrative and audit requirements and cost principles that govern federal monies.

Indirect costs under training awards to organizations other than State, local or Indian tribal governments will be budgeted and reimbursed at eight (8) percent of modified total direct costs rather than on the basis of a negotiated rate agreement, and are not subject to upward or downward adjustment. Direct cost amounts for equipment and capital expenditures, tuition and fees, and sub-grants and subcontracts in excess of \$25,000 are excluded from the direct cost base for purposes of this calculation.

III. Eligibility Information

1. Eligible Applicants

Eligible applicants include accredited schools of nursing, nursing centers, academic health centers, State or local governments, and other private or public entities determined appropriate by the Secretary. Faith-based organizations, community-based organizations, and Tribes and Tribal Organizations that are otherwise eligible can apply for these funds. *Individuals are not eligible to apply.*

Schools of nursing affiliated with the proposed project that provide formal degree programs must be accredited by a national nurse education accrediting agency or State approval agency recognized by the Secretary of the U.S. Department of Education for the purposes of nursing education. Applicants must submit documentation providing proof of accreditation (e.g., the accreditation letter from the accrediting agency specifically stating that accreditation has been granted and the period of time covered by the accreditation) with the application as **Attachment 8**. Applications that do not include document of accreditation in **Attachment 8** will be considered non-responsive and will not be considered for funding under this announcement. Links to the accrediting body website will not suffice as evidence of accreditation.

Accreditation for Newly Established Programs of Nursing: A new program of nursing that, by reason of an insufficient period of operation, is not, at the time of the submission of an application, eligible for accreditation by such a recognized body or bodies or State agency, shall be deemed accredited for the purposes of this title if the Secretary of Education finds, after consultation with the appropriate recognized State approval or accrediting body or bodies, that there is reasonable assurance that the program will meet the accreditation standards of such body or bodies prior to the beginning of the academic year following the normal graduation date of students of the first entering class in such a program. The Letter of Reasonable Assurance from the U.S. Department of Education must be submitted with the application as **Attachment 8**. Applications that do not include document of accreditation or reasonable assurance in **Attachment 8**, as specified in this FOA, will be considered non-responsive and will not be considered for funding under this announcement.

Eligible Project Participants: Project participants must be enrolled in an accredited nursing program; a citizen of the United States; a non-citizen national of the United States; or a foreign national who possesses a visa permitting permanent residence in the United States. **Individuals on temporary or student visas are not eligible participants and may not receive NWD grant support.**

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

Ceiling Amount

Applications that exceed the ceiling amount of \$350,000 (inclusive of direct **and** indirect costs) will be considered non-responsive and will not be considered for funding under this announcement.

Deadline

Any application that fails to satisfy the deadline requirements referenced in *Section IV.4* will be considered non-responsive and will not be considered for funding under this announcement.

Multiple Applications

NOTE: Eligible applicants may submit **only one** application to this FOA. Multiple applications from any single organization are not allowed. Independent organizations are those entities that have unique DUNS numbers.

If for any reason (including submitting to the wrong funding opportunity number or making corrections/updates), an application is submitted more than once prior to the application due date, HRSA will only accept the applicant's **last** validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application.

Accreditation

Applications that do not include document of accreditation or reasonable assurance in **Attachment 8**, as specified in this FOA, will be considered non-responsive and will not be considered for funding under this announcement.

Maintenance of Effort (MoE) The recipient must agree to maintain non-federal funding for award activities at a level which is not less than expenditures for such activities during the fiscal year prior to receiving the award [as required by Sec. 803(b) of the Public Health Service Act]. Applicants must complete the Maintenance of Effort document and submit as **Attachment 5**.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA *requires* applicants for this FOA to apply electronically through Grants.gov. Applicants must download the SF-424 Research and Related (R&R) application package associated with this FOA following the directions provided at [Grants.gov](https://www.grants.gov).

Applicants should always supply an e-mail address to grants.gov when downloading a funding opportunity announcement (FOA) or application package. As noted on the Grants.gov APPLICATION PACKAGE download page, as well as in the Grants.gov User Guide on pages 57-58, this allows us to e-mail you in the event the FOA is changed and/or republished on Grants.gov before its closing date. Responding to an earlier version of a modified announcement may result in a less competitive or ineligible application.

2. Content and Form of Application Submission

Section 4 of HRSA's [SF-424 R&R Application Guide](#) provides instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract. You must submit the information outlined in the Application Guide in addition to the program specific information below. All applicants are responsible for reading and complying with the instructions included in HRSA's [SF-424 R&R Application Guide](#) except where instructed in the FOA to do otherwise.

See Section 8.5 of the [SF-424 R&R Application Guide](#) for the Application Completeness Checklist.

Application Page Limit

The total size of all uploaded files may not exceed the equivalent of **65 pages**. The page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support required in the *Application Guide* and this FOA. Standard OMB-approved forms that are included in the application package are NOT included in the page limit. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) will not be counted in the page limit. **We strongly urge applicants to take appropriate measures to ensure the application does not exceed the specified page limit.**

Applications must be complete, within the specified page limit, and validated by Grants.gov under the correct funding opportunity number prior to the deadline, to be considered under the announcement.

Program-Specific Instructions

In addition to application requirements and instructions in Section 4 of HRSA's [SF-424 R&R Application Guide](#) (including the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract), include the following:

i. Project Abstract

See Section 4.1.ix of HRSA's [SF-424 R&R Application Guide](#).

In addition to the instructions provided in the guide, the Abstract must include:

1. A brief overview of the project as a whole;
2. Specific, measurable objectives that the project will accomplish;
3. How the proposed project for which funding is requested will be accomplished, i.e., the "who, what, when, where, why and how" of a project; and
4. Statement of funding preference (if applicable).

ii. Project Narrative

This section provides a comprehensive framework and description of all aspects of the proposed project. It should be succinct, self-explanatory and well organized so that reviewers can understand the proposed project.

Use the following section headers for the Narrative:

- *PURPOSE AND NEED -- Corresponds to Section V's Review Criterion #1*

In this section applicants describe the purpose and background of the proposed project, critically evaluating the need to integrate the social determinants into evidence-based strategies to increase the number of students from disadvantaged backgrounds who are retained in schools of nursing.

Applicants must describe the institution's challenges with the retention of students from disadvantaged backgrounds and their commitment to addressing the attrition problem, to include:

- A description (with supporting evidence) of the challenges that the school of nursing has experienced with retaining students from disadvantaged backgrounds;
- A description of the pool of potential students from disadvantaged backgrounds who will receive resources and support through the program, including supporting data that describe the social, cultural, economic, and physical environments of prospective students from disadvantaged backgrounds;
- A description of the need and benefits of retaining students from disadvantaged backgrounds in schools of nursing;
- A discussion of how the applicant institution and school of nursing demonstrate a commitment to the retaining students from disadvantaged backgrounds as part of its academic mission;
- A description of institutional commitment to retaining students from disadvantaged backgrounds, including existing policies, practices and services focused on their retention;
- A description of any existing community partnerships established to support the retention of students from disadvantaged backgrounds in schools of nursing;
- A description of the types of resources that would be required to increase retention among students from disadvantaged backgrounds; and
- A description of the expected community and social impact of retaining students from disadvantaged backgrounds; and

- A description of the applicant’s plan to utilize both quantitative and qualitative data to inform Rapid Cycle Quality Improvement (RCQI) efforts to periodically review program progress and make small adjustments in order to optimize program output. Additional information on RCQI is available at the following website:
<http://www.healthworkforceta.org/resources/rapid-cycle-quality-improvement-resource-guide>

NOTE: Applicants must cite demographic and social data whenever possible to support the information provided in the narrative need section. The needs section should logically connect to the project’s goals and objectives.

- *RESPONSE TO PROGRAM PURPOSE -- This section includes 3 sub-sections— (a) Methodology/Approach; (b) Work Plan; and (c) Resolution of Challenges—all of which correspond to Section V’s Review Criteria #2 (a), (b), and (c).*
- *(a) METHODOLOGY/APPROACH -- Corresponds to Section V’s Review Criterion #2 (a).*

In this section, the applicant must provide details of the methodology and methods that will be used to integrate social determinants into evidence-based approaches to increase student retention.

Applicants must include in the methodology discussion:

- A plan to increase retention of students from disadvantaged backgrounds using a combination of evidence-based strategies to address social determinants;
- Goals and strategies with specific time-frames for completion;
- A plan for collaboration and partnerships with institutional and community entities to address the individual and social factors that both inhibit and promote nursing workforce diversity; and
- A plan for how existing academic and community partnerships with relevant educational and/or community-based entities will meet the project’s goals and objectives.

Applicants must also describe how a combination of the following evidence-based strategies will be used with the social determinants to address retention in students from disadvantaged backgrounds with poor academic achievement who are at risk of failing:

- Academic and peer support;
- Mentoring;
- Institutional and community partnerships; and
- Student financial support.

- *(b) WORK PLAN -- Corresponds to Section V’s Review Criterion #2 (b) and #4*

Applicants must submit a comprehensive Work Plan that is clear, comprehensive, complete and feasible. The Work Plan must provide a description of the strategies, activities, methods, techniques, and/or steps that will be used to achieve each of the proposed objectives that are linked to the identified need. The applicant must:

- Project the number of students each year who will receive support through the program;
- Explain how the social determinants are integrated into the project's goals, objectives, and strategies;
- Identify how students from disadvantaged backgrounds that are experiencing poor academic achievement, and are at risk for failure, will be identified and tracked;
- Identify specific evidence-based activities to retain students from disadvantaged backgrounds in nursing schools;
- Describe how each evidence-based strategy supports the proposed project's outcomes (e.g. increase the number of students from disadvantaged backgrounds that are retained in schools of nursing);
- Describe collaboration and partnerships with academic and community entities;
- Identify project personnel responsible for implementing the strategies.

Applicants must also submit a logic model for designing and managing their project. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among project elements. While there are many versions of logic models, for the purposes of this announcement the logic model must identify and describe the connections between the:

- Goals of the project (e.g., objectives, reasons for proposing the intervention);
- Inputs (e.g., organizational profile, collaborative partners, key staff, budget, other resources);
- Target population (e.g., the individuals to be served);
- Activities (e.g., approach, listing key intervention, targets);
- Outputs (i.e., process outcome such as the direct products or deliverables of program activities); and
- Outcomes (i.e., the results of a program).

This logic model should be included as part of the Work Plan.

- *(c) RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criterion #2 (c)*

In this section, applicants must provide detailed information about potential challenges in the Work Plan. Applicants must identify and discuss:

- Potential challenges that are likely to be encountered in designing and implementing the activities described in the Work Plan.
 - Approaches that will be used to resolve potential challenges.
 - Barriers that may be encountered specifically with regard to social determinants in the target populations.
- *IMPACT -- This section includes 2 sub-sections— (a) Evaluation and Technical Support Capacity; and (b) Project Sustainability—both of which correspond to Section V's Review Criteria #3 (a) and (b).*

- (a) *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criterion #3 (a)*

Applicants must describe the plan for monitoring and evaluating program performance that will contribute to continuous quality improvement. The program performance evaluation should monitor ongoing processes and the progress towards the goals and objectives, sub-objectives, activities and timelines of the project. Applicants must also describe the systems and processes that will support the organization's performance measurement through effective tracking of performance outcomes, including a description of how the program will collect and manage data and explain how the data will be used to improve project performance.

Applicants must:

- Detail the evaluation strategy to assess project objectives and activities.
- Include a plan to track, collect and report required performance measures on a semi-annual basis including:
 - student diversity data such as the number and percent of students from disadvantaged backgrounds retained in the nursing program during the project year;
 - demographic descriptions of students from disadvantaged backgrounds; and
 - student financial support.
- Describe qualitative data collection strategies including a plan to capture:
 - social determinants that were addressed using evidence-based strategies and approaches, including structural changes;
 - level of institutional support from leadership, faculty, and staff for the project;
 - type and level of community-academic partnerships; and
 - types of evidence-based strategies used to retain students from disadvantaged backgrounds.
- Describe the quantitative and qualitative evaluation measures and metrics for each objective.
- Describe the process to validate and monitor data collection, expected results, and challenges encountered.
- Describe a continuous quality improvement plan to measure and assess the program's performance. The plan will provide meaningful monitoring of ongoing processes, outcomes of implemented activities, and program toward meeting project goals and objectives.

- (b) *PROJECT SUSTAINABILITY -- Corresponds to Section V's Review Criterion #3 (b)*

The applicant must describe:

- Plans for dissemination of project results;
- Project results as having the potential for a national scope; and
- Project activities as replicable.

Applicants must provide a clear plan for project sustainability after the period of federal funding ends, including:

- Timetable for becoming self-sufficient; and
- Barriers to overcome to achieve self-sufficiency.

- **ORGANIZATIONAL INFORMATION, RESOURCES AND CAPABILITIES** -- Corresponds to Section V's Review Criterion #4

In this section, the applicant must provide information on the organization's mission and structure, scope of current activities. Applicants must describe how the institution's resources and capabilities will contribute to the project's success. A project organizational chart must be provided as **Attachment 3**.

Applicants must also include a description of:

- Facilities and infrastructure to provide academic support, student mentoring, and student financial support;
- Key project personnel qualifications, training and/or experience to provide academic support and mentor students from disadvantaged backgrounds;
- Evidence of adequate staffing plan for proposed project including the project organizational chart (**Attachment 3**);
- Percentage of time, including in-kind, dedicated to the project by the Project Director; and
- Collaborative partnerships with other entities inside and outside the applicant's academic institution including the type and role of partners and any leveraged resources.

NARRATIVE GUIDANCE	
In order to ensure that the Review Criteria are fully addressed, this table provides a crosswalk between the narrative language and where each section falls within the review criteria.	
<u>Narrative Section</u>	<u>Review Criteria</u>
Purpose and Need	(1) Purpose and Need
Response to Program Purpose: (a) Methodology/Approach (b) Work Plan (c) Resolution of Challenges	(2) Response to Program Purpose (a) Methodology/Approach (b) Work Plan (c) Resolution of Challenges
Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability	(3) Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability
Organizational Information, Resources and Capabilities	(4) Organizational Information, Resources and Capabilities
Budget and Budget Narrative	(5) Support Requested – the budget section should include sufficient justification to allow reviewers to determine the reasonableness of the support requested.

iii. Budget

See Section 4.1.iv of HRSA's [SF-424 R&R Application Guide](#). Please note: the directions offered in the SF-424 R&R Application Guide differ from those offered by Grants.gov. Please follow the instructions included the Application Guide and, *if applicable*, the additional budget instructions provided below.

Reminder: The Total Project or Program Costs are the total allowable costs (inclusive of direct **and** indirect costs) incurred by the recipient to carry out a HRSA-supported project or activity. Total project or program costs include costs charged to the award and costs borne by the recipient to satisfy a matching or cost-sharing requirement, as applicable.

The Consolidated and Further Continuing Appropriations Act, 2015, Division G, § 203, (P.L. 113-235) states, "None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II." Please see Section 4.1.iv Budget – Salary Limitation of HRSA's [SF-424 R&R Application Guide](#) for additional information. Note that these or other salary limitations may apply in FY 2016, as required by law.

iv. Budget Justification Narrative

See Section 4.1.v. of HRSA's [SF-424 R&R Application Guide](#).

In addition, the Nursing Workforce Diversity Program requires the following which corresponds to Section V's Review Criterion #5:

Consultant Services: In the budget justification provide the name, affiliation, and qualifications of each consultant, if known, and indicate the nature and extent of the consultant service to be performed. If the consultant is not yet identified, provide the desired expertise and the scope of work of the proposed consultant. Include total number of days, expected rate of compensation and total fees, travel, per diem, and other related costs for each consultant.

Participant/Trainee Support Costs: For applicants with participant/trainee support costs, list tuition/fees/health insurance, stipends, travel, subsistence, other, and the number of participants/trainees. Ensure that your budget breakdown separates these trainee costs, and includes a separate sub-total entitled "total Participant/Trainee Support Costs" which includes the summation of all trainee costs.

Personnel Costs: Applicants shall identify only **one** Project Director. The Project Director for the NWD projects must be a licensed Registered Nurse (RN).

Scholarships: Student scholarships cover tuition, fees, books, and other related educational expenses. Scholarship funds must be disbursed in logical increments throughout the academic or calendar year and may or may not cover the total expenses required by the school. Awards that are dedicated for tuition should be disbursed at the beginning of each period within the academic year (e.g. semester, quarter, term). A student can receive both a scholarship and a stipend as long as the award limitations are not exceeded and awards do not cover the same expenses.

Students are designated to receive scholarships by the applicant institution in accordance with the guidelines established by the applicant organization. The proposed project must use NWD scholarship funds in a manner that will meet the needs of eligible students. The budget narrative must indicate the number of students to receive scholarships for each year of the grant and the proposed amount of each scholarship per student. *The scholarship amount awarded to each student may not exceed \$10,000.*

Each applicant organization may request up to \$50,000 (maximum) for scholarship funds to support eligible nursing students.

Stipends: Student stipend support is provided to assist in covering the student's general living expenses. The budget narrative must indicate the stipend rate (i.e., \$500/month), the number of stipends to be awarded, and the total stipend amount for each educational level as appropriate. It is the responsibility of the applicant to justify the basis for the stipend rate requested.

The *maximum annual (12 month) amount for stipends is \$10,000 per student* and is to be prorated and paid to eligible participants at regular intervals during the budget period.

v. Attachments

Please provide the following items in the order specified below to complete the content of the application. **Unless otherwise noted, attachments count toward the application page limit.** Indirect cost rate agreements and proof of non-profit status (if applicable) will not count toward the page limit. **Each attachment must be clearly labeled.**

Attachment 1: Staffing Plan, Job Descriptions for Key Personnel, and Biographical Sketches

See Section 4.1.vi. of HRSA's [SF-424 R&R Application Guide](#) for required information. Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff.

Include biographical sketches for persons occupying the key positions, not to exceed two pages in length each. In the event that a biographical sketch is included for an identified individual who is not yet hired, please include a letter of commitment from that person with the biographical sketch. Bio sketches should be uploaded in the SF-424 R&R Senior/Key Person Profile form.

Attachment 2: Letters of Agreement and/or Description(s) of Proposed/Existing Contracts (project specific)

Provide any documents that describe working relationships between the applicant organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual agreements should clearly describe the roles of the contractors and any deliverable. Letters of agreement must be dated.

Attachment 3: Project Organizational Chart

Provide a one-page figure that depicts the organizational structure of *the project (not the applicant organization)*.

Attachment 4: Tables, Charts, etc.- If Applicable

To give further details about the proposal (e.g., Gantt or PERT charts, flow charts, etc.).

Attachment 5: Maintenance of Effort Documentation

Applicants must provide a baseline aggregate expenditure for the prior fiscal year and an estimate for the next fiscal year using a chart similar to the one below. HRSA will enforce statutory MOE requirements through all available mechanisms.

NON-FEDERAL EXPENDITURES	
<p>FY15 (Actual) Actual prior FY non-federal funds, including in-kind, expended for activities proposed in this application.</p> <p>Amount: \$ _____</p>	<p>FY16 (Estimated) Estimated current FY non-federal funds, including in-kind, designated for activities proposed in this application.</p> <p>Amount: \$ _____</p>

Attachment 6: Request for Funding Preference or Priority

To receive a funding preference, include a statement that the applicant is eligible for a funding preference and identify the preference. Include documentation of this qualification. See Section V.2 [Review Funding Preferences](#).

Attachment 7: Letters of Support

Provide a letter of support from the President of the academic institution or other high level academic officer that demonstrates the institution's commitment to the project. In addition, provide a letter of support for each organization or department involved in your proposed project, and for each entity (inside the academic institution or in the community) that will serve as partner. In general, letters of support must be from someone who holds the authority to speak for the organization or department (CEO, Chair, etc.), must be dated, and must specifically indicate understanding of the project and a commitment to the project, including any resource commitments (in-kind services, dollars, staff, space, equipment, etc.).

Attachment 8: Accreditation Documentation or New Nursing Program Approval/Reasonable Assurance

All schools of nursing that are associated with the project and conferring degrees must be accredited. Applicants must submit documentation with dates of accreditation (e.g., an accreditation letter from the accrediting agency) with the HRSA grant application.

Documentation of Accreditation

Applicants must submit documentation of program accreditation and all approvals for new programs (i.e., new tracks or specialties or substantive program change) with the application. The documentation must be in the form of a letter on official letterhead, including the start

date of approval or accreditation, and is to be signed and dated by the accrediting agency. **No other forms of accreditation documentation, including certificate of accreditation, will be accepted.**

Applicants must provide documentation needed to enroll students into the program, including those approvals needed for new courses and programs of study. Accreditation for existing programs and approvals for new programs of study must be effective prior to the start of the budget/project period during which support will be received.

If accreditation is pending or not yet granted:

- Requests for letters of reasonable assurance made to the U.S. Department of Education to allow for processing time, should be submitted **at least 45 days prior to the HRSA application due date of November 20, 2015.**
- The letter of reasonable assurance, from or on behalf of the U.S. Department of Education, must be submitted along with the application stating that the program will meet the accreditation standards effective prior to the start of the budget/project period during which support will be received.
- The accrediting body must be identified by the U.S. Department of Education within the letter of reasonable assurance.
- Applicants will need to submit contact names, addresses, phone numbers, email addresses and all correspondence sent to the U.S. Department of Education.

Substantive Change Notification

Accredited nursing programs that modify (for example, a change to a BSN-DNP program), or add nursing specialties (for example, adding Geriatric Care to a Critical Care NP program) to an existing program requires a substantive change notification submitted to the national nursing accrediting body. A letter of notification to the accrediting body and the subsequent approval of such change must be signed, dated and submitted along with the accreditation documents in **Attachment 8.**

Attachment 9: Summary Progress Report—Required for Competing Continuations only.

A well-planned summary progress report can be of great value by providing a record of accomplishments. It is an important source of material for HRSA in preparing annual reports, planning programs, and communicating program specific accomplishments. The accomplishments of competing continuation applicants are carefully considered during the review process; therefore, applicants are advised to include previously stated goals and objectives in their application and emphasize the progress made in attaining these goals and objectives. Because the summary progress report is considered when applications are reviewed and scored, **competing continuation applicants who do not include an summary progress report may not receive as high a score as applicants who do.** The summary progress report will be evaluated as part of Review Criterion 3: IMPACT.

The summary progress report should be a brief presentation of the accomplishments, in relation to the objectives of the program during the current project period. The report should include:

The period covered (dates).

Specific Objectives - Briefly summarize the specific objectives of the project as actually funded.

Results - Describe the program activities conducted for each objective. Include both positive and negative results or technical problems that may be important.

Attachment 10: Other Relevant Documents

Include here any other document that is relevant to the application.

3. Dun and Bradstreet Universal Numbering System (DUNS) Number and System for Award Management

Applicant organizations must obtain a valid DUNS number and provide that number in their application. Each applicant must also register with the System for Award Management (SAM) and continue to maintain active SAM registration with current information at all times during which it has an active federal award or an application or plan under consideration by an agency (unless the applicant is an individual or federal agency that is exempted from those requirements under 2 CFR 25.110(b) or (c), or has an exception approved by the agency under 2 CFR 25.110(d)).

HRSA may not make an award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time HRSA is ready to make an award, HRSA may determine that the applicant is not qualified to receive an award and use that determination as the basis for making an award to another applicant.

If an applicant/recipient organization has already completed Grants.gov registration for HRSA or another federal agency, confirm that the registration is still active and that the Authorized Organization Representative (AOR) has been approved.

The Grants.gov registration process requires information in three separate systems:

- Dun and Bradstreet (<http://fedgov.dnb.com/webform/pages/CCRSearch.jsp>)
- System for Award Management (SAM) (<https://www.sam.gov>)
- Grants.gov (<http://www.grants.gov/>)

For further details, see Section 3.1 of HRSA's [*SF-424 R&R Application Guide*](#).

Applicants that fail to allow ample time to complete registration with SAM or Grants.gov will not be eligible for a deadline extension or waiver of the electronic submission requirement.

4. Submission Dates and Times

Application Due Date

The due date for applications under this FOA is November 16, 2015 *at 11:59 P.M. Eastern Time.*

See Section 8.2.5 – Summary of emails from Grants.gov of HRSA’s [SF-424 R&R Application Guide](#) for additional information.

5. Intergovernmental Review

The Nursing Workforce Diversity Program is not subject to the provisions of Executive Order 12372, as implemented by 45 CFR 100.

See Section 4.1 ii of HRSA’s [SF-424 R&R Application Guide](#) for additional information.

6. Funding Restrictions

Applicants responding to this announcement may request funding for a project period of up to one year, at no more than \$350,000 in total costs (inclusive of direct **and** indirect costs). No funding will be available to support projects beyond the first budget year.

Funds under this announcement may not be used for the following purposes:

- a. Establishment of a skills lab as the sole project focus;
- b. Provision of child care/child care costs;
- c. Licensure or certification exam fees;
- d. Accreditation, Credentialing, Licensing and Franchise fees and expenses; and
- e. College entrance exam costs.

The General Provisions in Division G of the Consolidated and Further Continuing Appropriations Act, 2015 (P.L. 113-235) apply to this program. Please see Section 4.1 of HRSA’s [SF-424 R&R Application Guide](#) for additional information. Note that these or other restrictions will apply in FY 2016, as required by law.

All program income generated as a result of awarded funds must be used for approved project-related activities.

V. Application Review Information

1. Review Criteria

Procedures for assessing the technical merit of applications have been instituted to provide for an objective review of applications and to assist the applicant in understanding the standards against which each application will be judged. Critical indicators have been developed for each review criterion to assist the applicant in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation. Review criteria are outlined below with specific detail and scoring points.

These criteria are the basis upon which the reviewers will evaluate the application. The entire proposal will be considered during objective review.

Review Criteria are used to review and rank applications. The Nursing Workforce Diversity Program has five (5) review criteria:

Criterion 1: PURPOSE AND NEED (25 points) – Corresponds to Section IV’s Purpose and Need

The application demonstrates the need and the factors contributing to the need.

Reviewers will consider the extent to which the applicant:

- Describes a well-established institutional commitment to the retention of students from disadvantaged backgrounds as a central tenet of its academic mission, to include the past and present application of dedicated staffing and/or programmatic resources for the purpose of retaining those students.
- Articulates the institution’s historical challenges with retaining students from disadvantaged backgrounds;
- Provides a detailed analysis of those factors – to include social determinants – which contribute to the aforementioned retention challenges, along with an estimate of the specific types and amount of resources that would be required to increase retention among students from disadvantaged backgrounds;
- Establishes that students from disadvantaged backgrounds comprise a substantive percentage of the total student population, thereby projecting a more robust return on the investment;
- Identifies a mechanism to identify students from disadvantaged backgrounds at risk for failing and to recruit those students into a retention program.

Criterion 2: RESPONSE TO PROGRAM PURPOSE (30 points) – Corresponds to Section IV’s Response to Program Purpose Sub-section (a) Methodology/Approach, (b) Work Plan and Sub-section (c) Resolution of Challenges

Criterion 2 (a): METHODOLOGY/APPROACH (15 points) – Corresponds to Section IV’s Response to Program Purpose Sub-section (a) Methodology/Approach

Reviewers will consider:

- The strength of the applicant’s plan to increase retention of students from disadvantaged backgrounds, to include the application of evidence-based strategies with demonstrated impact on the specific social determinants the applicant outlined in the Purpose and Need section;
- The extent to which the applicant outlines clear goals and strategies, specific and measurable objectives, and the feasibility of accomplishing those ends within the performance period;
- The strength of existing institutional and community partnerships between educational and/or clinical practice sites – or the detail and feasibility of planned partnerships – including the relationship of those partnerships to targeted social determinants;
- The extent to which the applicant conveys the likelihood that those partnerships will enhance the project’s goals and objectives.

For competing continuations, the extent to which applicants demonstrate the use of a proven methodology and/or approach using the social determinants to drive evidence-based approaches and retain students from disadvantaged backgrounds in schools of nursing.

Criterion 2 (b): WORK PLAN (10 points) – Corresponds to Section IV’s Response to Program Purpose Sub-section (b) Work Plan

Reviewers will consider:

- The breadth, scope, and clarity of the applicant’s work plan, which should be complete, comprehensive, and feasible within the performance period;
- The feasibility of the projected number of students (as both gross estimate and percentage of total student population) who will receive support over the performance period;
- The extent to which the applicant’s logic model clearly identifies project goals, inputs, target population, and activities;
- The breadth and strength of institutional and community partnerships outlined in the work plan aimed at improving the achievement of students from disadvantaged backgrounds, academic enhancement, science and math instructional enrichment, and mentoring. For new applicants -the feasibility and breadth of the proposed partnerships and the likelihood that it will result in successful implementation of the Methodology/Approaches proposed. For competing continuations applicants -the strength and past success of the partnership in meeting the goals of prior funding.
- The extent to which the applicant integrates social determinants and their associated evidence-based mitigation strategies into the project goals and objectives and the likelihood they approach will allow the applicant to meet program outputs and projected outcomes.

For Competing Continuation Applications: The extent to which the Work Plan is feasible and clearly outlines the extension of previous successful work in retaining disadvantage students, and is a strong plan for meeting the grant goals.

Criterion 2 (c): RESOLUTION OF CHALLENGES (5 points) – Corresponds to Section IV’s Response to Program Purpose Sub-section (c) Resolution of Challenges

The extent to which the application:

- Describes challenges that are likely to be encountered in designing and implementing the activities described in the Work Plan; and,
- Describes resolutions or approaches to address the challenges identified above.
- Identifies barriers that may be encountered with regard to the social determinants in the target population and describes evidence-based approaches that will be or have been attempted in the past to mitigate these barriers.

Criterion 3: IMPACT(30 points) – Corresponds to Section IV’s Impact Sub-section (a) Evaluation and Technical Support Capacity, and Sub-section (b) Project Sustainability

Criterion 3(a): EVALUATION AND TECHNICAL SUPPORT CAPACITY (15 points) – Corresponds to Section IV’s Impact Sub-section (a) Evaluation and Technical Support Capacity

- Reviewers will consider the extent: The ability of the proposed evaluation strategy to assess project objectives and activities;
- The demonstrated capacity of the institution to track, collect and report required performance measures on a semi-annual basis, including:
 - Student diversity data such as the number and percent of students from disadvantaged backgrounds retained in the nursing program during the project year;
 - Demographic descriptions of students from disadvantaged backgrounds; and
 - Student financial support.
- The strength of the institutional systems and processes that will support a qualitative data collection strategies, including a plan to capture:
 - Social determinants that were addressed using evidence-based strategies and approaches, including structural changes;
 - Level of institutional support from leadership, faculty, and staff for the project;
- The breadth of and coordination among existing community-academic partnerships used to retain students from disadvantaged backgrounds.
- The strength of the applicant’s plan to utilize both quantitative and qualitative data to inform Rapid Cycle Quality Improvement (RCQI) efforts to periodically review program progress and make adjustments in order to optimize program output.

Extent to which the applicant proposes a logical evaluation plan that outlines the expected outcomes to be gained from evidence-based strategies to retain disadvantaged students.

Criterion 3 (b): PROJECT SUSTAINIBILITY (15 points) – Corresponds to Section IV’s Impact Sub-section (b) Project Sustainability

Reviewers will consider the extent to which the applicant describes a feasible and actionable plan for project sustainability after the period of federal funding ends. Reviewers will consider the extent to which the plan specifies strategies to obtain future sources of potential income, as well as outlines other strategies – with timetables –to achieve self-sufficiency and sustainability, identifies likely challenges to be encountered in sustaining the program, and describes logical approaches that are likely to resolve such challenges, including:

- A feasible and effective plan to disseminate the project’s results, replicate the project in other schools of nursing, and scale the project on a national level; and
- The likelihood that the funded project will continue beyond the federal funding period.

For competing continuation applicants: The extent to which the proposed sustainability plan is clearly feasible and describes previous/ongoing retention efforts along with a plan to continue retention work after the grant period is completed.

Criterion 4: ORGANIZATIONAL INFORMATION, RESOURCES AND CAPABILITIES (10 points) – Corresponds to Section IV’s Organizational Information, Resources and Capabilities

The extent to which the applicant:

- Identifies project personnel who are qualified by training and/or experience to implement and carry out the project;

- Provides details of the organization’s past utilization of resources and previous priorities to address the retention of students from disadvantaged backgrounds as a foundation to support the proposed evidence-based retention project;
- Provides sufficient evidence of adequate staffing plan for the proposed project including the project organizational chart;
- Outlines a sufficient percentage of time, including in-kind, dedicated to the project by the Project Director (licensed Registered Nurse) to accomplish the proposed project; and
- Provides a meaningful description of the material support and internal and external collaborations with key institutional and community partners when planning, designing, and implementing all activities, including development of the application and any leveraged resources.
- Demonstrates appropriate resources and capabilities to begin immediately and carry out the proposed project in the one-year award period

Criterion 5: SUPPORT REQUESTED (5points) – Corresponds to Section IV’s Budget Justification Narrative and SF-424 budget forms

The extent to which the applicant aligns the budget with the project Work Plan and describes:

- Reasonable costs, as outlined in the budget and Work Plan;
- Direct correlation between the project costs with regard to staffing of key personnel and time devoted to the project activities; and
- Includes a detailed and reasonable budget justification that includes the indirect cost rate fixed at eight percent (8%).

2. Review and Selection Process

Please see Section 5.3 of HRSA’s [SF-424 R&R Application Guide](#).

Funding Preferences

The authorizing legislation provides a funding preference for some applicants. Applicants receiving the preference will be placed in a more competitive position among applications that can be funded. Applications that do not receive a funding preference will be given full and equitable consideration during the review process. The funding preference will be determined by the Objective Review Committee. The law provides that a funding preference be granted to any qualified applicant that demonstrates that they meet the criteria for the preference as follows:

Section 805 of the PHS Act provides a funding preference for applicants with projects that will:

- substantially benefit rural or underserved populations **OR**
- help meet public health nursing needs in State or local health departments.

To be considered for this funding preference, applicants must demonstrate they meet the criteria for one of the two preference tracks listed above in **Attachment 6**.

To demonstrate that the project “Substantially Benefits Rural Populations” – the applicant indicates that:

- Student training occurs at a site serving rural populations, which may include (but are not limited) to the following: Rural Health Clinic, State Office of Rural Health, Critical Access Hospital (CAH), Sole Community Hospital (SCH), Medicare Dependent Hospital (MDH) or Rural Referral Center. Applicants can confirm their eligibility for this funding preference using the Rural Health Grants Eligibility Analyzer (<http://datawarehouse.hrsa.gov/RuralAdvisor/ruralhealthadvisor.aspx?ruralByAddr=1>); **OR**
- The practice population being served is defined as a rural population (i.e. comprised primarily of populations residing in rural locales).

To demonstrate that the project “Substantially Benefits Underserved Populations” – the applicant indicates that:

- The applicant organization is physically located in a federally designated health professional shortage area (HPSA), medically underserved community (MUC); **OR**
- Provides health services in MUCs and focuses on primary care, wellness, and prevention strategies; **OR**
- Practitioners and or health care providers integrate cultural and health indices specific to underserved populations in their team-based health care decision-making; **OR**
- The practice population being served is categorized as poor and/or medically underserved.

To demonstrate that the project “Helps Meet the Public Health Nursing Needs in State or Local Health Departments” – the applicant provides documentation indicating that:

- Training occurs at a state or local health department practice site; **OR**
- The NWD project can demonstrate linkage(s) or training collaborations with State, local and Federal health departments for practitioners and/or student practicum experience.

Please Note: The Health Resources and Services Administration may elect not to fund applicants with management or financial instability that directly relates to the organization’s ability to implement statutory, regulatory or other requirements ([45 CFR § 75.205](#)). The decision not to make an award or to make an award at a particular funding level, is discretionary and is not subject to appeal to any OPDIV or HHS official or board.

3. Anticipated Announcement and Award Dates

It is anticipated that awards will be announced prior to the start date of July 1, 2016.

VI. Award Administration Information

1. Award Notices

The Notice of Award will be sent prior to the start date of July 1, 2016. See Section 5.4 of HRSA's [SF-424 R&R Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

See Section 2 of HRSA's [SF-424 R&R Application Guide](#).

3. Reporting

1) **Performance Reports.** The recipient must submit a Performance Report to HRSA via the EHBs on a semi-annual basis. All BHW recipients are required to collect and report performance data so that HRSA can meet its obligations under the Government Performance and Results Modernization Act of 2010 (GPRA). Performance Reporting for BHW programs was newly implemented in Fiscal Year 2012. The required performance measures for this program are outlined in the Project Narrative Section IV's Impact Sub-section (a). Further information will be provided in the NoA.

The semi-annual performance reports will cover the following reporting periods:

Semi Annual Report #1 covers activities between July 1 and December 31. The report must be submitted by January 31 of the following year.

Semi Annual Report #2 covers activities between January 1 and June 30. The report must be submitted by July 31 of the same year.

2) **Final Report.** A final report is due within 90 days after the project period ends. The Final Report must be submitted online by recipients in the Electronic Handbook system at <https://grants.hrsa.gov/webexternal/home.asp>.

The Final Report is designed to provide BHW with information required to close out a grant after completion of project activities. Every recipient is required to submit a final report at the end of their project. The Final Report includes the following sections:

- Project Objectives and Accomplishments - Description of major accomplishments on project objectives.
- Project Barriers and Resolutions - Description of barriers/problems that impeded project's ability to implement the approved plan.
- Summary Information:
 - Project overview.
 - Project impact.
 - Prospects for continuing the project and/or replicating this project elsewhere.
 - Publications produced through this grant activity.

- Changes to the objectives from the initially approved grant.

Further information will be provided in the NoA.

3) **Federal Financial Report.** A Federal Financial Report (SF-425 is required according to the schedule in the SF-424 R&R Application Guide. The report is an accounting of expenditures under the project that year. Financial reports must be submitted electronically through the EHB system. More specific information will be included in the NoA.

4) HRSA requires recipients to use the following acknowledgement and disclaimer on all products produced by HRSA grant funds:

“This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number and title for grant amount (specify grant number, title, total award amount and percentage financed with nongovernmental sources). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.”

Recipients are required to use this language when issuing statements, press releases, requests for proposals, bid solicitations, and other HRSA supported publications and forums describing projects or programs funded in whole or in part with HRSA funding, including websites. Examples of HRSA-supported publications include, but are not limited to, manuals, toolkits, resource guides, case studies and issues briefs.

VII. Agency Contacts

Applicants may obtain additional information regarding business, administrative, or fiscal issues related to this FOA by contacting:

Bruce Holmes
Grants Management Specialist
HRSA Division of Grants Management Operations, OFAM
Parklawn Building, Room 11A-02
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 443-0752
Email: bholmes@hrsa.gov

Additional information related to the overall program issues and/or technical assistance regarding this funding opportunity announcement may be obtained by contacting:

José Santiago-Vélez, PhD
Public Health Analyst
Bureau of Health Workforce
Division of Nursing and Public Health
Email: jsantiago-velez@hrsa.gov

Telephone: (301) 443-0533

Fax: (301) 443-0791

Applicants may need assistance when working online to submit their application forms electronically. Applicants should always obtain a case number when calling for support. For assistance with submitting the application in Grants.gov, contact Grants.gov 24 hours a day, 7 days a week, excluding federal holidays at:

Grants.gov Contact Center

Telephone: 1-800-518-4726 (International Callers, please dial 606-545-5035)

Email: support@grants.gov

iPortal: <https://grants-portal.psc.gov/Welcome.aspx?pt=Grants>

Successful applicants/recipients may need assistance when working online to submit information and reports electronically through HRSA's Electronic Handbooks (EHBs). For assistance with submitting information in HRSA's EHBs, contact the HRSA Contact Center, Monday-Friday, 8:00 a.m. to 8:00 p.m. ET:

HRSA Contact Center

Telephone: (877) 464-4772

TTY: (877) 897-9910

Web: <http://www.hrsa.gov/about/contact/ehbhelp.aspx>

VIII. Other Information

Definitions:

Key Definitions related to this funding opportunity include:

Academic/peer support and Mentoring – activities should enhance the academic abilities and preparation of students from disadvantaged backgrounds (including racial and ethnic minorities) underrepresented among registered nurses, to increase their potential for academic success in professional nursing programs. Academic enrichment/mentoring activities must be targeted to students enrolled in professional registered nursing programs that are experiencing poor academic achievement and are at risk of failing. Applicants must describe the methods for identifying and supporting students at risk for failing

Disadvantaged Background – An individual from a disadvantaged background is defined as someone who comes from an environmentally *or* economically disadvantaged background.

- 1) **Educationally disadvantaged** means an individual comes from an environment that has inhibited him/her from obtaining the knowledge, skills, and abilities required to enroll in and graduate from a health professions school.
- 2) **Economically disadvantaged** means an individual comes from a family with an annual income below a level based on low-income thresholds, according to family size established by the U.S. Census Bureau, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary of the U.S. Department of

Health and Human Services, for use in all health professions programs. The Secretary updates these [income levels in the *Federal Register* annually.](#)

The Secretary defines a “low income family/household” for various health professions programs included in Titles III, VII and VIII of the Public Health Service Act, as having an annual income that does not exceed 200 percent of the Department’s poverty guidelines. A *family* is a group of two or more individuals related by birth, marriage, or adoption who live together. A *household* may be only one person.

2015 HRSA Poverty Guidelines (200% of HHS Poverty Guidelines)			
Size of parents’ family*	Income Level**		
	48 Contiguous States and D.C.	Alaska	Hawaii
1	\$23,540	\$29,440	\$27,100
2	\$31,860	\$39,840	\$36,660
3	\$40,180	\$50,240	\$46,220
4	\$48,500	\$60,640	\$55,780
5	\$56,820	\$71,040	\$65,340
6	\$65,140	\$81,440	\$74,900
7	\$73,460	\$91,840	\$84,460
8	\$81,780	\$102,240	\$94,020
For each additional person, add	\$8,320	\$10,400	\$9,560

* Includes only dependents listed on federal income tax forms. Some programs will use the student’s family rather than his or her parents’ family.

** Adjusted gross income for calendar year 2014.

SOURCE: *Federal Register*, Vol. 80, No. 51, March 17, 2015, pp. 13879-13880

The following are provided as **examples** of a disadvantaged background. **These examples are for guidance only and are not intended to be all-inclusive. Each academic institution defines the below mentioned “low” rates based on its own enrollment populations. It is the responsibility of each applicant to clearly delineate the criteria used to classify student participants as coming from a disadvantaged background.** The most recent annual data available for the last four examples below can be found on your state’s Department of Education website under your high school’s report card.

- The individual comes from a family that receives public assistance (e.g., Temporary Assistance to Needy Families, Supplemental Nutrition Assistance Program, Medicaid, and public housing).
- The individual is the first generation in his or her family to attend college.
- The individual graduated from (or last attended) a high school with low SAT scores, based on most recent annual data available:
- The individual graduated from (or last attended) a high school that—based on the most recent annual data available— had either a:
 - low percentage of seniors receiving a high school diploma; or

- low percentage of graduates who go to college during the first year after graduation.
- The individual graduated from (or last attended) a high school with low per capita funding.
- The individual graduated from (or last attended) a high school where—based on the most recent annual data available— many of the enrolled students are eligible for free or reduced-price lunches.

Diversity refers to the multiplicity of human differences among groups of people or individuals. Increasing diversity means enhancing an individual's, *group's*, or *organization's* cultural competence; in other words, the ability to recognize, understand, and respect the differences that may exist between groups and individuals. Increasing diversity in the health care workforce requires recognition of many other dimensions including, but not limited to, sex, sexual orientation and gender identity, race, ethnicity, nationality, religion, age, cultural background, socio-economic status, disability, and language.

Health disparity population refers to a population that has a significant disparity in the overall rate of disease incidence, prevalence, morbidity, mortality, or survival rates in the population, as compared to the health status of the general population. It further includes populations for which there is a significant disparity in the quality, outcomes, cost, use of, access to, or satisfaction with health care services, as compared to the general population.

Institutional and community partnerships – partnerships (with other entities inside or outside the academic institution) should take a multi-pronged approach that targets students, faculty, and administration. Partnerships should ideally be multidimensional and focus on those strategies that improve the achievement of students from disadvantaged backgrounds including academic enhancement, science or math instructional enrichment, career role modeling and motivation, mentoring, apprenticeships, and parental and community involvement. Long-term financial and community support would be a key element of effective partnerships.

Rapid Cycle Quality Improvement is used to achieve improved outcomes by health care professionals and educators by asking three simple questions: (1) What are we trying to accomplish? (2) How will we know if a change is an improvement? and (3) What changes can we make that will result in improvement? By allowing the application of several tests over time, the RCQI model can identify the most successful ideas: those that have the largest impact on the overall program outcomes. Additional information on RCQI is available at the following website: <http://www.healthworkforceta.org/resources/rapid-cycle-quality-improvement-resource-guide/>

Rural Area means an area other than a Metropolitan Statistical Area (MSA) as designated by the Office of Management and Budget based on current census data. Census tracts in certain metropolitan areas may also be eligible if they are located a significant distance from the major city in the Standard Metropolitan Area (SMA). Rural means people who live in places with small populations or unincorporated areas with population density less than 1,000 per square mile. A rural place is any incorporated place or Census Designated Place with fewer than 2500 inhabitants that is located outside of an Urbanized Area (UA). An UA is defined as a continuously built-up area with a population of 50,000 or more.

Student financial support – student financial support in the form of scholarships and stipends provide financial assistance to eligible project participants to promote retention. Applicant organizations may choose to provide student scholarships or stipends, or a combination of scholarships and stipends. Financial support must be accompanied with academic/peer and faculty support, mentoring, or community partnerships activities. The applicant must include an explanation of how the evidence-based strategies/interventions have taken into account the social determinants.

An **Underrepresented Minority** is an individual from a racial and/or ethnic group that is considered inadequately represented in a specific profession relative to the numbers of that racial and/or ethnic group in the general population. For purposes of this program, the term “racial and ethnic minority group” means American Indians (including Alaska Natives, Eskimos, and Aleuts); Native Hawaiians and other Pacific Islanders; Blacks; and Hispanics. The term “Hispanic” means individuals whose origin is Mexican, Puerto Rican, Cuban, Central or South American, or any other Spanish-speaking country.

Logic Models:

Additional information on developing logic models can be found at the following website: http://www.cdc.gov/nccdphp/dnpao/hwi/programdesign/logic_model.htm.

Although there are similarities, a logic model is not a work plan. A work plan is an “action” guide with a timeline used during program implementation; the work plan provides the “how to” steps. A logic model is a visual diagram that demonstrates an overview of the relationships between the 1) resources and inputs, 2) implementation strategies and activities, and 3) desired outputs and outcomes in a project. Information on how to distinguish between a logic model and work plan can be found at the following website: <http://www.cdc.gov/healthyouth/evaluation/pdf/brief5.pdf>.

Technical Assistance:

A technical assistance webinar has been scheduled to help applicants understand, prepare and submit a grant application. The webinar is scheduled for:

Thursday, October 1, 2015 from 11:30 a.m.- 1:30 p.m. EST

Adobe Connect Link: <https://hrsa.connectsolutions.com/nwdfoa2016/>

Call-in Number: 888-790-3360 Participant Code: 5726044

IX. Tips for Writing a Strong Application

See Section 4.7 of HRSA’s [SF-424 R&R Application Guide](#).

In addition, BHW has developed a number of recorded webcasts with information that may assist applicants in preparing a competitive application. These webcasts can be accessed at: <http://bhpr.hrsa.gov/grants/technicalassistance/index.html>