

**U.S. Department of Health and Human Services**

**HRSA**

Health Resources & Services Administration

**NOTICE OF FUNDING OPPORTUNITY**

Fiscal Year 2023

Bureau of Health Workforce

Division of Nursing and Public Health

**Nurse Education, Practice, Quality and Retention (NEPQR)-Pathway to  
Registered Nurse Program (PRNP)**

**Funding Opportunity Number: HRSA-23-016**

**Funding Opportunity Type(s): New**

**Assistance Listings Number: 93.359**

**Application Due Date: April 27, 2023**

**Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately!**

**HRSA will not approve deadline extensions for lack of registration.**

**Registration in all systems may take up to 1 month to complete.**

**Issuance Date: February 27, 2023**

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See [Section VII](#) for a complete list of agency contacts.

Authority: 42 U.S.C § 296p (Section 831 of the Public Health Service Act)

## **508 Compliance Disclaimer**

Note: Persons using assistive technology may not be able to fully access information in this file. For assistance, please email or call one of the HRSA staff above in [Section VII. Agency Contacts.](#)

## **EXECUTIVE SUMMARY**

The [Health Resources and Services Administration \(HRSA\)](#) is accepting applications for the fiscal year (FY) 2023 Nurse Education, Practice, Quality and Retention-Pathway to Registered Nurse Program (NEPQR-PRNP). The purpose of this program is to create a pathway from academic training to clinical practice through the creation and implementation of Licensed Practical Nurse/Licensed Vocational Nurse (LPN/LVN) to Registered Nurse (RN) Bridge Programs and employment of Clinical Nurse Faculty.

Funding Opportunity Title:	Nurse Education, Practice, Quality and Retention (NEPQR)-Pathway to Registered Nurse Program (PRNP)
Funding Opportunity Number:	HRSA-23-016
Due Date for Applications:	April 27, 2023
FY 2023 Total Available FY 2023 Funding:	\$8,900,000
Estimated Number and Type of Award(s):	Approximately 8 cooperative agreement(s)
Estimated Annual Award Amount:	Up to \$1,000,000 per year subject to the availability of appropriated funds
Cost Sharing/Match Required:	No
Period of Performance:	August 1, 2023, through July 31, 2027 (4 years)

Eligible Applicants:	<p>Eligible applicants are accredited schools of nursing such as baccalaureate nursing programs and community colleges that train associate degree nurses, health care facilities, including federally qualified health centers, or nurse-managed health clinics or a partnership of such a school and facility.</p> <p>See <a href="#">Section III.1</a> of this notice of funding opportunity (NOFO) for complete eligibility information.</p>
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### **Application Guide**

You (the applicant organization/agency) are responsible for reading and complying with the instructions included in this NOFO and in HRSA's [SF-424 R&R Application Guide](#). Visit [HRSA's How to Prepare Your Application page](#) for more information.

### **Technical Assistance**

HRSA will hold a pre-application technical assistance (TA) webinar for applicants seeking funding through this opportunity. The webinar will provide an overview of pertinent information in the NOFO and an opportunity for applicants to ask questions. Visit the HRSA Bureau of Health Workforce's [open opportunities](#) website at to learn more about the resources available for this funding opportunity.

## Table of Contents

I. PROGRAM FUNDING OPPORTUNITY DESCRIPTION.....	1
1. PURPOSE .....	1
2. BACKGROUND.....	2
II. AWARD INFORMATION .....	4
1. TYPE OF APPLICATION AND AWARD .....	4
SUMMARY OF FUNDING .....	5
III. ELIGIBILITY INFORMATION.....	5
1. ELIGIBLE APPLICANTS .....	5
2. COST SHARING/MATCHING.....	6
3. OTHER .....	6
IV. APPLICATION AND SUBMISSION INFORMATION ADDRESS TO REQUEST APPLICATION PACKAGE .....	7
1. CONTENT AND FORM OF APPLICATION SUBMISSION .....	7
<i>i. Project Abstract.....</i>	<i>10</i>
<i>ii. Project Narrative.....</i>	<i>11</i>
<i>iii. Budget.....</i>	<i>17</i>
<i>iv. Budget Justification Narrative.....</i>	<i>18</i>
<i>v. Standardized Work Plan (SWP) Form.....</i>	<i>19</i>
<i>vi. Attachments .....</i>	<i>19</i>
2. UNIQUE ENTITY IDENTIFIER (UEI) AND SYSTEM FOR AWARD MANAGEMENT (SAM).....	22
3. SUBMISSION DATES AND TIMES .....	23
4. INTERGOVERNMENTAL REVIEW.....	23
5. FUNDING RESTRICTIONS .....	23
V. APPLICATION REVIEW INFORMATION .....	24
2. REVIEW AND SELECTION PROCESS.....	30
3. ASSESSMENT OF RISK.....	31
VI. AWARD ADMINISTRATION INFORMATION .....	32
1. AWARD NOTICES .....	32
2. ADMINISTRATIVE AND NATIONAL POLICY REQUIREMENTS .....	32
3. REPORTING .....	34
VII. AGENCY CONTACTS.....	36
VIII. OTHER INFORMATION.....	37

# I. Program Funding Opportunity Description

## 1. Purpose

The purpose of this program is to create a pathway from academic training to clinical practice through the creation and implementation of Licensed Practical Nurse/Licensed Vocational Nurse (LPN/LVN) to Registered Nurse (RN) Bridge Programs and employment of Clinical Nurse Faculty. Funding will be used for:

- **Program Development:** Funds can be used to develop and implement or enhance an accredited LPN/LVN-to-RN Bridge program targeting the needs of LPNs/LVNs.
- **Direct Support for LPN/LVN to RN students:** Funds can be used to assist in student success such as stipends, tuition, and other social supports (e.g., transportation and childcare assistance). LPNs/LVNs are nursing professionals and when entering a degree program there may be barriers in place that keep these students from being successful.
- **Curriculum and Partnership Development:** Funds can be used to develop curriculum and build/enhance/maintain partnerships between clinical and educational institutions. Challenges exist for students as they move from one educational institution to another (e.g., academic credits not transferring from 2-year to 4-year institutions) and working experiences are not always counted as credit toward their degree program. Strong partnerships are encouraged between clinical training sites and academic institutions including technical/vocational schools and community colleges to help to mitigate these challenges.
- **Preceptor/Faculty:** Funds can be used to recruit, retain, and develop clinical and didactic faculty and clinical preceptors. Faculty and preceptors are needed to train new students in the bridge program being created.

### Program Goals:

- Improve the supply and geographic distribution of the nursing health workforce by increasing the number of RNs entering the workforce through the development and implementation of accredited LPN/LVN-to-RN Bridge programs by reducing barriers that prevent LPNs/LVNs from transitioning into registered nursing careers.
- Increase the diversity of the nursing workforce to better address the needs of the populations they serve by recruiting and supporting students and faculty, including those from diverse populations such as students and faculty from disadvantaged backgrounds and underrepresented minorities in the nursing profession.

## Program Objectives:

- Recruit LPN/LVN-RN undergraduate nursing students committed to practicing in medically underserved communities.
- Provide nursing students with longitudinal interprofessional team-based, clinical, and didactic training experiences along the practice continuum in community-based settings located in rural or underserved areas.
- Prepare program participants for the National Council Licensing Examination for Registered Nurses (NCLEX- RN).
- Provide participants with the knowledge, skills, and support(s) needed to successfully matriculate through innovative LPN/LVN-to-RN career ladder training programs.

## 2. Background

The nation requires a nursing workforce that has an adequate supply and distribution of diverse, 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. It has been demonstrated that having a diverse and skilled health workforce that is representative of the communities being served will improve the access to care and quality of services provided.<sup>1</sup> Therefore, diversity in the nursing workforce is critical to achieve the goal of high-quality, safe, and accessible care. Ensuring that all populations have access to high-quality, culturally aligned, and competent care is necessary to reduce health disparities and improve health equity.

Currently, there are an estimated 641,240 LPNs, sometimes called LVNs, currently employed per the US Bureau of Labor and Statistics.<sup>2</sup> Prior studies indicate that LPNs with careers in hospitals and other health care settings develop clinical experience that provides the basis for establishing excellent careers as RNs.<sup>3</sup> Therefore, increasing LPN/LVN-to-RN professional transitions represents an opportunity to expand the RN workforce and create a meaningful career ladder for LPNs to advance their job prospects, income, and professional ability.<sup>4</sup>

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<sup>1</sup> U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. 2017. Nursing Workforce Projections by Ethnicity and Race 2014-2030

<sup>2</sup> Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, Licensed Practical and Licensed Vocational Nurses, at <https://www.bls.gov/ooh/healthcare/licensed-practical-and-licensed-vocational-nurses.htm> (visited May 16, 2022).

<sup>3</sup> Cook, L. et. Al (2010). Returning to school: The challenges of the licensed practical nurse-to-registered nurse transition student, *Teaching and Learning in Nursing*, Volume 5, Issue 3, 2010, Pages 125-128, ISSN 1557-3087, <https://doi.org/10.1016/j.teln.2010.02.003>.

<sup>4</sup> Jones, S. et. Al (2018). An untapped resource in the nursing workforce: Licensed practical nurses who transition to become registered nurses, *Nursing Outlook*, Volume 66, Issue 1, 2018, Pages 46-55, ISSN 0029-6554, <https://doi.org/10.1016/j.outlook.2017.07.007>.

Nationally, there is a projected shortage of 78,610 full-time equivalent (FTE) RNs by 2025 and a shortage of 63,720 FTE RNs by 2030.<sup>5</sup> Furthermore, the American Nurses Association has noted there will be a need for 3.44 million nurses by 2030 and that the need for nurses spans beyond the COVID-19 pandemic. Additionally, employment of registered nurses is projected to grow 9 percent from 2020 to 2030.<sup>6</sup> However, one survey showed 89 percent of RN's felt burnt out in the past year.<sup>7</sup> In addition, the median age of RNs was 52 years with more than one-fifth indicating intent to retire from nursing over the next 5 years.<sup>8</sup> The COVID-19 pandemic has only accelerated this trend. In response to the critical shortage and RN's leaving the bedside due to burn out, retirement, and other unforeseen factors, HRSA is addressing this gap by enhancing the LPN/LVN-to-Associates Degree in Nursing (ADN)/Bachelor Degree in Nursing (BSN) pathway.

According to the American Association of Colleges of Nursing's report on 2019-2020 enrollments and graduations in baccalaureate and graduate programs, "U.S. nursing schools turned away 80,407 qualified applicants from baccalaureate and graduate nursing programs in 2019 due to an insufficient number of faculty, clinical sites, classroom space, clinical preceptors, and budget constraints".<sup>9</sup> Clinical nurse faculty will also be needed to support the efforts to mitigate the RN shortage. Supporting nurse educators—through onboarding and mentoring from established faculty who prepare clinical faculty to deliver clinical curricula and experiences to LPN/LVN-to-RN bridge students—has evidence to be beneficial for both student and faculty success.<sup>10</sup> Implementation of LPN/LVN-to-RN bridge programs with clinical faculty support will provide the resources to train LPN/LVN-to-RN students and support clinical faculty and preceptors, in order to provide care and meet the needs of the community in which they serve.

## Program Definitions

A glossary containing general definitions for terms used throughout the Bureau of Health Workforce NOFOs can be located at the [Health Workforce Glossary](#).

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<sup>5</sup> U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. Nurse Workforce Projections, 2020-2035. November 2022. <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/Nursing-Workforce-Projections-Factsheet.pdf>

<sup>6</sup> Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, Registered Nurses, at <https://www.bls.gov/ooh/healthcare/registered-nurses.htm> (visited May 16, 2022).

<sup>7</sup> Gaines, K. (2022). The Best (and Worst) Specialties for Nurses Right Now. Nurse.org, at <https://nurse.org/articles/best-and-worst-nursing-specialties/> (visited May, 16, 2022)

<sup>8</sup> Smiley, R. et Al., (2021). The 2020 National Nursing Workforce Survey. Journal of Nursing Regulation. SUPPLEMENT| [VOLUME 12, ISSUE 1, SUPPLEMENT](#), S1-S96, APRIL 01, 2021

<sup>9</sup> AACN.2022. Special Survey On Vacant Faculty Positions For Academic Year 2021-2022. <https://www.aacnnursing.org/Portals/42/News/Surveys-Data/2021-Faculty-Vacancy-Report.pdf>

<sup>10</sup> Busby KR, Draucker, CB., Reising DL., (2022). Exploring mentoring and nurse faculty: An integrative review, Journal of Professional Nursing, Volume 38, 2022, Pages 26-39, <https://doi.org/10.1016/j.profnurs.2021.11.006>.

## II. Award Information

### 1. Type of Application and Award

Type(s) of applications sought: New

HRSA will provide funding in the form of a cooperative agreement. A cooperative agreement is a financial assistance mechanism where HRSA anticipates substantial involvement with the recipient during performance of the contemplated project.

**In addition to the usual monitoring and technical assistance (TA) provided directly to award recipients, HRSA program involvement will include:**

- 1) Make available the services of experienced HRSA personnel as advisors in the planning and development of all phases of the project.
- 2) Provide programmatic consultation for development and delivery of training and technical assistance, project data collection methods and a set of core measures and metrics across projects.
- 3) Provide ongoing input in all phases of the project to accomplish the goals.
- 4) Participate, as appropriate, in meetings or site visits conducted during the period of the cooperative agreement.
- 5) Review and approve project information prior to dissemination.
- 6) Provide direction, assistance and recommendations in the establishment and facilitation of effective collaborative relationships with federal and state agencies, other HRSA grant projects, and other resource centers and entities relevant to the project's mission.
- 7) Provide guidance concerning the content, structure, and format of required reports; and support and direct the dissemination of effective education or practice models that emerge from the NEPQR-PRNP and identifying opportunities to expand best practice models

**In addition to adhering to all applicable federal regulations and public policy requirements, the cooperative agreement recipient's responsibilities are to:**

- 1) Develop, implement, carry out, and evaluate a training program that meets the goals outlined in Section I of this NOFO, and comply with all applicable grant requirements.
- 2) Engage, collaborate, and communicate with HRSA staff for input on project activities, quality improvement, and dissemination of lessons learned and effective education and practice models.
- 3) Participate in training and technical assistance provided by HRSA and other stakeholders, as appropriate.
- 4) Engage with relevant stakeholders to ensure project success and sustainability.



- 5) Engage, collaborate, and communicate with other NEPQR-PRNP award recipients in a learning community to share practice innovations and leverage resources; and
- 6) Adhere to HRSA guidelines pertaining to acknowledgement and disclaimer on all products produced by HRSA award funds, per the SF-424 R&R Application Guide (Acknowledgement of Federal Funding).

### **Summary of Funding**

HRSA estimates approximately \$8,900,000 to be available annually to fund approximately 8 recipients. You may apply for a ceiling amount of up to \$1,000,000 per year (includes both direct and indirect). Your request for each year of the period of performance cannot exceed your year 1 request.

The period of performance is August 1, 2023, through July 31, 2027 (4 years). Funding beyond the first year is subject to the availability of appropriated funds for NEPQR-PRNP in subsequent fiscal years, satisfactory progress, and a decision that continued funding is in the best interest of the Federal Government.

All HRSA awards are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements at [45 CFR part 75](#).

### **Limitations on indirect cost rates**

Indirect costs under training awards to organizations other than state or local governments or federally recognized Indian tribes, will be budgeted and reimbursed at **8 percent** of modified total direct costs rather than based on a negotiated rate agreement, and are not subject to upward or downward adjustment. Direct cost amounts for equipment, tuition and fees, as otherwise allowable, and sub awards 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**

In accordance with Section 831(f) of PHS Act, eligible entities are defined in PHS Act section 801(2), and include an accredited school of nursing, such as a baccalaureate nursing program and community college that trains associate degree nurses, a health care facility, including federally qualified health centers or nurse-managed health clinics, or a partnership of such a school and facility.

Schools of nursing affiliated with the proposed project must be accredited at the time of application. Applicants must provide documentation of current accreditation by a national nurse education accrediting agency, or a state agency approved by the U.S. Department of Education as [Attachment 8](#). Individuals and for-profit entities are not eligible to apply.

In addition to entities in the 50 states, entities in the District of Columbia, Guam, the Commonwealth of Puerto Rico, the Northern Mariana Islands, American Samoa, the U.S. Virgin Islands, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau may apply. Tribes and Tribal organizations may apply for these funds, if otherwise eligible. Foreign entities are not eligible for this HRSA award.

### **Beneficiary Eligibility Requirement**

An eligible beneficiary (participant) receiving support from award funds under this program must be a citizen, non-citizen national of the United States, an individual lawfully admitted for permanent residence to the United States, or any other “qualified alien” under section 431(b) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. 104-193, as amended. Individuals on temporary or student visas are not eligible to participate.

### **2. Cost Sharing/Matching**

Cost sharing/matching is not required for this program.

### **3. Other**

HRSA may not consider an application for funding if it contains any of the non-responsive criteria below:

- Exceeds the ceiling amount.
- Fails to satisfy the deadline requirements referenced in [Section IV.4](#);
- Applicants whose accreditation status cannot be verified at time of application; accreditation status must be active at time of application.

### **Maintenance of Effort**

The recipient must agree to maintain non-federal funding for award activities at a level that is not less than expenditures for such activities maintained by the entity for the fiscal year preceding the fiscal year for which the entity receives the award, as required by 42 U.S.C. §296b. Such federal funds are intended to supplement, not supplant, existing non-federal expenditures for such activities. Complete the Maintenance of Effort information and submit as [Attachment 5](#).

HRSA will enforce statutory MOE requirements through all available mechanisms.

Multiple applications from an organization with the same [Unique Entity Identifier](#) (UEI) are allowed if the applications propose separate and distinct projects.

HRSA will only accept your **last** validated electronic submission, under the correct funding opportunity number, before the Grants.gov application due date as the final and only acceptable application.

Failure to include all required documents as part of the application may result in an application being considered incomplete or non-responsive. **Applications received without the appropriate tables will be deemed non-responsive to the NOFO and will not be considered for funding under this notice.**

## **IV. Application and Submission Information Address to Request Application Package**

HRSA **requires** you to apply electronically. HRSA encourages you to apply through [Grants.gov](https://www.grants.gov) using the SF-424 Research and Related (R&R) workspace application package associated with this notice of funding opportunity (NOFO) following the directions provided at [Grants.gov: HOW TO APPLY FOR GRANTS](https://www.grants.gov). If you use an alternative electronic submission, see [Grant.gov: APPLICANT SYSTEM-TO-SYSTEM](https://www.grants.gov).

**Form Alert:** For the Project Abstract Summary, applicants using the SF-424 R&R Application Package are encountering a “Cross-Form Error” associated with the Project Summary/Abstract field in the “Research and Related Other Project Information” form, Box 7. To avoid the “Cross-Form Error,” you must attach a blank document in Box 7 of the “Research and Related Other Project Information” form and use the Project Abstract Summary Form in workspace to complete the Project Abstract Summary. See Section IV.2.i [Project Abstract](#) for content information.

The NOFO is also known as “Instructions” on Grants.gov. You must select “Subscribe” and provide your email address for HRSA-23-016 in order to receive notifications including modifications, clarifications, and/or republications of the NOFO on Grants.gov. You will also receive notifications of documents placed in the RELATED DOCUMENTS tab on Grants.gov that may affect the NOFO and your application. *You are ultimately responsible for reviewing the* <http://apply07.grants.gov/search/spoExit.jsp?p=search-grants.html> *For Applicants* page for all information relevant to this NOFO.

### **1. Content and Form of Application Submission**

#### **Application Format Requirements**

Section 4 of HRSA’s [SF-424 R&R Application Guide](#) provides general instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, and certifications. You must submit the information outlined in the HRSA [SF-424 R&R Application Guide](#) in addition to the program-specific information below. You are responsible for reading and complying with the instructions included in this NOFO and HRSA’s [SF-424 R&R Application Guide](#). You must submit the application in the English language and in the terms of U.S. dollars (45 CFR § 75.111(a)).

See Section 8.5 of the HRSA [SF-424 R&R Application Guide](#) for the Application Completeness Checklist to assist you in completing your application.

## Application Page Limitation

The total of uploaded attachment pages that count against the page limit shall be no more than the equivalent of **60 pages** when printed by HRSA.

Forms that DO NOT count in the Page Limit

- Standard OMB-approved forms included in the workspace application package do not count in the page limit.
- The abstract is the standard form (SF) "Project Abstract Summary." It does not count in the page limit.
- Indirect Cost Rate Agreement and proof of non-profit status (if applicable) do not count in the page limit.
- If there are other attachments that do not count against the page limit, this will be clearly denoted in Section IV.2.vi Attachments.

If you use an OMB-approved form that is not included in the workspace application package for HRSA-23-016, it may count against the page limit. Therefore, we strongly recommend you only use Grants.gov workspace forms associated with this NOFO to avoid exceeding the page limit.

- HRSA will flag any application that exceeds the page limit and redact any pages considered over the page limit. The redacted copy of the application will move forward to the objective review committee.

**It is important to take appropriate measures to ensure your application does not exceed the specified page limit.**

**Applications must be complete and validated by Grants.gov under HRSA-23-016 before the [deadline](#).**

## Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification

- 1) You certify on behalf of the applicant organization, by submission of your proposal, that neither you nor your principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- 2) Failure to make required disclosures can result in any of the remedies described in [45 CFR § 75.371](#), including suspension or debarment. (See also 2 CFR parts 180 and 376, and 31 U.S.C. § 3321).
- 3) If you are unable to attest to the statements in this certification, you must include an explanation in [Attachment 10: Other Relevant Documents](#).

See Section 4.1 viii of HRSA's [SF-424 R&R Application Guide](#) for additional information on all certifications.

## **Program Requirements and Expectations**

All applicants funded under this funding opportunity will be required to implement the following:

### Program Development:

- **Develop and implement or enhance** an accredited LPN/LVN-to-RN Bridge program targeting the needs of LPNs/LVNs.
- **Academic Credit:** Develop programs and/or methods to assess LPN/LVN competencies, including previous experience and training as LPN/LVN, that are eligible for awarding academic credit toward a nursing degree. Potential credits may be based on leadership skills and/or prior health care training and experience.
- **Diversity:** Increase the diversity of the nursing workforce by recruiting students and faculty from diverse populations, including those from disadvantaged backgrounds and underrepresented racial and ethnic minorities in the nursing profession.

### Direct Support for LPN/LVN to RN students:

- **Support Services:** Provide academic, peer, and financial support to address the social determinants and other structural factors unique to LPN/LVN students that impede academic success and deter gainful employment in as a registered nurse after graduation.

### Curriculum and Partnership Development:

- **Clinical training:** Provide interprofessional team-based, clinical, and didactic training experiences along the practice continuum in community health settings.
- **Curriculum enhancement and development:** Enhance didactic nursing curriculum and continuing professional education and development (for LPN/LVN-to-RN students) with an emphasis on a collaborative team-based practice model to integrate:
  - a. Social determinants of health factors,
  - b. Health equity,
  - c. Populations at highest risk for health disparities, (including behavioral and mental health)
  - d. Increase health literacy,
  - e. Leadership and communication skills, community health nursing competencies, and
  - f. Longitudinal experiential training in community-based settings that provide integrated behavioral health services.
- **Partnerships:** Create and implement collaborative academic-practice partnerships to provide direct hands-on training and employment in the community-based settings upon program completion (i.e., homecare, schools,

health departments, health care for the homeless) to NEPQR-PRNP trainees and graduates. Partnerships are encouraged between clinical training sites and academic institutions including technical/vocational schools and community colleges.

Preceptor/Faculty

- **Clinical faculty:** Recruit, train, develop, support, and evaluate Didactic and Clinical Nurse Faculty and Clinical Preceptors as program partners to enhance community-based clinical and didactic nursing education.

**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:

Applicants are expected to develop and upload (in [Attachment 9](#)) a disparities impact statement.

**i. Project Abstract**

Use the Standard OMB-approved Project Abstract Summary Form 2.0 that is included in the workspace application package. Do not upload the abstract as an attachment or it will count toward the page limit. See [Form Alert](#) in Section IV.1 of this NOFO. For information required in the Project Abstract Summary Form, see Section 4.1.ix of HRSA’s [SF-424 R&R Application Guide](#).

The Abstract must include:

- A brief overview of the project as a whole.
- Specific, measurable objectives that the project will accomplish.
- Which of the clinical priorities will be addressed by the project, if applicable.
- 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.
- If a funding preference is being requested.

**NARRATIVE GUIDANCE**

To ensure that you fully address the review criteria, the table below provides a crosswalk between the narrative language and where each section falls within the review criteria. Any forms or attachments referenced in a narrative section may be considered during the objective review.

<u>Narrative Section</u>	<u>Review Criteria</u>
Purpose and Need	(1) Purpose and Need

<b><u>Narrative Section</u></b>	<b><u>Review Criteria</u></b>
Response to Program Purpose: (a) Work Plan (b) Methodology/Approach (c) Resolution of Challenges	(2) Response to Program Purpose (a) Work Plan (b) Methodology/Approach (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 Justification Narrative	(5) Support Requested

**ii. Project Narrative**

This section provides a comprehensive description of all aspects of the proposed project. It should be succinct, self-explanatory, consistent with forms and attachments, and organized in alignment with the sections and format below so that reviewers can understand the proposed project.

Successful applications will contain the information below. Please use the following section headers for the narrative:

- **PURPOSE AND NEED** -- Corresponds to Section V's [Review Criterion\(a\) 1](#)

You must directly link all aspects of the project to its goals and objectives, including its contribution to improving health equity, access to care, and increasing the diversity of the nursing workforce. You must identify and describe the purpose and need of the proposed project, including:

- The need for the LPN/LVN-to-RN Bridge program, and any relevant barriers and/or gaps of the nursing workforce in the community served by the applicant.
- A description of the targeted student population, identified needs, challenges and barriers faced by the targeted pool of students in obtaining a nursing degree and passing the NCLEX-RN. Include demographic data of the target student and faculty population, including but not limited to demographic characteristics, geographic background, and racial/ethnic background.
- The community that will benefit from the proposed project activities. You are expected to identify populations at highest risk for health disparities (including behavioral health), increase health literacy, and infrastructure to receive necessary services in rural and or underserved communities.



- Nursing curricula modifications and enhancements needed to incorporate social determinants of health (SDOH) populations at highest risk for experiencing health disparities (including behavioral health), increase health literacy, and health equity.
- Demographic data of the current nursing workforce in the geographic area of the proposed project.
- Include a Disparities Impact Statement (DIS), which is an instrument used to measure and describe how training will support trainees' capacity to meet the needs of underserved populations.

Please note that elements of the DIS are often integrated in the Project Narrative in the purpose/need and methodology/approach sections. See Section IV.2.vii [Attachment 9](#) of this NOFO for further details.

- *RESPONSE TO PROGRAM PURPOSE -- This section includes three sub-sections — (a) Work Plan; (b) Methodology/Approach; and (c) Resolution of Challenges—all of which correspond to Section V's Review Criteria 2 (a), (b), and (c).*
- (a) *WORK PLAN -- Corresponds to Section V's [Review Criterion\(a\) 2 \(a\)](#)*  
In response to this section, applicants will demonstrate how they plan to implement the proposed project in order to achieve the goals of the NOFO. Your work plan must be submitted through the Standardized Work Plan (SWP) Form located in the Grants.gov workspace. Provide a brief narrative in addition to completing the SWP.

Your brief narrative should include the elements outlined below.

The work plan (SWP and narrative) must:

- Describe the activities or steps you will use to achieve each of the objectives proposed during the entire period of performance identified in the [Methodology](#) section
- Provide a reasonable set of milestones that demonstrate a complete understanding of all activities and responsibilities required to implement the establishment and/or expansion of the proposed project within the timeframe of the award.
- Describe the timeframes, deliverables, and key partners required during the grant period of performance to address each of the needs described in the [Purpose and Need](#) section
- Explain how the work plan is appropriate for the program design and how the targets fit into the overall timeline of grant implementation.
- Identify meaningful support and collaboration with key stakeholders in planning, designing, and implementing all activities, including development of the application and the extent to which these contributors address the cultural, racial/ethnic, linguistic, and/or geographic diversity of the populations and communities served ([Attachments 2](#) and [7](#)).



- Provide timeline for implementation of the LPN/LVN-to-RN Bridge Program and the accreditation process.
  - Provide proposed outcomes of the LPN/LVN-to-RN Bridge program with a timeline with proposed number of students to be trained each year; and
  - Provide a detailed plan in recruiting, developing, and retaining clinical faculty the proposed number of clinical faculty per year.
- *(b) METHODOLOGY/APPROACH -- Corresponds to Section V's Review Criterion*  
Describe your objectives and proposed activities, and provide evidence for how they link to the project [purpose and needs](#) and the requirements listed in [Section IV. Program Requirements and Expectations](#). You must:
- Specify methods or processes that will be used to award academic credit for prior LPN/LVN acquired training or experience.
  - Describe the goals of the proposed project, including the rationale for proposing the intervention, and how they relate to attainment of the proposed goals.
  - Provide a detailed plan for recruitment and training of nursing students, including but not limited to individuals from diverse populations, such as individuals from disadvantaged backgrounds and underrepresented racial and ethnic minority populations among registered nurses.
  - Provide a detailed plan to recruit and develop clinical faculty from diverse backgrounds, who will train and support the students of the proposed project.
  - Include a dissemination plan that includes the outreach and collaboration to target audiences that receive the project reports, products, and/or project output information.
  - Describe how the proposed project strategies will facilitate the translation of LPN/LVN acquired clinical skills into nursing degree level nursing practicums.
  - Describe your partnerships with clinical training sites and academic institutions including technical/vocational schools and community colleges, in the planning, development and implementation of the project activities, goal, and objectives.
  - Identify strategies, tools and/or activities to address the SDOH, health equity, low health literacy, care of individuals with physical and behavioral needs in community settings and community and system needs, explain the rationale for proposing specific activities, and present a clear connection between identified system gaps, needs, and the proposed activities.
  - Develop experiential longitudinal clinical training opportunities for nursing students (LPN/LVN-to-RN) in the project; and
  - Describe support services that will be provided to the target student population to overcome barriers to success in nursing degree programs.

- (c) *RESOLUTION OF CHALLENGES -- Corresponds to Section V's [Review Criterion 2 \(c\)](#)*
  - Discuss challenges that you are likely to encounter in designing and implementing the activities described in the work plan, and approaches that you will use to resolve such challenges.
  - Discuss challenges that are likely to be encountered in sustaining the program and approaches that will be used to resolve such challenges; and
  - Describe any potential obstacles for implementing the program performance evaluation and meeting HRSA's performance measurement requirements and your plan to address those obstacles.
- *IMPACT -- This section includes two 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 \(a\)](#)*

Describe the plan for the program performance evaluation that will contribute to continuous quality improvement. The program performance evaluation must:

- Monitor ongoing processes and the progress towards meeting the goals and objectives of the project and attainment of the proposed goals. Identify how projects will meet identified needs, and work toward increasing the number of nurses who are able to practice in effective collaborative, interprofessional, team-based environments that are comprised of high-functioning diverse professionals.
- Describe how the organizational structure, including the capability and commitment of administration, management and governing board, is appropriate for the implementation, operations, and oversight necessary to implement integrated services and curriculum enhancements ([Attachments 3](#) and [7](#)).
- Include descriptions of the inputs (e.g., organizational profile, collaborative partners, key personnel, budget, and other resources), key processes, and variables to be measured, and expected outcomes of the funded activities.
- Demonstrate evidence that the evaluative measures selected will be able to assess: 1) the extent to which the program objectives have been met, and 2) the extent to which these can be attributed to the project.
- Describe the systems and processes that will support your organization's collection of HRSA's performance management requirements through effective collection, analysis, and tracking of performance outcomes and how the data will be used to inform program development and service delivery; and
- Describe processes to obtain participant employment data one year after graduation.

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

Provide a clear plan for project sustainability after the period of federal funding ends, including a description of specific actions you will take to:

- Highlight key elements of your grant projects, e.g., training methods or strategies, which have been effective in improving practices.
- Discuss the identification of other sources of income, future funding initiatives and strategies, a timetable for continued growth of the proposed project and recruitment of clinical faculty.
- Provide a timetable for becoming self-sufficient. Recipients are expected to sustain key elements of their projects, e.g., strategies or services and interventions, which have been effective in improving practices and those that have led to improved outcomes for the target population; and
- Identify barriers to project implementation and sustainability, including workforce and student recruitment and retention, billing/payment systems, technology (i.e., health information technology), and quality improvement factors, and a plan to resolve and overcome these challenges.

▪ *ORGANIZATIONAL INFORMATION, RESOURCES, AND CAPABILITIES -- Corresponds to Section V's Review Criterion(a) 4*

Succinctly describe your capacity to effectively manage the programmatic, fiscal, and administrative aspects of the proposed project. (A project organizational chart is requested in Section IV.2. vi. [Attachment 3](#)).

- Describe your organization's current mission, structure, and scope of current activities and how these elements all contribute to the organization's ability to implement the program requirements and meet program expectations.
- Describe how the organizational structure, including the capability and commitment of administration, management, and governing board, is appropriate for the implementation, operations, and oversight necessary to integrated services and curriculum enhancements, including the President of the academic institution and/or health care facility or other higher-level official ([Attachment 7](#)).
- Provide a letter of agreement, commitment, or a Memoranda of Understanding (MOU) from each partner organization or department, internal and external, involved in your proposed project ([Attachment 2](#)).
- Discuss your current undergraduate nursing programs as well as current faculty, how many students are in each class, and the faculty devoted to undergraduate nurse training.
- Provide any documents that describe working relationships between your organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and any deliverable ([Attachment 2](#)).

- Provide a Staffing plan for proposed project including the percentage of time, including in-kind, dedicated to the project by the Project Director and key personnel that is sufficient to meet the goals of the program ([Attachment 1](#)).

## Key Personnel

**Project Director Qualification:** Identify one Project Director. The Project Director for the proposed project must be a licensed Registered Nurse. NOTE: There may only be one Project Director for the NEPQR-PRNP project.

The staffing plan and job descriptions for key faculty/staff must be included in [Attachment 1](#) (Staffing Plan and Job Descriptions for Key Personnel).

However, the biographical sketches must be uploaded in the SF-424 RESEARCH & RELATED Senior Key Person Profile (Expanded) form that can be accessed in the Application Package under “Mandatory.” Include biographical sketches for persons occupying the key positions, not to exceed TWO pages in length each. If 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. When applicable, biographical sketches should include training, language fluency, and experience working with diverse populations that are served by their programs.

Biographical sketches, not exceeding two pages per person, should include the following information:

- Senior/key personnel name
- Position Title
- Education/Training - beginning with baccalaureate or other initial professional education, such as nursing, including postdoctoral training and residency training if applicable:
  - Institution and location
  - Degree (if applicable)
  - Date of degree (MM/YY)
  - Field of study
- *Section a (required)* **Personal Statement.** Briefly describe why the individual's experience and qualifications make them particularly well-suited for their role (e.g., PD/PI) in the project that is the subject of the award.
- *Section B (required)* **Positions and Honors.** List in chronological order previous positions, concluding with the present position. List any honors. Include present membership on any Federal Government public advisory committee.
- *Section C (optional)* **Peer-reviewed publications or manuscripts in press (in chronological order).** You are encouraged to limit the list of selected peer-reviewed publications or manuscripts in press to no more than 15. Do not include manuscripts

submitted or in preparation. The individual may choose to include selected publications based on date, importance to the field, and/or relevance to the proposed research. Citations that are publicly available in a free, online format may include URLs along with the full reference (note that copies of publicly available publications are not acceptable as appendix material).

- Section D (*optional*) **Other Support**. List both selected ongoing and completed (during the last 3 years) projects (federal or non-federal support). Begin with any projects relevant to the project proposed in this application. Briefly indicate the overall goals of the projects and responsibilities of the Senior/Key Person identified on the Biographical Sketch.

### iii. **Budget**

The directions offered in the [SF-424 R&R Application Guide](#) may differ from those offered by Grants.gov. Follow the instructions in Section 4.1.iv of HRSA's [SF-424 R&R Application Guide](#) and the additional budget instructions provided below. A line-item budget in the SF424 budget form is required for each of 4 budget periods and includes a cumulative budget for the entire project period of 4 years. A budget that follows the *R&R Application Guide* will ensure that, if HRSA selects your application for funding, you will have a well-organized plan and, by carefully following the approved plan, may avoid audit issues during the implementation phase.

#### Sub awards/subcontracts

A detailed line-item budget form is required for each sub award for each of 4 budget periods and should be uploaded to the R&R Sub award Budget Attachment(s) Form.

The R&R Sub award Budget Attachment Form limits the number of attachments for sub awards to 10. If you need to include additional line-item budget forms, upload the attachment in R&R Other Project Information Form, block 12 "Other Attachments." These additional line-item budget forms for sub awards will not count against the page limit. Note that any additional budget justifications (i.e., back-up information) are included in the page limit.

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

As required by the Consolidated Appropriations Act, 2023 (P.L. 117-328), Division H, § 202, "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." See Section 4.1.iv Budget – Salary Rate Limitation of HRSA' [SF-424 R&R Application Guide](#) for additional information. Note that these or other salary limitations may apply in the following fiscal years, as required by law.

Indirect costs under training awards to organizations other than state or local governments, or federally recognized Indian tribes, will be budgeted and reimbursed at **8 percent** of modified total direct costs rather than based on a negotiated rate agreement, and are not subject to upward or downward adjustment. Direct cost amounts for equipment, tuition and fees, and sub awards and subcontracts in excess of \$25,000 are excluded from the direct cost base for purposes of this calculation.

**iv. Budget Justification Narrative**

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

The budget justification narrative must describe all line-item federal funds (including sub awards), and matching non-federal funds proposed for this project. Please note: all budget justification narratives count against the page limit. In addition, NEPQR-PRNP requires the following:

*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.

*Consultant Services:* If you are using consultant services, list the total costs for all consultant services. In the budget justification, identify each consultant, the services they will perform, the total number of days or the cost per hour and number of hours devoted to this project, travel costs, and the total estimated costs.

*Sub awards/Consortium/Contractual Costs:* Applicants that have sub awards or subcontracts must include a separate SF-424A Budget Information for Non-Construction Projects for EACH sub award. See detailed instructions in [Section VIII. Other Information](#) - Contracts/Sub awards. For applicants that have sub awards/contracts, provide a clear explanation as to the purpose of each sub award/contract, how the costs were estimated, and the specific contract deliverables. Applicants are responsible for ensuring that their organization or institution has in place an established and adequate procurement system with fully developed written procedures for awarding and monitoring all contracts. Applicants must provide a clear explanation as to the purpose of each contract, how the costs were estimated, and the specific contract deliverables. Reminder: recipients must notify potential sub recipients that entities receiving sub awards must be registered in SAM and provide the recipient with their DUNS number.



v. **Standardized Work Plan (SWP) Form**

As part of the application submitted through Grants.gov, you must complete and electronically submit the SWP Form by the application due date. Work Plan -- Corresponds to Section V's Review Criterion 2 (a).

The SWP Form is part of the electronic Grants.gov application package and must be completed online as a part of the Grants.gov application package. Ensure it includes all the information detailed in Section IV.2. ii. Project [Narrative](#).

vi. **Attachments**

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 limitation.** Your indirect cost rate agreement and proof of non-profit status (if applicable) will not count toward the page limitation. **Clearly label each attachment.** You must upload attachments into the application. Any *hyperlinked* attachments will *not* be reviewed/opened by HRSA.

*Attachment 1: Staffing Plan and Job Descriptions for Key Personnel (see Section 4.1.vi. of HRSA's [SF-424 R&R Application Guide](#)) (Required)*

Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff. Also include a description of your organization's time keeping process to ensure that you will comply with the federal standards related to documenting personnel costs.

*Attachment 2: Letters of Agreement or Commitment, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts (project-specific) (Required)*

Provide any documents that describe working relationships between your organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and any deliverable. Make sure any letters of agreement are signed and dated. It is not necessary to include the entire contents of lengthy agreements, so long as the included document provides the information that relates to the requirements of the NOFO.

*Attachment 3: Project Organizational Chart (Required)*

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

*Attachment 4: Tables, Charts, etc. (As Applicable)*

This attachment should give more details about the proposal (e.g., Gantt or PERT charts, flow charts).

*Attachment 5: Maintenance of Effort Documentation (Required)*

Applicants must provide a baseline aggregate of actual expenditures for the prior fiscal year and an estimate of non-federal funds expended on the proposed grant-funded activities for the next fiscal year using a chart like the one below.

HRSA will enforce statutory MOE requirements through all available mechanisms.

NON-FEDERAL EXPENDITURES	
<p style="text-align: center;">FY 2022 (Actual)</p> <p>Actual FY 2022 non-federal funds, including in-kind, expended for activities proposed in this application.</p> <p>Amount: \$ _____</p>	<p style="text-align: center;">FY 2023 (Estimated)</p> <p>Estimated FY 2023 non-federal funds, including in-kind, designated for activities proposed in this application.</p> <p>Amount: \$ _____</p>

***Attachment 6: Request for Funding Preference (Required, as applicable)***

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](#).

***Attachment 7: Letters of Support (Required as applicable)***

Provide a letter of support for each organization or department involved in your proposed project. Letters of support must be from someone who holds the authority to speak for the organization or department (CEO, Chair, etc.), must be signed and 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 (Required)***

Schools of nursing affiliated with the proposed project must be accredited at the time of application by a recognized body or bodies or by a state agency approved for such purpose by the Secretary of the U.S. Department of Education. Applicants must submit documentation that (1) demonstrates continuing accreditation from the relevant accrediting body and are not on probation, (2) the name of the accrediting body, (3) the date of initial accreditation, (4) the date of the next expected accrediting body review (or expiration date of current accreditation), and (5) a web link to the accreditation information on the accrediting body website (if available). Applicants on provisional accreditation status must provide proof of this status. Applicants whose accreditation status cannot be verified will be considered nonresponsive and deemed ineligible to receive funding under this funding notice.

**Substantive Change Notification**

Accredited nursing programs that modify (for example, a change to a BSN-DNP program) or add a nursing specialty that requires substantive change notification to the national nursing accrediting body, must include documentation of such approval of the change from the accrediting agency.



### **Newly Established Programs of Nursing Accreditation**

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.

### ***Attachment 9: (Required) Disparities Impact Statement***

A Disparities Impact Statement (DIS) is an instrument used to measure and describe how training will support trainees' capacity to meet the needs of underserved populations.

Please note that **elements of the DIS are often integrated in the Project Narrative in the purpose/need and methodology/approach sections.** Please include any relevant information from those sections into this attachment.

- 1) The efforts your organization will make to prepare trainees to address the social determinants of health, including but not limited to access barriers to health services, and health literacy.
  - For example: after considering data about the percentage of non-English-speaking residents of the local geographical area, design training related to overcoming language barriers to service utilization.
- 2) The strategies your organization will engage to improve trainee cultural competence to meet the needs of underserved communities by providing training based on the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care Standards.
  - For example: To improve cultural and linguistic competence, our trainings will utilize the National Standards for Culturally and Linguistically Appropriate Services (CLAS Standards) in Health and Health Care. This will include a focus on:
    - a. Diverse cultural health practices
    - b. Preferred languages/language translation services
    - c. Training and integration of CLAS Standards, health literacy and other communication needs of the disparity sub-populations identified
- 3) Measure and report where graduates (completers of training programs) are 1 year following completion and how many of them align demographically with the

community and/or disparity sub-populations they are serving, such as graduates/program completers from rural areas now practicing in a rural area.

Project activities must comply with the non-discrimination requirements described in [Section VI](#).

*Attachment 10: Other Relevant Documents (As Applicable)*

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

## **2. Unique Entity Identifier (UEI) and System for Award Management (SAM).**

Effective April 4, 2022:

- The UEI assigned by SAM has replaced the Data Universal Numbering System (DUNS) number.
- Register at SAM.gov and you will be assigned a UEI.

You must register with SAM and continue to always maintain active SAM registration with current information when you have an active federal award, an active application, or an active plan under consideration by an agency (unless you are an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or you have an exception approved by the agency under 2 CFR § 25.110(d)). For your SAM.gov registration, you must submit a notarized letter appointing the authorized Entity Administrator.

If you are chosen as a recipient, HRSA will not make an award until you have complied with all applicable SAM requirements. If you have not fully complied with the requirements by the time HRSA is ready to make an award, you may be deemed not qualified to receive an award, and HRSA may use that determination as the basis for making an award to another applicant.

If you have already completed Grants.gov registration for HRSA or another federal agency, confirm that it is still active and that the Authorized Organization Representative (AOR) has been approved.

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

- SAM (<https://sam.gov/content/home> | SAM.gov Knowledge Base)
- Grants.gov (<https://www.grants.gov/>)

Effective March 3, 2023, individuals assigned a SAM.gov Entity Administrator role must be an employee, officer, or board member, and cannot be a non-employee. This change is to ensure entities are in control of who has permission to control roles within their entity.

Here's what this means:

- Entity Administrators assigning roles to non-employees will only be able to assign a Data Entry role or lower.

- Any entities assigning Entity Administrator roles using an Entity Administrator Role Request Letter (formerly called “notarized letter”) will no longer be able to assign the Entity Administrator role to a non-employee.
- Entity Administrator roles assigned to non-employees will be converted to Data Entry roles. With a Data Entry role, non-employees can still create and manage entity registration data entry but cannot manage roles.

If you are an entity using a non-employee or if you are a non-employee working with an entity to manage registrations, please read (and share) more about this change on our blog to know what to expect. For more details, see Section 3.1 of HRSA’s [SF-424 R&R Application Guide](#).

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

### **3. Submission Dates and Times**

#### **Application Due Date**

The application due date under this NOFO is *April 28, 2023, at 11:59 p.m.ET*. HRSA suggests you submit your application to Grants.gov at least **3 calendar days before the deadline** to allow for any unforeseen circumstances. See Section 8.2.5 – Summary of emails from Grants.gov of HRSA’s [SF-424 R&R Application Guide](#) for additional information.

#### **4. Intergovernmental Review**

NEPQR-PRNP is not subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

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

#### **5. Funding Restrictions**

You may request funding for a period of performance of up to 4 years, at no more than \$1,000,000 per year (inclusive of direct **and** indirect costs). Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project’s objectives, and a determination that continued funding would be in the best interest of the Federal Government.

The General Provisions of the Consolidated Appropriations Act of FY 2023 (P.L. 117-328) apply to this program. See Section 4.1 of HRSA’s [SF-424 R&R Application Guide](#) for additional information. Note that these and other restrictions will apply in the following fiscal years, as required by law.

You are required to have the necessary policies, procedures, and financial controls in place to ensure that your organization complies with all legal requirements and restrictions applicable to the receipt of federal funding including statutory restrictions on use of funds for lobbying, executive salaries, gun control, abortion, etc. Like all other

applicable grants requirements, the effectiveness of these policies, procedures, and controls is subject to audit.

Be aware of the requirements for HRSA recipients and sub recipients at 2 CFR § 200.216 regarding prohibition on certain telecommunications and video surveillance services or equipment. For details, see the [HRSA Grants Policy Bulletin Number: 2021-01E](#).

All program income generated as a result of awarded funds must be used for approved project-related activities. Any program income earned by the recipient must be used under the addition/additive alternative. You can find post-award requirements for program income at [45 CFR § 75.307](#).

## **V. Application Review Information**

### **1. Review Criteria**

HRSA has procedures for assessing the technical merit of applications to provide for an objective review and to assist you in understanding the standards against which your application will be reviewed. HRSA has critical indicators for each review criterion to assist you in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation.

Reviewers will evaluate and score the merit of your application based upon these criteria. Five (5) review criteria are used to review and rank NEPQR-PRNP applications. Below are descriptions of the review criteria and their scoring points.

*Criterion 1: PURPOSE AND NEED (10 points) – Corresponds to Section IV's [Purpose and Need](#)*

Reviewers will consider the need for the proposed project as illustrated by current, well-cited data. Reviewers will consider whether the applicant has demonstrated understanding of the need of the proposed project in the community/target population and within the applicant organization, the extent that the application:

- Demonstrates the problem and associated contributing factors to the problem, including the quality and extent to which it addresses RN and faculty shortage.
- Presents the prevalence of LPN/LVNs and RNs in the targeted community and the need for the proposed project in target community/population to address the community health status indicators, social determinants of health, and barriers to care and unmet health needs.
- Reflects the demographic data of the applicants target student and faculty population, including but not limited to demographic characteristics, geographic background, and race/ethnicity background, and demographics of the current nursing workforce in the geographic area of the proposed project.
- Describes any relevant barriers or gaps that prevent LPN/LVNs from being successful in obtaining a nursing degree and passing the NCLEX-RN; and
- Describes ([Attachment 9](#)) how training will address the social determinants of health, prepare trainees to provide culturally competent care, and track graduates' alignment with the communities they serve demographically and geographically.

Criterion 2: RESPONSE TO PROGRAM PURPOSE (35 points) – Corresponds to Section IV's *Response to Program Purpose Sub-section (a) Methodology/Approach, Sub-section (b) Work Plan and Sub-section (c) Resolution of Challenges*

*Criterion 2 (a): WORK PLAN (10 points) – Corresponds to Section IV's Response to Program Purpose Sub-section [\(a\) Work Plan](#)*

Reviewers will consider the extent to which the application provides a clear, comprehensive, and specific set of goals and objectives and the concrete steps that will be used to achieve those goals and objectives including how the application:

- Describes timeframes, deliverables, and key partners required during the grant period of performance to address each of the needs described in the Purpose and Need section.
- Describe of the goals of the proposed project, including the rationale for proposing the intervention, and how they relate to attainment of the proposed goals.
- Explains how the work plan is appropriate for the program design and how the targets fit into the overall timeline of grant implementation.
- Includes feasible and reasonable timeframes for accomplishing all activities proposed under the Methodology and Approach section within the four-year period of performance.
- Provides a reasonable set of milestones that demonstrate a complete understanding of all activities and responsibilities required to implement the establishment and/or expansion of the LPN/LVN-to-RN Bridge project within the timeframe of the award.

- Identifies meaningful support and collaboration with key stakeholders in planning, designing, and implementing all activities, including development of the application and, further, the extent to which these contributors address the cultural, racial, linguistic, and/or geographic diversity of the populations and communities served.
- Provides a proposed outcomes with a timeline with proposed number of students to be trained each year; and
- Provides a detailed plan in recruiting, developing, and retaining clinical faculty.

*Criterion 2 (b): METHODOLOGY/APPROACH (20 points) – Corresponds to Section IV's Response to Program Purpose Sub-section [\(b\) Methodology/Approach](#)*

The reviewers will consider the quality and extent to which the application:

- Describes methods or processes for awarding academic credit for prior LPN/LVN acquired training/ experience and strategies for translating acquired medical skills into professional (nursing degree level) nursing clinical practice.
- Implements strategies that will be used to enhance the knowledge, skills, and abilities of faculty about health equity and SDOH.
- Describes the partnerships with clinical training sites and academic institutions, including technical/vocational schools and community colleges, used in recruiting, retaining, graduating students, and assisting LPN/LVN-to-ADN/BSN students (i.e., prep courses, tutoring, etc.) in passing the NCLEX-RN exam.
- Details modifications made to the curriculum and support services to address student challenges and barriers in obtaining nursing degrees.
- Includes specific strategies to assist graduates to obtain professional nursing employment post - graduation.
- Describes existing and proposed expansion of clinical faculty through recruitment and development and its capacity to support the proposed program.
- Describes a detailed plan for recruitment and training of nursing students, including those from diverse populations, such as individuals from disadvantaged backgrounds and underrepresented racial and ethnic minority populations among registered nurses.
- Identifies strategies, tools and/or activities to address the SDOH, health equity, increase health literacy, care of individuals with physical and behavioral needs in community settings, and community and system needs, explains the rationale for proposing specific activities, and presents a clear connection between identified system gaps, and attainment of the proposed goals.
- Describes the use of partnerships in developing didactic training curriculum and longitudinal training in community health settings.
- Includes a plan to disseminate reports, products, and/or project outputs so project information is provided to key target audiences.

*Criterion 2 (c): RESOLUTION OF CHALLENGES (5 points) – Corresponds to Section IV's Response to Program Purpose Sub-section [\(c\) Resolution of Challenges](#)*

The application will be evaluated on the extent to which the applicant demonstrates an understanding of potential obstacles and challenges during the design and implementation of the project, as well as a plan for dealing with identified contingencies that may arise.

Reviewers will determine the extent to which you:

- Articulate potential obstacles and challenges during the implementation of the project, as well as describe a reasonable and actionable plan for dealing with identified contingencies that may arise.

*Criterion 3: IMPACT (25 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 quality of the applicant's plan to report on the measurable outcomes being requested, including both an internal program performance evaluation plan and HRSA's required performance measures.

Reviewers will consider the extent to which the applicant:

- Describes the plan for the program performance evaluation that will contribute to continuous quality improvement. The program performance evaluation must include monitoring ongoing processes and the progress towards meeting the goals and objectives of the project, and the attainment of the proposed goals.
- Demonstrates evidence that the evaluative measures selected will be able to assess: 1) the extent to which the program objectives have been met, and 2) the extent to which these can be attributed to the project.
- Describes the systems and processes that will support your organization's collection of HRSA's performance management requirements through effective tracking of performance outcomes.
- Describes the data collection strategy to accurately collect, analyze and track data to measure process and impact/outcomes, and explain how the data will be used to inform program development and service delivery.
- Provides a detailed evaluation and reporting plan that illustrates the feasibility and effectiveness of plans for dissemination of project results, the extent to which project results may be national in scope, and the degree to which the project activities are replicable.

- Provides evidence of the financial capability and organizational commitment needed to operate the project.
- Describes the recruitment and retention plan for clinical faculty who will expand access and support to the LPN/LVN-to-RN Bridge Program throughout the period of performance; and
- Describes processes to obtain participant employment data one year after graduation.

*Criterion 3 (b): PROJECT SUSTAINABILITY (10 points) – Corresponds to Section IV’s Impact Sub-section [\(b\) Project Sustainability](#)*

Reviewers will consider the quality of the response in which the applicant describes a feasible and actionable plan for project sustainability after the period of federal funding ends. Reviewers will also consider the extent to which the applicant identifies likely challenges to be encountered in sustaining the program and describes logical approaches that are likely to resolve such challenges.

- Details a proposed a plan for project sustainability after the period of federal funding ends, including a description of specific actions you will take to: Highlight key elements of your grant projects, e.g., training methods or strategies, which have been effective in improving practices.
- Provides a timetable for becoming self-sufficient. Recipients are expected to sustain key elements of their projects, e.g., strategies or services and interventions, which have been effective in improving practices and those that have led to improved outcomes for the target population.
- Discusses your current undergraduate nursing programs as well as current faculty, how many students are in each class, and the faculty devoted to undergraduate nurse training.
- Provides any documents that describe working relationships between your organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and any deliverable ([Attachment 2](#)); and the identification of other sources of income, future funding initiatives and strategies, a timetable for continued growth of the proposed project and recruitment for clinical faculty.



Criterion 4: ORGANIZATIONAL INFORMATION/RESOURCES/CAPABILITIES (10 points) – Corresponds to Section IV's [Organizational Information, Resources, and Capabilities](#)

Reviewers will determine the extent to which the applicant identifies highly qualified personnel and high-quality facilities to implement the project. Reviewers will consider the quality in which you:

- Provide letters of support from each organization or department, internal and external, involved in your proposed project ([Attachment 7](#)).
- Describe organization's current mission, structure, and scope of current activities and how these elements all contribute to the organization's ability to implement the program requirements and meet program expectations. Include an organizational chart ([Attachment 3](#)).
- Discuss how the organization will follow the approved plan, as outlined in the application, properly account for the federal funds, and document all costs to avoid audit findings.
- Provide a staffing plan for proposed project and the project organizational chart to ensure it is sufficient to meet the goals of the program including the percentage of time, including in-kind, dedicated to the project by the Project Director ([Attachment 1](#)); and
- Describes how the organizational structure, including the capability and commitment of administration, management, and governing board, is appropriate for the implementation, operations, and oversight necessary to implement integrated services and curriculum enhancements.

Criterion 5: SUPPORT REQUESTED (20 points) – Corresponds to Section IV's [Budget Justification Narrative and SF-424 R&R budget forms](#)

Reviewers will consider the reasonableness of the proposed budget for each year of the period of performance, in relation to the objectives, the complexity of the project activities, and the anticipated results. Reviewers will also consider the extent to which:

- Costs, as outlined in the budget and required resources sections, are reasonable given the scope of work.
- Key personnel have adequate time devoted to the project to achieve project objectives; and
- Budget justification is clear and aligns with the SF 424 R&R budget forms for each year. The costs are clearly justified by a narrative description, provides an itemized breakdown for all costs, including participant support costs, and indirect costs are calculated at the negotiated rate.

## 2. Review and Selection Process

The objective review process provides an objective evaluation of applications to the individuals responsible for making award decisions. The highest ranked applications receive consideration for award within available funding ranges. HRSA may also consider assessment of risk and the other pre-award activities described in Section 3 below. See Section 5.3 of HRSA's [SF-424 R&R Application Guide](#) for more details. In addition to the ranking based on merit criteria, HRSA approving officials will apply other factors described below in selecting applications for award.

For this program, HRSA will use:

### Funding Preferences

This program provides a funding preference for some applicants as authorized by section 805 of the Public Health Service Act (42 U.S.C. § 296d). 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 receive full and equitable consideration during the review process.

Preference shall be given to applicants with projects that will substantially benefit rural or underserved populations or help meet public health nursing needs in State or local health departments. For this competition, HRSA has interpreted "substantially benefit" to mean those projects that encompass clinical practice training at a site physically located in either (a) a rural area, (b) Medically Underserved Area and/or Population, and/or (c) a State or local health department.

Applicants should indicate in the program abstract their request for funding preference consideration. To be considered for Funding Preference, you must supply all supporting data in [Attachment 6](#). Only applications with supporting data requested in [Attachment 6](#) will be considered for the funding preference. An applicant may receive only **one** funding preference out of the three possible ways to qualify. HRSA staff will determine the funding factor and will grant it to any qualified applicant that demonstrates they meet the criteria for the preference(s) as follows:

#### **Qualification 1 (Substantially Benefits Rural Population):**

*School of Nursing applicants* are eligible to receive this preference if they can demonstrate that graduates of their nursing program are currently employed in a rural area. Eligibility confirmation can be obtained by the applicant providing data including the number of nursing graduates that are in a rural area.

*Health Facility applicants* are eligible to receive this preference if they can demonstrate that the community in which they provide training are deemed rural (health facilities) using the eligibility confirmation. Confirmation that a site is rural Eligibility confirmation can be obtained by inserting the address of the clinical training site into [HRSA's Rural Health Grants Eligibility Analyzer](#) or "Am I Rural?" (Applicants must include a copy of the output from the Analyzer with the application in [Attachment 6](#).) Note that if the output exceeds three pages, only the first three pages will count toward the page limit).

## **OR**

### **Qualification 2 (Substantially Benefits Underserved Populations):**

*School of Nursing applicants* are eligible to receive this if they can demonstrate that they encompass clinical practice training at a site physically located in either (a) a rural area, (b) Medically Underserved Area and/or Population, and/or (c) a State or local health department.

*Health Facility applicants* are eligible to receive this preference if they can demonstrate that the community in which they provide training are deemed MUA/MUP using the eligibility confirmation. Applicants must include a copy of the output from Shortage Designation Advisor in [Attachment 6](#). (Note that if the output exceeds three pages, only the first three pages will count toward the page limit)

## **OR**

### **Qualification 3 (Substantially Benefits Public Health Nursing Needs in State or Local Health Departments):**

Applicants are eligible to receive this preference if they substantially benefit Public Health Nursing needs in State or Local Health Departments. Eligibility confirmation may be obtained by demonstrating linkage(s) or practice collaborations with state or local health departments for student practicum experiences. Applicants must include a copy of the practice agreement in [Attachment 6](#).

### **3. Assessment of Risk**

HRSA 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](#)).

HRSA reviews applications receiving a favorable objective review for other considerations that include past performance, as applicable; cost analysis of the project/program budget; assessment of your management systems, ensuring continued applicant eligibility; and compliance with any public policy requirements, including those requiring just-in-time submissions. HRSA may ask you to submit additional programmatic or administrative information (such as an updated budget or "other support" information) or to undertake certain activities (such as negotiation of an indirect cost rate) in anticipation of an award. However, even at this point in the process, such requests do not guarantee that HRSA will make an award. Following review of all applicable information, HRSA's approving, and business management officials will determine whether HRSA can make an award, if special conditions are required, and what level of funding is appropriate.

Award decisions are discretionary and are not subject to appeal to any HRSA or HHS official or board.

HRSA is required to review and consider any information about your organization that is in the [Federal Awardee Performance and Integrity Information System \(FAPIIS\)](#). You

may review and comment on any information about your organization that a federal awarding agency previously entered. HRSA will consider your comments, in addition to other information in [FAPIIS](#) in making a judgment about your organization's integrity, business ethics, and record of performance under federal awards when completing the review of risk as described in [45 CFR § 75.205 HHS Awarding Agency Review of Risk Posed by Applicants](#).

HRSA will report to FAPIIS a determination that an applicant is not qualified ([45 CFR § 75.212](#)).

## **VI. Award Administration Information**

### **1. Award Notices**

HRSA will release the Notice of Award (NOA) on or around the start date of July 1, 2023. See Section 5.4 of HRSA's [SF-424 R&R Application Guide](#) for additional information.

### **2. Administrative and National Policy Requirements**

See Section 2.1 of HRSA's [SF-424 R&R Application Guide](#).

If you are successful and receive an NOA, in accepting the award, you agree that the award and any activities thereunder are subject to:

- All provisions of 45 CFR part 75, currently in effect or implemented during the period of the award,
- Other federal regulations and HHS policies in effect at the time of the award or implemented during the period of award, and
- Applicable statutory provisions.

### **Accessibility Provisions and Non-Discrimination Requirements**

Should you successfully compete for an award, recipients of federal financial assistance (FFA) from HHS will be required to complete an HHS Assurance of Compliance form (HHS 690) in which you agree, as a condition of receiving the grant, to administer your programs in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, age, sex and disability, and agreeing to comply with federal conscience laws, where applicable. This includes ensuring that entities take meaningful steps to provide meaningful access to persons with limited English proficiency; and ensuring effective communication with persons with disabilities. Where applicable, Title XI and Section 1557 prohibit discrimination on the basis of sexual orientation, and gender identity. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. See <https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html> and <https://www.hhs.gov/civil-rights/for-individuals/nondiscrimination/index.html>.

- For guidance on meeting your legal obligation to take reasonable steps to ensure meaningful access to your programs or activities by limited English proficient individuals, see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> and <https://www.lep.gov>.
- For information on your specific legal obligations for serving qualified individuals with disabilities, including providing program access, reasonable modifications, and to provide effective communication, see <http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>.
- HHS funded health and education programs must be administered in an environment free of sexual harassment, see <https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html>.

For guidance on administering your project in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see <https://www.hhs.gov/conscience/conscience-protections/index.html> and <https://www.hhs.gov/conscience/religious-freedom/index.html>.

Please contact the [HHS Office for Civil Rights](#) for more information about obligations and prohibitions under federal civil rights laws or call 1-800-368-1019 or TDD 1-800-537-7697.

The HRSA Office of Civil Rights, Diversity, and Inclusion (OCRDI) offers technical assistance, individual consultations, trainings, and plain language materials to supplement OCR guidance and assist HRSA recipients in meeting their civil rights obligations. Visit [OCRDI's website](#) to learn more about how federal civil rights laws and accessibility requirements apply to your programs, or contact OCRDI directly at [HRSACivilRights@hrsa.gov](mailto:HRSACivilRights@hrsa.gov).

### **Executive Order on Worker Organizing and Empowerment**

Pursuant to the Executive Order on Worker Organizing and Empowerment, HRSA strongly encourages applicants to support worker organizing and collective bargaining and to promote equality of bargaining power between employers and employees. This may include the development of policies and practices that could be used to promote worker power. Applicants can describe their plans and specific activities to promote this activity in the application narrative.

### **Requirements of Sub awards**

The terms and conditions in the NOA apply directly to the recipient of HRSA funds. The recipient is accountable for the performance of the project, program, or activity; the appropriate expenditure of funds under the award by all parties; and all other obligations of the recipient, as cited in the NOA. In general, the requirements that apply to the recipient, including public policy requirements, also apply to sub recipients under awards, and it is the recipient's responsibility to monitor the compliance of all funded sub recipients. See [45 CFR § 75.101 Applicability](#) for more details.

## Data Rights

All publications developed or purchased with funds awarded under this notice must be consistent with the requirements of the program. Pursuant to 45 CFR § 75.322(b), the recipient owns the copyright for materials that it develops under an award issued pursuant to this notice, and HHS reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use those materials for federal purposes, and to authorize others to do so. In addition, pursuant to 45 CFR § 75.322(d), the Federal Government has the right to obtain, reproduce, publish, or otherwise use data produced under this award and has the right to authorize others to receive, reproduce, publish, or otherwise use such data for federal purposes, e.g., to make it available in government-sponsored databases for use by others. If applicable, the specific scope of HRSA rights with respect to a particular grant-supported effort will be addressed in the NOA. Data and copyright-protected works developed by a sub recipient also are subject to the Federal Government's copyright license and data rights.

## 3. Reporting

Award recipients must comply with Section 6 of HRSA's [SF-424 R&R Application Guide](#) and the following reporting and review activities:

- 1) **Progress Report(s).** The recipient must submit a progress report to HRSA on an annual basis. HRSA will verify that that approved and funded applicants' proposed objectives are accomplished during each year of the project.

The Progress Report has two parts. The first part demonstrates recipient progress on program-specific goals. Recipients will provide performance information on project objectives and accomplishments, project barriers and resolutions, and will identify any technical assistance needs.

The second part collects information providing a comprehensive overview of recipient overall progress in meeting the approved and funded objectives of the project, as well as plans for continuation of the project in the coming budget period. The recipient should also plan to report on dissemination activities in the annual progress report.

In addition, you must submit a Quarterly Progress Update (QPU) to HRSA via the Electronic Handbooks (EHBs) at the completion of each quarter. The QPU will be automatically generated and allows recipients to document progress on their activities based on the information submitted in the SWP.

More information will be available in the NOA.

- 2) **Performance Reports.** The recipient must submit a Performance Report to HRSA via the EHBs on an annual basis. All HRSA 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 (GPRM). 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 annual performance report will address all academic year activities from August 1 to July 31 and will be due to HRSA on August 31 each year. If award activity extends beyond July 31 in the final year of the period of performance, a Final Performance Report (FPR) may be required to collect the remaining performance data. The FPR is due within 90 calendar days after the period of performance ends.

- 3) **Final Program Report.** A final report is due within 90 calendar days after the period of performance ends. The Final Report must be submitted online by recipients in the EHBs at <https://grants.hrsa.gov/webexternal/home.asp>.

The Final Report is designed to provide HRSA with information required to close out a grant after completion of project activities. Recipients are 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.

- 4) **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. More specific information will be included in the NOA.
- 5) **Integrity and Performance Reporting.** The NOA will contain a provision for integrity and performance reporting in [FAPIS](#), as required in [45 CFR part 75 Appendix XII](#).

Note that the OMB revisions to Guidance for Grants and Agreements termination provisions located at [2 CFR § 200.340 - Termination](#) apply to all federal awards effective August 13, 2020. No additional termination provisions apply unless otherwise noted

## VII. Agency Contacts

You may request additional information and/or technical assistance regarding business, administrative, or fiscal issues related to this NOFO by contacting:

Nandini Assar, PH.D.  
Grants Management Specialist  
Division of Grants Management Operations, OFAM  
Health Resources and Services Administration  
5600 Fishers Lane, Mailstop 10SWH03  
Rockville, MD 20857  
Telephone: 301-443-4920  
Email : [nassar@hrsa.gov](mailto:nassar@hrsa.gov)

You may request additional information regarding the overall program issues and/or technical assistance related to this NOFO by contacting:

Michelle Osborne MSN, RN, FNP-BC  
Nurse Consultant/Project Officer  
Attn: NEPQR-PRNP  
Bureau of Health Workforce  
Health Resources and Services Administration  
5600 Fishers Lane, Room 11N 100D  
Rockville, MD 20857  
Email : [mosborne@hrsa.gov](mailto:mosborne@hrsa.gov)

You may need assistance when working online to submit your application forms electronically. 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 dial 606-545-5035)  
Email: [support@grants.gov](mailto:support@grants.gov)

### [Self-Service Knowledge Base](#)

Successful applicants/recipients may need assistance when working online to submit information and reports electronically through [HRSA's Electronic Handbooks \(EHBs\)](#). Always obtain a case number when calling for support. For assistance with submitting in the EHBs, contact the HRSA Contact Center, Monday–Friday, 7 a.m. to 8 p.m. ET, excluding federal holidays at:



HRSA Contact Center  
Telephone: (877) 464-4772 / (877) Go4-HRSA  
TTY: (877) 897-9910  
Web: <http://www.hrsa.gov/about/contact/ehbhelp.aspx>

## **VIII. Other Information**

### **Technical Assistance**

See TA details in Executive Summary.

### **Tips for Writing a Strong Application**

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

## Appendix A: Page Limit Worksheet

The purpose of this worksheet is to give you a tool to ensure the number of pages uploaded into your application is within the specified [page limit. \(Do not submit this worksheet as part of your application.\)](#)

The Standard Forms listed in column 1 do not count against the page limit; however, attachments to the Standard Forms listed in column 2 do count toward the page limit. For example, the Budget Narrative Attachment Form does not count, however the attachment uploaded in that form does count against the page limit.

<b>Standard Form Name (Forms themselves do not count against the page limit)</b>	<b>Attachment File Name (Unless otherwise noted, attachments count against the page limit)</b>	<b># of Pages Applicant Instruction – enter the number of pages of the attachment to the Standard Form</b>
Application for Federal Assistance (SF-424 R&R - Box 18)	SFLLL (Disclosure of Lobbying Activities)	<i>My attachment = ____ pages</i>
Application for Federal Assistance (SF-424 R&R - Box 21)	Cover Letter Attachment	<i>My attachment = ____ pages</i>
RESEARCH & RELATED Senior/Key Person Profile)	Biographical Sketch	<i>My attachment = ____ pages</i>
Project/Performance Site Location(s)	Additional Location(s)	<i>My attachment = ____ pages</i>
RESEARCH & RELATED BUDGET – A. Senior/Key Person	Additional Senior Key Persons	<i>My attachment = ____ pages</i>
RESEARCH & RELATED BUDGET – C. Equipment Description	Additional Equipment	<i>My attachment = ____ pages</i>
RESEARCH & RELATED BUDGET – L. Budget Related	Budget Justification	<i>My attachment = ____ pages</i>
RESEARCH & RELATED Other Project Information	8. Project Narrative	<i>My attachment = ____ pages</i>
RESEARCH & RELATED Other Project Information	9. Bibliography & References Cited	<i>My attachment = ____ pages</i>

<b>Standard Form Name</b> <i>(Forms themselves do not count against the page limit)</i>	<b>Attachment File Name</b> <i>(Unless otherwise noted, attachments count against the page limit)</i>	<b># of Pages</b> <i>Applicant Instruction – enter the number of pages of the attachment to the Standard Form</i>
RESEARCH & RELATED Other Project Information	10. Facilities & Other Resources	My attachment = ____ pages
RESEARCH & RELATED Other Project Information	11. Equipment	My attachment = ____ pages
RESEARCH & RELATED Other Project Information	12. Other Attachments	My attachment = ____ pages
Attachments Form	Attachment 1: <i>Staffing Plan and Job Descriptions for Key Personnel</i>	My attachment = ____ pages
Attachments Form	Attachment 2: <i>Letters of Agreement or Commitment, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts (project-specific)</i>	My attachment = ____ pages
Attachments Form	Attachment 3: <i>Project Organizational Chart</i>	My attachment = ____ pages
Attachments Form	Attachment 4: <i>Tables, Charts, etc.</i>	My attachment = ____ pages
Attachments Form	Attachment 5: <i>Maintenance of Effort Documentation</i>	My attachment = ____ pages
Attachments Form	Attachment 6: <i>Request for Funding Preference or Priority</i>	My attachment = ____ pages
Attachments Form	Attachment 7: <i>Letters of Support</i>	My attachment = ____ pages
Attachments Form	Attachment 8: <i>Accreditation</i>	My attachment = ____ pages
Attachments Form	Attachment 9: <i>Disparities Impact Statement</i>	My attachment = ____ pages
Attachments Form	Attachment 10: <i>Other Relevant Documents</i>	My attachment = ____ pages

<b>Standard Form Name</b> <i>(Forms themselves do not count against the page limit)</i>	<b>Attachment File Name</b> <i>(Unless otherwise noted, attachments count against the page limit)</i>	<b># of Pages</b> <i>Applicant Instruction – enter the number of pages of the attachment to the Standard Form</i>
# of Pages Attached to Standard Forms		Applicant Instruction: Total the number of pages in the boxes above.
<b>Page Limit for HRSA-23-016 is 60 pages</b>		<b>My total = ____ pages</b>