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

Bureau of Health Workforce Division of Nursing and Public Health

## Nursing Workforce Diversity (NWD) Program

Announcement Type: New

Funding Opportunity Number: HRSA-17-063

Catalog of Federal Domestic Assistance (CFDA) No. 93.178

#### FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2017

# Application Due Date: November 18, 2016

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

Issuance Date: September 15, 2016

Modified November 15, 2016: Application Due Date changed from November 14 to November 18.

#### Modified September 30, 2016: hyperlinks to the SF-424 R&R Application Guide corrected throughout the FOA

Tara Spencer, MS, RN Project Officer/Nurse Consultant Division of Nursing and Public Health Bureau of Health Workforce 301-443-3192 Email: <u>TSpencer@hrsa.gov</u>

Authority: Section 821 of the Public Health Service Act (42 U.S.C. 296m)

# **EXECUTIVE SUMMARY**

The Health Resources and Services Administration (HRSA), Bureau of Health Workforce, Division of Nursing and Public Health, is accepting applications for the fiscal year (FY) 2017 Nursing Workforce Diversity (NWD) program. The purpose of this grant program is to increase educational opportunities for individuals from disadvantaged backgrounds (including racial and ethnic minorities underrepresented among registered nurses). The overarching goal of the NWD program is to increase access to high quality, culturally-aligned registered nurse providers that reflect the diversity of the communities in which they serve. This goal is accomplished by assisting students from disadvantaged backgrounds to become registered nurses, facilitating diploma or associate degree registered nurses to become baccalaureate-prepared registered nurses, and preparing practicing registered nurses for advanced nursing education.

Nursing Workforce Diversity (NWD) Program
HRSA-17-063
November 18, 2016
\$12,500,000
Up to 25 grants
Up to \$500,000 per year
No
July 1, 2017 through June 30, 2021
(4 years)
Eligible applicants include accredited
schools of nursing, nursing centers,
academic health centers, State or local
governments, and other private or public
non-profit entities determined appropriate
by the Secretary. Eligible faith-based
organizations, community-based
organizations, and Tribes and Tribal
Organizations can apply for these funds.
For profit entities are not eligible under
this funding opportunity announcement
(FOA).
ndividuals are not eligible to apply for
these funds. See <u>Section III-1</u> of this
FOA for complete eligibility information.

#### **Application Guide**

You (the applicant organization/agency) are responsible for reading and complying with the instructions included in HRSA's <u>SF-424 R&R Application Guide</u>, available online at <u>http://www.hrsa.gov/grants/apply/applicationguide/sf424rrguidev2.pdf</u>, except where instructed in this FOA to do otherwise. A short video for applicants explaining the *Application Guide* is available at <u>http://www.hrsa.gov/grants/apply/applicationguide/</u>.

#### **Technical Assistance**

A technical assistance webinar has been scheduled to help applicants understand, prepare and submit a grant application. The webinar is scheduled for: **Tuesday, September 27, 2016 from 2:30 p.m. - 4:30 p.m. EST Adobe Connect Link:** <u>https://hrsa.connectsolutions.com/fy2017-nwd/</u> Call-in Number: 800-779-1324 Participant Code: 3062656

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# I.Program Funding Opportunity Description

#### 1. Purpose

This announcement solicits applications for the Nursing Workforce Diversity (NWD) program. The overall purpose of the NWD program is to increase nursing education opportunities for individuals from disadvantaged backgrounds, including ethnic and racial minorities who are underrepresented among registered nurses.

This FY 2017 announcement solicits applications for a four year NWD program to strengthen and expand the comprehensive use of evidence-based strategies shown to increase the recruitment, enrollment, retention, and graduation of students from disadvantaged backgrounds in schools of nursing. For the purpose of this FOA, students from disadvantaged backgrounds include racial and ethnic minorities who are underrepresented among registered nurses, and individuals who are educationally and/or economically disadvantaged. (Please use the program definitions below as a reference for defining disadvantaged backgrounds and underrepresented minority populations.)

Applicants must be committed to increasing diversity in health professions training programs and the health workforce. This commitment helps ensure, to the extent possible, that the health workforce reflects the diversity of the nation. Training programs must develop the competencies and skills needed for intercultural understanding and expand cultural fluency, recognizing that bringing people of diverse backgrounds and experiences together facilitates innovative and strategic practices that enhance the health of all people. Accordingly, nursing training programs must be committed to developing a nursing workforce that is more reflective of the communities needing to be served.

#### 2. Background

This program is authorized under Section 821 of Public Health Service Act; 42 U.S.C. 296m.

A diverse health care workforce is necessary to meet the needs of a diverse population and achieve population health equity<sup>1</sup>. Diversity in nursing has been linked to improved health care delivery, increased cultural competence, and increased patient satisfaction. Furthermore, evidence shows that underrepresented racial/ethnic minority providers more often practice in underserved areas and thereby improve access to health care for the most vulnerable communities<sup>2</sup>. The current nursing workforce does not reflect the

<sup>&</sup>lt;sup>1</sup> Bendarz, H., Schim, S., Doorenbos, A. (2010). Cultural Diversity in Nursing Education: Perils, Pitfalls, and Pearls. *Journal of Nursing Education, 45(5).*253-260. <u>http://dx.doi.org/10.3928%2F01484834-</u>20100115-02

<sup>&</sup>lt;sup>2</sup> Sullivan, L.W. (2004). Missing persons: Minorities in the Health Professions. A Report of the Sullivan Commission on Diversity in the Healthcare Workforce. Located at: <u>http://www.aacn.nche.edu/media-relations/SullivanReport.pdf</u>

ethnic and cultural diversity of rural and underserved communities in the United States. According to a 2013 survey conducted by the National Council of State Boards of Nursing (NCSBN) and The Forum of State Nursing Workforce Centers, nurses from minority backgrounds represent 19 percent of the registered nurse (RN) workforce. A 2015 National Center for Health Workforce Analysis (NCHWA) report titled *Sex, Race, and Ethnic Diversity of U.S. Health Occupations* shows that only 20 percent of RNs are from racial/ethnic minority groups with 15 percent being from underrepresented populations<sup>3</sup>.

The nursing literature shows financial and interpersonal levers such as scholarships, loans, and mentoring are necessary, but not wholly sufficient to recruit, enroll, retain, and graduate underrepresented populations needed to diversify the workforce<sup>4</sup>. Therefore, workforce structural and multi-level approaches at the systems level guided by the social determinants of education must be used in order to enhance scholarship, stipend, and pre-entry mentoring activities. Studies have also shown that a social determinants framework can help to identify the economic and support barriers that can impede a student's success, and the social, environmental, and structural barriers that impede an institution's ability to support its students from enrollment through graduation. Further, a systems approach to address these barriers affords institutions the opportunity to examine and adjust current admissions practices and better utilize evidence-based strategies that address the structural changes necessary to create an environment that is culturally inclusive and adapts to the unique needs of a diverse student population<sup>5,6</sup>

Examples of evidence-based strategies include access to diverse mentors and role models, academic and financial support to engage students, and an environment of inclusion and success<sup>7</sup>. Strategies that incorporate both internal and external partnerships are essential to overcome student and institutional barriers<sup>8</sup>. Internal partnerships include building relationships and supporting the academic institution's services for student mentoring and social services that are provided to all students. External partnerships may leverage resources from national organizations or engage

<sup>&</sup>lt;sup>3</sup> National Center for Health Workforce Analysis. (2015). *Sex, Race, and Ethnic Diversity of U.S. Health Occupations.* Rockville, MD: U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Workforce.

<sup>&</sup>lt;sup>4</sup> World Health Organization. (2008). *Closing the gap in a generation: Health equity through action on the Social Determinants of Health*. (Final Report of the Commission on Social Determinants of Health). Geneva.

<sup>&</sup>lt;sup>5</sup> Marmot M, Friel S. (2008) Global health equity: Evidence for action on the Social Determinants of Health. Journal *Journal of Epidemiology and Community Health, 62*, 1095-1097. http://dx.doi.org/10.1136/jech.2008.081695

<sup>&</sup>lt;sup>6</sup> Marmot M., Allen J., Bell R., Bloomer, E., and Goldblatt, P. (2012) WHO European review of social determinants of health and the health divide. *The Lancet, 380(9846),* 1011-1029. http://dx.doi.org/10.1016/S0140-6736(12)61228-8

<sup>&</sup>lt;sup>7</sup>Milem, J. et al (2005) Making Diversity Work on Campus: A Research-Based Perspective, accessed at <u>https://www.aacu.org/sites/default/files/files/mei/milem\_et\_al.pdf</u>

<sup>&</sup>lt;sup>8</sup> Noone, J. (2008) The diversity imperative: Strategies to address a diverse nursing workforce. *Nursing Forum, 43(3),* 133-43. <u>http://dx.doi.org/10.1111/j.1744-6198.2008.00105.x</u>.

with community organizations that can help institutions recruit disadvantaged students, advise on diversity relations, and provide mentorship and service opportunities for disadvantaged students.

In order to continue to overcome the nursing workforce diversity deficit, a shift must occur at the educational level. This shift includes using a holistic approach to assess applicants in academic institutions as a strategy to increase student diversity and inclusion. In 2013, the National Advisory Council for Nursing Education and Practice recommended health professional education institutions follow the National Research Committee's recommendation to include a comprehensive review of applicants encompassing background and past learning experiences; training of admissions committee members to increase cultural humility; de-emphasis of standardized test data; and inclusion of members from underrepresented racial and ethnic minority groups and ethnically and racially diverse faculty on admissions committees<sup>9</sup>. Over the last decade, many health professions schools have successfully implemented this strategy. In a 2014 study conducted by the Urban Universities for Health Equity through Alignment, Leadership, and Transformation of the Health Workforce, 81 percent of health professions schools that used many elements of a holistic process experienced an increase in student diversity. In this study, 47 percent of Bachelor of Science in nursing programs reported using a holistic approach to admissions compared to 78-93 percent of other health professions programs<sup>10</sup>. Together, the implementation of all of these evidence-based strategies facilitates a comprehensive approach that mirrors a community, provides support, and is a catalyst for student success.

#### Program Requirements

All NWD recipients will implement a comprehensive systems approach to implementing five (5) evidence-based strategies successful in supporting nursing students from disadvantaged backgrounds (including ethnic and racial minorities underrepresented among registered nurses) from enrollment through graduation. This approach will also include an assessment of the social determinants that impeded the educational success of students from disadvantaged backgrounds, identification of the needs of these students, and implementation of tailored, evidence-based strategies to address their identified social determinants and needs. The strategies proposed align with recommendations and evidence-based strategies of several entities including the National Advisory Council on Nursing Education and Practice, as well as the Urban Universities for Health and the Association of American Colleges of Nursing.

All applicants will:

http://urbanuniversitiesforhealth.org/media/documents/holisticadmissionsinthehealthprofessions.pdf

<sup>&</sup>lt;sup>9</sup> National Advisory Council for Nursing Education and Practice. *Eleventh report to the Secretary of the Department of Health and Human Services and the Congress, 2013, Achieving Health Equity through Nursing Workforce Diversity.* Available from:

http://www.hrsa.gov/advisorycommittees/bhpradvisory/nacnep/Reports/eleventhreport.pdf. Accessed 7/28/2016

<sup>&</sup>lt;sup>10</sup> Urban Universities for Health Equity through Alignment, Leadership, and Transformation of the Health Workforce. (2014).*Holistic Admissions in the Health Professions Finding s from a national survey* [PDF version]. Retrieved from

- Implement a systems approach using <u>all</u> of the following five evidence-based strategies:
  - Academic and peer supports tailoring services necessary to facilitate and maintain the success of students from disadvantaged backgrounds.
  - Mentoring incorporating professional, academic, and peer mentors, including those from diverse backgrounds underrepresented among registered nurses.
  - Internal (i.e., institutional) and external (i.e., community) partnerships support the implementation of the systems approach and help to address the social determinants that impede the access to education and success of students from disadvantaged backgrounds.
  - Student financial support tailored to address the social determinants and needs of students from disadvantaged backgrounds.
  - Holistic review <sup>11</sup> incorporating criteria that are evidence-based, driven by the mission of the school of nursing, promote diversity, and use a balance of experiences, attributes, and academic metrics (refer to the Holistic Review definition in <u>Section VIII: Other Information</u>). Within this strategy, applicants will:
    - Assess the current use of practices consistent with holistic review and create a plan forecasting the progression toward higher levels of practice usage and a process for ongoing tracking of practice usage;
    - Identify criteria and develop metrics for holistic review practices to assess and evaluate school of nursing applicants for implementation; and
    - Establish a plan to implement a formal arrangement with a health professions organization for training and technical assistance with regards to holistic review process, practices, and implementation, as well as to increase the level of diversity training.
- Incorporate a rapid cycle quality improvement (RCQI) method that identifies, implements, and measures changes made to improve the project's performance.
- Demonstrate an institutional commitment to creating and maintaining a culture of diversity.

#### **Program Definitions**

The following are key definitions that apply to the NWD Program for FY 2017. *Please see Section VIII: Other Information, Program Definitions for an extended list of definitions.* 

Academic and peer support – A variety of instructional methods, educational services, or resources provided to students in the effort to help accelerate their learning progress, meet learning standards, or foster success in academic institutions.

**Disadvantaged background** – An individual who comes from an economically and or educationally disadvantaged background.

<sup>&</sup>lt;sup>11</sup> Please see American Association of Medical Colleges, Advancing Holistic Review Initiative.

**Economically disadvantaged** – An individual from a family with an annual income below a level based on low-income thresholds, according to family size established by the U.S. Census Bureau, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary of the U.S. Department of Health and Human Services, for use in all health professions programs. The Secretary updates these income levels in the Federal Register annually. (Please see Section VIII: Other Information, Program Definitions for an extended list of definitions)

**Educationally disadvantaged** – An individual from a social, cultural, or educational environment that has demonstrably and directly inhibited the individual from obtaining the knowledge, skills, and abilities necessary to develop and participate in a health professions education or training program. (*Please see Section VIII: Other Information, Program Definitions, for an extended list of definitions*)

**Holistic review** – A strategy that assesses an applicant's unique experiences alongside traditional measures of academic achievement. This strategy is designed to help universities consider a broad range of factors reflecting the applicant's academic readiness, contribution to the incoming class, and potential for success both in school and later as a professional. Holistic review, when used in combination with a variety of other mission-based practices, constitutes a "holistic admissions" process. (See Section *VIII: Other Information, Program Definitions, <u>Holistic review</u> for an extended list of definitions).* 

**Institutional and community partnerships** – An active ongoing collaboration between an academic institution and an internal and external entity. These collaborations should take a multi-pronged approach that targets students, faculty, and administration. Partnerships should ideally be multidimensional and focus on those strategies that improve the achievement of students from disadvantaged backgrounds including academic enhancement, science or math instructional enrichment, career role modeling and motivation, mentoring, apprenticeships, and parental and community involvement. Long-term financial and community support are key elements of effective partnerships.

**Social determinants of education** – The conditions in which people are born, grow, live, work and age, including the education system. These circumstances are shaped by social, physical, economic and educational factors at national and local levels, which are influenced by policy choices. The social determinants of education are mostly responsible for education inequities—the unfair and avoidable differences in education access and success at the national and local levels. The NWD program seeks to address the social, physical, economic, and educational factors that affect the academic access and success of students from disadvantaged backgrounds (including racial and ethnic minorities underrepresented among registered nurses) in addition to the social, environmental, and structural factors that affect an institution's ability to recruit, retain, and graduate students of this same student population.

**Student financial support** – A form of student support such as scholarships and stipends that provides financial assistance to eligible project participants to promote

retention. Applicant organizations may choose to provide student scholarships or stipends, or a combination of scholarships and stipends. Financial support must be accompanied with academic/peer and faculty support, mentoring, and/or community partnerships activities.

**Underrepresented minority –** An individual from a racial and/or ethnic group that is considered inadequately represented among the registered nurse population relative to the numbers of that racial and/or ethnic group in the general population. For the purposes of this program, the term "underrepresented racial and ethnic minorities" include Black or African Americans, Hispanic or Latinos, American Indians or Alaska Natives, and Native Hawaiians.

## II. Award Information

#### 1. Type of Application and Award

Type(s) of applications sought: New

Funding will be provided in the form of a grant.

#### 2. Summary of Funding

This program will provide funding for a four-year project period during federal fiscal years FY 2017 - 2020. Approximately \$12,500,000 is expected to be available annually to fund up to 25 recipients. You may apply for a ceiling amount of up to \$500,000 per year. The actual amount available in FY 2017 will not be determined until enactment of the final FY 2017 federal budget. This program announcement is subject to the appropriation of funds and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed and funds can be awarded in a timely manner. The project period is July 1, 2017 – June 30, 2021. Funding beyond the first year is dependent on the availability of appropriated funds for NWD in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the federal government.

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

## **III. Eligibility Information**

#### 1. Eligible Applicants

Eligible applicants include accredited schools of nursing, nursing centers, academic health centers, State or local governments, and other private or public non-profit entities determined appropriate by the Secretary. Eligible faith-based organizations, community-based organizations, and Tribes and Tribal Organizations can apply for these funds.

For profit entities are not eligible under this FOA.

Individuals are not eligible to apply.

Foreign entities are not eligible for HRSA awards, unless the authorizing legislation specifically authorizes awards to foreign entities or the award is for research. This exception does not extend to research training awards or construction of research facilities.

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

**Accreditation** – Schools of nursing affiliated with the proposed project that provide formal degree programs must be accredited by a national nurse education accrediting agency or State approval agency recognized by the Secretary of the U.S. Department of Education for the purposes of nursing education. Applicants must submit an <u>official</u> <u>letter of accreditation</u> as proof of accreditation from the accrediting agency specifically stating that accreditation has been granted and the period of time covered by the accreditation. The letter must be submitted with the application as **Attachment 8**.

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

Applications that do not include an Official Letter of accreditation or the Letter of Reasonable Assurance in **Attachment 8**, as specified in this FOA, will be considered non-responsive and will not be considered for funding under this announcement.

**Documentation of Private or Public Non-profit Status –** Applicants applying as a private non-profit must submit verification from the Internal Revenue Service (IRS) of non-profit 501(c)(3) status signed by an authorized representative of the IRS, or an authorizing tribal resolution.

Applicants applying as a tax-exempt public education institution under IRS Section 511 must submit verification from the IRS in the form of a Government Information Letter. Please visit the IRS website for more information: <u>https://www.irs.gov/government-entities/federal-state-local-governments/governmental-information-letter</u>.

This documentation must be submitted with the application as Attachment 9.

Applications that do not include this documentation will be considered non-responsive and will not be considered for funding under this announcement.

#### 2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

#### 3. Other

**Ceiling Amount** – Applications that exceed the ceiling amount of \$500,000 (inclusive of both direct and in-direct costs) will be considered non-responsive and will not be considered for funding under this announcement.

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

**Maintenance of Effort (MoE)** – The recipient must agree to maintain non-federal funding for award activities at a level which is not less than expenditures for such activities during the fiscal year prior to receiving the award [as required by Sec. 803(b) of the Public Health Service Act 42 U.S.C. § 296b(b)]. Complete the Maintenance of Effort document and submit as **Attachment 5.** 

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

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

You are reminded that failure to include all required documents as part of the application may result in an application being considered incomplete or non-responsive.

# **IV.** Application and Submission Information

#### 1. Address to Request Application Package

HRSA *requires* applicants for this FOA to apply electronically through Grants.gov. You must download the SF-424 R&R application package associated with this FOA following the directions provided at <u>http://www.grants.gov/applicants/apply-for-grants.html</u>.

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

#### 2. Content and Form of Application Submission

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

See Section 8.5 of the <u>SF-424 R&R Application Guide</u>for the Application Completeness Checklist.

#### Application Page Limit

The total size of all uploaded files may not exceed the equivalent of **70 pages**. The page limit includes the abstract, project and budget narratives, attachments including biographical sketches (bio sketches), and letters of commitment and support required in HRSA's <u>SF-424 R&R Application Guide</u> and this FOA. Standard OMB-approved forms that are included in the application package are NOT included in the page limit (Exception: Biographical Sketches in Appendix A of the R&R Application Guide **do** count in the page limit). Indirect Cost Rate Agreement and proof of non-profit status (if applicable) will not be counted in the page limit. **We strongly urge you to take appropriate measures to ensure your application does not exceed the specified page limit.** 

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

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

- 1) The prospective recipient certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- 2) Where the prospective recipient is unable to attest to any of the statements in this certification, such prospective recipient shall attach an explanation to this proposal.

See Section 4.1 viii of HRSA's <u>SF-424 R&R Application Guide</u> for additional information on this and other certifications.

#### **Program-Specific Instructions**

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

#### i. Project Abstract

See Section 4.1.ix of HRSA's SF-424 R&R Application Guide.

The Abstract must include:

- 1. A brief overview of the project as a whole;
- 2. Specific, measurable objectives that will be accomplished by the project;
- 3. How the proposed project will be accomplished (i.e., the who, what, when, where, why and how of the project); and
- 4. Funding preference for which the applicant is requesting, if applicable (e.g., rural, underserved, or public health nursing).

#### ii. Project Narrative

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

Use the following section headers for the Narrative:

#### > **PURPOSE AND NEED** – Corresponds to Review Criterion 1

You must identify and describe the specific target student population from disadvantaged backgrounds and the communities served by the proposed project and directly link them to the project's goals and objectives, including contribution to diversifying the nursing workforce. You must discuss:

• Demographic data of geographic area including community, city, and state;

- Data from Academic Year 2014-2015 on the number and percentage of students from the identified target population that are (1) enrolled, (2) retained, and (3) graduated from the program. Newly established schools that do not have performance data from Academic Year 2014-2015 should indicate this in their response and provide current recruitment and admissions data for the identified target population;
- Challenges (with supporting evidence) schools have experienced with enrolling, retaining, and graduating students in target student population from disadvantaged backgrounds;
- Structural changes necessary to create academic environments that are adaptive to diverse student needs and facilitate academic success;
- Social, economic, academic, and physical environments of identified target student population that will receive resources and support through the proposed project; and
- Social determinants that impede the success of the identified target student population.

NOTE: You must cite externally available, verifiable data whenever possible to support the information provided in the need section.

# **RESPONSE TO PROGRAM PURPOSE** – Corresponds to Review Criteria 2(a)-(c)

#### (a) METHODOLOGY/APPROACH – Corresponds to Review Criterion 2(a)

Describe your project goals and objectives and how they will address the project purpose and stated needs. You must describe how the objectives link to each of the previously described requirements listed in Section I. Program Requirements.

Provide a clear and comprehensive description of how you will implement or enhance each of the five (5) key evidence-based strategies to address the needs identified above:

- 1. Academic and peer support;
- 2. Mentoring;
- 3. Institutional and community partnerships;
- 4. Student financial support; and
- 5. Holistic review.

In addition, you must describe the following:

- Your commitment to enrolling, retaining, and graduating students in the target population from disadvantaged backgrounds as a central tenant of your academic mission and goal to increase diversity;
- The approaches used to overcome the identified gaps in educational opportunities for students in the target population from disadvantaged

backgrounds stated in the previous needs section, including challenges and successes of using these approaches;

- How the assessment of the social determinants affecting students from disadvantaged backgrounds in the target student population and the identification of the students' needs will be incorporated into the evidenced-based strategies;
- How implementation of the five (5) evidence-based strategies will enhance the ability to address the larger and structural forces that impede your ability to recruit, enroll, retain, and graduate students in the target population from disadvantaged backgrounds; and
- The examination of applicant review practices to assess if criteria are mission-driven, evidence-based, and assess a balance of experience, attributes, and academic metrics and to incorporate holistic review practices based on assessment.

#### (b) WORK PLAN/LOGIC MODEL – Corresponds to Review Criterion 2(b)

In this section, you must provide a detailed work plan that is comprehensive, feasible, and addresses all proposed activities in the Methodology/Approach section. You must:

- Provide a detailed description of the specific activities, timeline, and implementation activities of each of the five evidence-based strategies and the project personnel responsible for completing the activities;
- Explain how the work plan is appropriate for the program design and how the targets for key activities, personnel, and resources fit into the overall timeline of NWD program implementation; and
- Project the number of students from the identified target population to be enrolled, retained, and graduated who will receive support through the proposed project.

You must submit a logic model for designing and managing your project. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among program elements to achieve the relevant outcomes. While there are many versions of logic models, for the purposes of this announcement, the logic model should summarize the connections between the following:

- Goals of the project (objectives, reasons for proposing the intervention, if applicable);
- Assumptions (evidence to support how the program will work and is supporting resources. Assumptions should be based on research, best practices, and experience);
- *Inputs* (organizational profile, collaborative partners, key staff, budget, other resources);
- Activities (approach, listing key intervention, if applicable);
- Outputs (the direct products or deliverables of program activities); and

• *Outcomes* (the results of a program, typically describing a change in people or systems).

#### (c) **RESOLUTION OF CHALLENGES** – Corresponds to Review Criterion 2(c)

You must discuss what challenges are anticipated during the design and implementation of activities described in the work plan, and how the challenges will be addressed/resolved. Applicants must provide information including, but not limited to:

- Potential challenges related to project implementation and the achievement of the proposed goals and objectives;
- Potential challenges related to any proposed changes in applicant review practices within the applicant institution; and
- Plan to address/resolve the identified challenges.
- > IMPACT Corresponds to Review Criteria 3(a) and (b)

# (a) EVALUATION AND TECHNICAL SUPPORT CAPACITY – Corresponds to Review Criterion 3(a)

*Evaluation Plan:* Describe the plan to evaluate your program to achieve performance improvement. The evaluation plan must, at a minimum, incorporate a rapid cycle quality improvement (RCQI) method to assess and monitor program objectives and make adjustments as needed to improve program outputs and outcomes over the project period. The plan must also include a description of the inputs (e.g., key evaluation staff and organizational support, collaborative partners, budget, and other resources); key processes; variables to be measured; expected outcomes of the funded activities; and a description of how all key measures will be reported. The evaluation plan must include a description of anticipated obstacles and the methods used to overcome those obstacles as well as a plan for dissemination of project results.

Performance Data Collection and Reporting Plan: Describe the systems and processes that will support your organization's collection of the required HRSA performance measurements. You must describe how you will effectively track performance outcomes, including how you will collect and manage data (e.g., assigned skilled staff, data management software) in a way that allows for accurate and timely reporting of performance outcomes to HRSA through the use of the following forms:

http://bhw.hrsa.gov/grants/reporting/Performance%20Measures/Nursing/nwd.pdf.

Award recipients may be asked to collect and report the following qualitative data:

• Frequent assessment and evaluation of social determinants and holistic review metrics used to inform incoming class in order to tailor evidence-based strategies

- Strategies for rapid-cycle quality improvement to test the effectiveness of the project and plan for ongoing feedback and improvement
- Measures of institutional progress toward the implementation of program requirements
- Depth and increase of institutional support for the grant program and activities from leadership, faculty, and staff during the progress of the project
- Level of involvement and activities with internal and external communityacademic partnerships
- Baseline evaluation of school's applicant review practices
- Progress toward and sustainability of a culture of diversity and inclusion

#### (b) **PROJECT SUSTAINABILITY** – Corresponds to Review Criterion 3(b)

You must provide a clear plan for project sustainability after the period of federal funding ends. Discuss challenges that are likely to be encountered in sustaining the program and approaches that will be used to resolve such challenges. You must describe:

- Actions to highlight key project elements (e.g., training methods or strategies) which have been effective in improving practices;
- Plan to obtain future funding;
- Timetable to become sustainable in the absence of federal funding;
- Formal plan to establish and implement a formal arrangement with a health professions organization able to: (1) train and provide technical assistance with regards to holistic review practices and implementation, (2) increase the level of diversity training, and (3) attend and participate in activities such as HRSA and related stakeholder meetings, learning collaborative, webinars, and other grant-related activities. Allocation to support this activity should be no less than \$15,000 per year. Details of this allocation must be included in the proposed line item budget and budget justification; and
- Plan to sustain a culture of diversity and inclusion.

#### ORGANIZATIONAL INFORMATION, RESOURCES AND CAPABILITIES – Corresponds to Review Criterion 4

Provide your current mission and structure, relevant experience, and scope of current activities linked to your ability to implement the proposed project and meet the program requirements and expectations. An organizational chart for the NWD project (not the institution or school of nursing) must be provided as **Attachment 3.** 

Specifically, you must describe the following:

• Facilities and infrastructure in place to provide academic and peer support, student mentoring, student financial support, and holistic review practices;

- Qualifications, training, and/or experience of key personnel that demonstrate the ability to support students from disadvantaged backgrounds;
- Education and training needs of key personnel and other staff and how they will be prepared to participate in implementation of the project;
- Organizational structure, including the capacity and commitment of administration, faculty, and staff is appropriate for the operational and oversight needs necessary to implement the requirements of this funding opportunity;
- Partnerships with other entities both internal and external to the applicant's academic institution including the type and role of the partners and any leveraged resources; Percentage of time, including in-kind, dedicated to the project by the Project Director;
- Founding and guiding policies, organizational structure(s), strategic plan, recruitment and supportive strategies (including outreach, pipeline programs, financial aid, mentoring, and tutoring), and program initiatives (e.g., specific curricula or program tracks) that demonstrate institutional commitment to diversity; and
- Evidence of transformative learning and active faculty development and continuing professional development that demonstrates commitment to diversity.

#### NARRATIVE GUIDANCE

In order to ensure that the Review Criteria are fully addressed, this table provides a crosswalk between the narrative language and where each section falls within the review criteria.

Narrative Section	Review Criteria
Purpose and Need	(1) Purpose and Need
Response to Program Purpose:	(2) Response to Program Purpose
(a) Methodology/Approach	(a) Methodology/Approach
(b) Work plan/Logic Model	(b) Work plan
(c) Resolution of Challenges	(c) Resolution of Challenges
Impact:	(3) Impact:
(a)Evaluation and Technical	(a) Evaluation and Technical Support
Support Capacity	Capacity
(b) Project Sustainability	(b) Project Sustainability
Organizational Information,	(4) Organizational Information, Resources
Resources and Capabilities	and Capabilities
Budget and Budget Narrative	(5) Support Requested – the budget section should include sufficient justification to allow reviewers to determine the reasonableness of the support requested.

#### iii. Budget

See Section 4.1.iv of HRSA's <u>SF-424 R&R Application Guide</u>. NOTE: the directions offered in the <u>SF-424 R&R Application Guide</u> differ from those offered by Grants.gov. Please follow the instructions included in the R&R Application Guide and, *if applicable*, the additional budget instructions provided below.

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

A minimum of 30 percent of the budget must be allocated to direct student support (*Trainee Related Expenses categories*).

In addition, the NWD program requires the following which corresponds to Section V's Review Criterion #5:

The Consolidated Appropriations Act, 2016, Division H, § 202, (P.L. 114-113) states, "None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II." Please see Section 4.1.iv Budget – Salary Limitation of HRSA's <u>SF-424 R&R Application Guide</u> for additional information. Note that these or other salary limitations may apply in FY 2017 as required by law.

Funds under the 'Trainee Related Expenses' should not be used for any other purposes outside of 'Trainee Related Expenses' categories.

Please note that the budget line items must match what is stated in the Budget Narrative.

#### iv. Budget Narrative

See Section 4.1.v. of HRSA's <u>SF-424 R&R Application Guide</u>. In addition, the **NWD** program requires the following:

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

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

**Participant/Trainee Support Costs:** Applicants with participant/trainee support costs must list tuition/fees/health insurance, stipends, travel, subsistence, other, and the number of participants/trainees. Budget breakdown must separate trainee costs, and include a separate sub-total entitled "total Participant/Trainee Support Costs" which includes the summation of all trainee costs.

On the SF-424 R&R, do not enter a dollar amount for tuition, fees, health insurance or subsistence. Follow the form directions.

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

Students are designated to receive scholarships by the applicant institution in accordance with the guidelines established by the applicant organization. The proposed project must use NWD scholarship funds in a manner that will meet the needs of eligible students. The budget narrative must indicate the number of students to receive scholarships for each year of the grant and the proposed amount of each scholarship per student. Whatever is stated in the budget narrative should concur with the total amount listed in the budget line item.

**Stipends:** Student stipend support is provided to assist in covering a student's general living expenses. The budget narrative must indicate the stipend rate (e.g., \$500/month), the number of stipends to be awarded, and the total stipend amount for each educational level as appropriate. It is the responsibility of the applicant to justify the basis for the stipend rate requested. Stipends are to be prorated and paid to eligible participants at regular intervals during the budget period.

**Consultant Services:** Total costs for all consultant services should be listed as applicable. In the budget justification, identify each consultant, the services he/she will perform, the total number of days, travel costs, and the total estimated costs in the budget justification.

#### v. Attachments

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

#### Attachment 1: Required (Counted in the page limit)

**Staffing Plan, Job Descriptions for Key Personnel, and Biographical Sketches** See Section 4.1.vi.of HRSA's <u>SF-424 R&R Application Guide</u> for required information. Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff.

Include biographical sketches for persons occupying the key positions. 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 him/her particularly well-suited for his/her 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 three 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.

In the event that a biographical sketch is included for an identified individual who is not yet hired, please include a letter of commitment from that person with the biographical sketch. Biographical sketches should be uploaded in the SF-424 R&R Senior/Key Person Profile form. Note that all biographical sketches count toward the application page limit.

#### Attachment 2: Required (Counted in the page limit) Letters of Agreement and/or Description(s) of Proposed/Existing Contracts (project specific)

Provide any documents that describe working relationships and partnerships between the applicant organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual agreements should clearly describe the roles of the contractors and any deliverables. Letters of agreement must be signed and dated no more than 3 months prior to the close of this FOA.

#### Attachment 3: Required (Counted in the page limit) Project Organizational Chart

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

Attachment 4: As Applicable (Counted in the page limit) Tables, Charts, etc.

Provide further proposal detail (e.g., Gantt or PERT charts, flow charts, etc.).

#### Attachment 5: Required (Counted in the page limit) Maintenance of Effort (MOE) Documentation

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

#### NON-FEDERAL EXPENDITURES

FY 16 (Actual)	FY17 (Estimated)
Actual FY16 non-federal funds,	Estimated FY 2017 non-federal funds,
including in-kind, expended for	including in-kind, designated for
activities proposed in this application.	activities proposed in this application.
Amount: \$	Amount: \$
/ #HOUTH \$	

#### Attachment 6: As Applicable (Counted in the page limit) Request for Funding Preference

To receive a funding preference, include a statement that the applicant is eligible for a funding preference and identify the preference. Include documentation of this qualification. See Section V.2. Review and Selection Process for additional information regarding the funding preference.

#### Attachment 7: Required (Counted in the page limit) Letters of Support

Provide a letter of support from the President of the academic institution or other higher level academic officer that demonstrates the institution's commitment to the project. In addition, provide a letter of support from each partner organization or department, internal and external, 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 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.). Letters of support submitted to HRSA separately from the application will not be included.

#### Attachment 8: Required (Counted in the page limit)

# Accreditation Documentation or New Nursing Program Approval/Reasonable Assurance

All schools of nursing that are associated with the project and conferring degrees must be accredited. Applicants must submit accreditation documentation with start

and end dates (e.g., an accreditation letter from the accrediting agency) with the HRSA grant application.

- Applicants must submit documentation of program accreditation and all approvals for new programs (i.e., new tracks or specialties or substantive program change) with the application. The documentation must be in the form of a letter on official letterhead, including the start date of approval or accreditation, and is to be signed and dated by the accrediting agency. Certificate of accreditation, or links to the accrediting body website, will not be accepted as a form of accreditation documentation.
- Applicants must provide documentation needed to enroll students into the program, including those approvals needed for new courses and programs of study.

Accreditation for existing programs and approvals for new programs of study must be effective prior to the start of the budget/project period during which support will be received. **If accreditation is pending or not yet granted**, applicants must submit:

- Letter of reasonable assurance, from or on behalf of the U.S. Department of Education, along with the application stating that the program will meet the accreditation standards effective prior to the start of the budget/project period during which support will be received. The accrediting body must be identified by the U.S. Department of Education within the letter of reasonable assurance. NOTE: you should allow for processing time and request letters of reasonable assurance from the U.S. Department of Education at least 45 days prior to the HRSA application due date of November 18, 2016
- Contact names, addresses, phone numbers, email addresses and all correspondence sent to the U.S. Department of Education.

Accredited nursing programs that modify (for example, a change to a BSN-DNP program), or add nursing specialties (for example, adding an acute care pediatric APRN program to a general pediatric APRN program) to an existing program are required to submit a substantive change notification to the national nursing accrediting body.

Applicants must submit a copy of the letter of notification sent by the applicant to the accrediting body, and the subsequent approval of such change must be signed, dated and submitted along with the accreditation documents in Attachment 8.

#### Attachment 9: Required (Counted in the page limit) Documentation of Private or Public Non-profit Status

Applicants applying as a private non-profit must submit verification from the Internal Revenue Service (IRS) of non-profit 501(c)(3) status signed by an authorized representative of the IRS.

Applicants applying as a tax-exempt public education institution under IRS Section 511 must submit verification from the IRS in the form of a Government Information Letter. Please visit the IRS website for more information:

https://www.irs.gov/government-entities/federal-state-localgovernments/governmental-information-letter.

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

You must obtain a valid DUNS number and provide that number in your application. You must also register with the System for Award Management (SAM) and continue to maintain active SAM registration with current information at all times during which you have an active federal award or an application or 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 has an exception approved by the agency under 2 CFR 25.110(d)).

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

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

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

- Dun and Bradstreet (<u>http://www.dnb.com/duns-number.html</u>)
- System for Award Management (SAM) (<u>https://www.sam.gov</u>)
- Grants.gov (<u>http://www.grants.gov/</u>)

For further details, see Section 3.1 of HRSA's SF-424 R&R Application Guide.

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

#### 4. Submission Dates and Times

The due date for applications under this FOA is *November 18,, 2016 at 11:59 P.M. Eastern Time*.

See Section 8.2.5 – Summary of emails from Grants.gov of HRSA's <u>SF-424 R&R</u> <u>Application Guide</u> for additional information.

#### 5. Intergovernmental Review

NWD is not a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR 100.

See Section 4.1 ii of HRSA's <u>SF-424 R&R Application Guide</u> for additional information.

#### 6. Funding Restrictions

Applicants responding to this announcement may request funding for a project period of up to four (4) years, at no more than \$500,000 per year in total costs (direct and indirect). 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.

Funds under this announcement may not be used for purposes specified in HRSA's <u>SF-424 R&R Application Guide</u>. In addition, funds may not be used for the following purposes:

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

Section 803(a) of the Public Health Service Act establishes allowable uses of funds for the NWD program.

The General Provisions in Division H of the Consolidated Appropriations Act, 2016 (P.L. 114-113) apply to this program. Please see Section 4.1 of HRSA's <u>SF-424 R&R</u> <u>Application Guide</u> for additional information. Note that these or other restrictions will apply in FY 2017, 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 the all federal funding requirements and prohibitions such as lobbying, gun control, abortion, etc. The effectiveness of these policies, procedures and controls is subject to audit.

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

## V. Application Review Information

#### 1. Review Criteria

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

These criteria are the basis upon which the reviewers will evaluate each application. The entire proposal will be considered during the objective review. Review criteria are used to review and rank applications. The NWD program has five (5) review criteria:

Criterion 1: PURPOSE AND NEED (15 points) – Corresponds to Section IV's Purpose and Need

Reviewers will consider the applicant's contribution to diversify the nursing workforce, including the demonstration of their understanding of the need for funding, associated factors contributing to the need, and the quality of and extent to which the application clearly justifies the need by:

- Demonstrating the significant gaps and a compelling need for increasing diversity and educational opportunities for students from disadvantaged backgrounds in schools of nursing by the use of data and other supportive evidence. For newly established schools where performance data from Academic Year 2014-2015 is not available, applicants should indicate that they are a new school in their response and provide recruitment and admissions data available.
- Identifying significant, quantifiable challenges with the recruitment, enrollment, retention, and/or graduation of students from disadvantaged backgrounds.
- Demonstrating a clear, data-informed picture of the social determinants that impact the access and success in nursing education of their target population who will receive resources and support through the proposed project.

#### > Criterion 2: RESPONSE TO PROGRAM PURPOSE (Total 35 points)

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

Reviewers will determine the extent to which the applicant proposes a methodology and work plan that (1) incorporates the required strategies in the FOA and expectations of the program and (2) fully addresses the needs highlighted in the Purpose and Need section. Reviewers will consider the degree to which the

applicant <u>proposes objectives</u> that adequately address the project purpose, stated needs, program requirements, and expectations of the FOA. The reviewers will evaluate the quality and extent to which the application:

- Demonstrates an academic mission that reflects the commitment to increasing diversity and to the enrollment, recruitment, retention, and graduation of students from disadvantaged backgrounds;
- Proposes approaches that are likely to address the identified gaps in educational opportunities for students in their target population from disadvantaged backgrounds stated in the Purpose and Need section;
- Proposes a comprehensive and actionable plan to implement a systems approach to include the use of evidence-based strategies, with demonstrated impact on the specific social determinants outlined in the applicant's Purpose and Needs section; and
- Clearly incorporates all of the five (5) evidence-based strategies to enhance the institution's ability to address larger structural forces that impede the success of students from disadvantaged backgrounds.

In addition, the reviewers will assess the extent to which the applicant provides a clear and comprehensive description of how they will implement or enhance each of the following five (5) evidence-based strategies:

- Academic and peer supports are adequate to facilitate and maintain the success of students from disadvantaged backgrounds;
- Professional, academic and peer *mentors* recruited are sufficient to address the needs of the students and that the mentors reflect the population of the target student population;
- New *partnerships* or strengthened and expanded existing partnerships (both internal and external) are sufficient to ensure the success of students from disadvantaged backgrounds and to increase diversity in schools of nursing;
- Demonstrates the adequate use of *student financial support* to meet the needs of the students in the program;
- Articulates a clear and plausible assessment of current applicant review practices and forecasts a plan that will result in the implementation a more *holistic review* of applicants as a mechanism to increase admission, retention, and graduation of students from the targeted population; and
- Details a plan to adapt and modify current applicant review practices that incorporate criteria that are mission-driven, evidence-based, promote diversity, and include a balanced use of experiences, attributes, and metrics.

# *Criterion 2(b): WORK PLAN (10 points)* – Corresponds to Section IV's Response to Program Purpose Sub-section (b) Work Plan/Logic Model

Reviewers will determine the extent to which the applicant provides clear, comprehensive, and specific goals and objectives, and the concrete steps to achieve the goals and objectives to implement the project successfully. The reviewers will determine the quality and extent to which the applicant:

- Provides a detailed work plan including descriptions of specific activities and clear timeline for the implementation of each of the five evidence-based strategies within the proposed project;
- Provides a clear explanation of how the work plan is realistic, and demonstrates a complete understanding of all of the activities, responsibilities, key personnel, and resources required to meet the institution's goals, objectives, and outcomes within the timeframe of the award;
- Projects a feasible and attainable number of students from the target population enrolled, retained, and graduated who will receive support over the project period; and
- Includes a logic model that illustrates all components of the proposed project, and demonstrates that the methodology/approach proposed is sufficient to meet the structural, academic, and social needs identified in the needs statement. The logic model should summarize connections between the goals of the project, assumptions, inputs, activities, outputs and outcomes.

# **Criterion 2(c): RESOLUTION OF CHALLENGES (10 points)** – Corresponds to Section IV's Response to Program Purpose Sub-section (c) Resolution of Challenges

Reviewers will determine the quality and extent in which the applicant describes:

- Potential obstacles and challenges encountered during the design and implementation of the activities described in the work plan;
- Potential challenges related to systematic changes such as change application review and practices with the applicant institution; and
- A reasonable, actionable, and evidence-based plan to address the challenges identified above.

### Criterion 3: IMPACT (Total 25 points)

# **Criterion 3(a): EVALUATION AND TECHNICAL SUPPORT CAPACITY** (10 **points)** – Corresponds to Section IV's Impact Sub-section (a) Evaluation and Technical Support Capacity

Reviewers will determine the extent to which the applicant is able to effectively report on the measurable outcomes requested. This includes both their discussion of an internal program performance evaluation plan and their organization's capacity to collect and timely report on the required performance measures to HRSA. Reviewers will determine the quality and extent to which the applicant:

- Describes the strength and effectiveness of their evaluation plan to evaluate their program and improve results;
- Details an RCQI plan that includes assessment and monitoring of program objectives and adjusts as needed to improve program outputs and outcomes over the project period;
- Articulates an evaluation plan that includes necessary components (descriptions of the inputs, key processes, variables to be measured, expected

outcomes of the funded activities, tools and how key measures will be reported);

- Describes their data collection and reporting plan including the system and process that supports the collection and management of data for HRSA's performance measures requirement;
- Anticipates obstacles to the evaluation plan and proposes how to address those obstacles; and
- Details a feasible and effective plan for dissemination of project results.

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

Reviewers will determine the quality and extent to which the applicant:

- Describes a solid plan to sustain the evidence-based approaches to the recruitment, enrollment, retention and graduation after the federal funding period ends;
- Articulates potential challenges to achieve sustainability, and logical approaches to the resolution of such challenges;
- Identifies key project elements (e.g., training methods or strategies) which have been effective in improving practices;
- Identifies other sources of income, future funding initiatives, strategies, a timetable for becoming self-sufficient, and a description of barriers to becoming self-sufficient;
- Describes a proposal to establish and implement a formal arrangement with a health professions organization to (1) train and provide technical assistance with regards to holistic review practices and implementation (2) increase the level of diversity training, and (3) attend and participate in activities such as HRSA and related stakeholder meetings, learning collaborative, webinars, and other grant-related activities; and
- Details a plan to create and continue building a culture of diversity and inclusion.
- Criterion 4: ORGANIZATIONAL INFORMATION, RESOURCES AND CAPABILITIES (15 points) – Corresponds to Section IV's Organizational Information, Resources and Capabilities

Reviewers will determine the extent to which project personnel are qualified by training and/or experience to implement and carry out the project. This will be evaluated both through the information in the project narrative, as well as the Attachments. Reviewers will also determine the quality and extent to which the following are articulated:

 Applicant organization's access to quality resources such as facilities and infrastructure in order to fulfill the needs and requirements of the proposed project and immediately begin implementation;

- Confirmation of adequate staffing plan for the proposed project including the project organization chart (Attachment 3), qualifications, experience, and training of key personnel (Attachment 1);
- Capability and commitment of institutional leadership (administration, management, and governing board) and the extent to which it is appropriate for project implementation and oversight (Attachment 7);
- Meaningful support and collaboration with key stakeholders (internal and external) who are able to assist with the planning, design, and implementation of all activities. Description should include the type and role of the partners and any leveraged resources (Attachments 2 and 7);
- Founding and guiding policies, organizational structure(s), strategic plan, recruitment, and supportive strategies (including outreach, pipeline programs, financial aid, mentoring, and tutoring), and program initiatives (e.g., specific curricula or program tracks) that demonstrate institutional commitment to diversity; and
- Evidence of transformative learning and active faculty development and continuing professional development that demonstrates commitment to diversity.

#### Criterion 5: SUPPORT REQUESTED (10 points) – Corresponds to Section IV's Budget Justification Narrative and SF-424 R&R budget forms

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

- Costs, as outlined in the budget and required resources sections, are reasonable given the scope of work;
- Outline of sufficient percentage of time, including in-kind, dedicated to the project by the Project Director (licensed Registered Nurse) and key personnel devoted to the project to achieve project goals and objectives;
- Alignment of budget, as necessary, to support partnerships;
- Costs for trainee support that are reasonable and support the project objectives;
- Budget line-items for each budget period are appropriate;
- Budget justification is clear and adequately aligns with the proposed line item budget for each year that support is requested;
- Allocation of no less than \$15,000 per year to establish and implement a formal arrangement with a health professions organization (as addressed in Review Criterion 3); and
- Minimum of 30 percent of budget is allocated to direct student support under the Trainee Related Expenses.

#### 2. Review and Selection Process

Please see Section 5.3 of HRSA's SF-424 R&R Application Guide.

HRSA will use other factors in addition to merit criteria in selecting applications for federal awards including the funding preference (below). HRSA will ensure a geographic distribution of the NWD grants across the nation.

#### **Funding Preference**

This program also provides a funding preference for some applicants, as authorized by Section 805 of the PHS Act. Applicants receiving the preference will be placed in a more competitive position among the applications that can be funded. Please note, however, that applicants who do not receive a funding preference will be given full and equitable consideration during the review process. Only <u>one</u> funding preference will be honored per applicant. HRSA staff will verify that the documentation submitted meets the below stated requirements. To be considered for a funding preference, applicants must demonstrate in **Attachment 6** that they meet the criteria for one of the following funding preferences:

Substantially Benefits Rural Population	Student training occurs at a site serving rural populations, which may include (but is not limited to) the following: Rural Health Clinic, State Office of Rural Health, Critical Access Hospital, Sole Community Hospital, Medicare Dependent Hospital, or Rural Referral Center. Applicants can confirm their eligibility for this funding preference by using the <u>Rural Health Grants Eligibility Analyzer</u> (Documentation from Grants Eligibility Analyzer must be included in Attachment 6). <u>OR</u>
	The practice population being served is defined as a rural population (i.e., comprised primarily of populations residing in rural locales).
Substantially Benefits Underserved	The applicant must be located in a geographical area that is defined as a Health Professional Shortage Area (HPSA) or serving a federally- designated Medically Underserved Area (MUA) or Population (MUP). HRSA will use the address of the applicant from the SF-424 to verify the funding preference using Health Resources and Services Administration's <u>Shortage Designation Advisor</u> . (Applicants must include documentation from Shortage Designation Advisor in Attachment 6).
Populations	OR
	The practice population being served is categorized as poor and/or medically underserved.
	OR

	Practitioners and or health care providers integrate cultural and health indices specific to underserved populations in their team-based health care decision-making.		
Substantially	Collaborative practice occurs at a state or local health department		
Benefits	practice site (Practice agreement must be included in documentation).		
Public			
Health	OR		
Nursing			
Needs in	The NWD project can demonstrate linkage(s) or practice collaborations		
State or	with state, local and federal health departments for practitioners and/or		
Local Health	student practicum experience (Practice agreement must be included in		
Departments	documentation).		
	,		

#### **Special Consideration**

This program includes special consideration. A special consideration is defined as the favorable consideration of an application by HRSA funding officials, based on the extent to which the application addresses the specific area of special consideration. Applications that do not receive special consideration will be given full and equitable consideration during the review process.

In making NWD awards, HRSA will give special consideration to the geographic distribution of the NWD grants across the nation.

#### 3. Assessment of Risk and Other Pre-Award Activities

The Health Resources and Services Administration may elect not to fund applicants with management or financial instability that directly relates to the organization's ability to implement statutory, regulatory or other requirements (<u>45 CFR § 75.205</u>).

Applications receiving a favorable objective review that HRSA is considering for funding are reviewed for other considerations. These include, as applicable, cost analysis of the project/program budget, assessment of the applicant's management systems, ensuring continued applicant eligibility, and compliance with any public policy requirements, including those requiring just-in-time submissions. You may be asked to submit additional programmatic or grants 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 an award will be made. Following review of all applicable information, the HRSA approving and business management officials will determine whether an award can be made, 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.

Effective January 1, 2016, HRSA is required to review and consider any information about the applicant that is in the Federal Awardee Performance and Integrity Information System (FAPIIS). An applicant may review and comment on any information about itself that a federal awarding agency previously entered. HRSA will consider any comments by the applicant, in addition to other information in FAPIIS in making a judgment about the applicant's integrity, business ethics, and record of performance under federal awards when completing the review of risk posed by applicants as described in 45 CFR § 200.205 Federal Awarding Agency Review of Risk Posed by Applicants.

A determination that an applicant is not qualified will be reported by HRSA to FAPIIS (45 CFR § 75.212).

#### 4. Anticipated Announcement and Award Dates

HRSA anticipates that awards will be announced prior to the project start date of July 1, 2017.

## VI. Award Administration Information

#### 1. Award Notices

The Notice of Award (NoA) will be sent prior to the project start date of July 1, 2017. See Section 5.4 of HRSA's <u>SF-424 R&R Application Guide</u> for additional information.

#### 2. Administrative and National Policy Requirements

See Section 2 of HRSA's SF-424 R&R Application Guide.

#### 3. Reporting

The successful applicant under this FOA must comply with Section 6 of HRSA's <u>SF-424</u> <u>R&R Application Guide</u> and the following reporting and review activities:

- 1. BHW Progress Reports. The recipient must submit a progress report to HRSA on an **annual** basis. The Bureau of Health Workforce (BHW) will verify that approved and funded applicants' proposed objectives are accomplished during each year of the project. The BHW Progress Report has two parts.
  - a. The first part demonstrates recipient's 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.

b. 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.

Further information will be provided in the NoA.

2. Performance Reports. The recipient must submit a Performance Report to HRSA via the Electronic Handbook (EHB) on an **annual** basis. All recipients are required to collect and report performance data so that HRSA can meet its obligations under the Government Performance and Results Modernization Act of 2010 (GPRA). The required performance measures for this program are outlined in the Project Narrative Section IV's Impact Sub-section (a).

The annual performance report will include all activities from July 1 to June 30 of each project period. The report will be due to HRSA annually on July 31. Further information will be provided in the NoA.

**3. Final Report.** Every recipient is required to submit a Final Report within 90 days after the project period ends. The Final Report must be submitted online by recipients in the EHB system at <a href="https://grants.hrsa.gov/webexternal/home.asp">https://grants.hrsa.gov/webexternal/home.asp</a>.

The Final Report is designed to provide BHW with information required to close out a grant after completion of project activities. 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 the 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 award activity
  - Changes to the objectives from the initially approved award

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 <u>SF-424 R&R Application Guide</u>. The report is an accounting of expenditures under the project that year. Financial reports must be submitted electronically through the EHB system. More specific information will be included in the NoA.

**5. Attribution.** You are required to use the following acknowledgement and disclaimer on all products produced by HRSA funds:

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

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

 Integrity and Performance Reporting. The Notice of Award will contain a provision for integrity and performance reporting in <u>FAPIIS</u>, as required in 45 CFR 75 Appendix XII.

### VII. Agency Contacts

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

G. Sapphire Marc-Harris, M. Ed. Senior Grants Management Specialist Division of Grants Management Operations, OFAM Health Resources and Services Administration 5600 Fishers Lane, 10NWH04 Rockville, MD 20857 Email: <u>SMarc-Harris@hrsa.gov</u>

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

Tara D. Spencer, MS, RN Project Officer Attn: Nursing Workforce Diversity Program Bureau of Health Workforce Health Resources and Services Administration 5600 Fishers Lane, 11N94B

Rockville, MD 20857 301-443-3192 Email: TSpencer@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, please dial 606-545-5035) Email: <u>support@grants.gov</u> Self-Service Knowledge Base: https://grantsportal.psc.gov/Welcome.aspx?pt=Grants

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

8:00 a.m. to 8:00 p.m. ET:

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

#### VIII. **Other Information**

#### Logic Models:

Additional information on developing logic models can be found at the following website: http://www.cdc.gov/eval/resources/index.htm

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

#### **Holistic Review Resources:**

For more information about holistic review, please review the following resources:

- Urban Universities for HEALTH Holistic Admissions in the Health Professions Finding from a National Survey: <u>http://urbanuniversitiesforhealth.org/media/documents/holisticadmissionsinthehealt</u> <u>hprofessions.pdf</u>
- American Association of Colleges of Nursing Holistic Review Admissions in Nursing resources: <u>http://www.aacn.nche.edu/education-resources/holistic-review</u>
- Association of American Medical Colleges' Experiences, Attributes, and Metrics (E-A-M) Model <u>https://www.aamc.org/download/358700/data/hrp2-pager.pdf</u>
- HRSA Bureau of Health Workforce Division of Nursing and Public Health We CAN: Changing Admissions in Nursing Webinar Series: <u>http://bhw.hrsa.gov/nursing/nph\_resources.html</u>.

#### Technical Assistance: Call/Webinar

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

A technical assistance webinar has been scheduled to help applicants understand, prepare and submit a grant application. The webinar is scheduled for: **Tuesday, September 27, 2016 from 2:30 p.m. - 4:30 p.m. EST Adobe Connect Link:** <u>https://hrsa.connectsolutions.com/fy2017-nwd/</u> Call-in Number: 800-779-1324 Participant Code: 3062656

#### **Program Definitions:**

The following definitions apply to the Nursing Workforce Diversity Program for Fiscal Year 2017:

Academic and peer support - A variety of instructional methods, educational services, or resources provided to students in an effort to help accelerate their learning progress, meet learning standards, or foster success in academic institutions.

**Cultural competence** - The knowledge, interpersonal skills, behaviors, attitudes, and policies that allow health professions educators and practitioners to understand, appreciate, and respect cultural differences and similarities in cross-cultural situations. Cultural competency acknowledges these variances in customs, values, beliefs, and communication patterns by incorporating these variables in the assessment and treatment of individuals and in the training of all health professionals. Information and services are to be provided in the language, educational, and cultural context most appropriate for the individuals being served.

**Disadvantaged background** - An individual who comes from an economically and or educationally disadvantaged background.

**Economically disadvantaged** - An individual comes from a family with an annual income below a level based on low-income thresholds, according to family size established by the U.S. Census Bureau, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary of the U.S. Department of Health and Human Services, for use in all health professions programs. The Secretary updates these income levels in the *Federal Register* annually.

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

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2016 HRSA Poverty Guidelines (200 percent of HHS Poverty Guidelines)					
Size of	Income Level**				
parents'	48	Alaska	Hawaii		
family*	Contiguous				
	States and				
	D.C.				
1	\$23,760	\$29,680	\$27,340		
2	32,040	40,040	36,860		
3	40,320	50,400	46,380		
4	48,600	60,760	55,900		
5	56,880	71,120	65,420		
6	65,160	81,480	74,940		
7	73,460	91,840	84,460		
8	81,780	102,240	94,020		
For each additional person, add	\$8,320	\$10,400	\$9,560		

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

\*\* Adjusted gross income for calendar year 2015.

SOURCE: Federal Register, Vol. 81, No. 45, March 8, 2016, pp. 12108 - 12109

**Educationally disadvantaged** - An individual who comes from a social, cultural, or educational environment that has demonstrably and directly inhibited the individual from obtaining the knowledge, skills, and abilities necessary to develop and participate in a health professions education or training program.

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

- The individual comes from a family that receives public assistance (e.g., Temporary Assistance to Needy Families, Supplemental Nutrition Assistance Program, Medicaid, and public housing).
- The individual is the first generation in his or her family to attend college.
- The individual graduated from (or last attended) a high school with low SAT scores, based on most recent annual data available.
- The individual graduated from (or last attended) a high school that—based on the most recent annual data available— had either a:
  - o low percentage of seniors receiving a high school diploma; or
  - low percentage of graduates who go to college during the first year after graduation.
- The individual graduated from (or last attended) a high school with low per capita funding.
- The individual graduated from (or last attended) a high school where—based on the most recent annual data available— many of the enrolled students are eligible for free or reduced-price lunches.

**Health Professional Shortage Area (HPSA)** - A federal designation used to identify areas, populations, and facilities which have a shortage of either primary care, dental, and/or mental health providers as measured by the ratio of available discipline-specific providers to: the population of the area; a specific population group; or the number of those served by the facility. All federally qualified health centers and rural health clinics, as defined in section 1861(aa) of the Social Security Act (42 U.S.C. 1395x(aa)) and that meet the requirements of section 334 in PHSA, (related to charging for services,) shall be automatically designated as having such a shortage. More information on the HPSA criteria can be found at:

http://bhw.hrsa.gov/shortage/hpsas/designationcriteria/designationcriteria.html.

**Holistic review -** A strategy that assesses an applicant's unique experiences alongside traditional measures of academic achievement such as grades and test scores. It is designed to help universities consider a broad range of factors reflecting the applicant's academic readiness, contribution to the incoming class, and potential for success both in school and later as a professional. Holistic review, when used in combination with a variety of other mission-based practices, constitutes a "holistic admission" process.

The following provided as **examples** of holistic review practices. This list is not a comprehensive list of all holistic review practices:

- The institution evaluates applicant criteria related to specific mission or goals of the school
- The institution has a mission statement for admission that includes diversity
- The institution considers non-academic criteria as well as academic metrics such as GPA and test scores in the initial screening process

• The institution evaluates non-academic criteria related to student background or experience in the initial screening such as first-generation status, socio-economic status, gender, race, community/area of origin, circumstances indicative of adversity, foreign language ability, participation in community service, academic achievements, and healthcare experience and exposure.

**Institutional and community partnerships** - An active ongoing collaboration between an academic institution and an internal and external entity. These collaborations must take a multi-pronged approach that targets students, faculty, and administration. Partnerships should ideally be multidimensional and focus on those strategies that improve the achievement of students from disadvantaged backgrounds including academic enhancement, science or math instructional enrichment, career role modeling and motivation, mentoring, apprenticeships, and parental and community involvement. Long-term financial and community support are key elements of effective partnerships.

**Medically Underserved Areas (MUAs)** - A county, a group of counties or civil divisions, or a group of urban census tracts in which residents have a shortage of personal health services. MUAs are designated based on the Index of Medical Underservice. MUAs are a subset of a Medically Underserved Community. See <a href="http://www.hrsa.gov/shortage/mua/">http://www.hrsa.gov/shortage/mua/</a> for additional information.

**Medically Underserved Populations (MUPs)** - Federally-designated population groups having a shortage of personal health services, often defined as groups who face economic, cultural, or linguistic barriers to health care, and limited access to services. MUPs are designated based on the Index of Medical Underservice. See <u>http://www.hrsa.gov/shortage/mua/</u> for additional information.

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

http://www.healthworkforceta.org/resources/rapid-cycle-quality-improvement-resourceguide/

**Rural Area** - HRSA's Federal Office of Rural Health Policy (FORHP) accepts all non-Metro counties as rural and uses an additional method of determining rurality called the Rural-Urban Commuting Area (RUCA) codes, which are based on Census data that is used to assign a code to each Census Tract. Tracts inside Metropolitan counties with the codes 4-10 are considered rural. While use of the RUCA codes has allowed identification of rural census tracts in Metropolitan counties, among the more than 70,000 tracts in the U.S. there are some that are extremely large. In these larger tracts, use of RUCA codes alone fails to account for distance to services and sparse population. Therefore, FORHP has designated 132 large area census tracts with RUCA codes 2 or 3 as rural. These tracts are at least 400 square miles in area with a population density of no more than 35 people. Following the 2010 Census the FORHP definition included approximately 57 million people, about 18 percent of the population and 84 percent of the area of the USA.

**Social Determinants of education** - The conditions in which people are born, grow, live, work and age, including the education system. These circumstances are shaped by social, physical, economic and educational factors at national and local levels, which are influenced by policy choices. The social determinants of education are mostly responsible for education inequities-the unfair and avoidable differences in education access and success seen within and between national and local levels. The NWD program seeks to address the social, physical, economic, and educational factors that act affect the academic access and success of students from disadvantaged backgrounds including racial and ethnic minorities underrepresented amongst registered nurses in addition to the social, environmental, and structural determinants that have an effect on an institution's ability to recruit, retain, and graduate students this same student population.

**Student financial support** - A form of support such as scholarships and stipends that provide financial assistance to eligible project participants to promote retention. Applicant organizations may choose to provide student scholarships or stipends, or a combination of scholarships and stipends. Financial support must be accompanied with academic/peer and faculty support, mentoring, or community partnerships activities.

**Underrepresented Minority** - An individual from a racial and/or ethnic group that is considered inadequately represented among the registered nurse population relative to the numbers of that racial and/or ethnic group in the general population. For the purposes of this program, the term "underrepresented racial and ethnic minorities" include Black or African Americans, Hispanic or Latinos, American Indians or Alaska Natives, and Native Hawaiians.

## IX. Tips for Writing a Strong Application

See Section 4.7 of HRSA's SF-424 R&R Application Guide.

In addition, HRSA has developed a number of resources with information that may assist applicants in preparing a competitive application. These resources can be accessed at: <u>http://www.hrsa.gov/grants/apply/writestrong/</u>