

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

HRSA

Health Resources & Services Administration

Maternal and Child Health Bureau

Emerging Issues in Maternal and Child Health

Funding Opportunity Number: HRSA-21-080

Funding Opportunity Type(s): New

Assistance Listings (CFDA) Number: 93.110

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2021

Letter of Intent Requested by: February 5, 2021

Application Due Date: April 9, 2021

*Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately!
HRSA will not approve deadline extensions for lack of registration.
Registration in all systems, including SAM.gov and Grants.gov,
may take up to 1 month to complete.*

Issuance Date: January 8, 2021

Hannah Reisner
Public Health Analyst, Office of Policy and Planning
Telephone: (301) 443-3327
Email: emergingissuesmch@hrsa.gov

Authority: 42 U.S.C. § 701(a)(2) (Title V, § 501(a)(2) of the Social Security Act)

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for the fiscal year (FY) 2021 Emerging Issues in Maternal and Child Health Program. The purpose of this program is to strengthen the capacities of state¹- and/or local-level organizations to respond to emerging public health issues affecting maternal and child health (MCH) populations.

Recipients will implement a set of activities under at least one capacity-strengthening area and through these activities address an emerging issue specific to their state or local community.

Funding Opportunity Title:	Emerging Issues in Maternal and Child Health
Funding Opportunity Number:	HRSA-21-080
Due Date for Applications:	April 9, 2021
Anticipated Total Annual Available FY 2021 Funding:	\$1,500,000
Estimated Number and Type of Award(s):	Up to six grants
Estimated Award Amount:	Up to \$250,000
Cost Sharing/Match Required:	No
Period of Performance:	September 1, 2021 through August 31, 2022 (1 year)
Eligible Applicants:	Any domestic public or private entity, including an Indian tribe or tribal organization (as those terms are defined at 25 U.S.C. § 450b) is eligible to apply. See 42 CFR § 51a.3(a). Domestic faith-based and community-based organizations are also eligible to apply. See Section III.1 of this notice of funding opportunity (NOFO) for complete eligibility information.

Application Guide

You (the applicant organization/agency) are responsible for reading and complying with the instructions included in HRSA's *SF-424 Application Guide*, available online at <http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf>, except where instructed in this NOFO to do otherwise.

¹ For the purposes of this NOFO, the term "state" encompasses the 50 states and following jurisdictions: the District of Columbia, the Republic of the Marshall Islands, the Federated States of Micronesia, the Republic of Palau and the U.S. territories of the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands. See 42 U.S.C. § 1301(a)(1) (Title V, § 1101(a)(1) of the Social Security Act).

Technical Assistance

HRSA has scheduled the following technical assistance:

Webinar

Day and Date: Tuesday, January 26, 2021

Time: 2–3 p.m. ET

Call-In Number: 1-888-324-9321

Participant Code: 4477317

Weblink: https://hrsa.connectsolutions.com/emerging_issues_maternal_child_health_ta/

HRSA will record the webinar and make it available at:

<https://mchb.hrsa.gov/fundingopportunities/default.aspx>.

Table of Contents

I. PROGRAM FUNDING OPPORTUNITY DESCRIPTION	1
1. PURPOSE	1
2. BACKGROUND	2
II. AWARD INFORMATION	3
1. TYPE OF APPLICATION AND AWARD	3
2. SUMMARY OF FUNDING	3
III. ELIGIBILITY INFORMATION	3
1. ELIGIBLE APPLICANTS	3
2. COST SHARING/MATCHING	3
3. OTHER	4
IV. APPLICATION AND SUBMISSION INFORMATION	4
1. ADDRESS TO REQUEST APPLICATION PACKAGE	4
2. CONTENT AND FORM OF APPLICATION SUBMISSION	4
<i>i. Project Abstract</i>	8
<i>ii. Project Narrative</i>	8
<i>iii. Budget</i>	12
<i>iv. Budget Narrative</i>	13
<i>v. Attachments</i>	13
3. DUN AND BRADSTREET DATA UNIVERSAL NUMBERING SYSTEM (DUNS) NUMBER TRANSITION TO THE UNIQUE ENTITY IDENTIFIER (UEI) AND SYSTEM FOR AWARD MANAGEMENT (SAM)	14
4. SUBMISSION DATES AND TIMES	15
5. INTERGOVERNMENTAL REVIEW	15
6. FUNDING RESTRICTIONS	16
7. OTHER SUBMISSION REQUIREMENTS	16
V. APPLICATION REVIEW INFORMATION	17
1. REVIEW CRITERIA	17
2. REVIEW AND SELECTION PROCESS	19
3. ASSESSMENT OF RISK	19
VI. AWARD ADMINISTRATION INFORMATION	20
1. AWARD NOTICES	20
2. ADMINISTRATIVE AND NATIONAL POLICY REQUIREMENTS	20
3. REPORTING	21
VII. AGENCY CONTACTS	22
VIII. OTHER INFORMATION	23
APPENDIX A: GLOSSARY	24
APPENDIX B: ACCESSING THE TVIS	25

I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity to apply for funding under the Emerging Issues in Maternal and Child Health Program. The purpose of this program is to strengthen the capacities of state- and/or local-level organizations to respond to emerging public health issues affecting maternal and child health (MCH) populations.

This funding opportunity is a mechanism to support capacity-strengthening activities that will improve state- and/or local-level organizations' abilities to address emerging issues that threaten the health and well-being of MCH populations in an effective, timely manner. For the purposes of this NOFO, MCH populations include the following groups: women, children (birth to 21), children with special health care needs (CSHCN), adolescents, and families.

Recipients will implement a set of activities under at least one of the three capacity-strengthening areas below (See [Section IV.2](#) for details) and through these activities address an emerging issue specific to their state or local community.

Capacity Areas:

- 1) Data and Informational Systems
- 2) Workforce Development
- 3) Strategic Partnerships

“Emerging issues” refers to issues that affect MCH populations at an increased rate, for which there is new knowledge or an increased level of awareness of, or there are new approaches to solving the issue. The challenge is that these issues are difficult to anticipate and thus difficult for which to have funds set aside. Through this program, the HRSA Maternal and Child Health Bureau (MCHB) aims to increase the ability of states and local communities to anticipate, prepare, and execute timely responses to emerging issues to reduce their negative impact on MCH populations.

You will select an emerging issue specific to the needs of your state or local community. Examples of emerging issues include, but are not limited to, increasing rates of opioid and other substance use disorders, emergent environmental health threats, persistent or increasing disparities in maternal mortality, inadequate availability of and access to behavioral health services, disparities in access to health services for CSHCN, and declining immunization coverage. Successful projects will address an emerging issue that affects MCH populations and has reliable, current data to support it.

In November 2020, MCHB released summaries of Title V state needs assessments. Every 5 years states complete a comprehensive needs assessment to assess their progress, identify emerging issues and needs, and set priorities going forward. Regardless of the geographic scope of your project, you are encouraged to utilize your state's needs assessment report at the [Title V Information System \(TVIS\)](#) to inform the selection of an appropriate emerging issue. See [Appendix B](#) for guidance on the TVIS and [Section IV.2](#) for a list of all suggested data sources.

Program Goal

To increase state- and/or local-level organizations' abilities to respond effectively to emerging issues affecting MCH populations.

Program Objectives

- 1) Strengthen state- and/or local-level organizations' capacities under at least one area, as detailed in [Section IV.2](#).
- 2) Demonstrate [innovative](#) approaches to address emerging issues at the state or local level that affect MCH populations.
- 3) Implement strategies to sustain capacity improvements beyond the period of performance and remain responsive to future emerging issues.

2. Background

This program is authorized by 42 U.S.C. § 701(a)(2) (Title V, § 501(a)(2) of the Social Security Act). The authorization appropriates funding for special projects of regional and national significance in maternal and child health, which may include projects that address critical and emerging issues, and supports MCHB's aim to improve the health and well-being of America's mothers, children, and families. To learn more about MCHB's programs and investments visit <http://www.mchb.hrsa.gov>.

Historically, MCHB has provided additional assistance to state and local communities delivering key programs and services to MCH populations in response to critical and emerging issues. This assistance aligns with the 10 Essential Public Health Services (EPHS), outlined in a framework that describes the core components that make up an effective public health system.² Organizations commonly cite lack of time and inadequate funding as barriers to being highly functioning under each of these services,³ which in turn may slow down their ability to respond to emerging issues in an effective, timely manner, and thereby prevent such emerging issues from becoming critical public health threats.

Capacity refers to an organization's availability of and ability to utilize resources, knowledge, skills, systems, and leadership to carry out an effective mission. Capacity is a determinant of an organization's performance, and capacity-strengthening projects have demonstrated a positive relationship between public health capacity and population-level health outcomes.⁴ MCHB has chosen specific capacity-strengthening topics that encompass the EPHS and align with the infrastructure components needed to respond to emerging issues. The primary focus of this program is on the capacity-strengthening activities, and the strongest indicator of a successful project under this program is a demonstrated increase in your organization's capacity at the end of the period of performance, and the anticipated degree to which you will sustain that capacity beyond the period of performance.

² U.S. Department of Health and Human Services. Centers for Disease Control and Prevention (CDC). 2020. 10 Essential Public Health Services. <https://www.cdc.gov/publichealthgateway/publichealthservices/essentialhealthservices.html>.

³ Ross C. Brownson, Jonathan E. Fielding, Lawrence W. Green. 2018. Building Capacity for Evidence-Based Public Health: Reconciling the Pulls of Practice and the Push of Research. *Annual Review Public Health* 39:27-53. Downloaded from www.annualreviews.org.

⁴ Schenk et al. Building the Evidence for Decision-Making: The Relationship Between Local Public Health Capacity and Community Mortality. *American Journal of Public Health* 105: (S2)11-15.

While many existing programs focus on capacity-strengthening activities for the delivery of routine MCH programs and services, this funding opportunity intends to direct capacity-strengthening activities specifically towards emerging issues. Due to their novel and unpredictable nature, emerging issues – in contrast to well-known public health issues supported by a strong base of established, evidence-based practices – may require a different or enhanced response, such as enhanced data surveillance systems, a workforce with specialized skillsets, or unique cross-sector partnerships. MCHB aims to support projects that will make successful, sustainable capacity improvements and increase organizations’ abilities to anticipate and respond to emerging issues effectively and timely.

II. Award Information

1. Type of Application and Award

Type(s) of applications sought: New

HRSA will provide funding in the form of a grant.

2. Summary of Funding

HRSA estimates approximately \$1,500,000 to be available to fund six recipients. The actual amount available will not be determined until enactment of the final FY 2021 federal appropriation. You may apply for a ceiling amount of up to \$250,000 total cost (includes both direct and indirect, facilities and administrative costs). The period of performance is September 1, 2021 through August 31, 2022 (1 year).

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

III. Eligibility Information

1. Eligible Applicants

Any domestic public or private entity, including an Indian tribe or tribal organization (as those terms are defined at 25 U.S.C. § 450b) is eligible to apply. For your reference, see [42 CFR § 51a.3\(a\)](#).

Domestic faith-based and community-based organizations are also eligible to apply. For your reference, see [45 CFR part 87](#).

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

HRSA will consider any application that exceeds the ceiling amount non-responsive and will not consider it for funding under this notice.

HRSA will consider any application that fails to satisfy the deadline requirements referenced in [Section IV.4](#) non-responsive and will not consider it for funding under this notice.

NOTE: Multiple applications from an organization are not allowable.

HRSA will only accept your **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.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA **requires** you to apply electronically. HRSA encourages you to apply through [Grants.gov](#) using the SF-424 workspace application package associated with this notice of funding opportunity (NOFO) following the directions provided at <http://www.grants.gov/applicants/apply-for-grants.html>.

The NOFO is also known as “Instructions” on Grants.gov. You must select “Subscribe” and provide your email address for each NOFO you are reviewing or preparing in the workspace application package in order to receive notifications including modifications, clarifications, and/or republications of the NOFO on Grants.gov. You will also receive notifications of documents placed in the RELATED DOCUMENTS tab on Grants.gov that may affect the NOFO and your application. *You are ultimately responsible for reviewing the [For Applicants](#) page for all information relevant to this NOFO.*

2. Content and Form of Application Submission

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

See Section 8.5 of the *Application Guide* for the Application Completeness Checklist.

Application Page Limit

The total size of all uploaded files included in the page limit may not exceed the equivalent of **40 pages** when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support

required in the *Application Guide* and this NOFO. Standard OMB-approved forms that are included in the workspace application package do not count in the page limit. Please note: If you use an OMB-approved form that is not included in the workspace application package for HRSA-21-080, it may count against the page limit. Therefore, we strongly recommend you only use Grants.gov workspace forms associated with this NOFO to avoid exceeding the page limit. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) do not count in the page limit. **It is therefore important 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.

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification

- 1) You certify on behalf of the applicant organization, by submission of your proposal, that neither you nor your principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- 2) Failure to make required disclosures can result in any of the remedies described in 45 CFR § 75.371, including suspension or debarment. (See also 2 CFR parts 180 and 376, and 31 U.S.C. § 3321).
- 3) Where you are unable to attest to the statements in this certification, an explanation shall be included in **Attachment 7: Other Relevant Documents**.

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

Program-Specific Instructions

Program Expectations

Propose a project that implements activities under at least one of the three capacity areas below and addresses your chosen state or local emerging issue. Projects may address more than one capacity area. You may reference the examples provided under each capacity area to inform the development of your project, with the understanding that the design of your proposed project will be unique to the needs of your organization and state or local community.

1) Data and Informational Systems

This area aims to strengthen public health infrastructure related to data, informational technology (IT), and communication systems to facilitate the meaningful use of health information technology among health care, public health, education, and social services professionals and between the populations they serve. Activities may focus on, but are not limited to, developing or enhancing data and informational technology tools for health assessments, data collection, analysis and reporting, information dissemination, and program and service delivery.

Example 1

Recipient A's organization currently has limited linkage between existing datasets and does not allow for long-term follow-up of its patients. Based on state-level data, the recipient has identified widening disparities in reproductive health screenings and follow-up for women of low socioeconomic status as an emerging issue. Recipient A's project will link relevant databases to provide accurate, real-time data to enable follow-up and long-term monitoring. The recipient will maintain this enhanced data system and continue to monitor the data for identification of future emerging health disparities among their patient populations.

2) Workforce Development

This area aims to build and strengthen a highly skilled and effective interdisciplinary public health workforce that is aware of trends in emerging issues across sectors and adequately trained to address these issues. Activities under this capacity may focus on, but are not limited to, education, training, professional development, coaching/mentoring, and cross training. Activities may also support efforts to build and/or strengthen a community-based workforce that is culturally competent, accessible and contributes a lived experience to the public health workforce.

Example 2a

Recipient B would like to develop a more integrated and interprofessional workforce within its county. The recipient organization will institute a program that trains and mentors community-based peer support workers. The recipient identified low rates of health literacy among low-income families of children with special health care needs as an emerging issue, and the project under this award will focus on training and mentoring peer support workers to navigate these families through the systems of services and facilitate their access to information, health care, psychosocial support, and material resources. To sustain this project beyond the period of HRSA funding, Recipient B has developed a partnership with a group of local health centers to connect its peer support workers to continued experiential training and permanent employment opportunities.

Example 2b

Recipient C noted the need to increase primary care providers' knowledge of and skills to address specialized topics affecting the health of their patient populations. The recipient has identified a lack of adequate mental and other behavioral health services as an emerging issue increasingly affecting the health outcomes of children and youth in its local community. The recipient will create an interdisciplinary model that increases providers' abilities to screen, treat, and/or refer children and youth with behavioral health needs. The recipient will continue activities (e.g., training and inter-professional engagement) under this interdisciplinary model to continue developing providers' readiness to identify and address emerging health issues.

3) Strategic Partnerships

This area aims to build and strengthen public health networks and relationships between and among states and communities. Diverse networks improve collaboration and communication and can contribute to better performance outcomes. Activities under this capacity should aim to increase your organization's number of productive partnerships that contribute to increased performance under the 10 EPHS and positively affect the health of MCH populations. MCHB encourages leveraging nontraditional partnerships (e.g., organizations working in housing, judicial systems, schools, etc.).

Example 4

Recipient D wants to develop state-level best practices to share between stakeholders and across sectors. The recipient has identified the need to maximize flexibilities in telehealth services in rural and other geographically isolated locations. The project will collaborate with families, providers, and its state's Medicaid program and/or other payers to support families and providers in developing guidelines for delivering, evaluating, and sustaining telehealth best practices at the state level. To sustain the core components of this project, the recipient will maintain its relationships with these stakeholders to monitor future emerging issues and communicate relevant guidance and best practices.

Regardless of the capacity/capacities you address, successful projects will develop or enhance meaningful partnerships with relevant stakeholders to inform the selection of an emerging issue and the development and implementation of the project. This includes members of the MCH population your emerging issue affects, and specifically, if you are not a state Title V agency or state/local health department you are encouraged to engage with your state Title V agency and state/local health department.

In selecting and justifying an emerging issue (which you will detail in the [Project Narrative](#)), you should cite valid and current data, no older than 24 months. You are encouraged to cite multiple sources and include information from at least one of the following:

- Title V 5-year State Needs Assessments via [MCHB's TVIS](#) (See [Appendix B](#) for additional guidance)
- [National Survey of Children's Health](#)
- [Youth Risk Behavior Surveillance System](#)
- [Data Resource Center for Child and Adolescent Health](#)
- [Behavioral Risk Factor Surveillance System](#)
- [County Health Rankings and Road Maps](#)
- [Research and Uniform Data System \(UDS\) Resources from HRSA's Health Center Program](#)
- Other data from a state or local health department

This program intends to fund innovative and sustainable approaches to strengthening organizational capacity to address emerging issues. Innovative activities should be non-duplicative of your organization's current activities and contribute to a positive change in your organization's performance outcomes. Sustainable activities should equip your

organization with durable resources and/or practices. Strong indicators of a sustainable project include, but are not limited to:

- Demonstration that the capacity improvements are applicable to future emerging issues different from the one identified for this project, and will equip your organization with the ability to provide an effective and time-efficient response;
- Evidence of strong organizational leadership of and commitment to the capacity improvements;
- Demonstration that key elements of the project could be replicated in other organizations with similar programs/services and produce successful outcomes, both for the organization and the MCH population(s) it serves; and
- Creation, implementation, and dissemination of policies or evidence-based best practices that clearly demonstrate a positive impact on MCH populations.

Please note that given the award amount and 1-year period of performance, the intention of the Emerging Issues in Maternal and Child Health Program is not to fund the establishment of a new organization. You are encouraged to pay special attention to prompts throughout the project narrative instructions to demonstrate that your organization already possesses the baseline capacity (including, but not limited to, facilities, knowledgeable personnel, financial resources, and existing partnerships) necessary to implement and complete your proposed activities within the 1-year period of performance.

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

i. Project Abstract

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

In addition to the requirements listed in the SF-424 Application Guide, please include:

- The requested amount of funding;
- Your selected capacity area(s) and a brief summary of the proposed activities;
- The identified emerging issue and the MCH population it affects;
- Specific, measurable objectives the project will achieve; and
- The geographic scope of your project (i.e., state or local).

ii. Project Narrative

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

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

- **INTRODUCTION** -- Corresponds to Section V's [Review Criterion \(1\) Need](#)

Briefly describe the purpose of the proposed project including your chosen capacity-strengthening area(s), associated activities, emerging issue, and the MCH population your emerging issue affects. Include a brief summary of how your project is sustainable beyond the period of performance and is unique to any activities your organization currently implements.

- **NEEDS ASSESSMENT** -- Corresponds to Section V's [Review Criterion \(1\) Need](#)

This section will help reviewers understand the current scope of your organization's capacities and the effect your emerging issue has on MCH populations. Outline the needs of your state or local community and the MCH population(s) your emerging issue affects, and discuss any relevant barriers you face in supporting these groups. Use and cite demographic data and/or literature where applicable, including citation(s) of the data source(s) used to justify your selection of an emerging issue (see [Section IV.2](#)).

Include discussion of the following:

- Your current capacity/capacities in relation to the capacity area(s) selected and relevant barriers that limit your current ability to address the identified emerging issue;
- The emerging issue the proposed project will address and relevant data/information that describes the threat it poses to MCH populations and demonstrates alignment with the [NOFO's definition](#) of an emerging issue; and
- The unmet health needs (related to the emerging issue) of your MCH population.

- **METHODOLOGY** -- Corresponds to Section V's Review Criteria [\(2\) Response](#) and [\(4\) Impact](#)

Describe the methodology you will use to strengthen your organization's capacity/capacities in the selected area(s) listed in [Section IV.2](#). These methods should address the needs of your organization and the needs of the MCH population identified in the needs assessment section of your project narrative.

Include:

- The specific, measurable objectives the project will achieve and demonstration of how they will strengthen your organization's capacity/capacities in the selected area(s);
- An explanation of how the proposed methodology and anticipated improvements to your selected capacity area(s) align with the capacity descriptions in Section IV.2 and are applicable to the identified emerging issue;
- Discussion of how your project's capacity improvements will produce evidence (e.g., data, policies, evidence-based products/services) that the project's outcomes will have a positive impact on the health of MCH populations, and how this evidence could be disseminated and replicated;

- Discussion of how your proposed methodology is sustainable beyond the period of performance and reflective of the sustainability indicators discussed in [Section IV.2](#); and
 - Discussion of why the proposed methodology is justifiable, using research and/or other documentation as applicable.
- *WORK PLAN -- Corresponds to Section V's Review Criteria [\(2\) Response](#) and [\(4\) Impact](#)*

The work plan should demonstrate that your organization possesses a baseline capacity to implement and carry out the proposed project successfully and within the 1-year period of performance.

Submit the work plan and accompanying logic model as **Attachment 1**.

The work plan should include:

- A description of current activities your organization already implements and a clear demonstration of how the proposed project is unique to and not duplicative of these activities;
- A description of feasible activities and/or steps under the selected capacity area(s) that you will take to achieve each of your project's objectives;
- Identification of key personnel responsible for each of the activities;
- A clear and detailed plan for sustaining key project elements and capacity improvements beyond the period of performance; and
- As applicable, a description of any engagement with relevant stakeholders as discussed in the NOFO's [program expectations](#) to develop your application and implement the project's activities. Include any letters of support as **Attachment 4**.

Also, include a logic model for designing and managing the project. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among each of the project's elements. While there are many versions of logic models, for the purposes of this NOFO, the logic model should summarize the connections between the:

- Goals and objectives of the project (e.g., reasons for proposing the project, if applicable);
- Assumptions (e.g., beliefs about how the program will work and support resources. Base assumptions on research, best practices, and experience.);
- Inputs (e.g., organizational profile, collaborative partners, key personnel, budget, other resources);
- Target population(s) (e.g., the individuals to be served – this may include primary and secondary populations);
- Activities (e.g., approach);
- Outputs (i.e., the direct products of program activities); and
- Outcomes (i.e., the results of a program, typically describing a change in people or systems).

Although there are similarities, a logic model is not a work plan. A work plan is an "action" guide with a time line used during program implementation; the work plan

provides the “how to” steps. You can find additional information on developing logic models at the following website:

<https://www.acf.hhs.gov/archive/ana/training-technical-assistance/ana/resource/ana/resource/logic-model-template>.

- *RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criteria [\(2\) Response](#) and [\(4\) Impact](#)*

Discuss the challenges that you are likely to encounter in designing and implementing your proposed project, and actions that you will take to resolve such challenges.

Address challenges that include, but are not limited to, the following:

- Ensuring the project and its activities are innovative;
- Achieving the project's objectives within the 1-year period of performance;
- Developing and implementing a sustainability plan;
- Overcoming the barriers discussed in the needs assessment; and
- Completing work in accordance with state and/or local policies and guidelines to reduce the spread of COVID-19.

- *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criteria [\(3\) Evaluative Measures](#) and [\(5\) Resources/Capabilities](#)*

Describe the systems and processes that will support effective tracking of outputs and outcomes, including a description of how the organization will collect, manage, and analyze data (e.g., assigned skilled personnel, data management software) in a way that allows for accurate and timely reporting of these outputs and outcomes.

Submit a plan for project evaluation that will monitor ongoing processes and progress towards the goals and objectives of the project. The project evaluation plan should include the following:

- The inputs (e.g., organizational profile, collaborative partners, key personnel, budget, and other resources), key processes, and expected outcomes of the funded activities;
- Any applicable baseline measurements necessary to demonstrate improvements in the selected capacity area(s) when compared with end-line measurements;
- How the evaluation plan demonstrates that the measures will effectively assess the extent to which the project achieved its objectives and strengthened your organization's capacity;
- How the evaluation plan will demonstrate the project's activities contributed to an increase in your organization's overall performance;
- A plan to evaluate and disseminate any data, policies, products/services that result from your project's capacity improvements and demonstrate a positive impact on the MCH population your emerging issue affects; and

- Any potential obstacles to implementing the project evaluation and a plan to address those obstacles.
- **ORGANIZATIONAL INFORMATION** -- Corresponds to Section V's [Review Criterion \(5\) Resources/Capabilities](#)

Include:

- Your organization's current mission, structure, and scope of activities and how they contribute to your ability to meet the NOFO's [program expectations](#);
- Existing organizational skills, capabilities, and resources (e.g., facilities, knowledgeable personnel, financial resources, and existing partnerships) that demonstrate a baseline capacity to implement and complete the project within the 1-year period of performance;
- A staffing plan, submitted as **Attachment 2**, that outlines key personnel responsible for the project and the amount of time each will devote to the project, the total sum of which should equal at least one full-time equivalent, with at least one person expected to devote a minimum of 25 percent of his or her time to the project;
- Biographical sketches, submitted as **Attachment 3**, for each key personnel that demonstrate the following:
 - At least one key personnel has 3 or more years of experience with project management or an equivalent amount of post-baccalaureate education, and
 - At least one key personnel has experience and/or education in MCH-related activities relevant to the proposed project.
- How your organization will follow the approved plan, as outlined in the application, to properly account for the federal funds, and document all costs to avoid audit findings; and
- Your organization's experience with fiscal management of grants and information on your organization's experience managing federal grants.

iii. Budget

The directions offered in the SF-424 Application Guide may differ from those offered by Grants.gov. Follow the instructions in Section 4.1.iv of HRSA's [SF-424 Application Guide](#) and the additional budget instructions provided below. A budget that follows the Application Guide will ensure that, if HRSA selects the application for funding, you will have a well-organized plan and, by carefully following the approved plan, may avoid audit issues during the implementation phase.

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

The Consolidated Appropriations Act, 2021 (P.L. 116-260), Division H, § 202 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.” See Section 4.1.iv Budget – Salary Limitation of HRSA’s [SF-424 Application Guide](#) for additional information. Note that these or other salary limitations may apply in the following fiscal years, as required by law.

iv. Budget Narrative

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

NARRATIVE GUIDANCE	
To ensure that you fully address the review criteria, this table provides a crosswalk between the narrative language and where each section falls within the review criteria. Any attachments referenced in a narrative section may be considered during the objective review.	
<u>Narrative Section</u>	<u>Review Criteria</u>
Introduction	(1) Need
Needs Assessment	(1) Need
Methodology	(2) Response and (4) Impact
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response and (4) Impact
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (5) Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested

v. Attachments

Provide the following items in the order specified below to complete the content of the application. **Unless otherwise noted, attachments count toward the application page limit.** Indirect cost rate agreements and proof of non-profit status (if applicable) will not count toward the page limit. **Clearly label each attachment.**

Attachment 1: Work Plan and Logic Model

Attach the work plan and logic model for the project that includes all information detailed in [Section IV.2.ii. Project Narrative](#). If you will make subawards or expend funds on contracts, describe how your organization will ensure proper documentation of funds.

Attachment 2: Staffing Plan and Job Descriptions for Key Personnel (see Section 4.1. of HRSA’s [SF-424 Application Guide](#))

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

Attachment 3: Biographical Sketches of Key Personnel

Include biographical sketches for persons occupying the key positions described in ***Attachment 2***, not to exceed two pages in length per person. In the event that a biographical sketch is included for an identified individual not yet hired, include a letter of commitment from that person with the biographical sketch.

Attachment 4: Letters of Support, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts

Provide any documents that describe working relationships between your organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and any deliverable. Make sure any letters of agreement are signed and dated.

Attachment 5: Project Organizational Chart

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

Attachment 6: Tables, Charts, etc.

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

Attachment 7: Other Relevant Documents

Include here any other documents that are relevant to the application.

3. Dun and Bradstreet Data Universal Numbering System (DUNS) Number Transition to the Unique Entity Identifier (UEI) and System for Award Management (SAM)

You must obtain a valid DUNS number, also known as the Unique Entity Identifier (UEI), and provide that number in the application. In April 2022, the *DUNS number will be replaced by the UEI, a “new, non-proprietary identifier” requested in, and assigned by, the System for Award Management (SAM.gov). For more details, visit the following pages: [Planned UEI Updates in Grant Application Forms](#) and [General Service Administration’s UEI Update](#).

You must also register with 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 the applicant is an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the agency under 2 CFR § 25.110(d)).

If you are chosen as a recipient, HRSA would not make an award until you have complied with all applicable DUNS (or UEI) and SAM requirements and, if you have not fully complied with the requirements by the time HRSA is ready to make an award, you may be deemed not qualified to receive an award and 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.

*Currently, the Grants.gov registration process requires information in three separate systems:

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

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

SAM.GOV ALERT: For your SAM.gov registration, you must submit a [notarized letter](#) appointing the authorized Entity Administrator. The review process changed for the Federal Assistance community on June 11, 2018.

In accordance with the Federal Government's efforts to reduce reporting burden for recipients of federal financial assistance, the general certification and representation requirements contained in the Standard Form 424B (SF-424B) – Assurances – Non-Construction Programs, and the Standard Form 424D (SF-424D) – Assurances – Construction Programs, have been standardized federal-wide. Effective January 1, 2020, the forms themselves are no longer part of HRSA's application packages and the updated common certification and representation requirements will be stored and maintained within SAM. Organizations or individuals applying for federal financial assistance as of January 1, 2020, must validate the federally required common certifications and representations annually through SAM located at [SAM.gov](#).

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

4. Submission Dates and Times

Application Due Date

The due date for applications under this NOFO is *April 9, 2021 at 11:59 p.m. ET*. HRSA suggests submitting applications to Grants.gov at least **3 calendar days before the deadline** to allow for any unforeseen circumstances. See Section 8.2.5 – Summary of emails from Grants.gov of HRSA's [SF-424 Application Guide](#) for additional information.

5. Intergovernmental Review

Emerging Issues in Maternal and Child Health is not a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

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

6. Funding Restrictions

You may request funding for a period of performance of up to 1 year, at no more than \$250,000 (inclusive of direct **and** indirect costs).

The General Provisions in Division H of the Consolidated Appropriations Act, 2021 (P.L. 116-260) apply to this program. Please see Section 4.1 of HRSA's *SF-424 Application Guide* for additional information. Note that these or other restrictions will apply in following fiscal years, as required by law.

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

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

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

7. Other Submission Requirements

Letter of Intent to Apply

The letter should identify your organization and its intent to apply, and briefly describe the proposal. This should include the capacity area(s) selected, your identified emerging issue, and the MCH population your emerging issue affects. HRSA will **not** acknowledge receipt of letters of intent.

Send the letter via email by **February 5, 2021** to:

HRSA Digital Services Operation (DSO)

Please use the HRSA opportunity number as email subject (HRSA-21-080)

HRSADSO@hrsa.gov

Although HRSA encourages letters of intent to apply, they are not required. You are eligible to apply even if you do not submit a letter of intent.

V. Application Review Information

1. Review Criteria

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

Review criteria are used to review and rank applications. Emerging Issues in Maternal and Child Health has six review criteria. These criteria are the basis upon which the reviewers will evaluate and score the merit of the application. The objective review will consider the entire proposal. See the review criteria outlined below with specific detail and scoring points.

Criterion 1: NEED (15 points) – Corresponds to Section IV's [Introduction](#) and [Needs Assessment](#)

- The degree to which the application justifies its selection of an emerging issue, including demonstrating alignment to the [NOFO's definition](#) of the term and citing valid data sources less than 24 months old, at least one being from the list in [Section IV.2](#);
- The extent of the unmet health needs of the MCH population the identified emerging issue affects; and
- The extent to which the application describes the applicant organization's existing capacity in the area(s) chosen and its current ability to respond to the identified emerging issue.

Criterion 2: RESPONSE (25 points) – Corresponds to Section IV's [Methodology](#), [Work Plan](#), and [Resolution of Challenges](#)

Criterion 2 (a): Methodology (10 points)

- The degree to which the application proposes innovative methodology and the effectiveness in which it outlines the applicant organization's current activities to demonstrate that the proposed activities are unique to the organization and not duplicative;
- The degree to which the application demonstrates that the chosen capacity area(s) align with the NOFO's descriptions of each capacity in [Section IV.2](#); and
- The specificity and measurability of the objectives, and the degree to which they align with the [NOFO's purpose, goal, and objectives](#).

Criterion 2 (b): Feasibility of Work Plan (10 points)

- The degree to which the work plan demonstrates the applicant organization has a baseline capacity to implement and complete the project within the 1-year period of performance;
- How effectively the work plan outlines feasible activities that can be implemented and completed within the period of performance; and
- The degree to which descriptions of engagement (regardless of the capacity area(s) selected) with relevant stakeholders as described in the NOFO's [program expectations](#) demonstrate a meaningful contribution to the development and implementation of the project.

Criterion 2 (c): Justification of Response (5 points)

- The strength by which research and/or data justifies the methodology, and
- How effectively the logic model demonstrates a clear connection between the target population(s), inputs, activities, outputs, and anticipated outcomes and goals of the proposed project.

Criterion 3: EVALUATIVE MEASURES (15 points) – Corresponds to Section IV's [Evaluation and Technical Support Capacity](#)

- The strength of the systems and processes that the applicant organization will use to collect, manage, and analyze data accurately and in a timely manner;
- The strength of evidence that the evaluation plan will assess: 1) to what extent the project's objectives have been met, and 2) to what extent these can be attributed to the project;
- The effectiveness in which relevant baseline measurements will demonstrate improvements in the selected capacity area(s) when compared with end-line measurements;
- The feasibility of the application's plan to evaluate and disseminate any data, policies, products/services that result from the project; and
- The thoroughness with which the application discusses potential challenges related to implementing the evaluation plan and the feasibility of the steps proposed to address those challenges.

Criterion 4: IMPACT (20 points) – Corresponds to Section IV's [Methodology](#), [Work Plan](#), and [Resolution of Challenges](#)

Criterion 4 (a): Sustainability (15 points)

- The degree to which the application incorporates a sustainability plan into its work plan, the extent to which it aligns with the indicators discussed in [Section IV.2](#), and the degree to which this plan is feasible;
- The thoroughness with which the application discusses potential challenges related to sustainability and the feasibility of the steps proposed to address those challenges.

Criterion 4 (b): Impact on MCH Populations (5 points)

- The extent to which the application demonstrates its project will result in evidence (e.g., data, policies, evidence-based products/services) that the

project's outcomes will have a positive impact on the health of MCH populations, and

- The degree to which the application demonstrates it will apply an understanding of MCH populations (e.g., knowledgeable personnel, engagement with the population, evidence of existing or past projects, etc.) to the development and implementation of the project.

Criterion 5: RESOURCES/CAPABILITIES (15 points) – Corresponds to Section IV's [Evaluation and Technical Support Capacity](#) and [Organizational Information](#)

- The strength of evidence that the applicant organization currently possesses the infrastructure and resources necessary to implement and complete the project within the 1-year period of performance;
- The extent to which the staffing plan (**Attachment 2**) demonstrates that at least one key personnel expected to devote a minimum of 25 percent of his or her time to the project, and that the total sum of all key personnel's efforts equals at least one full-time equivalent; and
- The degree to which the biographical sketches demonstrate that at least one key personnel has:
 - Three or more years of experience with project management or an equivalent amount of post-baccalaureate education, and
 - Experience and/or education in MCH activities relevant to the proposed project and the MCH population affected by the emerging issue.

Criterion 6: SUPPORT REQUESTED (10 points) – Corresponds to Section IV's [Budget and Budget Narrative](#)

- The degree to which costs, as outlined in the budget and required resources sections, are described and are reasonable given the scope of work and period of performance, and
- The strength of evidence in the budget and budget narrative that the applicant organization's primary use of the funds intends to support capacity-strengthening activities.

2. Review and Selection Process

The objective review process provides an objective evaluation to the individuals responsible for making award decisions. The highest ranked applications receive consideration for award within available funding ranges. HRSA may also consider assessment of risk and the other pre-award activities described in Section 3 below. See Section 5.3 of HRSA's [SF-424 Application Guide](#) for more details.

3. Assessment of Risk

HRSA may elect not to fund applicants with management or financial instability that directly relates to the organization's ability to implement statutory, regulatory, or other requirements ([45 CFR § 75.205](#)).

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

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

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

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

VI. Award Administration Information

1. Award Notices

HRSA will issue the Notice of Award (NOA) prior to the start date of September 1, 2021. See Section 5.4 of HRSA’s [SF-424 Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

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

If you are successful and receive a Notice of Award, in accepting the award, you agree that the award and any activities thereunder are subject to all provisions of 45 CFR part 75, currently in effect or implemented during the period of the award, other Department regulations and policies in effect at the time of the award, and applicable statutory provisions.

Requirements of Subawards

The terms and conditions in the NOA apply directly to the recipient of HRSA funds. The recipient is accountable for the performance of the project, program, or activity;

the appropriate expenditure of funds under the award by all parties; and all other obligations of the recipient, as cited in the NOA. In general, the requirements that apply to the recipient, including public policy requirements, also apply to subrecipients under awards, and it is the recipient's responsibility to monitor the compliance of all funded subrecipients. See [45 CFR § 75.101 Applicability](#) for more details.

Data Rights

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

3. Reporting

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

- 1) **DGIS Performance Reports.** Available through the Electronic Handbooks (EHBs), the Discretionary Grant Information System (DGIS) is where recipients will report annual performance data to HRSA. Award recipients are required to submit a DGIS Performance Report **annually**, by the specified deadline. To prepare successful applicants for their reporting requirements, the listing of administrative forms and performance measures for this program are available at <https://grants4.hrsa.gov/DGISReview/FormAssignmentList/G31.html>. The type of report required is determined by the project year of the award's period of performance.

Type of Report	Reporting Period	Available Date	Report Due Date
a) New Competing Performance Report	September 1, 2021 – August 31, 2022 <i>(administrative data and performance measure projections, as applicable)</i>	Period of performance start date	120 days from the available date
b) Project Period End Performance Report	September 1, 2021 – August 31, 2022	Period of performance end date	90 days from the available date

The full OMB-approved reporting package is accessible at <https://mchb.hrsa.gov/data-research-epidemiology/discretionary-grant-data-collection> (OMB Number: 0915-0298 | Expiration Date: 06/30/2022).

Please note that the OMB revisions to Guidance for Grants and Agreements termination provisions located at [2 CFR § 200.340 - Termination](#) apply to all federal awards effective August 13, 2020.

VII. Agency Contacts

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

David Colwander
 Grants Management Specialist
 Division of Grants Management Operations, OFAM
 Health Resources and Services Administration
 5600 Fishers Lane, Mailstop 10SWH03
 Rockville, MD 20857
 Telephone: (301) 443-7858
 Email: Dcolwander@hrsa.gov

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

Hannah Reisner
 Public Health Analyst, Office of Policy and Planning
 Attn: Emerging Issues in Maternal and Child Health
 Maternal and Child Health Bureau
 Health Resources and Services Administration
 5600 Fishers Lane
 Rockville, MD 20857

Telephone: (301) 443-3327
Email: emergingissuesmch@hrsa.gov

MCHB monitors all inquiries sent to the above email address daily and will respond within 48 hours.

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: support@grants.gov
Self-Service Knowledge Base: <https://grants-portal.psc.gov/Welcome.aspx?pt=Grants>

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

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

VIII. Other Information

Technical Assistance

HRSA has scheduled following technical assistance:

Webinar

Day and Date: Tuesday, January 26, 2021
Time: 2–3 p.m. ET
Call-In Number: 1-888-324-9321
Participant Code: 4477317
Weblink: https://hrsa.connectsolutions.com/emerging_issues_maternal_child_health_ta/

HRSA will record the webinar and make it available at:
<https://mchb.hrsa.gov/fundingopportunities/default.aspx>.

Tips for Writing a Strong Application

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

Appendix A: Glossary

Capacity – an organization’s availability of and ability to use resources, knowledge, skills, systems, and leadership to carry out an effective mission

Emerging Issues – issues that affect MCH populations at an increased rate, for which there is a new or increased level of awareness of, or for which there is a new approach to solving the issue

Innovative – activities that are unique to and non-duplicative of what the applicant organization is already carrying out and will contribute to an increase in the organization’s performance outcomes

MCH Populations – women, children (birth to 21), children and youth with special health care needs, adolescents, and families

State – the 50 states and following jurisdictions: the District of Columbia, the Republic of the Marshall Islands, the Federated States of Micronesia, the Republic of Palau and the U.S. territories of the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands.

Appendix B: Accessing the TVIS

[MCHB's TVIS](#) houses data reported by state Title V agencies. There are several resources publically available to applicants to inform the selection of their emerging issue, prepare their application, and develop their proposed project. Below are three key resources.

1. National Performance Measures Dashboard

This dashboard displays state data on National Outcome Measures (NOMs), National Performance Measures (NPMs), and Evidence-based or -informed Strategy Measures (ESMs)

To access from the TVIS home page, open the “Priorities and Measures” drop-down at the top of the page, click “National Performance Measures Dashboard,” and select a state from the “National” drop-down menu.

2. State Application/Annual Report

The annual report contains each state’s 5-year needs assessment, and includes a narrative description of the status and activities of its MCH programs.

To access from the TVIS home page, open the “Archive” drop-down at the top of the page, click “State Application/Annual Report,” and select a state from the drop-down menu.

3. Multi-Year Narrative Text Search

This feature makes the State Application/Annual Report searchable by key words and allows you to filter by narrative section, state, and year(s).

To access from the TVIS home page, open the “Archive” drop-down at the top of the page, click “Multi-Year Narrative Text Search” and enter your desired key word(s) into the “Enter Search Text” box.