NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2019

Application Due Date: January 30, 2019

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: November 1, 2018

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EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for fiscal year (FY) 2019 for the AIDS Education and Training Centers – National HIV Curriculum (NHC) e-Learning Platform: Technology Operations and Maintenance. This project will manage the technological operation and maintenance of the NHC e-Learning Platform. Further, the project will maintain the platform’s capacity to support additional modules thereby broadening the subject matter content available on the existing NHC, and to remain updated on the latest e-learning instructional technology. Broader subject matter content may include additional competencies and/or modules on crosscutting concepts, emerging issues such as mental illness, opioids and other substance use disorders, and intimate partner violence, initiatives such as treatment as prevention, building capacity for HIV elimination, the “Undetectable=Untransmittable” campaign and/or HRSA’s priorities related to the care and treatment of people living with HIV. The project will also maintain the platform’s capacity to identify technological issues/problems, and to develop and implement appropriate solutions.

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<tbody>
<tr>
<td>Funding Opportunity Number:</td>
<td>HRSA-19-041</td>
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<tr>
<td>Due Date for Applications:</td>
<td>January 30, 2019</td>
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<tr>
<td>Anticipated Total Annual Available FY 2019 Funding:</td>
<td>$500,000</td>
</tr>
<tr>
<td>Estimated Number and Type of Award(s):</td>
<td>One cooperative agreement</td>
</tr>
<tr>
<td>Estimated Award Amount:</td>
<td>Up to $500,000 per year subject to the availability of appropriated funds</td>
</tr>
<tr>
<td>Cost Sharing/Match Required:</td>
<td>No</td>
</tr>
<tr>
<td>Period of Performance:</td>
<td>September 1, 2019 through August 31, 2022 (3 years)</td>
</tr>
<tr>
<td>Eligible Applicants:</td>
<td>Eligible applicants include public and nonprofit private entities and schools, and academic health science centers. Faith-based and community-based organizations, and tribes and tribal organizations are also eligible to apply for these funds.</td>
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<tr>
<td></td>
<td>See Section III-1 of this notice of funding opportunity (NOFO) for complete eligibility information.</td>
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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 HRSA-19-041

**Technical Assistance**
HRSA has scheduled the following technical assistance webinar:

*Webinar*

Day and Date:  Monday, November 19, 2018  
Time:  2 – 3:30 p.m. ET  
Call-In Number: 1-888-913-9971  
Participant Code: 3646287  
Weblink: [https://hrsa.connectsolutions.com/ta_nhc_technology_nofo/](https://hrsa.connectsolutions.com/ta_nhc_technology_nofo/)  
Playback Number: 1-800-778-9714  
Passcode: 3255
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I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity to apply for funding under the Ryan White HIV/AIDS Program (RWHAP), AIDS Education and Training Centers (AETC) Program for the technological operations and maintenance of the National HIV Curriculum (NHC) e-Learning Platform. This project will manage the technological operation and maintenance of the NHC e-learning Platform. Further, it will maintain the platform’s capacity to support additional modules thereby broadening the subject matter content available on the existing NHC. Broader subject matter content may include additional competencies and/or modules on crosscutting concepts, emerging issues such as mental illness, opioids and other substance use disorders and intimate partner violence, initiatives such as treatment as prevention,\(^1\) building capacity for HIV elimination, the “Undetectable=Untransmittable” campaign,\(^2\) and/or the Health Resources and Services Administration’s (HRSA) priorities related to the care and treatment of people living with HIV (PLWH). The project will also maintain the platform’s capacity to identify technological issues/problems, and to develop and implement appropriate solutions.

This project will utilize experts in e-learning technology and instructional design, to ensure flexibility to respond and adapt to changing educational needs and maintain a state of the art website for HIV treatment training. The ultimate goal of this project is to address the national shortages in the HIV clinical workforce by providing access to high quality, up-to-date training that is easily accessible so as to encourage ongoing learning and assist health care professionals in meeting the core competency knowledge for HIV prevention, screening, diagnosis, care, and treatment of PLWH.

This notice of funding opportunity (NOFO) will fund one organization for a three-year project period to manage the technological operation and maintenance of the NHC e-Learning Platform. The recipient of this award will continuously optimize the NHC Platform by:

- applying innovative technological approaches or strategies to provide a dynamic and interactive learning experience while surpassing the technological functionality of other e-learning websites;
- being flexible enough to rapidly update and deploy relevant training information to users, in collaboration with the University of Washington (UW) which is implementing HRSA-18-110 Enhancement and Update of the National HIV Curriculum eLearning Platform;
- applying the latest trends in e-learning technology;
- addressing technical problems as soon as they occur including fixing bugs, security patches to ensure an up-to-date, stable, secure and powerful website;
- enhancing learning engagement and promoting successful uptake/transfer of knowledge to improve health outcomes for PLWH;

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1 Centers for Disease Control and Prevention, HIV Treatment As Prevention, https://www.cdc.gov/hiv/risk/art/index.html
• collecting, analyzing, and tracking data to measure process and impact/outcomes and using the data to enhance and expand the NHC Platform.

2. Background

This program is authorized by Section 2692(a) of the Public Health Service (PHS) Act (42 U.S.C. 300ff-111(a)) and section 2693 (42 U.S.C. § 300ff-121) of the PHS Act, as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87).

The goal of the AETC Program is to increase the number of health care professionals who are educated to counsel, diagnose, treat, and medically manage PLWH, and to help prevent high-risk behaviors that lead to HIV transmission. Achieving this goal includes providing training, education, consultation, and clinical decision support to diverse health care providers, allied health professionals, and health care support staff on the prevention and treatment of HIV/AIDS.

In alignment with the goals of the AETC Program, HRSA supported the development of the NHC to help address the growing shortage of adequately trained HIV care providers. The NHC is available via a web-based e-learning platform that is free for use by novice to expert health care professionals. Through this e-learning platform, the NHC is available for health care professionals in search of ongoing, up-to-date information and training that meets the core competency knowledge required for HIV prevention, screening, diagnosis and sustained treatment and care of PLWH. The website was developed by the University of Washington (UW) in collaboration with the AETC National Coordinating Resource Center and was launched in July 2017.

The National HIV Curriculum and its operating e-learning system is currently housed on the UW’s Infectious Disease Education & Assessment Platform and is operated and maintained by the University of Washington (HRSA-18-110). This web-based curriculum offers HIV training information and continuing education credits through several self-study course modules, a question bank, clinical challenges, screening tools and clinical calculators, as well as information on the national guidelines/recommendations for the care and treatment of PLWH and HIV co-morbidities.

The NHC platform, like many e-learning websites, requires continuous maintenance and improvements to keep pace with the latest trends in e-learning technology. At the same time, the National HIV Curriculum needs frequent updates in response to the changing HIV epidemic/landscape. For example, we have seen significant changes in the HIV epidemic in the past 20 years, as better treatment options became available. With better treatment options, more people are living longer with the disease, increasing the demand for HIV and primary care services. Further, a recent study of the HIV

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workforce concluded that the current health workforce is not adequately equipped to effectively treat PLWH. In general, projections reflect a growing shortage of HIV clinicians as current providers reach retirement age while the number of people living with HIV continues to grow. It is therefore imperative that the e-learning platform that supports the NHC remains up-to-date with state-of-the-art technology to ensure that HIV clinical care knowledge and information is available to current and future health care professionals, and that it is equipped to accommodate anticipated as well as unpredictable changes in the HIV epidemic/landscape.

The successful applicant will support the NHC e-Learning Platform by improving the availability and access of up-to-date HIV care and treatment training consistent with established guidelines and current research. The successful applicant will describe innovative approaches and strategies to provide dynamic and interactive learning experiences to increase the number of qualified novice & experienced providers essential to ending the HIV epidemic in the U.S.

**National HIV/AIDS Strategy: Updated to 2020**

The National HIV/AIDS Strategy for the United States: Updated to 2020 (NHAS 2020) is a five-year plan that details principles, priorities, and actions to guide the national response to the HIV epidemic. The RWHAP promotes robust advances and innovations in HIV health care using the National HIV/AIDS Strategy to end the epidemic as its framework. Therefore, to the extent possible, activities funded by RWHAP focus on addressing these four goals:

1) Reduce new HIV infections;  
2) Increase access to care and improve health outcomes for PLWH;  
3) Reduce HIV-related health disparities and health inequities; and  
4) Achieve a more coordinated national response.

To achieve these shared goals, recipients should align their organization’s efforts, within the parameters of the RWHAP statute and program guidance, to ensure that PLWH are linked to and retained in care, and have timely access to HIV treatment and the supports needed (e.g., mental health and substance use disorder services) to achieve HIV viral suppression.

**HIV Care Continuum**

Diagnosing PLWH, linking PLWH to HIV primary care, and PLWH achieving viral suppression are important public health steps toward ending the HIV epidemic in the U.S. The HIV care continuum has five main “steps” or stages that include: HIV diagnosis, linkage to care, retention in care, antiretroviral use, and viral suppression. The HIV care continuum provides a framework that depicts the series of stages a person with HIV engages in from initial diagnosis through their successful treatment with HIV medication. It shows the proportion of individuals living with HIV or individuals diagnosed with HIV who are engaged at each stage. The HIV care continuum allows recipients and planning groups to measure progress and to direct HIV resources most effectively.

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According to recent data from the 2016 Ryan White Services Report (RSR), the RWHAP has made tremendous progress toward ending the HIV epidemic in the U.S. From 2010 to 2016, HIV viral suppression among RWHAP patients who have had one or more medical visits during the calendar year and at least one viral load with a result of <200 copies/mL reported, has increased from 69.5 percent to 84.9 percent, and racial/ethnic, age-based, and regional disparities have decreased.\(^5\) These improved outcomes mean more PLWH in the U.S. will live near normal lifespans and have a reduced risk of transmitting HIV to others.\(^6\) In a September 27, 2017, Dear Colleague letter, CDC notes that scientific advances have shown that antiretroviral therapy (ART) preserves the health of PLWH. There is also strong evidence of the prevention effectiveness of ART. When ART results in viral suppression, it prevents sexual HIV transmission. This means that people who take ART daily as prescribed and achieve and maintain an undetectable viral load have effectively no risk of sexually transmitting the virus to an HIV-negative partner. Such findings underscore the importance of supporting effective interventions for linking PLWH into care, retaining them in care, and helping them adhere to their ART.

RWHAP recipients are encouraged to assess the outcomes of their programs along this continuum of care. Recipients should work with their community and public health partners to improve outcomes across the HIV care continuum. HRSA encourages recipients to use the performance measures developed for the RWHAP at their local level to assess the efficacy of their programs and to analyze and improve the gaps along the HIV care continuum.

II. Award Information

1. Type of Application and Award

Type of applications sought: New.

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

HRSA Program involvement will include:

- Participating in discussions regarding the adoption of technological models and tools to enhance learning engagement and successful knowledge transfer of curriculum content that will ultimately lead to improved health outcomes for PLWH;

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• Participating in the planning and coordination of meetings, including participating in the Executive/Steering Committee (if applicable) and other meeting(s), as appropriate;
• Assisting with establishing linkages between this project, other health care organizations, other web-based instructional design and delivery organizations, and HRSA-supported projects to enhance collaboration;
• Facilitating communication with HRSA programmatic and data reporting efforts;
• Reviewing project information and materials prior to dissemination;
• Facilitating the dissemination of project information;
• Reviewing conference presentations (oral, poster, roundtable, etc.) that share cooperative agreement data, activities, work products, best practices and/or lessons learned.

The cooperative agreement recipient’s responsibilities will include:
• Ensuring that the NHC e-Learning Platform is kept updated by the addition of the latest e-learning technology and teaching/knowledge transfer techniques such as micro-learning (10-15 minutes) segments, short video content, podcasts, clinical decision tree algorithms for addressing common HIV clinical presentations with links to references, etc.;
• Providing ongoing maintenance and update of the e-learning platform;
• Identifying e-learning/technology issues, and developing and implementing solutions, as appropriate;
• Ensuring and maintaining the capacity for additional curriculum content (for e.g., new modules), as requested by HRSA, to address emerging issues and/or HRSA’s priorities related to the care and treatment of PLWH;
• Collaborating with recipient of HRSA-18-110 (UW), HRSA Bureaus and other federal entities and key stakeholders as listed in the project narrative section below;
• Tracking performance outcomes, including how the output data will be collected and managed to allow for accurate and timely reporting to HRSA and for continuous project improvement;
• Contributing data and collaborating with UW to evaluate the effectiveness of the NHC e-Learning Platform as well as system-level impacts of the overall project;
• Collaborating with HRSA and AETC Program recipients, including regional and national AETCs, to carry out programmatic activities, as appropriate;
• Informing HRSA of project activities and allowing ample time to receive input and/or technical assistance;
• Attending the biennial AETC Program Administrative Reverse Site Visit meetings; and
• Attending the biennial National Ryan White Conference on HIV Care and Treatment held in the metropolitan Washington, D.C. area.

2. Summary of Funding

HRSA expects approximately $500,000 to be available annually to fund one recipient. You may apply for a ceiling amount of up to $500,000 total cost (includes both direct and indirect, facilities and administrative costs) per year. The period of performance is September 1, 2019 through August 31, 2022 (3 years). Funding beyond the first year is
subject to the availability of appropriated funds for this program in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government. HRSA may reduce recipient funding levels beyond the first year if the recipient is unable to fully succeed in achieving the goals listed in the application.

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

Eligible applicants include public and nonprofit private entities and schools and academic health science centers. Faith-based and community-based organizations, and tribes and tribal organizations are also eligible to apply.

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. 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 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 NOFO following the directions provided at http://www.grants.gov/applicants/apply-for-grants.html.
If you’re reading this notice of funding opportunity (NOFO) (also known as “Instructions” on Grants.gov) and reviewing or preparing the workspace application package, you will automatically be notified in the event HRSA changes and/or republishes the NOFO on Grants.gov before its closing date. Responding to an earlier version of a modified notice may result in a less competitive or ineligible application. Please note you are ultimately responsible for reviewing the For Applicants page for all information relevant to desired opportunities.

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 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. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) do not count 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 this notice.

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) 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 the prospective recipient is unable to attest to the statements in this certification, an explanation shall be included in Attachment 8: Other Relevant Documents.

See Section 4.1 viii of HRSA’s SF-424 Application Guide for additional information on all certifications.
Program-Specific Instructions

In addition to 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.

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 your proposed project. Clearly articulate your planned approach to managing the technological operation, maintenance, and updates to the NHC e-Learning Platform, including methods for adding content such as new modules (e.g., modules on mental illness and substance use disorder, including opioid use disorder); and/or HRSA’s priorities related to the care and treatment of PLWH. Briefly describe your planned collaboration with the award recipient of HRSA-18-110 (Enhancement and Update of the National HIV Curriculum e-Learning Platform). You should demonstrate an understanding of web-based instructional design and instructional technology.

- **NEEDS ASSESSMENT -- Corresponds to Section V’s Review Criterion #1 Need**

  Describe the need for an adequate HIV workforce in the U.S. in terms of current shortages of health care providers who are able to deliver high-quality HIV care and treatment and consequently, the need for easy access to the knowledge and skills necessary for the delivery of comprehensive care and treatment to PLWH. This section must describe gaps in access to easy, readily available, reliable, ongoing HIV care and treatment learning content for health care professionals. Articulate the need for keeping the NHC Platform current on the latest e-learning technology and the importance of having the capacity to expand the platform, as needed, to handle additional content that will keep pace with the changing HIV landscape. You should demonstrate an understanding of web-based instructional design concepts that incorporate various educational/learning theories including adult learning principles, interactive learning theory, intrinsically motivating instruction, experiential learning concepts, etc., related to developing engaging and effective learning activities based on the science of how people learn.

- **METHODOLOGY -- Corresponds to Section V’s Review Criterion #2 Response**

  Propose methods that you will use to address the stated needs and meet each of
the previously described program requirements and expectations in this NOFO. Describe any innovative methods that you will use to address the stated needs. Describe the process for identifying new strategies and effective tools for continuous maintenance and improvements of the NHC e-Learning Platform to keep pace with the changing HIV landscape and the latest trends in e-learning technology.

Propose a strategy to track and analyze performance outcomes, including how output data will be collected and managed to allow for accurate and timely reporting to HRSA, and for continuous project improvement. Describe how you will collaborate with UW to evaluate the effectiveness of the NHC e-Learning Platform as well as system-level impact of the overall project.

Discuss your plan for expanding the platform to include additional content as listed in the purpose of the NOFO. Describe your plan for collaboration with UW, HRSA-18-110 award recipient (Enhancement and Update of the National HIV Curriculum e-Learning Platform), HRSA’s Bureau of Primary Health Care, Bureau of Health Workforce, Federal Office of Rural Health Policy, Office of Regional Operations, other RWHAP, such as the Special Projects of National Significance (SPNS) Program, other federal entities, and key stakeholders including the Substance Abuse and Mental Health Services Administration’s Addiction Technology Transfer Centers, National Institute on Drug Abuse, HIV/STD Prevention Training Centers, Primary Care Associations, Viral Hepatitis Education and Training Projects, Center for Rural Development, and Office of the National Coordinator for Health Information Technology. This section should help reviewers understand how you will collaborate with other entities to continuously maintain and improve the NHC e-Learning Platform.

Discuss your organization’s cybersecurity policies and programs to protect your systems, networks, and data. Also, provide a detailed plan for adherence to current information technology (IT) related legislation, including Office of Management and Budget and National Institute of Standards and Technology policy and/or guidance on IT security and disability access.

Also, include in this section a plan to disseminate reports, products, and/or project outputs so that key target audiences receive the project information.

- **WORK PLAN -- Corresponds to Section V’s Review Criteria # 2 Response and # 4 Impact**

Provide a comprehensive work plan that is tied to the needs identified in the needs assessment and to the activities described in the project narrative and purpose of the NOFO. Describe the activities or steps that you will use to achieve each of the objectives proposed in the Methodology section during the entire period of performance. Use a timeline that includes each activity and identifies responsible staff. As appropriate, identify meaningful support and collaboration with key stakeholders in planning, designing, and implementing all activities.
The work plan and timeline must demonstrate the ability to reach stated program objectives within the required time of performance, including a plan for rapid launch of project activities that includes full implementation. The work plan should specifically include:

- Innovative approaches or strategies to provide a dynamic and interactive learning experience;
- Methods to keep the site flexible enough to rapidly update and deploy relevant training information to users in response to the changing HIV epidemic/landscape;
- The latest trends in e-learning technology that will be used to improve the platform;
- How technical issues/problems (fixing bugs, security patches, etc.) will be addressed to keep the website up-to-date, stable and secure;
- Methods to enhance learning engagement and promote successful uptake/transfer of knowledge;
- How you will support the NHC e-Learning Platform in a way that leads to increased numbers of qualified novice and experienced HIV care and treatment providers and potential providers across the U.S.;
- How you will improve availability and easy access to HIV care and treatment training and information;
- The degree to which project activities are replicable;
- A description of strategies, activities and action steps that will be used for all aspects of the project, including planning, implementation, and evaluation;
- Goals, objectives, and outcomes that are specific, measureable, achievable, realistic, and time-measured (SMART);
- An evaluation of the overall project and its ability to achieve the program’s goals and objectives;
- The specific action steps, key staff responsible, and timeline for completion for each activity.

The work plan should include as much detail as possible with the understanding that you will finalize the plan after HRSA awards the cooperative agreement and after initial consultations with HRSA. Include the project’s work plan in **Attachment 1**. Please use a chart or table format to present and/or summarize the work plan.

In addition to the work plan, you must submit 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 program elements. While there are many versions of logic models, for the purposes of this notice, the logic model should summarize the connections between the:

- Goals of the project (e.g., objectives, reasons for proposing the intervention, 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 staff, budget, other resources);
• Target population (e.g., the individuals to be served);
• Activities (e.g., approach, listing key intervention, if applicable);
• Outputs (i.e., the direct products or deliverables of program activities); and
• Outcomes (i.e., the results of a program, typically describing a change in people or systems).

You can find additional information on developing logic models at the following website: https://www.cdc.gov/eval/tools/logic_models/index.html

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. You can find information on how to distinguish between a logic model and work plan at the following website: http://www.cdc.gov/healthyyouth/evaluation/pdf/brief5.pdf

• RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criterion # 2 Response

Discuss challenges you are likely to encounter in designing and implementing the activities described in the work plan and describe specific approaches that you will use to resolve identified challenges

• EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criteria # 3 Evaluative Measures and # 5 Resources/Capabilities

Describe the plan for the program performance evaluation that will contribute to continuous quality improvement. The program performance evaluation should monitor ongoing processes and the progress towards the goals and objectives of the project. Include descriptions of the inputs (e.g., organizational profile, collaborative partners, key staff, budget, and other resources), key processes, and expected outcomes of the funded activities.

You must describe the systems and processes that will support your organization's performance management requirements through effective tracking of performance outcomes, including a description of how your organization 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.

Describe current experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature. As appropriate, describe the data collection strategy to collect, analyze and track data to measure process and impact/outcomes, and explain how you will use the data to enhance and expand the NHC e-Learning Platform. Provide all proposed outcomes, including methods and timelines for assessing these outcomes. Describe any potential obstacles for implementing the program performance evaluation and your plan to address those obstacles.
ORGANIZATIONAL INFORMATION -- Corresponds to Section V’s Review Criterion # 5 Resources/Capabilities

Succinctly describe your organization’s current mission and structure, scope of current activities, and how these elements all contribute to your organization’s ability to conduct the program requirements and meet program expectations. Include an organizational chart. Describe your organization’s experience with learning methodologies including web-based instructional design, authoring tools, and your ability to design and develop micro-learning activities. Discuss how your organization will follow the approved plan, as outlined in the application, properly account for the federal funds, and document all costs to avoid audit findings. Describe the role of key partners in the project’s planned approach and provide a memorandum of understanding (MOU) or letter of agreement for each identified partner (Attachment 4). You may submit one memorandum signed by multiple partners if the entities share the same arrangement with your organization.

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.

<table>
<thead>
<tr>
<th>Narrative Section</th>
<th>Review Criteria</th>
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<tbody>
<tr>
<td>Introduction</td>
<td>(1) Need</td>
</tr>
<tr>
<td>Needs Assessment</td>
<td>(1) Need</td>
</tr>
<tr>
<td>Methodology</td>
<td>(2) Response</td>
</tr>
<tr>
<td>Work Plan</td>
<td>(2) Response and (4) Impact</td>
</tr>
<tr>
<td>Resolution of Challenges</td>
<td>(2) Response</td>
</tr>
<tr>
<td>Evaluation and Technical Support Capacity</td>
<td>(3) Evaluative Measures and</td>
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<td>(5) Resources/Capabilities</td>
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<tr>
<td>Organizational Information</td>
<td>(5) Resources/Capabilities</td>
</tr>
<tr>
<td>Budget and Budget Narrative</td>
<td>(6) Support Requested – the budget section should include sufficient justification to allow reviewers to determine the reasonableness of the support requested.</td>
</tr>
</tbody>
</table>

iii. Budget

See Section 4.1.iv of HRSA’s SF-424 Application Guide. Please note: the directions offered in the SF-424 Application Guide may differ from those offered by Grants.gov. Follow the instructions included in the 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 can avoid audit issues during the
implementation phase.

Your budget should include costs associated with attendance at the biennial AETC Program Administrative Reverse Site Visit meetings and the biennial National Ryan White Conference on HIV Care and Treatment in Washington, D.C.

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

The Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019 (P.L. 115-245), Division B, § 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 FY, as required by law.

**iv. Budget Narrative**

See Section 4.1.v. of HRSA’s *SF-424 Application Guide*.

**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. You must clearly label each attachment.

**Attachment 1: Work Plan**

Attach the work plan for the project that includes all information detailed in Section IV. ii. Project Narrative. Also, include the required logic model in this attachment. 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. Include the role, responsibilities, and qualifications of proposed project staff. 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 Agreement, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts (project-specific)

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.

Attachment 6: Tables, Charts, etc.

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

Attachment 7: Request for Funding Preference or Priority

To receive a funding preference, include a statement that you are eligible for a funding preference and identify the preference. Include documentation of this qualification. See Section V.2.

Attachments 8 – 10: Other Relevant Documents (as applicable)

Include here any other documents that are relevant to the application, including letters of support. Letters of support must be dated and specifically indicate a commitment to the project/program (in-kind services, dollars, staff, space, equipment, etc.).

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

You must obtain a valid DUNS number, also known as the Unique Entity Identifier, for your organization/agency and provide that number in the 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 the applicant is an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the agency under 2 CFR § 25.110(d)).

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

If 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 (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.

**UPDATED 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. Read the updated FAQs to learn more.

**SAM.gov** is experiencing high volume and delays. If you have tried to create or update your SAM.gov registration but have not been able to complete the process, you may not be able to apply for a HRSA funding opportunity via Grants.gov in a timely manner prior to the application deadline. If so, please email DGPwaivers@hrsa.gov, per the instructions in Section 3.6 of your HRSA Application Guide.

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

4. Submission Dates and Times

**Application Due Date**
The due date for applications under this NOFO is January 30, 2019 at 11:59 p.m. Eastern Time. HRSA suggests submitting applications to Grants.gov at least 3 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

This program is 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 3 years, at no more than $500,000 per year (inclusive of direct and indirect costs).

Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project’s objectives, and a determination that continued funding would be in the best interest of the Federal Government.
The General Provisions in Division B of the Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019 (P.L. 115-245) 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 the following FY, as required by law.

You may not use funds under this notice for the following purposes:

- International HIV/AIDS training activities;
- Payment for any item or service to the extent that payment has been made (or reasonably can be expected to be made), with respect to that item or service, under any state compensation program, insurance policy, federal or state benefits program, or any entity that provides health services on a prepaid basis (except for a program administered by or providing the services of the Indian Health Service);
- Cash payment to intended recipients of RWHAP services;
- Clinical quality management;
- International travel;
- Construction (minor alterations and renovations to an existing facility to make it more suitable for the purposes of the award program are allowable with prior HRSA approval);
- HIV test kits;
- Syringe Services Programs (SSPs). Some aspects of SSPs are allowable with HRSA's prior approval and in compliance with HHS and HRSA policy;
- Development of materials designed to directly promote or encourage intravenous drug use or sexual activity, whether homosexual or heterosexual;
- Pre Exposure Prophylaxis (PrEP) medications and related medical services or Post-Exposure Prophylaxis (PEP), as the person using PrEP or PEP is not living with HIV and therefore not eligible for RWHAP funded medication.

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.

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.

V. Application Review Information

1. Review Criteria

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

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

Review criteria are used to review and rank applications. This program has six review criteria:

Criterion 1: NEED (15 points) – Corresponds to Section IV’s Introduction and Needs Assessment. The extent to which the application demonstrates the problem and associated contributing factors to the problem. Reviewers will also consider the extent to which the applicant:

- Demonstrates a thorough understanding of HIV workforce capacity gaps in the United States and articulates a thorough understanding of the need for easily accessible HIV-related education and training for current and future health care professionals;
- Describes gaps in capacity to deliver quality, ongoing HIV content to health care professionals;
- Describes the need for providing easy access to the knowledge and skills needed for the delivery of comprehensive care and treatment to PLWH;
- Articulates the need for keeping the NHC Platform current on the latest e-learning technology and the importance of having the capacity to expand the platform to handle additional modules and/or content to address emerging issues and/or HRSA’s priorities related to the care and treatment of PLWH;
- Demonstrates an understanding of web-based instructional design concepts and education/learning theories related to developing engaging and effective learning activities based on the science of how people learn;

Criterion 2: RESPONSE (35 points) – Corresponds to Section IV’s Methodology and Work Plan. The extent to which the proposed project responds to the “Purpose” included in the program description, the strength of the proposed goals and objectives and their relationship to the project and the extent to which the activities described in the application are capable of addressing the problem and attaining the project objectives. Reviewers will also consider the extent to which the applicant:

- Clearly proposes methods to address the stated needs and meet each of the previously described program requirements and expectations in this NOFO and the extent to which the application includes a description of any innovative methods that will be used to address the stated needs;
- Proposes effective tools and strategies for the technological operations and maintenance of NHC eLearning Platform and the plan for expanding the platform to include modules on mental health and substance use disorders, including opioid abuse, in PLWH, etc.;
- Describes the activities or steps that will be used to achieve each of the objectives proposed during the entire period of performance in the Methodology section;
• Describes the plan for collaboration with HRSA’s award recipient of HRSA-18-110 (UW), other HRSA and federal entities and key stakeholders in planning, designing, and implementing all activities;
• Describes the organization’s cybersecurity policies and programs to protect their systems, networks, and data;
• Provides a detailed plan for adherence to current information technology (IT) related legislation, including Office of Management and Budget and National Institute of Standards and Technology policy and/or guidance on IT security, and disability access;
• Describes proposed methods for collecting, analyzing, and tracking data to measure process and impact/outcomes and how the data will be used to enhance and expand the NHC Platform;
• Describes how the project will effectively track performance outcomes, including how the output data will be collected and managed in a way that allows for accurate and timely reporting to HRSA;
• Describe how you will contribute data and collaborate with UW to evaluate the effectiveness of the NHC e-Learning Platform as well as system-level impacts of the overall project.

The reviewers will also consider the extent to which:
• The work plan and timeline demonstrate the ability to reach the stated program objectives within the required time of performance;
• The work plan specifically addresses the following:
  o Innovative approaches or strategies to provide a dynamic and interactive learning experience;
  o Methods to keep the site flexible enough to rapidly update and deploy relevant training information to users in response to the changing HIV epidemic/landscape;
  o The latest trends in e-learning technology that will be used to improve the platform;
  o How technical issues/problems (fixing bugs, security patches, etc.) will be addressed to keep the website up-to-date, stable and secure.
  o Methods to enhance learning engagement and promote successful uptake/transfer of knowledge and;
  o Methods to add more interactive content.
• The applicant describes the expected work plan for the entire project period including:
  o Description of strategies, activities and action steps that will be used for all aspects of the project, including planning, implementation, and evaluation;
  o Goals, objectives, and outcomes that are SMART;
  o Evaluation of the overall project and its ability to achieve the program’s goals and objectives;
  o Identifying for each activity the specific action steps, key staff responsible, and timeline for completion;
• The extent to which the logic model summarizes the connections between the:
  o Goals of the project (e.g., objectives, reasons for proposing the intervention, 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 staff, budget, other resources);

Target population (e.g., the individuals to be served);

Activities (e.g., approach, listing key intervention, if applicable);

Outputs (i.e., the direct products or deliverables of program activities); and

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

The extent to which the applicant articulates likely challenges to be encountered, and describes logical approaches to resolving such challenges;

The extent to which the applicant includes a plan to disseminate reports, products, and/or project outputs so key target audiences receive the project information.

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

The strength and effectiveness of the method proposed to monitor and evaluate the project results. Evidence that the evaluative measures will be able to assess to what extent the program objectives have been met and can be attributed to the project.

The reviewer will also consider:

- The extent to which the application clearly describes the plan for the program performance evaluation that will contribute to continuous quality improvement by monitoring ongoing processes and the progress towards the goals and objectives of the project;
- The strength of the proposed strategy to collect, analyze, and track data to measure process and impact/outcomes and how the data will be used to enhance and expand the NHC e-Learning Platform;
- The extent to which the application includes descriptions of the inputs (e.g., organizational profile, collaborative partners, key staff, budget, and other resources), key processes, and expected outcomes of the funded activities;
- The strength of the applicant’s proposed methods and measures that will be used to evaluate the system-level impacts of the overall project. This will be done in collaboration with UW;
- The extent to which the applicant demonstrates a thorough understanding of any potential obstacles for implementing the project performance evaluation, and the strength of the proposed plans to address those obstacles;
- The extent to which the applicant clearly describes current experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature;
- The extent to which the applicant demonstrates strength and effectiveness to monitor and evaluate project objectives, activities, and results through the proposed evaluation strategy;
- The extent to which the program will effectively track performance outcomes,
including how the output data will be collected and managed in a way that allows for accurate and timely reporting to HRSA.

**Criterion 4: IMPACT (15 points) – Corresponds to Section IV’s Work Plan**
The extent to which the proposed project has a public health impact and the project will be effective, if funded. This may include:
- Support to the NHC e-Learning Platform leading to increased numbers of qualified novice and experienced HIV care and treatment providers, and potential providers across the U.S.;
- Improved availability and easy access to HIV care and treatment training and information;
- Degree to which the project activities are replicable.

**Criterion 5: RESOURCES/CAPABILITIES (10 points) – Corresponds to Section IV’s Evaluation and Technical Support Capacity, Organizational Information**
- The extent to which project personnel are qualified by training and/or experience to implement and carry out the project;
- The capabilities of the applicant organization and the quality and availability of facilities and personnel to fulfill the needs and requirements of the proposed project;
- The strength and clarity of the proposed staffing plan (Attachment 2) and project organizational chart (Attachment 5) in relation to the project description and proposed activities; including evidence that the staffing plan includes sufficient personnel with adequate time to successfully implement all of the project activities throughout the project as described in the work plan;

**Criterion 6: SUPPORT REQUESTED (10 points) – Corresponds to Section IV’s Budget and Budget Narrative**
The reasonableness of the proposed budget for each year of the period of performance in relation to the objectives, the complexity of the research activities, and the anticipated results.
- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work;
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives;
- The extent to which the costs in the proposed budget and budget narrative align with the proposed project work plan, and are justified as adequate, cost-effective, and reasonable for the resources requested;
- The strength and clarity of the budget narrative that fully explains each line item and any significant changes from one budget period to the next.
2. Review and Selection Process

The independent 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.

Funding Preferences

This program provides a funding preference for some applicants, as authorized by Section 2692(a)(2) of the Public Health Service Act. Applicants receiving the preference will be placed in a more competitive position among applications that can be funded. Applications that do not receive a funding preference will receive full and equitable consideration during the review process. The Objective Review Committee will determine the funding factor and will grant it to any qualified applicant that specifically requests and demonstrates that they meet the criteria for preference(s) as follows:

HRSA shall give preference to qualified projects that:

- Train, or result in the training of, health professionals, who will provide treatment for minority individuals and Native Americans with HIV/AIDS and other individuals who are at high risk of contracting such disease;
- Train, or result in the training of, minority health professionals and minority allied health professionals to provide treatment for individuals with such disease; and
- Train, or result in the training of, health professionals and allied health professionals to provide treatment for hepatitis B or C co-infected individuals.

3. Assessment of Risk and Other Pre-Award Activities

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.
Effective January 1, 2016, HRSA is required to review and consider any information about your organization that is in the Federal Awardee Performance and Integrity Information System (FAPIIS). You may review and comment on any information about your organization that a federal awarding agency previously entered. HRSA will consider any of your comments, in addition to other information in FAPIIS, in making a judgment about your organization’s integrity, business ethics, and record of performance under federal awards when completing the review of risk posed as described in 45 CFR § 75.205 HHS Awarding Agency Review of Risk Posed by Applicants.

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

VI. Award Administration Information

1. Award Notices

HRSA will issue the Notice of Award prior to the start date of September 1, 2019. 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.

Requirements of Subawards

The terms and conditions in the Notice of Award (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. See 45 CFR § 75.101 Applicability for more details.

3. Reporting

Award recipients must comply with Section 6 of HRSA’s SF-424 Application Guide and the following reporting and review activities:

1) Progress Report(s). The recipient must submit a progress report to HRSA on a biannual basis. Among other items, the report will ask for progress against program activities and outcomes proposed in the application. Further information will be available in the award notice.

2) Integrity and Performance Reporting. The Notice of Award will contain a provision for integrity and performance reporting in FAPIIS, as required in 45 CFR part 75 Appendix XII.
VII. Agency Contacts
You may request additional information and/or technical assistance regarding business, administrative, or fiscal issues related to this NOFO by contacting:

Nancy Gaines
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
5600 Fishers Lane, Mailstop 10SWH03
Rockville, MD 20857
Telephone: (301) 443-5382
Email: NGaines@hrsa.gov

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

Sherrillyn Crooks
Chief, HIV Education Branch
Office of Training and Capacity Development
HIV/AIDS Bureau
Health Resources and Services Administration
5600 Fishers Lane, Room 9N110
Rockville, MD 20857
Telephone: (301) 443-7662
Fax: (301) 443-2697
Email: scrooks@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: support@grants.gov

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 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

**Logic Models**


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 information on how to distinguish between a logic model and work plan at the following website: [http://www.cdc.gov/healthyyouth/evaluation/pdf/brief5.pdf](http://www.cdc.gov/healthyyouth/evaluation/pdf/brief5.pdf).

**Technical Assistance**

HRSA has scheduled following technical assistance webinar:

Day and Date: Monday, November 19, 2018  
Time: 2 – 3:30 p.m. ET  
Call-In Number: 1-888-913-9971  
Participant Code: 3646287  
Weblink: [https://hrsa.connectsolutions.com/ta_nhc_technology_nofo/](https://hrsa.connectsolutions.com/ta_nhc_technology_nofo/)

Playback Number: 1- 800-778-9714  
Passcode: 3255

**Tips for Writing a Strong Application**

See Section 4.7 of HRSA’s [SF-424 Application Guide](https://hrsa.gov).