

U.S. Department of Health and Human Services



Health Resources & Services Administration

Bureau of Health Workforce

National Center for Health Workforce Analysis

Health Workforce Research Center Cooperative Agreement Program

Funding Opportunity Number: HRSA-22-054

Funding Opportunity Type(s): New, Competing Continuation

Assistance Listings (AL/CFDA) Number: 93.300

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2022

Application Due Date: April 14, 2022

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

HRSA will not approve deadline extensions for lack of registration.

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

Issuance Date: January 14, 2022

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

Authority: 42 U.S.C. § 300u-2 (Section 1703 of the Public Health Service Act): Public Health Workforce; 42 U.S.C. § 290bb-2, §290bb-22, §290bb-32 (Section 509, 516, 520A of the Public Health Service Act): Behavioral Health Workforce; 42 U.S.C. § 294n(c) (Section 761(c) of the Public Health Service Act): Health Equity in the Health Workforce, Allied Health Workforce, Long-Term Care Support and Services, Oral Health Workforce, Emerging Health Workforce Topics, and Technical Assistance).

508 COMPLIANCE DISCLAIMER

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

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for the Fiscal Year (FY) 2022 Health Workforce Research Center (HWRC) Cooperative Agreement Program. The purpose of this program is to support and disseminate rigorous research that strengthens evidence-based policy and enhances understanding of issues and trends in the health workforce.

Pending available funding, HRSA anticipates that up to nine (9) HWRC cooperative agreements will be funded under this notice:

- One (1) HWRC will focus on the public health workforce. HRSA expects that this HWRC will be jointly funded by Centers for Diseases Control and Prevention (CDC) and HRSA, and administered by HRSA.
- One (1) HWRC will focus on the behavioral health workforce. HRSA expects that this HWRC will be funded solely by the Substance Abuse and Mental Health Services Administration (SAMHSA) and administered by HRSA.
- One (1) HWRC will focus on health equity in the health workforce. HRSA expects that this HWRC will be funded and administered solely by HRSA.
- One (1) HWRC will focus on the allied health workforce. HRSA expects that this HWRC will be funded and administered solely by HRSA.
- One (1) HWRC will focus on long-term care support and services. HRSA expects that this HWRC will be funded and administered solely by HRSA.
- One (1) HWRC will focus on the oral health workforce. HRSA expects that this HWRC will be funded and administered solely by HRSA.
- Two (2) HWRCs will focus on emerging health workforce topics. HRSA expects that these two HWRCs will be funded solely and administered by HRSA.
- One (1) technical assistance HWRC. HRSA expects that this HWRC will be funded solely and administered by HRSA.

Funding Opportunity Title:	Health Workforce Research Center Cooperative Agreement Program
Funding Opportunity Number:	HRSA-22-054
Due Date for Applications:	April 14, 2022
Anticipated Total Annual Available FY 2022 Funding:	\$4,950,000
Estimated Number and Type of Award(s):	Up to nine (9) cooperative agreements
Estimated Annual Award Amount:	Behavioral Health Workforce, up to \$900,000 per year; Public Health Workforce, up to \$900,000 per year; All others, up to \$450,000 per year Subject to the availability of appropriated funds.
Cost Sharing/Match Required:	No
Period of Performance:	September 1, 2022 through August 31, 2027 (5 years)
Eligible Applicants:	Eligible applicants include: a State; a State workforce investment board; a public health or health professions school; an academic health center; Indian tribes or tribal organizations; or other public or private nonprofit entity. 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 R&R Application Guide*, available online at <http://www.hrsa.gov/grants/apply/applicationguide/sf424rrguidev2.pdf>, except where instructed in this NOFO to do otherwise.

Technical Assistance

HRSA will hold a pre-application technical assistance (TA) webinar for applicants seeking funding through this opportunity. The webinar will provide an overview of

pertinent information in the NOFO and an opportunity for applicants to ask questions. Visit the HRSA Bureau of Health Workforce's open opportunities website at <https://bhw.hrsa.gov/fundingopportunities/default.aspx> to learn more about the resources available for this funding opportunity.

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I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity to apply for funding under the Health Workforce Research Center (HWRC) Cooperative Agreement Program. Under this notice, applications are being sought for up to nine (9) separate HWRCs:

- One (1) HWRC focusing on the Public Health Workforce will be funded jointly by the Centers for Diseases Control and Prevention (CDC) under Section 1703 (42 USC 300u-2) of the Public Health Service (PHS) Act and by HRSA under 42 U.S.C. § 294n(c) (Section 761(c) of the PHS Act). The Public Health Workforce Research Center program will be administered by HRSA with guidance and direction given by both CDC and HRSA.
- One (1) HWRC focusing on the Behavioral Health Workforce will be solely funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) under 42 U.S.C. §290bb-2, §290bb-22, §290bb-32 (Sections 509, 516, and 520A of the PHS Act). The Behavioral Health Workforce Research Center program will be administered by HRSA with guidance and direction given by both SAMHSA and HRSA.
- Seven (7) HWRCs focusing on Health Equity in the Health Workforce (1), Allied Health Workforce (1), Long-Term Care Support and Services (1), Oral Health Workforce (1), Emerging Health Workforce Topics (2), and Technical Assistance (TA) (1) will be funded and administered by HRSA under 42 U.S.C. § 294n(c) (Section 761(c) of the PHS Act).

Program Purpose

The purpose of the HWRC Cooperative Agreement Program is to support and disseminate rigorous and state-of-the-art applied research that strengthens evidence-based policy and enhances the Federal Government's and the public's understanding of issues and trends in the health workforce. In this way, the HWRC projects inform health workforce planning and policy at all levels.

Program Goals

The goals of this program are to:

- Collect, analyze, and disseminate health workforce program data to the National Center for Health Workforce Analysis and to the public; and
- Provide TA to local and regional entities on the collection, analysis, and reporting of health workforce data.

[For more details, see Program Requirements and Expectations.](#)

General Emergency Preparedness Statement

Eligible entities must be ready to continue programmatic activities in the event of a public health emergency – both those that are expected and unexpected. A training-focused emergency preparedness plan is critical for HRSA-funded projects and helps ensure that recipients are able to continue programmatic activities, can coordinate effectively, and can implement recovery plans when emergencies disrupt project activities. You must develop and maintain a flexible training-focused emergency preparedness plan in case of public health emergencies to ensure continuation of programmatic and training activities.

2. Background

The HWRC Cooperative Agreement Program is authorized by 42 U.S.C. § 294n(c) (PHS Act section 761(c)). This program provides funding to eligible entities for the purposes of conducting and disseminating research on health workforce topics related to the PHS Act's Title VII programs. Findings from HWRC-funded projects help to inform health workforce educators, planners, and policy makers, as well as the National Center for Health Workforce Analysis (NCHWA) within HRSA, and other audiences interested in health workforce issues.

The entire HWRC program will be implemented and managed by NCHWA. With funding provided by CDC to support the Public Health Workforce Research Center and by SAMHSA to support the Behavioral Health Workforce Research Center, CDC and SAMHSA are expected to participate in annual project selection process, participate in routine project meetings, and maintain regular contact with HRSA for their respective centers to ensure the research direction and projects align with agency priorities.

NCHWA oversees and conducts evidence-based research and evaluation initiatives that support informed public/private sectors' decision making on a broad range of issues around the U.S. health care and health support workforce.

HRSA seeks to improve the health of the nation's underserved communities and vulnerable populations by developing, implementing, evaluating, and refining programs that strengthen the nation's health workforce and connect skilled health professionals to communities in need. HRSA's programs holistically support a diverse, culturally competent workforce by addressing:

- Education and training
- Recruitment and retention
- Financial support for students, faculty, practitioners, and supporting institutions

- Health workforce data collection and analysis
- Evaluation and coordination of health workforce activities

The Public Health HWRC is authorized through CDC authority, by section 1703 (42 USC 300u-2) of the PHS Act and by HRSA authority under 42 U.S.C. § 294n(c) (Section 761(c) of the PHS Act). Because the Public Health HWRC is a joint initiative between CDC and HRSA, it receives guidance and direction from both CDC and HRSA. CDC is the agency within the U.S. Department of Health and Human Services (HHS) that protects the public health of the nation by providing leadership and direction in the prevention and control of diseases and other preventable conditions and responding to public health emergencies. CDC addresses the health of our population through:

- Detecting and responding to new and emerging health threats
- Tackling the biggest health problems causing death and disability for Americans
- Putting science and advanced technology into action to prevent disease
- Promoting healthy and safe behaviors, communities, and environment
- Developing leaders and training the public health workforce, including disease detectives

The Behavioral Health HWRC is authorized by 42 U.S.C. §290bb-2, §290bb-22, §290bb-32 (Sections 509, 516, and 520A of the PHS Act). Because the Behavioral Health HWRC is a joint initiative between SAMHSA and HRSA, it receives guidance and direction from both SAMHSA and HRSA. SAMHSA is the agency within HHS that leads public health efforts to address the behavioral health needs of the nation. Its mission is to reduce the impact of mental illness and substance use disorders on America's communities. SAMHSA provides national leadership in promoting the provision of quality behavioral health services and works to address mental illness and substance use disorders through:

- Increasing awareness and understanding
- Strengthening prevention
- Improving access to care and the quality of evidence-based treatments
- Supporting recovery

NCHWA oversees and conducts evidence-based research and evaluation initiatives that support informed public/private sectors decision-making on broad range of issues around the U.S. health care and health support workforce.

Currently, nine HWRCs are funded through August 31, 2022. These nine HWRCs focus on a range of topics, including the behavioral health workforce, health equity in the

health workforce, allied health workforce, long-term care support and services, oral health workforce, emerging health workforce topics, and TA related to the health workforce. Information about the work supported through the current HWRC cooperative agreements is available via HRSA's HWRC's website: <http://bhw.hrsa.gov/healthworkforce/researchcenters/index.html>.

Program Priorities

Under this notice, the award(s) will provide support for the establishment of up to nine (9) HWRCs. Successful applicants will demonstrate broad, national-level research expertise in one of the following HWRC topic areas:

- 1) Public Health Workforce.¹ The successful recipient in this topic area will produce research projects focused on:
 - a. Evaluating the role(s) of public health occupations in delivering programs, including essential or foundational public health services, across populations.
 - b. Investigating public health workforce composition, data, needs, sufficiency, and distribution including both governmental (i.e., federal, state, local, tribal, territorial) and non-governmental entities.
 - c. Assessing public health workforce development methods including but not limited to recruitment and training models and the outlook and analytics for workforce needs.
 - d. Conducting and evaluating public health workforce implementation scientific research, including identifying evidence-informed strategies and interventions.
- 2) Behavioral Health Workforce. The successful recipient in this topic area will produce research projects focused on:
 - a. Evaluating disparities in behavioral health occupations as it related to reducing disparities in mental illness and/or substance use disorders across populations.
 - b. Investigating behavioral health workforce composition, data (including but not limited to data held by SAMHSA), needs, sufficiency, distribution, and the integration of behavioral and physical health workforces.

¹ CDC Public Health Workforce Development Action Plan <https://www.cdc.gov/csels/dsepd/strategic-workforce-activities/ph-workforce/action-plan.html>

- c. Assessing service delivery methods, including but not limited to models of care (e.g., Certified Community Behavioral Health Clinics, Partial Hospitalization Programs, Crisis Response), and reimbursement issues.
- 3) Health Equity in the Health Workforce. The successful recipient in this topic area will conduct research to examine a range of issues related to health equity in health workforce education and training. This may include, but not be limited to: assessing the incorporation of health equity across various health workforces, developing health equity metrics, and evaluating the role of health equity in improving health care delivery (in respect to factors such as access to primary care; provider shortages; integration of primary, behavioral and oral health care; workforce diversity). The encompassing goal of this Center's research will be to strengthen the evidence base for effective education and training programs that can enable and empower a health workforce capable of fostering health equity.
- 4) Allied Health Workforce. The successful recipient in this topic area will conduct research to examine a range of issues related to the allied health workforce.
- 5) Long-Term Care Support and Services. The successful recipient in this topic area will conduct research to examine a range of health workforce issues related to long-term care support and services.
- 6) Oral Health Workforce. The successful recipient in this topic area will conduct research to examine a range of issues related to the oral health workforce.
- 7) Emerging Health Workforce Topics. The successful applicants in this topic area will conduct research on any number of emerging topics related to the PHS Act's Title VII programs. Examples of emerging topics include: the use of health information technology (HIT) by the health workforce to deliver care to underserved and rural communities; workforce characteristics and competencies needed to provide care for special populations (e.g., the aging population; Medicaid beneficiaries in underserved and rural communities; dual eligible beneficiaries (individuals who qualify for both Medicare and Medicaid benefits); Impact of the COVID-19 pandemic on the healthcare workforce). Other emerging topic(s) may be suggested by the applicant.
- 8) Technical Assistance. TA to national, regional, state, and local entities on the collection, analysis, and reporting of health workforce data and research. The Center is also expected to serve as a liaison to enhance collaboration and research dissemination for health workforce research communities and other stakeholders.

In addition to selecting one of the above topic areas, all HWRC recipients should include aspects related to health equity in all studies and projects when it is scientifically, methodologically, and topically appropriate. Promoting equity is essential

to the HHS's mission of protecting the health of Americans and providing essential human services. This view is reflected in Executive Order (E.O.) 13985 entitled Advancing Racial Equity and Support for Underserved Communities Through the Federal Government (Jan. 20, 2021). Health equity is the consistent and systematic fair, just, and impartial treatment of all individuals, including individuals who belong to underserved communities that have been denied such treatment, such as Black, Latino, Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality. Applicants should have an understanding of intersectionality and how multiple forms of discrimination impact individuals' lived experiences. Individuals and communities often belong to more than one group that has been historically underserved, marginalized, or adversely affected by persistent poverty and inequality. Individuals at the nexus of multiple identities often experience unique forms of discrimination or systemic disadvantages, including in their access to needed services.

Other Guidance

Consortium Model (OPTIONAL)

To ensure that your HWRC will have the necessary breadth to comprehensively address a wide range of issues related to your selected HWRC topic area (from [Section I.1](#) of this notice), you may propose to utilize a consortium model. Under a consortium model, members of your consortium would represent a purposeful group of organizations and staff who will work together on research studies related to your selected HWRC topic area. Funds must be used in accordance with Section III Eligibility Information, and Section VI Award Administration Information.

If you propose to utilize a consortium model, all members of your consortium must meet the eligibility requirements listed in [Section III.1](#) of this notice. Also, if you are proposing to use a consortium model, your application must include a memorandum of understanding (MOU) from each anticipated consortium partner. In developing these MOUs, please recognize that the successful HWRC applicant will be ultimately responsible for the quality and accuracy of all research submitted to the Federal Government; supervision and administrative activities; and overall management of federal funds awarded under this NOFO.

Partnership (OPTIONAL)

You may propose to partner with other stakeholders, including foundations, public organizations, and private organizations who will work with you to conduct and disseminate research related to your selected HWRC topic area from [Section I.1](#) of this notice.

Partners do not need to meet the eligibility requirements listed in Section III.1 of this notice. However, if you do elect to partner with a foundation or organization that is engaged in work related to your selected HWRC topic area, you must describe how the partnership will strengthen the conduct and dissemination of your research. HRSA funding must not be distributed to the partner organizations, either directly or as a sub-award.

Program Definitions

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

II. Award Information

1. Type of Application and Award

Type(s) of applications sought: New, Competing Continuation

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

HRSA program involvement will include:

- Managing all pre-award, award, and post-award HWRC program administration activities.
- Participating in the planning and development of each HWRC's annual research portfolio and in the selection of each HWRC's annual research studies. The annual project selection will be in consultation with the CDC and SAMHSA for the Public Health Workforce Research Center and the Behavioral Health Workforce Research Center, respectively.
- Reviewing, and, if necessary, commenting on each HWRC's plans and methodologies presented in their study proposals. The project review process will be in consultation with the CDC and SAMHSA for the Public Health Workforce Research Center and the Behavioral Health Workforce Research Center, respectively.
- Reviewing each HWRC's work products, including each study's methodology, analysis, results, policy implications, and format, prior to public dissemination.
- Providing consultation, as appropriate, to each HWRC to design strategies for disseminating HWRC work in order to target multiple audiences interested in

health workforce issues. Dissemination products may include policy briefs; peer-reviewed journal articles; invited presentations; responses to inquiries from health policy programs and health policy researchers; webinars; presentations at national, regional, state, and local conferences; and other appropriate vehicle(s) for sharing rigorous, policy-oriented research.

The cooperative agreement recipient's responsibilities will include:

- Adhering to HRSA guidelines pertaining to acknowledgement and disclaimer on all products produced by HRSA award funds, per Section 1.2 of the R&R Application Guide (Acknowledgement of Federal Funding).
- Establishing and maintaining effective working relationships with other HRSA-funded HWRCs as well as with health workforce stakeholders. For Public Health and Behavioral Health Workforce Research Centers, this includes CDC and SAMHSA, respectively.
- Submitting project proposals with relevant timelines and milestones to the NCHWA Project Officer (PO) for review.
 - For the recipient of the Technical Assistance HWRC, the proposals should include TA initiatives or projects related to the research community and/or local and regional entities on the collection, analysis, and reporting of health workforce data and research.
- Conducting studies/projects, and synthesizing the results into reports or other work products developed for both technical and non-technical audiences.
- Participating in the planning and development of the HWRC's annual project portfolio and in the final selection of studies/projects with HRSA. CDC and SAMHSA will provide guidance and direction for their respective centers during this process.
- Preparing and submitting a 250-word abstract and a 2-page brief for each completed study/project in addition to the study's primary work product(s) (e.g., full policy brief, report, journal manuscript, monograph).
- Submitting work products (e.g., abstracts, 2-page briefs, full policy briefs, reports, manuscripts, monographs) for NCHWA review, generally within 180 days of the end of each budget period. Work products from Public Health and Behavioral Health Workforce Research Centers will be distributed to CDC and SAMHSA for review, respectively, by NCHWA. The timeline for submitting specific work products may be extended by the NCHWA project officer (PO) on a case-by-case basis upon request by the award recipient.

- At the end of the period of performance, ensuring all the work products developed and completed through funding of this cooperative agreement (e.g., abstracts, 2-page briefs, full policy briefs, reports, manuscripts, monographs) are sent to HRSA.
- Implementing and maintaining a publicly available website with information about the health workforce, current HWRC projects funded under this cooperative agreement, and completed projects/work products funded under this cooperative agreement. The recipient's website must also include the acknowledgement and disclaimer information required on all products supported by HHS award funds.
- Designing and implementing strategies to disseminate the HWRC's studies/projects to multiple audiences interested in health workforce issues. Dissemination products may include policy briefs; peer-reviewed journal articles; invited presentations; responses to inquiries from health policy programs and health policy researchers; webinars; presentations at national, regional, state, and local conferences; and other appropriate vehicle(s) for sharing rigorous, policy-oriented research. Additionally, cooperative agreement recipients will:
 - Post completed work products to the HWRC's publicly available website. Note: In certain cases, exceptions may be made for posting peer-reviewed journal articles, if posting a published article is prohibited by the journal.
 - Submit summary information on ongoing projects and completed work products in a mutually agreeable format to the PO for dissemination purposes. The frequency of this information gathering will occur no more than six (6) times per budget year.
- Responding to NCHWA PO's comments, questions, and requests (including executing short-term, rapid-response qualitative or quantitative analyses to assist in answering health workforce planning and policy questions) within five to ten business days. Note: The timeline for responding to rapid response requests or other requests from the PO may be extended by the PO on a case by case basis.
 - Comments, questions, and requests from CDC/SAMHSA for their respective center will be given to the award recipients by the PO. Therefore, the recipients should provide a response directly to the PO.
- Responding to and participating in HRSA requests for technical feedback on federal health workforce product development.
- Attending and presenting at periodic HWRC Cooperative Agreement Program meetings either at HRSA's headquarters in Rockville, Maryland or in the Washington, D.C. metropolitan area or via virtual platform.
- Participating in periodic NCHWA-hosted conference calls with other HWRCs.

2. Summary of Funding

HRSA estimates approximately \$4,950,000 to be available annually to fund up to nine (9) recipients. The actual amount available will not be determined until enactment of the final FY 2022 federal appropriation.

- If you are applying under the HWRC topic areas related to Public Health Workforce or Behavioral Health Workforce, you may apply for a ceiling amount up to \$900,000 total cost (includes both direct and indirect, facilities and administrative costs) per year.
- If you are applying under the HWRC topic areas related to Health Equity in the Health Workforce, Allied Health Workforce, Long-Term Care Support and Services, Oral Health Workforce, Emerging Health Workforce Topics, or Technical Assistance, you may apply for a ceiling amount of up to \$450,000 total cost (includes both direct and indirect, facilities and administrative costs) per year.

This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and award funds appropriately. During a given fiscal year, additional supplemental funds may be provided for additional activities or work products.

The period of performance is September 1, 2022 through August 31, 2027 (5 years). Funding beyond the first year is subject to the availability of appropriated funds for the HWRC Cooperative Agreement Program in subsequent fiscal years, satisfactory progress, and a decision that continued funding is in the best interest of the Federal Government.

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

III. Eligibility Information

1. Eligible Applicants

Eligible applicants for the HWRC Cooperative Agreement Program are a State, a State workforce investment board, a public health or health professions school, an academic health center, or an appropriate public or private nonprofit entity. Faith-based and community-based organizations are eligible to apply for these funds if otherwise eligible. Tribes and tribal organizations may apply for these funds, if otherwise eligible. Foreign entities are not eligible for this award.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

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

- Exceeds the ceiling amount

Applications for the Public Health Workforce or Behavioral Health Workforce that exceed the ceiling amounts of \$900,000 each.

or

Applications for the following six (6) HWRC topic areas that exceed the ceiling amounts of \$450,000 each: Health Equity in the Health Workforce, Allied Health Workforce, Long-Term Care Support and Services, Oral Health, Emerging Health Workforce Topics, and Technical Assistance.

- Fails to satisfy the deadline requirements referenced in [Section IV.4](#)

Other Eligibility Limitations

NOTE: Multiple applications from an organization with the same DUNS number or [Unique Entity Identifier](#) (UEI) are allowable if the applications propose separate and distinct projects and the applicants meet the two following conditions:

1. Each campus of the applicant organization is allowed to submit one application per HWRC topic area (from [Section I.1](#) of this notice). A campus is defined as a division of a university that has the same name yet is separate with its own grounds, buildings (e.g., school of nursing) and faculty; a single department or agency of a state or local government. For example, the University of ABC – Springfield and the University of ABC – Goldboro can each submit an application for the same HWRC topic area under this program.
2. You can submit only one application per campus for each of the eight (8) HWRC topic areas identified in Section I.1. For example, the University of ABC – Springfield can submit one application for the Health Equity in the Health Workforce topic area AND one application for the Behavioral Health Workforce topic area. Alternatively, the University of ABC – Springfield can submit one application for the Health Equity in the Health Workforce topic area, and the University of ABC – Goldboro can submit one application for the Behavioral Health Workforce topic area.

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.

Failure to include all required documents as part of the application may result in an application being considered incomplete or non-responsive.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA **requires** you to apply electronically. HRSA encourages you to apply through [Grants.gov](https://www.grants.gov) using the SF-424 Research and Related (R&R) workspace application package associated with this notice of funding opportunity (NOFO) following the directions provided at <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 HRSA-22-054 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

Application Format Requirements

Section 4 of HRSA’s [SF-424 R&R Application Guide](#) provides general instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, etc. You must submit the information outlined in the HRSA [SF-424 R&R Application Guide](#) in addition to the program-specific information below. You are responsible for reading and complying with the instructions included in HRSA’s [SF-424 R&R 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 HRSA [SF-424 R&R Application Guide](#) for the Application Completeness Checklist.

Application Page Limitation

The total size of all uploaded files included in the page limit shall not exceed the
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equivalent of **80 pages** when printed by HRSA. The page limit includes project and budget narratives, attachments including biographical sketches (biosketches), and letters of commitment and support required in HRSA's [SF-424 R&R Application Guide](#) and this NOFO.

Please note: Effective April 22, 2021, the abstract is no longer an attachment that counts in the page limit. The abstract is the standard form (SF) "Project Abstract Summary."

Standard OMB-approved forms that are included in the workspace application package do not count in the page limit. Biographical sketches **do** count in the page limitation.

Note: If you use an OMB-approved form that is not included in the workspace application package for HRSA-22-054, 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. Any application exceeding the page limit of 80 pages will not be read, evaluated, or considered for funding.**

Applications must be complete, within the maximum specified page limit, and validated by Grants.gov under HRSA-22-054 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. § 3354).
- 3) If you are unable to attest to the statements in this certification, you must include an explanation in **Attachment 10: Other Relevant Documents**.

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

Temporary Reassignment of State and Local Personnel during a Public Health Emergency

Section 319(e) of the PHS Act provides the Secretary of the Department of Health and Human Services (HHS) with discretion upon request by a state or tribal organization to authorize the temporary reassignment of state, tribal, and local personnel during a declared federal public health emergency. The temporary reassignment provision is

applicable to state, tribal, and local public health department or agency personnel whose positions are funded, in full or part, under PHS programs and allows such personnel to immediately respond to the public health emergency in the affected jurisdiction. Funds provided under the award may be used to support personnel who are temporarily reassigned in accordance with § 319(e). Please reference detailed information available on the [HHS Office of the Assistant Secretary for Preparedness and Response \(ASPR\) website](#).

Program Requirements and Expectations

HRSA expects that each award recipient funded under this notice will have the following:

- A broad, comprehensive, national-level understanding of the current U.S. health workforce.
- Experience in working with health workforce data.
- Expertise in analytical methods and tools appropriate for health workforce research.
- Awareness of emerging topics, issues, and trends related to the health workforce.

Successful applicants will demonstrate their expertise as well as the potential impact of their work through the publication of articles in peer-reviewed journals; presentations at national and international conferences and meetings; and publication of policy briefs, fact sheets, articles, blogs, etc. that are available in the public domain.

Program-Specific Instructions

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

i. Project Abstract

Use the Standard OMB-approved Project Abstract Summary Form 2.0 that is included in the workspace application package. Do not upload the abstract as an attachment or it will count toward the page limitation. Please use the guidance below. It is most current and differs slightly from that in Section 4.1.ix of HRSA's [SF-424 R&R Application Guide](#).

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

Provide a summary of the application in the Project Abstract box of the Project Abstract Summary Form using 4,000 characters or less.

- HWRC Topic Area (from the topics listed in [Section I.1](#) of this notice)

- Applicant Organization Name and Address
- Project Director/Principal Investigator Name and Degree(s)
- Contact Phone Numbers (Voice, Fax)
- Email Address
- Website Address, if applicable
- List all program funds requested in the application, if applicable
- If requesting a funding preference, priority, or special consideration as outlined in [Section V. 2.](#) of the program-specific NOFO, indicate here.

Because the abstract is often distributed to provide information to the public and Congress, prepare this so that it is clear, accurate, concise, and without reference to other parts of the application. It must include a brief description of the proposed project including the needs to be addressed, the proposed services, and the population group(s) to be served. If the application is funded, your project abstract information (as submitted) will be made available to public websites and/or databases including [USAspending.gov](https://www.usaspending.gov).

The Abstract must also include the following elements:

1. A brief overview of the project as a whole;
2. Specific, measurable objectives that the project will accomplish;
3. Which of the workforce priorities will be addressed by the project, if applicable;
4. How the proposed project for which funding is requested will be accomplished, i.e., the "who, what, when, where, why, and how" of a project;
5. Contact person's name and email address, if different from the Project Director/Principal Investigator;
6. Anticipated consortium model members, if applicable;
7. Anticipated partner(s), if applicable; and
8. A summary of the research studies or TA initiatives proposed for Budget Year 1.

NARRATIVE GUIDANCE

To ensure that you fully address the review criteria, the table below provides a

crosswalk between the narrative language and where each section falls within the review criteria. Any forms or attachments referenced in a narrative section may be considered during the objective review.

<u>Narrative Section</u>	<u>Review Criteria</u>
Purpose and Need	(1) Purpose and Need
Response to Program Purpose: (a) Methodology/Approach (b) Work Plan (c) Resolution of Challenges	(2) Response to Program Purpose (a) Methodology/Approach (b) Work Plan (c) Resolution of Challenges
Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability	(3) Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability
Organizational Information, Resources, and Capabilities	(4) Organizational Information, Resources, and Capabilities
Budget and Budget Justification Narrative	(5) Support Requested

ii. *Project Narrative*

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

Use the following section headers for the narrative:

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

In this section, you must:

- Identify one (1) topic area from the eight (8) HWRC topic areas outlined in [Section I.1](#) of this notice as the focus of your HWRC Cooperative Agreement Program activities.
 - Demonstrate a comprehensive, national-level understanding of the current composition and state of the health workforce, including education and training, as it relates to your selected HWRC topic area.
 - Clearly articulate current and emerging issues and challenges related to your selected HWRC topic area.
 - Describe challenges related to research in your selected HWRC topic area.
- **RESPONSE TO PROGRAM PURPOSE** -- *This section includes three sub-sections — (a) Methodology/Approach; (b) Work Plan; and (c) Resolution of Challenges—all of which correspond to Section V's Review Criteria 2 (a), (b), and (c).*
- **(a) METHODOLOGY/APPROACH** -- [Corresponds to Section V's Review Criterion 2 \(a\)](#)

Applicants for the Public Health Workforce Topic Area:

Propose twelve (12) research questions and develop a study proposal for each. Your proposed research studies must also meet the following requirements:

- Each study must address a relevant, national-level planning or policy research question related to your selected HWRC topic area.
- You must propose at least two (2) public health workforce research studies related to each of the four (4) broad priorities listed in [Section I.2](#). These priorities are:
 1. Evaluating the role(s) of public health occupations in delivering programs, including essential or foundational public health services, across populations.
 2. Investigating public health workforce composition, data, needs, sufficiency, and distribution including both governmental (i.e., Federal, State, Local, Tribal, Territorial) and non-governmental entities.

3. Assessing public health workforce development methods including but not limited to recruitment and training models and the outlook and analytics for workforce needs.
4. Conducting and evaluating public health workforce implementation scientific research, including identifying evidence-informed strategies and interventions.

You may focus your remaining four (4) proposals on the four (4) priorities listed above, or on other public health workforce issues, or on any combination of these four (4) priorities and other topics. Collectively, your twelve (12) proposed studies must address a mix of public health professions.

- Your proposed studies do not need to address each priority equally.
- At least six (6) of your twelve (12) proposed studies must use a predominantly quantitative methodology.
- Your twelve (12) proposed studies must be feasible to complete within approximately one (1) year.
- When scientifically, methodologically, and topically appropriate, proposed studies should incorporate health equity and diversity issues.

Post award, CDC and HRSA will select eight (8) of the successful Public Health Workforce applicant's twelve (12) proposed research studies for completion in Budget Year 1. If necessary, the selected Budget Year 1 studies will be refined collaboratively among the successful applicant, CDC and HRSA. This process may include additional input from CDC and HRSA on possible alternative proposals and suggested proposal modifications.

Applicant of the Behavioral Health Workforce Topic Area

Propose twelve (12) research questions and develop a study proposal for each. Your proposed research studies must also meet the following requirements:

- Each study must address a relevant, national-level planning or policy research question related to your selected HWRC topic area.
- You must propose at least two (2) behavioral health workforce research studies related to each of the three (3) broad priorities listed in [Section I.2](#).

These priorities are:

1. Evaluating disparities in behavioral health occupations as it related to reducing disparities in mental illness and/or substance use disorders across populations.

2. Investigate behavioral health workforce composition, data (including but not limited to data held by SAMHSA), needs, sufficiency, distribution, and the integration of behavioral and physical health workforces.
3. Assess service delivery methods, including but not limited to models of care (e.g., Certified Community Behavioral Health Clinics, Partial Hospitalization Programs, Crisis response), and reimbursement issues.

You may focus your remaining six (6) proposals on the three priorities listed above, or on other behavioral health workforce issues, or on any combination of these three priorities and other topics. Collectively, your twelve (12) proposed studies must address a mix of behavioral health practitioners.

- Your proposed studies do not need to address each priority equally.
- At least six (6) of your twelve (12) proposed studies must use a predominantly quantitative methodology.
- Your twelve (12) proposed studies must be feasible to complete within approximately one (1) year.
- When scientifically, methodologically, and topically appropriate, proposed studies should incorporate health equity and diversity issues.

Post award, SAMHSA and HRSA will select eight (8) of the successful Behavioral Health Workforce applicant's twelve (12) proposed research studies for completion in Budget Year 1. If necessary, the selected Budget Year 1 studies will be refined collaboratively among the successful applicant, SAMHSA and HRSA. This process may include additional input from SAMHSA and HRSA on possible alternative proposals and suggested proposal modifications.

Applicants for the Topic Areas of Health Equity in the Health Workforce, Allied Health Workforce, Long-Term Care Support and Services, Oral Health Workforce, and Emerging Health Workforce Topics:

Propose eight (8) research questions and develop a study proposal for each. Your proposed research studies must also meet the following requirements:

- Each study must address a relevant, national-level planning or policy research question related to your selected HWRC topic area.
- Collectively, your eight (8) proposed studies must address a mix of health practitioners.

- At least six (6) of your eight (8) proposed studies must use a predominantly quantitative methodology.
- Your eight (8) proposed studies must be feasible to complete within approximately one (1) year.
- When scientifically and methodologically appropriate, proposed studies should incorporate health equity and diversity issues.

Post award, HRSA will select four (4) of the successful applicant's eight (8) proposed research studies for completion in Budget Year 1. If necessary, the selected Budget Year 1 studies will be refined collaboratively between the successful applicant and HRSA. This process may include additional input from HRSA on possible alternative proposals and suggested proposal modifications.

Applicants for the Technical Assistance Topic Area:

Propose eight (8) initiatives that focus on providing TA to national, regional, state or local entities. Your proposed TA initiatives must also meet the following requirements:

- Each TA proposal must address a need related to health workforce data management, health workforce planning, or health workforce policy that is important or useful to health workforce planners and policy makers.
- Collectively, your eight (8) proposed initiatives must address a mix of health practitioners.
- Your eight (8) proposed initiatives must be feasible to be completed within approximately one (1) year.
- When scientifically and methodologically appropriate, proposed studies should incorporate health equity and diversity issues.

Post award, HRSA will select four (4) of the successful applicant's eight (8) TA initiatives for completion in Budget Year 1. If necessary, the selected Budget Year 1 projects will be refined collaboratively between the successful applicant and HRSA. This process may include additional input from HRSA on possible alternative proposals and suggested proposal modifications.

REMINDER: Both new and competing continuation applicants must propose work that does not duplicate previous or current HWRC work. However, applicants may propose work that builds on or updates previously funded HWRC studies/projects. Information on previous and current HWRC studies is available here: <https://bhw.hrsa.gov/health-workforce-analysis/research/research-centers>.

All Applicants:

Depending on available funding in subsequent years, recipients will be required to propose additional studies/projects for Budget Year 2, Budget Year 3, Budget Year 4, and Budget Year 5. HRSA expects that these subsequent budget year efforts will build on the recipient's Budget Year 1 work to culminate in a comprehensive body of research and work products. State and regional studies may be considered in Budget Year 2 through Budget Year 5.

You must present your Budget Year 1 research study proposals using the format outlined below. Limit each research proposal to a maximum of two (2) pages total.

Research Study Proposal (maximum 2 pages total)

- Title
- Stand-alone, two-sentence description of the research study/project
- Statement of purpose and program/policy relevance:
 - Describe the purpose of the proposed study/project.
 - Explain how the results can be used to inform health workforce programs and policies related to your selected HWRC topic area.
- Design and analysis:
 - State the proposed study question(s) or study hypothesis(es).
 - Describe the study design.
 - Discuss the proposed approach for data analysis, and explain the rationale for selecting the proposed approach.
 - Briefly discuss the limitations of the proposed methods.
 - *This information may not be applicable for TA initiatives proposed by applicants for the Technical Assistance topic area. Technical Assistance applicants must describe the methods and activities they propose to use in carrying out their TA initiatives. Technical Assistance applicants must address methods for collaborating with stakeholders, and the types of assistance (e.g., data development, data collection, data dissemination, data analysis) they propose to offer. If appropriate, you must include the development of effective tools and strategies for training, outreach, collaboration, communication, and dissemination.*

- Data sources:
 - Identify proposed data sources.
 - If applicable, include information on data availability, cost, and schedule for obtaining and preparing the data for analysis.
 - For primary data: discuss the data collection plan, including sampling methods, estimated sample size, expected response rate, data collection schedule, etc.
 - For secondary data: describe your experience in accessing and using these data, and indicate whether utilization of the data will require a data use agreement or similar vehicle.
- Human subject research: Provide answers to the questions below.
 - Are human subjects involved?
 - If activities involving human subjects are planned at any time during the proposed study, indicate YES, even if the proposed work is exempt from Regulations for the Protection of Human Subjects.
 - Indicate NO if no activities involving human subjects are planned.
 - If the answer is YES, indicate whether the Institutional Review Board (IRB) review is pending or completed.
 - If the IRB review has been completed and the work has been approved, provide the approval date.
 - If the proposed work is exempt from IRB approval, indicate the exemption relied upon and a short description corresponding to one or more of the exemption categories. See [45 CFR part 46](#).
 - For the Human Subject Assurance Number, provide the IRB approval number or the approved Federal Wide Assurance (FWA), Multiple Project Assurance (MPA), Single Project Assurance (SPA) or Cooperative Project Assurance Number (CPA) that you have on file with the Office of Human Research Protections, if available.
 - If the study has not yet been reviewed by IRB and you believe the research is exempt, provide a justification for the exemption(s) with sufficient information about involvement of

human subjects to allow a tentative conclusion by HRSA staff that the claimed exemption(s) seem(s) appropriate.

REMINDER: Non-exempt research involving human subjects cannot be conducted under a HHS-sponsored award unless you provide verification of the justification for the research per HHS regulations. Documentation of IRB review when it is completed and its exemption or approval must be sent to NCHWA PO. This IRB certification must include the grant number, title of the study, name of the appropriate IRB which has reviewed and exempted or approved the proposed activity, name of the principal investigator/ program director, date of IRB exemption or approval, and appropriate signatures.

- (b) *WORK PLAN* -- [Corresponds to Section V's Review Criterion 2 \(b\)](#)

Describe the activities or steps proposed to effectively manage your HWRC workload. For applicants in the Public Health or Behavioral Health Topic Areas, this includes eight (8) research studies and up to six (6) Rapid Response Requests. For applicants in other topic areas, this include four (4) studies /projects and up to four (4) Rapid Response Requests.

REMINDER: Rapid Response Requests

In addition to conducting studies/projects, the successful applicant in the following topic areas must be able to respond to as many as four (4) Rapid Response Requests in each budget year: Health Equity in the Health Workforce, Allied Health Workforce, Long-Term Care Support and Services, Oral Health Workforce, Emerging Health Workforce Topics, or Technical Assistance.

The successful applicants in the Public Health Workforce and Behavioral Health Workforce topic areas must be able to respond to as many as six (6) Rapid Response Requests in each budget year.

Rapid Response Requests are generally small-scale tasks with a turnaround time of five (5) to ten (10) business days. The timeline for addressing rapid response requests may be extended by the NCHWA PO on a case-by-case basis.

You must include the following in your *Work Plan*:

- **Project Management Plan:** You must present a Project Management Plan to ensure that all work, including studies/projects and rapid response requests, stays on track throughout Budget Year 1.
- **General Work Plan:** You must include a General Work Plan for Budget Year 2 – Budget Year 5. The General Work Plan does not need to identify specific studies/projects that will be conducted during those years but it

must describe general HWRC activities that span all five (5) years of the project period.

Provide a detailed work plan that demonstrates your experience implementing a project of the proposed scope. A sample work plan can be found here:

<http://bhw.hrsa.gov/grants/technicalassistance/workplantemplate.docx>).

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

Discuss challenges (e.g., data availability, data cost, IRB approval) that you anticipate you are likely to encounter in designing and implementing the work proposed in the *Methodology Section*, as well as challenges you anticipate may be associated with performing the activities described in the *Work Plan Section*.

If you are proposing to use a consortium or partnership model, please include challenges you foresee that may be associated with working with the HWRC consortium or partnership members.

Describe approaches you will use to address all identified challenges.

- *IMPACT* -- This section includes two sub-sections— (a) *Evaluation and Technical Support Capacity*; and (b) *Project Sustainability*—both of which correspond to Section V's Review Criteria 3 (a) and (b).

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

Describe your plan for self-monitoring progress on each of the budget year studies/projects, as well as any Rapid Response Requests received during each budget year.

Describe your quality control processes, including an explanation of how you will ensure data quality and the quality of the products produced under this cooperative agreement.

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

Present a plan for disseminating products produced under this cooperative agreement. At a minimum, your dissemination plan must include:

- Anticipated products and venues for dissemination of completed work.
- Target audiences for the anticipated dissemination products.
- Methods for ensuring the dissemination products' quality and accessibility.

- Plans for publishing HWRC work in peer-reviewed journals.
- Development and maintenance of a website dedicated to the HWRC that will house your completed HWRC work. As part of developing and maintaining this website, you must:
 - Provide your NCHWA PO with a link to your website.
 - Post ongoing projects to your website with a brief description of project purpose and program/policy relevance.
 - Post completed HWRC products to your website, including links to abstracts or full manuscripts for all peer-reviewed journal articles that describe work funded under this cooperative agreement.
 - Alert visitors to your website of new HWRC products.

Describe how you will track and report on the frequency that each product posted on your HWRC website is accessed or downloaded, as well as your plan to track journal citations, conference presentations and posters, speaking engagements (including webinars), and press inquiries/communications.

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

Describe your expertise in health workforce research. Demonstrate the organizational capability and resources necessary to conduct and disseminate complex, policy-relevant studies/projects in a 12 to 18-month time period.

Applicants must provide both organizational information and a staffing plan, as described below:

- **Organizational Information:** You must describe how your organization has the ability to implement the proposed work and meet the requirements and expectations of this cooperative agreement. You must also:
 - Provide information on your organization's current mission and structure, relevant experience, and current activities.
 - Describe your organizational capacity to effectively manage the programmatic, fiscal, and administrative aspects of your proposed work.
 - Include an HWRC organizational chart, as requested in [Section IV.2.v](#), **Attachment 1**.

- Consortium Model Information: If you are proposing to use a consortium model, you must describe the HWRC consortium members, and you must also:
 - Include a brief discussion of each consortium member's mission, and how their mission will contribute to the success of the HWRC.
 - Describe the research and policy expertise that each consortium member brings to the HWRC, and explain how that expertise will contribute to the design, conduct, and dissemination of the HWRC's research.
 - Discuss how your anticipated consortium members will communicate regarding the conduct and dissemination of HWRC research.
 - Include a memorandum of understanding (MOU) from each anticipated consortium partner, as requested in [Section IV.2.v](#), **Attachment 4**.
- Partnership Information: If you are proposing to partner with a foundation, public organization or private organization, you must describe your proposed partner(s), and you must also:
 - Include a brief discussion of each partner's mission, and how their mission will contribute to the success of the HWRC.
 - Describe the research and policy expertise that each partner brings to the HWRC, and explain how that expertise will contribute to the design, conduct, and dissemination of the HWRC's research.
 - Discuss how your anticipated partner(s) will communicate regarding the conduct and dissemination of HWRC research.
- Staffing Plan: You must present a staffing plan that describes the education, experience, and rationale for the amount of time requested for each key staff member. Key staff members are: the Principal Investigator; the Deputy Principal Investigator; and the Core Project Team. The Principal Investigator and the Deputy Principal Investigator cannot be the same person, and co-Principal Investigators are not permitted.
 - Principal Investigator requirements:
 - Have national expertise.

- Have a doctoral degree, or a post-graduate degree with at least 15 additional years of research experience in the field of health workforce.
- Devote at least 25 percent of his or her time to the HWRC.
- Lead the development and execution of the HWRC's research portfolio.
- Serve as lead investigator on at least two (2) of the HWRC's studies/projects in each budget year.
- Have the ability and authority to review draft work products to assure their relevance, quality, and accessibility.
- Be responsible for the administrative aspects of the HWRC and the review of all draft products.
- Have at least five (5) years of experience specific to health workforce research.
- Have at least five (5) peer-reviewed health workforce publications.
- Required information for the Principal Investigator:
 - Experience, roles, and responsibilities in managing research teams.
 - Experience, roles, and responsibilities in conducting and disseminating policy-relevant health workforce research.
 - Experience informing/educating national, state, and community decision-makers, especially those concerned with health workforce issues related to your selected HWRC topic area.
 - A list of relevant articles that the Principal Investigator has published in peer-reviewed journals.
- Deputy Principal Investigator requirements:
 - Devote at least 20 percent of his/her time to the proposed HWRC.
 - Serve as the lead investigator on at least one (1) of the HWRC's studies/projects in each budget year.
 - Have national expertise.

- Have at least three (3) years of experience specific to health workforce research.
- Required information for the Deputy Principal Investigator:
 - Experience, roles, and responsibilities in conducting and disseminating policy-relevant health workforce research.
 - Experience informing/educating national, state, and community decision-makers, especially those concerned with health workforce issues related to your selected HWRC topic area.
- Core Project Team requirements:
 - The Core Project Team must have the education, research, and professional experience necessary to support the studies/projects proposed in your application.
 - The Team may include individuals with clinical or nonclinical backgrounds in relevant disciplines (e.g., behavioral health, biostatistics, demography, economics, epidemiology, geography, health communication, health information technology, medicine, nursing, political science, public health, psychology, sociology, statistics).
- Required information for the Core Project Team:
 - An explanation of how the Core Project Team's disciplines relate to your proposed research.
 - A discussion of how the experience of the Core Project Team supports the execution and dissemination of your proposed work.
 - A list of relevant articles that Core Project Team members have published in peer-reviewed journals.

OPTIONAL: Editor, Technical Writer, Website Developer, Social Media Specialist, etc.

You may include an editor, technical writer, website developer, social media specialist or other staff member(s) whose main/partial responsibility will be to review draft products to ensure high quality and accessibility. The(se) individual(s) should be identified in your line item budget. Note: These positions are not requirements. HRSA leaves it to each applicant's discretion as to whether such staff will strengthen their HWRC products.

REQUIRED: POSITION DESCRIPTIONS AND STAFF LOADING CHART

Position descriptions for key staff members must be included in **Attachment 2**. You must also include a staff loading chart that presents the number of hours or Full-Time Equivalents (FTEs) devoted to the proposed HWRC for each key staff member (Principal Investigator, Deputy Principal Investigator, and Core Project Team), and the total number of hours or FTEs for all staff members (**Attachment 3**).

REQUIRED: BIOGRAPHICAL SKETCHES

Biographical sketches must be uploaded in the SF-424 RESEARCH & RELATED Senior Key Person Profile (Expanded) form that can be accessed in the Application Package under “Mandatory. Biographical sketches, not exceeding two pages per person, should include the following information:

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

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

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

iii. **Budget**

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

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.

- In addition, the HWRC Cooperative Agreement Program requires the following, which corresponds to Section V's Review [Criterion #5](#):

The maximum annual budget for this cooperative agreement is up to \$900,000 per budget year for each successful applicant in the Public Health Workforce and Behavioral Health Workforce topic areas, as well as up to \$450,000 per budget year for each successful applicant in the topic areas of Health Equity in the Health Workforce, Allied Health Workforce, Long-Term Care Support and Services, Oral Health Workforce, Emerging Health Workforce Topics, and Technical Assistance. Since only a subset of the successful applicant's proposals will be selected, you should, to the best of your ability, submit a budget where any combination of your proposals would not exceed the applicable ceiling, based on your selected HWRC topic area.

You should also bear in mind that over the course of the award, you may be required to respond to rapid response requests. The PO will work collaboratively with successful applicants post award to address any budget issues that arise during the

proposal selection process. The successful applicant may be asked to submit individual study budgets for each proposal post award to aid in this process.

As required by the Consolidated Appropriations Act, 2021 (P.L. 116-260), Division H, § 202 and Division A of the Further Continuing Appropriations Act, 2022 (P.L. 117-70), “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.” Effective January 2022, the Executive Level II salary increased from \$199,300 to **\$203,700**. Note that these or other salary limitations may apply in the following fiscal years, as required by law.

iv. ***Budget Justification Narrative***

- See Section 4.1.v of HRSA’s [SF-424 R&R Application Guide](#).
- The budget justification narrative must describe all line-item federal funds (including subawards), and matching non-federal funds proposed for this project. Please note: all budget justification narratives count against the page limit. In addition, the HWRC cooperative agreement program requires the following:

HRSA understands that individual research studies or TA initiatives will vary in terms of their budgets and this may impact an applicant’s overall budget.

If you are applying under the Public Health Workforce or Behavioral Health Workforce topic area, you should attempt to create a budget that allows for necessary variation across your proposed research studies, and does not exceed the expected award amount of \$900,000, regardless of which eight (8) of your twelve (12) proposed studies are selected.

If you are applying under the Health Equity in the Health Workforce Education, Allied Health Workforce, Long-Term Care Support and Services, Oral Health Workforce, Emerging Health Workforce Topics, or Technical Assistance topic area, you should attempt to create a budget that allows for necessary variation across your proposed studies/projects, and does not exceed the expected award amount of \$450,000, regardless of which four (4) of your eight (8) proposed studies are selected.

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 limitation.** Your indirect cost rate agreement and proof of non-profit status (if applicable) will not count toward the page limitation. **Clearly label each attachment.**

You must upload attachments into the application. Any *hyperlinked* attachments will

not be reviewed/opened by HRSA.

Attachment 1: HWRC Organizational Chart

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

Attachment 2: Position Descriptions for Key Personnel

See Section 4.1.vi. of HRSA's [SF-424 R&R Application Guide](#)). Keep each position description to one page in length if possible. For each position description, describe the individual's role, responsibilities, and qualifications.

Attachment 3: Staff Loading Chart

Summarize the total FTE commitment of each key staff member in Budget Year 1.

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. Letters of agreement must be signed and dated.

Attachment 5: Tables, Charts, etc.

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

Attachment 6: Progress Report (FOR COMPETING CONTINUATIONS ONLY)

A well-documented progress report is a required and important source of material for HRSA in preparing annual reports, planning programs, and communicating program-specific accomplishments. The accomplishments of competing continuation applicants are carefully considered; therefore, you should include previously stated goals and objectives in your application and emphasize the progress made in attaining these goals and objectives. HRSA program staff reviews the progress report after the Objective Review Committee evaluates the competing continuation applications. See Section V.2 Review and Selection Process for a full explanation of funding priorities and priority points.

HRSA may award an additional five (5) priority points to the current recipients of funding for HWRC Topic Areas (Behavioral Health Workforce, Health Equity in the Health Workforce, Allied Health Workforce, Long-Term Care Support and Services, Oral Health Workforce, Emerging Health Workforce Topics, or Technical

Assistance) based on their ability to demonstrate progress on program-specific goals.

Identify your current grant number, include the most important objectives from your approved application (including any approved changes), and document overall program accomplishments under each objective over the entire period of performance. Where possible, include the proposed and actual metrics, outputs, or outcomes of each project objective. HRSA program staff will review the progress report after the Objective Review Committee reviews your competing continuation application. See [Section V.2 Review and Selection Process](#) for further explanation of the past performance funding priority.

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

- (1) The period covered (dates)
- (2) Specific Objective: Briefly summarize the specific objectives of the project as actually funded
- (3) Results: Describe the program activities conducted for each objective. Include both positive and negative results or technical problems that may be important.

Attachment 7: Accomplishment Report (FOR NEW APPLICANTS ONLY)

A well-documented accomplishment report is an important source of material for new applicants to demonstrate their ability to successfully executed comparable health workforce research or TA. The accomplishments of new applicants are carefully considered; therefore, you should include previously stated goals and objectives in your application and emphasize the approach in attaining these goals and objectives. HRSA program staff reviews the Accomplishment Report after the Objective Review Committee evaluates the competing continuation applications. See Section V.2 Review and Selection Process for a full explanation of funding priorities and priority points

The accomplishment report should be a brief presentation of the accomplishments, in relation to the objectives of the program in the past year. The report should include

- (1) The period covered (dates)
- (2) Specific Objective: Briefly summarize the specific objectives of currently funded projects

- (3) The structure of the institution and research activities and how it may strengthen the success of health workforce research or TA initiatives
- (4) Results: Describe the program activities conducted for each objective and related accomplishment. Include both positive and negative results or technical problems that may be important

Attachment 8: Negotiated Indirect Cost Rate Agreement

If indirect costs are included in the budget, attach a copy of the negotiated indirect cost rate agreement. The agreement will not count toward the page limit.

Attachment 9: Maintenance of Effort Documentation

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

NON-FEDERAL EXPENDITURES	
FY 2021 (Actual) Actual FY2021 non-federal funds, including in-kind, expended for activities proposed in this application. Amount: \$ _____	FY 2022 (Estimated) Estimated FY 2022 non-federal funds, including in-kind, designated for activities proposed in this application. Amount: \$ _____

Attachment 10: Other Relevant Documents

Include here any other document that is relevant to your 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](https://sam.gov)). For more details, visit the following webpages: [Planned UEI Updates in Grant Application Forms](#) and [General Service Administration’s UEI Update](#).

You must 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 you are an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or you have an exception approved by the agency under 2 CFR § 25.110(d)). For your SAM.gov registration, you must submit a notarized letter appointing the authorized Entity Administrator.

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

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

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

- Dun and Bradstreet (<https://www.dnb.com/duns-number.html>)
- System for Award Management (SAM) (<https://sam.gov/content/home> | [SAM.gov Knowledge Base](#))
- Grants.gov (<https://www.grants.gov/>)

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

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. Effective January 1, 2020, the forms themselves are no longer part of HRSA's application packages instead, 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.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 14, 2022 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 R&R Application Guide](#) for additional information.

5. Intergovernmental Review

The HWRC Cooperative Agreement Program is not subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

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

6. Funding Restrictions

If you are applying under the topic areas of Behavioral Health Workforce, Health Equity in the Health Workforce Education, Allied Health Workforce, Long-Term Care Support and Services, Oral Health Workforce, Emerging Health Workforce Topics, or Technical Assistance, you may request funding for a period of performance of up to 5 years, at no more than \$450,000 per year (inclusive of direct **and** indirect costs). If you are applying under the topic areas of Public Health Workforce or Behavioral Health Workforce, you may request funding for a period of performance of up to 5 years, at no more than \$900,000 per year (inclusive of direct **and** indirect costs)

This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and award funds appropriately. 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 H of the Consolidated Appropriations Act, 2021 (P.L. 116-260) and Division A of the Further Continuing Appropriations Act, 2022 (P.L. 117-70) apply to this program. See Section 4.1 of HRSA's [SF-424 R&R Application Guide](#) for additional information. Note that these or other restrictions will apply in the following fiscal years, as required by law. Effective January 2022, the Executive Level II salary increased from \$199,300 to **\$203,700**.

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

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

Be aware of the requirements for HRSA recipients and 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. Any program income earned by the recipient must be used under the addition/additive alternative. You can find post-award requirements for program income at [45 CFR § 75.307](#).

V. Application Review Information

1. Review Criteria

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

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, except for the progress report submitted with a competing continuation application, which will be reviewed by HRSA program staff after the objective review process.

Five (5) review criteria are used to review and rank HWRC Cooperative Agreement Program applications. Below are descriptions of the review criteria and their scoring points.

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

- The extent to which the application demonstrates a comprehensive, national-level understanding of the current composition and state of the health workforce, including education and training, as it relates to your selected HWRC topic area.
- The extent to which the application articulates current and emerging issues and challenges related to the selected HWRC topic area.

- The strength of the application in describing challenges related to studies/projects in the selected HWRC topic area.

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

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

- The extent to which the application proposed studies/projects demonstrate a strong, national-level understanding of available health workforce data resources, recent health workforce research, and current health workforce policies related to your selected HWRC topic area.
- The extent to which the application proposed studies/projects address current needs or gaps in the current health workforce landscape, as it relates to your selected HWRC topic area.
- The extent to which your proposed studies/projects are methodologically sound and appropriately detailed, including information describing your study hypotheses, study designs, data analyses, and Human Subjects Research requirements.
- The extent to which, collectively, your proposed studies/projects address a mix of health practitioners.
- The extent to which your proposed research studies use quantitative methodologies.
 - When quantitative methodologies are not used for projects proposed by applicants for the Technical Assistance topic area. Please refer to [“Additional criteria for applicants proposing TA initiatives”](#) section below.
- The extent to which your proposed research studies are feasible to complete within approximately one (1) year.

Additional criteria for applicants proposing TA initiatives:

- The extent to which the TA initiative proposals are feasible, methodologically sound, and encourage dissemination.
- The extent to which the TA initiative proposals are appropriately detailed.

For Public Health Workforce topic area applicants only: The extent to which at least one (1) of your proposed research studies addresses each of the four (4) broad priorities listed in Section I.1 of this notice. These priorities are:

- Evaluating the role(s) of public health occupations in delivering programs, including essential or foundational public health services, across populations.
- Investigating public health workforce composition, data, needs, sufficiency, and distribution including both governmental (i.e., Federal, State, Local, Tribal, Territorial) and non-governmental entities.
- Assessing public health workforce development methods including but not limited to recruitment and training models and the outlook and analytics for workforce needs.
- Conducting and evaluating public health workforce implementation science research, including identifying evidence-informed strategies and interventions.

For Behavioral Health Workforce topic area applicants only: The extent to which at least one (1) of your proposed research studies addresses each of the three (3) broad priorities listed in Section I.1 of this notice. These priorities are:

- Evaluating disparities in behavioral health occupations as it related to reducing disparities in mental and/or substance disorders across population
- Investigating behavioral health workforce composition, data (including but not limited to data held by SAMHSA), needs, sufficiency and distribution.
- Assessing service delivery methods, including but not limited to models of care (e.g., Certified Community Behavioral Health Clinics, Partial Hospitalization Programs, Crisis Response), and reimbursement issues.

Criterion 2 (b): WORK PLAN (5 points) – [Corresponds to Section IV's Response to Program Purpose Sub-section \(b\) Work Plan](#)

- The extent to which your Project Management Plan and General Work Plan demonstrate your ability to effectively manage the HWRC work load, including research studies and rapid response requests, and ensure that HWRC products are delivered in a timely manner over the course of the five (5) year project period.

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

- The extent to which your application demonstrates an understanding of potential obstacles and challenges that may arise during the project period, including challenges related to working with the HWRC consortium members.
- The strength of your approaches for addressing potential obstacles and challenges.

Criterion 3: IMPACT (20 points) – [Corresponds to Section IV's Impact Sub-section \(a\) Evaluation and Technical Support Capacity, and Sub-section \(b\) Project Sustainability](#)

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

- The strength of your plan for self-monitoring progress on each of your studies/projects in each budget year, as well as any Rapid Response Requests received during each budget year.
- The strength of your processes for ensuring data quality and the quality of products produced under this cooperative agreement

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

The extent to which your strategy for disseminating findings and information pertaining to your selected HWRC topic area is reasonable, feasible, and likely to reach multiple types of health workforce stakeholders and audiences

Criterion 4: ORGANIZATIONAL INFORMATION/RESOURCES/CAPABILITIES (30 points) – [Corresponds to Section IV's Organizational Information, Resources, and Capabilities](#)

- The extent to which your application describes your organization's mission, structure, relevant experience, and current activities.
- The extent to which your application explains how your organization's capabilities will contribute to your ability to effectively manage the programmatic, fiscal, and administrative requirements of this cooperative agreement.

If you are proposing to utilize a consortium model:

- The extent to which your application describes the research and policy expertise provided by your anticipated HWRC consortium members.
- The extent to which your application explains how each consortium member's mission, together with their research and policy expertise, will contribute to the design, conduct, and dissemination of HWRC research.
- The extent to which your application describes how your anticipated consortium members will communicate regarding the conduct and dissemination of HWRC research.

If you are proposing to partner with a foundation, public organization, or private organization:

- The extent to which your application clearly explains how the partnership will contribute to the conduct and dissemination of research in your selected HWRC topic area.
- The extent to which the Principal Investigator, Deputy Principal Investigator and Core Project Team are qualified by their education, research, and experience to implement and carry out the proposed work. [This will be evaluated both through your project narrative and through information included in your Attachments].
- The extent to which the Principal Investigator, Deputy Principal Investigator and Core Project Team meet the specific requirements outlined in Section IV.2.ii.

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

The extent to which the application provides a reasonable and sufficient budget for each year of the performance period in relation to the objectives and the complexity of the activities which are necessary to implement the anticipated program results. This includes the extent which:

- The application provides a complete (Federal and Non-Federal) line item budget and written narrative justification for each budget period of within the five year performance period.
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives.
- The budget narrative justification is well documented and logically details each line item request (e.g., personnel, travel, equipment, supplies) that supports the objectives and activities described in the application.
- The budgeted items are reasonable and necessary to develop, implement, and evaluate their proposed program objectives.
- The travel line item and budget narrative should include the requested data for staff and participant/trainee support costs.

2. Review and Selection Process

The objective review process provides an objective evaluation of applications to the individuals responsible for making award decisions. The highest ranked applications receive consideration for award within available funding ranges. HRSA may also

consider assessment of risk and the other pre-award activities described in Section 3 below. See Section 5.3 of HRSA's [SF-424 R&R Application Guide](#) for more details. In addition to the ranking based on merit criteria, HRSA approving officials will apply other factors (e.g., geographical distribution) described below in selecting applications for award.

Funding Priorities

This program includes a funding priority. A funding priority is the favorable adjustment of combined review scores of individually approved applications when applications meet specified criteria. HRSA staff award one funding priority applicable to the application and an adjustment is made by a set, pre-determined number of points. These priority points will be in addition to the possible score of 100 total points as outlined in the review criteria. The Health Workforce Research Center Program has two funding priorities:

Priority 1: Past Performance (5 Points)

You will be granted a funding priority if competing continuation applicants demonstrate successful execution of their respective HWRCs in the required Progress Report. More specific information can be found under **Attachment 6** (Progress Report).

Priority 2: Comparable Performance (5 Points)

You will be granted a funding priority if new applicants demonstrate successful execution of comparable health workforce research or TA in the required Accomplishment Report. More specific information can be found under **Attachment 7** (Accomplishment Report) requirements.

Please note that only one (1) cooperative agreement will be awarded for each HWRC topic area except for the Emerging Health Workforce Topics HWRC, for which two (2) cooperative agreements will be awarded.

3. Assessment of Risk

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

HRSA reviews applications receiving a favorable objective review for other considerations that include past performance, as applicable; cost analysis of the project/program budget; assessment of your management systems, ensuring continued applicant eligibility; and compliance with any public policy requirements, including those requiring just-in-time submissions. HRSA may ask you to submit additional programmatic or administrative information (such as an updated budget or "other support" information) or to undertake certain activities (such as negotiation of an indirect cost rate) in anticipation of an award. However, even at this point in the process, such

requests do not guarantee that HRSA will make an award. Following review of all applicable information, HRSA's approving and business management officials will determine whether HRSA can make an award, if special conditions are required, and what level of funding is appropriate.

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

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

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

VI. Award Administration Information

1. Award Notices

HRSA will release the Notice of Award (NOA) on or around the start date of September 1, 2022. See Section 5.4 of HRSA's [SF-424 R&R Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

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

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

- all provisions of 45 CFR part 75, currently in effect or implemented during the period of the award,
- other federal regulations and HHS policies in effect at the time of the award or implemented during the period of award, and
- applicable statutory provisions

Accessibility Provisions and Non-Discrimination Requirements

Should you successfully compete for an award, recipients of federal financial assistance (FFA) from HHS must administer their programs in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age and, in some circumstances, religion, conscience, and sex (including gender identity, sexual orientation, and pregnancy). This includes ensuring programs are accessible to persons with limited English proficiency and persons with disabilities. The HHS Office for Civil Rights (OCR) provides guidance on complying with civil rights laws enforced by HHS. See [Providers of Health Care and Social Services](#) and [HHS Nondiscrimination Notice](#).

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. For guidance on meeting your legal obligation to take reasonable steps to ensure meaningful access to your programs or activities by limited English proficient individuals, see [Fact Sheet on the Revised HHS LEP Guidance](#) and [Limited English Proficiency](#).
- For information on your specific legal obligations for serving qualified individuals with disabilities, including reasonable modifications and making services accessible to them, see [Discrimination on the Basis of Disability](#).
- HHS-funded health and education programs must be administered in an environment free of sexual harassment. See [Discrimination on the Basis of Sex](#).
- For guidance on administering your program in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see [Conscience Protections for Health Care Providers](#) and [Religious Freedom](#).

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

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

Executive Order on Worker Organizing and Empowerment

Pursuant to the Executive Order on Worker Organizing and Empowerment, HRSA strongly encourages applicants to support worker organizing and collective bargaining and to promote equality of bargaining power between employers and employees. This

may include the development of policies and practices that could be used to promote worker power. Applicants can describe their plans and specific activities to promote this activity in the application narrative.

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.

Human Subjects Protection

Federal regulations ([45 CFR part 46](#)) require that applications and proposals involving human subjects must be evaluated with reference to the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained. If you anticipate research involving human subjects, you must meet the requirements of the HHS regulations to protect human subjects from research risks.

- Refer to instructions provided in HRSA's [SF-424 R&R Application Guide](#), Appendix Supplemental Instructions for Preparing the Protection of Human Subjects Section of the Research Plan and Human Subjects Research Policy for specific instructions on preparing the human subjects section of the application.
- Refer to HRSA's [SF-424 R&R Application Guide](#) to determine if you are required to hold a Federal Wide Assurance (FWA) of compliance from the Office of Human Research Protections (OHRP) prior to award. You must provide your Human Subject Assurance Number (from the FWA) in the application. If you do not have an assurance, you must indicate in the application that you will obtain one from OHRP prior to award.
- In addition, you must meet the requirements of the HHS regulations for the protection of human subjects from research risks, including the following: (1) discuss plans to seek IRB approval or exemption; (2) develop all required documentation for submission of research protocol to IRB; (3) communicate

with IRB regarding the research protocol; (4) communicate about IRB's decision and any IRB subsequent issues with HRSA.

- IRB approval is not required at the time of application submission but must be received prior to initiation of any activities involving human subjects. Do not use the protection of human subjects section to circumvent any page limitation in the [Methodology](#) portion of the Project Narrative section.

3. Reporting

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

- 1) **Progress Report(s).** The recipient must submit a progress report to HRSA via Electronic Handbooks (EHBs) as part of the non-competing continuation (NCC) renewal on an annual basis. HRSA will verify that that approved and funded applicants' proposed objectives are accomplished during each year of the project.

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

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

More information will be available in the NOA.

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

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

- Project Objectives and Accomplishments - Description of major accomplishments on project objectives.
- Project Barriers and Resolutions - Description of barriers/problems that impeded project's ability to implement the approved plan.

- Summary Information:
 - Project overview.
 - Project impact.
 - Prospects for continuing the project and/or replicating this project elsewhere.
 - Publications produced through this award activity.
 - Changes to the objectives from the initially approved award.

Further information will be provided in the NOA.

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

4) **Other Required Reports and/or Products.**

Proposals. Pending available funding, HRSA will require the award recipient to submit six (6) or ten (10) two-page study/project proposals to NCHWA PO, depending on topic areas, for deliberation for each noncompetitive year (Budget Year 2 through Budget Year 5).

- Six (6) proposals for award recipients of Health Equity in the Health Workforce, Allied Health Workforce, Long-Term Care Support and Services, Oral Health Workforce, Emerging Health Workforce Topics, and Technical Assistance topic areas.
- Ten (10) proposals for award recipients of Public Health Workforce and Behavioral Health Workforce topic areas.

Briefs/Reports. HRSA requires the award recipient to submit a comprehensive brief or report for each study/project to NCHWA PO. These should generally be submitted no later than 180 days after the end of each budget year. If the recipient is aware that it is not likely to meet this deadline, the award recipient must communicate the reasons for the delay to the PO and provide a strategy for finalizing and submitting the brief(s)/report(s) as soon as possible.

For each brief/report, HRSA will also require the award recipient to submit a short abstract (250 words or less) and a two-page brief summarizing the work. The abstract and two-page brief are required to be submitted in addition to the full brief or report described in the preceding paragraph. The PO will provide

templates for the abstract and two-page brief to the award recipient following award.

All products submitted to the PO for review must be submitted in a Word Document compatible with Track Changes to allow for efficient and effective review. PDF versions for review are not acceptable except for final publication to the recipient's website.

HRSA requires the award recipient to work collaboratively with the PO to come to a resolution on all editorial comments.

The award recipient must submit at the end of each budget year an electronic compendium of all abstracts, briefs, reports, and manuscripts (one copy per project) to the PO.

Rapid Response Requests. HRSA requires the award recipient to respond to Rapid Response Requests via a variety of products that may include short reports, memoranda, tables, or other product. Deadlines for responses will be provided by the PO and will usually range from five to ten business days from the date of request.

Publications. The award recipient may submit findings from HWRC studies/projects to peer-reviewed journals for publication under the following conditions. The attribution statement specified below must also be included in every publication.

As a means of sharing knowledge, HHS encourages recipients to arrange for publication of the results and accomplishments of HHS-supported activities. OPDIV prior approval is not required for publishing the results of an activity under a grant. Recipients also may assert copyright in scientific and technical articles based on data produced under the grant and transfer it to the publisher or others where necessary to effect journal publication or inclusion in proceedings associated with professional activities. Any such transfer is subject to the royalty-free, non-exclusive and irrevocable license to the Federal government and any agreement should note explicitly that the assignment is subject to the government license.

Journal or other publication copyright requirements are acceptable unless the copyright policy prevents HRSA from exercising its royalty-free, nonexclusive and irrevocable right to reproduce, publish, or otherwise use the work for Federal purposes, and to authorize others to do so (as provided in 45 CFR § 75.322). The recipient should account for royalties and other income earned from a copyrighted work as specified by the OPDIV (see Part IV and the NoA).

HRSA allows the award recipient to defer publication of information to the award recipient's website of only one study/project in each budget year,

and only in the case where: (1) a recipient intends to submit a manuscript related to that work to a peer-reviewed journal, and (2) the delay is caused by the journal's peer review and acceptance policies.

In these cases, the award recipient will be allowed twelve additional months to complete the journal publication process for this one specific study/project. If the study/project is not accepted for publication within the twelve-month period, the award recipient must submit it promptly (i.e., within one month) for publication on the recipient's website. The award recipient may submit one or more of the remaining budget year studies/projects for journal publication, but these briefs/reports must be posted immediately upon their completion. No delay caused by the journal publication process will be allowed to impede publication on the recipient's website for the remaining briefs or reports.

Attribution. HRSA requires the award recipient to use the following acknowledgement and disclaimer on all products produced by HRSA funds:

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

HRSA requires the award recipient to use the following acknowledgement and disclaimer on all products produced by SAMHSA funds:

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

HRSA requires the award recipient to use the following acknowledgement and disclaimer on all products produced by CDC and HRSA funds:

"This project is/was supported by the Centers for Diseases Control and Prevention (CDC) and the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number and title for grant amount (specify grant number, title, and, if applicable, the percentage financed with nongovernmental sources). This information or content and conclusions are those of the author and should not be

construed as the official position or policy of, nor should any endorsements be inferred by CDC, HRSA, HHS or the U.S. Government.”

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

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

VII. Agency Contacts

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

Gerly Sapphire Marc-Harris
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
5600 Fishers Lane, Mailstop 10SWH03
Rockville, MD 20857
Telephone: (301) 443-2628
Email: SMarc-harris@hrsa.gov

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

Yahtyng Sheu, PhD, MPH
Social Scientist
National Center for Health Workforce Analysis
Bureau of Health Workforce
Health Resources and Services Administration
5600 Fishers Lane, Room 11N86
Rockville, MD 20857
Telephone: (301) 443-1426
Email: YSheu@hrsa.gov

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

Grants.gov Contact Center
Telephone: 1-800-518-4726 (International callers dial 606-545-5035)
Email: support@grants.gov

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 \(EHBs\)](#). Always obtain a case number when calling for support. For assistance with submitting in the EHBs, contact the HRSA Contact Center, Monday–Friday, 7 a.m. to 8 p.m. ET, excluding federal holidays at:

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

VIII. Other Information

Technical Assistance

HRSA will hold a pre-application technical assistance (TA) webinar for applicants seeking funding through this opportunity. The webinar will provide an overview of pertinent information in the NOFO and an opportunity for applicants to ask questions. Visit the HRSA Bureau of Health Workforce's open opportunities website at <https://bhw.hrsa.gov/fundingopportunities/default.aspx> to learn more about the resources available for this funding opportunity.

Tips for Writing a Strong Application

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

In addition, a number of helpful tips have been developed with information that may assist you in preparing a competitive application. This information can be accessed at <http://www.hrsa.gov/grants/apply/write-strong/index.html>.