








# Nurse Education, Practice, Quality, and Retention—Transition to Practice Program (NEPQR-TPP)

Opportunity number: HRSA-26-086



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# Before you begin

If you believe you are a good candidate for this funding opportunity, secure your [SAM.gov](#) and [Grants.gov](#) registrations now. If you are already registered, make sure your registrations are active and up-to-date.

## **SAM.gov registration (this can take several weeks)**

You must have an active account with SAM.gov. This includes having a Unique Entity Identifier (UEI).

[See Step 2: Get Ready to Apply](#)

## **Grants.gov registration (this can take several days)**

You must have an active Grants.gov registration. Doing so requires a Login.gov registration as well.

[See Step 2: Get Ready to Apply](#)

## **Apply by the application due date**

Applications are due by 11:59 p.m. Eastern Time on 06/05/2026.



To help you find what you need, this NOFO uses internal links. In Adobe Reader, you can go back to where you were by pressing Alt + Left Arrow (Windows) or Command + Left Arrow (Mac) on your keyboard.

All activities proposed in your application and budget narrative must align with applicable law, including but not limited to statutes, executive orders, federal regulations and applicable judicial holdings. Accordingly, discretionary awards shall not be used to fund, promote, encourage, subsidize, or facilitate racial preferences or other forms of racial discrimination by the recipient, including activities where race or intentional proxies for race will be used as a selection criterion for employment or program participation; denial by the recipient of the sex binary in humans, or the belief that sex is a chosen or mutable characteristic; illegal immigration; or any other initiatives that compromise public safety. If an application does not align, the application will not receive funding to the extent permitted by law and applicable court orders.



# Step 1:

# Review the Opportunity

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# Basic information

Health Resources and Services Administration

Bureau of Health Workforce

Increasing the nursing workforce in rural and medically vulnerable areas through innovative training opportunities.

## Summary

The Nurse Education, Practice, Quality, and Retention—Transition to Practice Program (NEPQR-TPP) aims to increase the nursing workforce and address the nursing shortage in rural and medically vulnerable communities. It does this by supporting innovative educational and clinical training opportunities.

## Funding details

**Application type:** New

**Expected total available funding in FY 2026:** \$24,262,837

**Expected number and type of awards:** 33 grants

**Funding range per award:** Up to \$750,000 per year. Your funding request for years 2 through 4 cannot exceed the amount requested in year 1.

At least 45% of annual funding must be used to expand experiential learning opportunities, including the purchase simulation-based technology costs, including equipment.

We plan to fund awards in four 12-month budget periods for a total of four years, with a period of performance from 09/01/2026 to 08/31/2030.



**Have questions?**

Go to [Contacts and Support](#).

## Key facts

**Opportunity name:**

Nurse Education, Practice, Quality, and Retention—Transition to Practice Program (NEPQR-TPP)

**Opportunity number:**

HRSA-26-086

**Announcement version:**

Initial

**Federal assistance listing:**

93.359

## Key dates

**NOFO issue date:**

06/15/2026

**Application due date:**

07/17/2026

**Expected award date:**

09/01/2026

**Expected start date:**

09/01/2026

See [other submissions](#) for other time frames that may apply to this NOFO.

# Eligibility

You can apply for this award if you are:

- An accredited school of nursing, as defined in section 801(2).
- A health care facility, including federally qualified health centers or nurse-managed health clinics.
- A partnership of such a school and facility.

## Types of eligible organizations

These types of domestic organizations may apply if they otherwise meet the eligibility criteria.

“Domestic” means the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Northern Mariana Islands, American Samoa, Guam, the U.S. Virgin Islands, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau.

- Public and state controlled institutions of higher education.
- Native American tribal organizations (other than federally recognized tribal governments).
- Private institutions of higher education.
- Others (See text field entitled additional information on eligibility).

## Additional information on eligibility

Section 801(2) defines “school of nursing” as “an accredited (as defined in paragraph 6) collegiate, associate degree, or diploma school of nursing in a State where graduates are— (A) authorized to sit for the National Council Licensure Examination-Registered Nurse (NCLEX–RN); or (B) licensed registered nurses who will receive a graduate or equivalent degree or training to become an advanced education nurse as defined by section 811(b),” such as:

- Baccalaureate nursing programs.
- Community colleges that train associate-degree nurses.

**Individuals are not eligible applicants under this NOFO.**

## Trainee eligibility

To receive support under this program, a trainee must be one of the following:

- A U.S. citizen or non-citizen national.
- An individual lawfully admitted for permanent residence to the United States.
- Any other “qualified alien” under section 431(b) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L 104-193, as amended.

## Qualifications for principal investigator or project director

- The principal investigator (PI) or project director (PD) must be a licensed registered nurse.
- You cannot have multiple project directors.
- The PI/PD cannot be the same person as the authorizing official.

## Completeness and responsiveness criteria

We will review your application to make sure it meets these basic requirements to move forward in the competition.

We will not consider an application that:

- Is from an organization that does not meet all [eligibility criteria](#).
- Requests funding above the award ceiling shown in the [funding range](#).
- Is submitted after the [deadline](#).

If you do not include all required documents as part of the application, we may consider your application incomplete or nonresponsive.

## Application limits

You may not submit more than one application. If you submit more than one application, we will only accept the last on-time submission.

**Application page limit:** 60 pages.

## Cost sharing

This program has no cost-sharing requirement. If you choose to share in the costs of the project, we will not consider it during merit review. Recipients agree that once committed, cost sharing amounts are enforceable and subject to reporting and auditing requirements under 2 CFR 200.

## Maintenance of effort

Federal funds must add to any existing non-federal funds for your proposed activities. If you receive an award, you will have to spend at least as much as you spent in the last fiscal year before the award. 42 U.S.C. §29b(b)(section 803)(b) of the Public Health Service Act) requires this. We will enforce these statutory requirements through all available mechanisms. You must provide supporting documentation of your maintenance of effort in your attachments.

## Post-award requirements

Before you apply, make sure you understand the requirements that come with an award.

See [Step 6: Learn What Happens After Award](#) for information on regulations that apply, reporting, and more.

# Program description

## Purpose

The purpose of the Nursing Education, Practice, Quality, and Retention—Transition to Practice Program (NEPQR-TPP) is to strengthen the nursing workforce and expand access to care. It does this by preparing undergraduate nursing students with the skill set to provide high-quality patient care in [traditional and nontraditional](#) community-based settings.

The program will increase the supply of a high-quality nursing workforce for rural and medically vulnerable communities.

## Background

The nursing shortage continues to affect the quality and stability of health care in the United States. In 2024, the Health Resources and Services Administration (HRSA) projected that by 2037 the country will face a 6% shortage of registered nurses. That equals about 207,980 full-time nurses. Rural areas are expected to face a larger shortage (13%) than metro areas (5%).<sup>[1]</sup> Many experienced nurses are leaving the workforce. At the same time, new nurses often begin their careers with limited support. Some health care facilities also operate with too few staff. These challenges can lead to unsafe nurse-to-patient ratios,<sup>[2]</sup> longer wait times, and delays in care.

To address this problem, health care leaders can invest in pathway programs. These programs help recruit and retain allied health professionals and support them as they move into nursing roles. Schools of nursing, health care facilities, and community partners can work together to provide clinical placements and structured mentoring.<sup>[3]</sup> Nursing programs can also use simulation technology to better prepare students. Simulation connects classroom learning to real-world practice. It helps students build clinical judgment and decision-making skills.

Together, these strategies help new nurses transition into practice and support a strong, stable nursing workforce.

## Program goal and objectives

Goal: Increase the supply of a high-quality nursing workforce for rural and medically vulnerable communities:

- **Objective 1:** Expand and/or enhance the workforce through the development of health professions pathways and competency-based curriculum.
- **Objective 2:** Expand community and clinical training partnerships in non-traditional community-based settings, particularly rural and medically vulnerable areas.
- **Objective 3:** Provide faculty and preceptor training and support.
- **Objective 4:** Expand experiential learning opportunities with the purchase and use of simulation-based technology to enhance academic-practice.

## Program requirements and expectations

Award recipients are required to participate in federally designed evaluations to assess program effectiveness and efficiency upon request.

### Create or strengthen pathways into nursing careers

Recruit and retain people with prior health care experience into your associate or bachelor's degree nursing program. This includes, but is not limited to:

- Licensed practical nurses (LPNs).
- Emergency medical technicians (EMTs).
- Certified nursing assistants (CNAs).
- Medical assistants (MAs).
- Community health workers (CHWs).
- Home health aides (HHAs).

### Provide direct support to nursing students and trainees

Support enrolled students and trainees through:

- Financial assistance, such as stipends or scholarships.
- Academic and peer support, including tutoring, supplemental instruction, and remediation.
- Mentoring through a formal mentorship program in partnership with professional nursing organizations and community-based organizations.

## Develop or strengthen student-centered, competency-based curricula

Develop or improve associate and bachelor's degree registered nursing curricula that include both classroom (didactic) and clinical training.

Your curriculum must:

- Use at least three of the six elements that define competency-based education:
  - Instruction.
  - Assessment.
  - Grading.
  - Pace.
  - Progression.
- Address Make America Healthy Again (MAHA) priorities,<sup>[6]</sup> such as disease prevention, wellness, obesity, nutrition, and chronic disease management, or other HHS priorities.

## Expand academic–clinical partnerships

Build or strengthen partnerships in nontraditional, community-based health care settings. These may include:

- Community health centers.
- Schools.
- Homeless shelters.
- Nurse-led clinics.
- Home health settings.
- Palliative care facilities.
- Mobile health units.

Your program must provide at least 100 additional clinical hours beyond standard nursing clinical rotations.

## Address clinical skills gaps through simulation

Use simulation-based technology, including high-fidelity simulation equipment, to strengthen clinical skills and prepare students to work in rural and medically vulnerable communities.

Students and trainees may complete no more than 50% of the additional clinical hours through simulation.

Simulation-based training must include:

- Collaborative, interprofessional team-based care.
- Measurable clinical competencies that build on knowledge and experience.
- Community-based practice scenarios that address MAHA priorities.
- Integration of competencies from the International Nursing Association for Clinical Simulation and Learning (INACSL).
- Funding for an academic nursing faculty member or coordinator to support best-practice simulation activities.
- At least 45% of annual funding must be used to expand experiential learning opportunities, including the purchase simulation-based technology costs, including equipment.

## Support and develop nursing faculty

Provide professional development and training opportunities for nursing faculty, clinical faculty, and preceptors.

## Statutory authority

42 U.S.C. 296p (Section 831 of the Public Health Services Act)

# Award information

## Funding policies and limitations

### Changes in HHS regulations

As of October 1, 2025, HHS has adopted [2 CFR Part 200](#), with some modifications included in 2 CFR Part 300. These regulations replace those in 45 CFR Part 75.

### Policies

- To make an award, funding must be available and allocated for this program and purpose, at which point we will move forward with the review and award process.
- Have clear policies and good financial practices to avoid spending HRSA funds on unallowable activities. Like other award rules, we may audit your policies, procedures, and controls.
- Support beyond the first budget year will depend on:
  - Appropriation of funds.
  - Your satisfactory progress in meeting the project's objectives.
  - A decision that continued funding is in the government's best interest.
- If we receive more funding for this program, we may:
  - Fund more applicants from the rank order list.
  - Extend the period of performance.
  - Award supplemental funding.

### General limitations

- For guidance on some types of costs we do not allow or restrict, see:
  - Project Budget Information in Section 3.1.4 of the [R&R Application Guide \[PDF\]](#). You can also see [2 CFR Part 200 Subpart E](#)—General Provisions for Selected Items of Cost.
  - Allowable and Unallowable Costs and Activities, in the [HHS Grants Policy Statement](#).
- All costs must be [reasonable](#), necessary, [allocable](#) to the award, and adequately documented ([2 CFR 200.403](#)).
- You cannot earn profit from the federal award. See [2 CFR 200.400\(g\)](#).
- 
- Current appropriations law includes a salary limit of \$228,000 as of January 2026 that applies to this program. You may pay salaries at a rate higher than the

Executive Level II if the amount beyond the HHS SRL is paid with non-HHS funds. For help calculating salaries under this limit, read more at “salary rate limitation” in the [R&R Application Guide \[PDF\]](#).

## Program-specific statutory or regulatory limitations

Additionally, these specific costs are not allowed:

- Accreditation costs.
- Renewals or annual fees.
- Credentialing.
- Certification exam or licensing fees.
- Franchise fees and expenses.
- Membership fees to organizations that directly fund lobbying activities.
- Laboratory fees.
- Food or drinks.
- Liability insurance, unemployment insurance, life insurance, taxes, fees, retirement plans, or other fringe benefits for students/trainees.
  - Health insurance for students/trainees is allowed.
- Payment of temporary personnel replacement costs for the time faculty, preceptors, or participants are away from their usual worksite during project activities.
- Paid release time for project faculty.
- Construction or major renovation.
- Foreign travel.

See [Manage Your Grant](#) for other information on costs and financial management.

## Indirect costs

Indirect costs are costs you charge across more than one project that cannot be easily separated by project. For example, this could include utilities for a building that supports multiple projects.

As of October 1, 2025, [2 CFR 300.414](#) indirect costs for training awards cannot exceed 8% of modified total direct costs. To calculate the (MTDC), we exclude from the direct cost base:

- Direct cost amounts for equipment, tuition, fees, and participant support costs.
- Subawards and subcontracts exceeding \$50,000.

For modified total direct costs, we use the definition at [2 CFR 200.1](#).

Consider your indirect costs when developing your [budget](#).

## Program income

Program income is money earned as a result of your award-supported project activities. You must use any program income you generate from awarded funds for approved project-related activities. Find more about program income at [2 CFR 200.307](#).



# Step 2:

## Get Ready to Apply

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# Get registered

## SAM.gov

You must have an active account with SAM.gov to apply. SAM.gov registration can take several weeks. Begin that process today.

To register:

- Go to [SAM.gov Entity Registration](#) and select Get Started. From the same page, you can also select the Entity Registration Checklist for the information you will need to register.
- You must agree to the [financial assistance general certifications and representations \[PDF\]](#) specifically. Those for contracts are different.

When you register, you will also receive your required Unique Entity Identifier (UEI).

Once you register:

- You will have to maintain your registration throughout the life of any award.
- If your organization has multiple UEIs, use the one associated with your physical location.

If you need additional information about user roles in SAM.gov, see “Get registered: SAM.gov user roles” in the [R&R Application Guide \[PDF\]](#).

## Grants.gov

You must also have an active account with [Grants.gov](#). You can see step-by-step instructions at the Grants.gov [Quick Start Guide for Applicants](#) and [How to Apply for Grants](#).

# Find the application package

The application package has all the forms you need to apply. You can find it online. Go to [Grants Search at Grants.gov](#) and search for opportunity number HRSA-26-086.

After you select the opportunity, we recommend that you click the Subscribe button to get updates.

# Application writing help

Visit [HHS Tips for Preparing Grant Proposals](#).

Visit [HRSA's How to Prepare Your Application](#) page for more guidance.

See [Apply for a Grant](#) for other help and resources.

## Join the webinar

For more information about this opportunity, Visit the [Bureau of Health Workforce's open opportunities](#) website. The webinar will be recorded.



**Have questions?** Go to [Contacts and Support](#).

FAQs will be posted on the Bureau of Health Workforce's open opportunities website.



# Step 3:

# Build Your Application

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# Application checklist

There are two types of forms in Grants.gov.

- Some forms allow you to upload components of your application to the form. These include components like your project narrative, budget and budget narrative, and attachments, as applicable.
- Other forms are more typical, fill-in-the-blank forms.

Make sure that you have everything you need to apply.

## Narratives

See the instructions for the [project narrative](#) and the [budget and budget narrative](#).

Component	Form	Included in page limit**?
<input type="checkbox"/> <a href="#">Project narrative</a>	Research & related other project information	Yes*
<input type="checkbox"/> <a href="#">Budget and budget narrative</a>	Research & related budget	Yes*

## Attachments

See [instructions for attachments](#).

Form	Included in page limit**?
<input type="checkbox"/> 1. Accreditation documentation	Yes
<input type="checkbox"/> 2. Project organizational chart	Yes
<input type="checkbox"/> 3. Agreements with entities	Yes
<input type="checkbox"/> 4. Staffing plan and job descriptions	Yes
<input type="checkbox"/> 5. Maintenance of effort documentation	Yes
<input type="checkbox"/> 6. Funding preference or priority documentation	Yes
<input type="checkbox"/> 7. Tables and charts	Yes
<input type="checkbox"/> 8. Letters of support	Yes
<input type="checkbox"/> 9-15. Other relevant documents	Yes

## Other required forms

See [form instructions](#).

Form	Included in page limit**?
<input type="checkbox"/> SF-424 R&R (Application for federal assistance)	No
<input type="checkbox"/> Project abstract summary form	No
<input type="checkbox"/> Research & related other project information	No
<input type="checkbox"/> Research & related senior/key person profile (expanded)	No
<input type="checkbox"/> R&R subaward budget attachment(s) form	Yes*
<input type="checkbox"/> Project/performance site location(s)	No
<input type="checkbox"/> Disclosure of lobbying activities (SF-LLL)	No
<input type="checkbox"/> Standardized work plan (SWP) form	No

\* Unless otherwise indicated, only what you attach to a form counts toward the page limit. The form itself does not count.

# Application contents and format

This section includes guidance on each component found in the application checklist.

**Application page limit:** 60 pages

Submit your information in English and express whole number budget figures using U.S. dollars.

## Required format

Required format for project summary, project narrative, budget narrative, and attachments.

**Font:** A readable font like Arial, Courier, CG Times, or Times New Roman.

**File format:** We only accept the following document formats:

- .PDF—Adobe Portable Document Format
- .DOC/.DOCX—Microsoft Word
- .RTF—Rich Text Format
- .TXT—Text
- .WPD—Word Perfect Document
- .XLS/.XLSX—Microsoft Excel
- .VSD—Microsoft Visio

**Size:** 12-point font

Footnotes, charts, graphics, and budget tables may be 10-point or higher.

**Ink color:** Black

**Spacing:** Single-spaced, including all text and tables.

**Alignment:** Left

**Headings:** Bold all headings and align left.

**Size:** 8.5 x 11 (Make sure the print area is set and allows printing to 8.5 x 11.)

**Margins:** 1-inch on all sides

**Footer:** On each page as the footer, include your organization's name and page numbers. If a competing continuation or competing supplement, also include your 10-digit award number.

**Page numbering:**

- Do not number the standard OMB-approved forms.
- Number each attachment page sequentially (that is, 1, 2, 3).
- Reset the numbering for each attachment.
- Treat each attachment as a separate section.

**File names:** You can find guidance for naming your files in the [R&R Application Guide \[PDF\]](#).

## Project narrative

Use the Research & Related Other Project Information form to attach the project narrative. In the project narrative, you will describe all aspects of your project.

Use the section headers and the order as listed.

### Introduction

**See merit review criterion 1:** [Need](#)

Briefly describe the purpose of your project and how it aligns with this funding opportunity.

### Need

**See merit review criterion 1:** [Need](#)

- Describe the nursing workforce shortages, needs, barriers, and nurse-retention challenges in your target service area or areas.
- Detail the need for a nursing pathway that recruits, enrolls and retains LPNs and/or unlicensed assistive personnel such as EMTs, CNAs, and HHAs to address the shortages and retention challenges.
- Identify critical gaps in your organization's professional development and mentoring programs that support nursing students/trainees in their transition to practice.
- Identify gaps in current curricula and traditional training models and show how you will use competency-based nursing education to overcome these gaps.
- Briefly describe challenges with access to community-based care in your service areas.
- Describe simulation-based equipment and training needed to implement the proposed project.

## Approach

### See merit review criterion 2: [Response](#)

- Describe how your project will address your stated needs and meet the [program requirements described in this NOFO](#).
- Explain your program's plan to recruit, train, and retain undergraduate nursing students/trainees. Explain how your project will provide professional development and mentoring for nursing students/trainees entering the nursing workforce.
- Describe plans to develop and implement student-centered, competency-based learning models, meaningful and measurable simulation competencies, and didactic and innovative experiential training.
- Describe innovative solutions to improve access to community-based care and address MAHA priorities in your service areas.
- List and describe each partnership you will form to meet the goals and objectives of the project.
  - Provide the location, type of facility, population served, and learning opportunities available at each clinical training site.
  - Describe how each site will provide meaningful experiential learning opportunities for students/trainees.
  - Provide letters of agreement or memoranda of understanding for these partnerships in [Attachment 3](#).
  - Include a plan to collect data, create reports, and disseminate your findings.

## High-level work plan

### See merit review criteria 2: [Response](#) and 4: [Impact](#)

- Describe how you'll achieve each of your project goal and objectives during the period of performance.
- Identify key stakeholders responsible for planning, designing, and carrying out all project activities.
- Provide a timeline that identifies each activity and the responsible stakeholder for each activity.
- Identify the projected number of students/trainees who you will support over the period of performance.
- Complete your [Standardized Work Plan \(SWP\)](#).

## Resolving challenges

### See merit review criterion 2: [Response](#)

- Discuss challenges that you are likely to encounter in designing and carrying out the activities in the work plan. Explain approaches that you'll use to resolve them.

## Performance management

See merit review criteria 3: [Performance management](#) and 5: [Resources and capabilities](#)

- **Outcomes.** Describe the expected outcomes (desired results) of the funded activities.
- **Performance measurement and reporting.** See the webpage [Report on Your Grant](#) for annual performance measure requirements and an example of reporting forms.
  - Describe how you will collect and report required performance data accurately and on time.
  - Describe how you will manage and securely store data.
  - Describe how you will track students/trainees for up to one year after they complete the program.
- Describe how you will monitor and analyze performance data to continuously improve your program.
- **Program evaluation.** Your evaluation should examine processes and progress toward [program goals](#), [program objectives](#), and expected outcomes. Evaluations must follow the HHS Evaluation Policy, as well as the standards and best practices described in [OMB Memorandum M-20-12: Program Evaluation Standards and Practices \[PDF\]](#). Describe your plan to evaluate the project, including:
  - The evaluation questions, methods, data to be collected, and timeline for implementation.
  - The evaluation barriers and your plan to address them.
  - The evaluation capacity of your organization and staff. Including experience, skills, and knowledge.
  - How you will disseminate results, how you will assess whether your dissemination plan is effective, whether the results are national in scope, and the extent of potential replication.

See the [reporting](#) section for more information.

## Sustainability

See merit review criterion 4: [Impact](#)

We expect you to sustain key project elements that improve practices and outcomes for the target population. Propose a plan for project sustainability after the period of federal funding ends.

- Highlight key elements of your project. Examples include training methods or strategies that have been effective in enhancing a student's learning, knowledge, and skills.
- Describe the actions you will take to obtain future sources of funding.
- Determine the timing to become self-sufficient.
- Discuss the challenges that you will likely encounter in sustaining the program. Include how you will resolve these challenges.

## Organizational information

### See merit review criterion 5: [Resources and capabilities](#)

- Briefly describe your mission, structure, and the scope of your current activities. Explain how they support your ability to carry out the program requirements. Include a [project organizational chart as Attachment 2](#).
- Discuss how you will follow the approved plan, account for federal funds, and record all costs to avoid audit findings.
- Describe how you will assess the unique needs of the students/trainees you serve.
- Including a staffing plan and job descriptions for key faculty and staff in [Attachment 4](#).
- Describe the organizations you will partner with to fulfill the program goals and meet the training objectives. Including key agreements in [Attachment 3](#) and letters of support in [Attachment 8](#).
- You will also include biographical sketches for key staff using the Research & Related Senior/Key Person Profile form. See the [other required forms](#).

# Budget and budget narrative

See merit review criterion 6: [Support requested](#)

Your **budget** should follow the instructions in budget narrative: detailed instructions section of the [R&R Application Guide \[PDF\]](#) and any specific instructions listed in this section.

HHS now uses the definitions for [equipment](#) and [supply](#) in [2 CFR 200.1](#). The new definitions change the threshold for equipment to the lesser of the recipient's capitalization level or \$10,000 and the threshold for supplies to below that amount.

The total project or program costs are all allowable (direct and indirect) costs used for the HRSA activity or project. This includes costs charged to the award and nonfederal funds used to satisfy any matching or cost sharing requirement (which may include maintenance of effort, if applicable).

**Reminder:** Indirect costs for training awards cannot exceed 8% of modified total direct costs.

The **budget narrative** supports the information you provide in the Research and Related Budget Form. The merit review committee reviews both. Your budget should show a well-organized plan.

The budget narrative includes an itemized breakdown and a clear justification of the requested costs. As you develop your budget, consider:

- If the costs are reasonable, allowable and allocable, and consistent with your project's purpose and activities.
- Restrictions on spending funds. See [funding policies and limitations](#).

In addition, NEPQR-TPP requires the following:

- List the costs of simulation equipment and justify why you need the equipment to carry out the program's goals.
- Provide a detailed itemized per-unit cost that shows how costs were estimated and total cost. At least 45% of annual funding must be used to expand experiential learning opportunities, including the purchase simulation-based technology costs, including equipment.

To create your budget justification narrative, see budget narrative instructions in the [R&R Application Guide \[PDF\]](#).

## Participant and trainee support costs

In your budget narrative:

- List tuition, fees, health insurance, stipends, travel, subsistence, and other costs.
- Identify the number of students/trainees and the cost per student/trainee.
- Separate these costs from others so we can identify them easily.
- Include a subtotal titled “Total Participant and Trainee Support Costs” with the summary of these costs.
- You must allocate at least 10% of the total annual budget to support participants and trainees.

## Preceptor costs

Preceptors can be either your employee, contractor, or consultant. Preceptor costs are unique and different than trainee costs, which are for your students/trainees. Allowable preceptor costs may include:

- Stipends (other than employees).
- Percentage of salary (for employees).
- Continuing education, other training, and related fees.
- Travel.

**Note:** You cannot require students/trainees to pay for preceptor costs.

- If the preceptor is an employee, specify those costs under Section B. Other Personnel, Section D. Travel, and Section F. Other Direct Costs.
- If the preceptor is a consultant or contractor, lists those costs under Section F. Other Direct Costs.
- Include the number of preceptors in your budget narrative.

## Consultants

Identify each consultant, the services they will perform, the total number of days, travel costs, and the total estimated costs.

# Attachments

See section [3.2 of the HRSA R&R Application Guide \[PDF\]](#).

Place your PDF attachments in order in the **Attachments form**. See the [application checklist](#) to determine if they count toward the page limit.

Unless the instructions below require it, do not submit organizational brochures or other promotional materials (for example, slides, films, clips).

## Attachment 1: Accreditation documentation

**Required:** You must provide documentation of your nursing program's accreditation. All nursing programs that are associated with the project must be accredited for the purpose of nursing education. Schools of nursing affiliated with the proposed project that provide formal degree programs must be accredited by a national nurse education accrediting agency or state approval agency recognized by the secretary of the U.S. Department of Education for the purposes of nursing education.

Please do not provide only the web link to the accreditation body's website. HRSA will not open any links included in the application.

You must submit documentation that:

- Demonstrates continuing accreditation or approval from the relevant accrediting or approval body.
- Includes the name of the accrediting or authorizing body.
- Provides the date of your initial accreditation approval.
- Provides the date of the next expected accrediting or approval body review, or the expiration date of your current accreditation or approval.
- Provides proof of status if you have provisional accreditation.
- Provides documentation of probationary license with documented next steps and provides a date for follow up approval body review.

If your accreditation or approval status cannot be verified, you will be considered nonresponsive and deemed **ineligible**.

You are responsible for verifying that all project partners maintain current accreditation or approval throughout the period of performance.

## Newly established programs of nursing accreditation

A new program of nursing that, by reason of an insufficient period of operation, is not, at the time of the submission of an application, eligible for accreditation by such a recognized body or bodies or state agency, shall be deemed accredited for the

purposes of this title if the secretary of education finds, after consultation with the appropriate recognized state approval or accrediting body or bodies, that there is reasonable assurance that the program will meet the accreditation standards of such body or bodies prior to the beginning of the academic year following the normal graduation date of students of the first entering class in such a program. The **letter of reasonable assurance** from the U.S. Department of Education must be submitted with the application.

## Health care facilities

If you partner with a nursing program, that nursing program must be accredited. You must provide documentation of your partnering nursing program's accreditation or probationary accreditation. All nursing programs that are associated with the project must be accredited for the purpose of nursing education. Please see requirements for accreditation documentation at the beginning of this section.

## Attachment 2: Project organizational chart

**Required:** You must provide a one-page diagram that shows the full project's organizational structure. Include all aspects, not just the applicant organization.

## Attachment 3: Agreements with other entities

**Required:** You must provide any documents that describe working relationships between your organization and others you refer to in the proposal, such as partnerships between health care facilities and schools of nursing. Documents that confirm actual or pending contracts or agreements should clearly describe the roles of subrecipients and contractors and any deliverables. It is not necessary to include the entire contents of lengthy agreements, so long as the portions you include describe the working relationship between you and the other organization. Make sure letters of agreement are signed and dated.

## Attachment 4: Staffing plan and job descriptions

**Required:** See Section 3.1.7 of the [R&R Application Guide \[PDF\]](#).

You must include a staffing plan that shows the staff positions that will support the project and key information about each. Justify your staffing choices, including education and experience qualifications and your reasons for the amount of time you request for each staff position.

For key personnel, attach a one-page job description. It must include the role, responsibilities, and qualifications.

## Attachment 5: Maintenance of effort documentation

**Required:** You must include nonfederal funds that support proposed activities. These include cash, in-kind, and other contributions. Do not include any federal funds. See the [maintenance of effort requirement in the eligibility section](#).

FY before application: Actual nonfederal expenditures	First FY of award: Estimated nonfederal expenditures
\$	\$

## Attachment 6: Funding preference documentation

**As applicable:** Provide documents that identify and prove you qualify for a funding preference.

See the [selection process section](#) for information about how these apply.

## Attachment 7: Tables and charts

**As applicable:** Provide tables or charts that give more details about the proposal. These might be Gantt, PERT, or flow charts.

## Attachment 8: Letters of support

**As applicable:** You may provide letters of support from other organizations or departments involved in the proposed project.

Letters of support can also be from individuals within your institution who hold the authority to speak for the organization or department, such as a CEO or chair.

Recommenders should indicate an understanding of and commitment to the project, and what their contribution to the project will be. You should reference letters of support in the applicable section of the project narrative.

Recommenders must sign and date their letter of support for the document to be considered.

## Attachments 9–15: Other relevant documents

**As applicable:** You may use attachments 9 through 15 to add other relevant documents.

## Other required forms

You will need to complete some other forms. Upload the following forms at Grants.gov. You can find them in the NOFO [application package](#) or review them and any available instructions at [Grants.gov Forms](#).

Forms	Submission Requirement
<input type="checkbox"/> SF-424 R&R (Application for federal assistance)	With application.
<input type="checkbox"/> Project abstract summary	With application.
<input type="checkbox"/> Research & related other project information	With application.
<input type="checkbox"/> Research & related senior/key person profile (expanded)	With application.
<input type="checkbox"/> R&R subaward budget attachment(s)	With application.
<input type="checkbox"/> Project/performance site location(s)	With application.
<input type="checkbox"/> Disclosure of lobbying activities (SF-LLL)	If applicable, with the application or before award.
<input type="checkbox"/> Standardized work plan (SWP)	With application.

## Form instructions

In addition to the requirements for the [budget narrative](#), [project narrative](#), and [attachments](#), following are instructions for each of the other forms required by this NOFO. See the [application checklist](#) for a full list of all application requirements.

### SF-424 (R&R) Application for Federal Assistance

This is your application for federal assistance. Follow the instructions in section 3.1.1 of the [R&R Application Guide \[PDF\]](#). This is the application for federal assistance.

#### Important: Public information

When filling out your SF-424 form, pay attention to Box 15: Descriptive Title of Applicant's Project.

We share what you put there with [USAspending](#). This is where the public goes to learn how the federal government spends their money.

Instead of just a title, insert a short description of your project and what it will do.

[See instructions and examples \[PDF\]](#).

## Project abstract summary form

Complete the information in the Project Abstract Summary Form. Include a short description of your proposed project. Include the needs you plan to address, the proposed services, and the population groups you plan to serve.

When writing your summary:

- Use 4,000 characters or fewer.
- Make sure it's clear, accurate, and short.
- Do not refer to other parts of the application.
- Do not include [personally identifiable information \(PII\)](#) in the abstract form.

If you receive an award, we'll put your project abstract on public websites and databases, including [USAspending.gov](https://USAspending.gov).

## Research & related other project information

In addition to the requirements in the [project narrative](#) section, you will provide some additional information in this form.

- Complete sections 1 through 6.
- Upload a blank document in item 7: Project Summary/Abstract to avoid a cross-form error with your Project Abstract Summary Form.
- Upload your project narrative in item 8.
- Leave items 9, 10, and 11 blank.

## Research & related senior/key person profile (expanded)

Include biographical sketches for people who will hold the key positions.

- Try to use no more than two pages per person.
- Do not include non-public [personally identifiable information](#).
- If you include someone you have not hired yet, include a letter of commitment from that person with their biographical sketch.
- Upload sketches in the Research & Related Senior/Key Person Profile form.
- Include:
  - Name and title.
  - Education and training. For each entry include institution and location, degree and date earned, if any, and field of study.
  - Section A, Personal Statement. Briefly describe why the individual's experience and qualifications make them well-suited for their role.

- Section B, Positions and Honors. List in chronological order previous and current positions. List any honors. Include present membership on any federal government public advisory committee.
- Section C, Other Support. This section is optional. List selected ongoing and completed projects during the last three years. Begin with any projects relevant to the proposed project. Briefly indicate the overall goals of the projects and responsibilities of the person.

## R&R subaward budget attachment(s) form

You will also complete the R&R Subaward Budget Attachment(s) form for each subaward you propose. These include subcontracts.

Use the following instructions:

- Once you open this form, you can select “Click here” to extract the R&R Subaward Budget Attachment.
- Save the file and then open it to complete it.
- Once you save the file you can upload it within the form.
- Repeat the steps for each subaward.

If you have more than 10 subawards, you may upload the extra budget forms in the Research & Related Other Project Information form in Block 12, Other Attachments.

## Project/performance site location(s)

Follow the form instructions in [Grants.gov Forms](#). Use the “Next Site” option rather than “Additional Location(s)” to add more than one project/performance site location.

## Disclosure of lobbying activities (SF-LLL)

Follow the form instructions in [Grants.gov Forms](#).

## Standardized work plan form

**Does not count toward the page limit.**

In addition to the requirements in [project narrative, high-level work plan](#), follow these instructions:

- Submit your workplan through the Standardized Work Plan (SWP) form. Provide a detailed work plan that demonstrates your experience or ability implementing a project of the proposed scope.
- Follow the instructions in the SWP form.
- Select your organizational priorities that best fit the objective.
- As specified in the NOFO, [program goal and objectives](#) must be copied as stated.



# Step 4: Understand Review, Selection, and Award

## In this step

Application review	<a href="#"><u>37</u></a>
Selection process	<a href="#"><u>42</u></a>
Award notices	<a href="#"><u>43</u></a>

# Application review

## Initial review

We will review your application to make sure that it meets [eligibility](#) criteria, including the [completeness and responsiveness criteria](#). If your application does not meet these criteria, we will not fund it. If this is the case, we will notify your authorized official.

We will not review any pages that exceed the page limit.

## Merit review

A panel reviews all applications that pass the initial review. You can find more about the merit review process in the [R&R Application Guide \[PDF\]](#). The members use these criteria.

Criterion	Total number of points = 100
1. Need	10 points
2. Response	40 points
3. Performance management	25 points
4. Impact	10 points
5. Resources and capabilities	10 points
6. Support requested	5 points

### Criterion 1: Need (10 points)

See the project narrative [Introduction](#) and [Need](#) sections.

The panel will review your application for how well it:

- Describes the purpose of your project and how it aligns with the purpose of the funding opportunity.
- Describes the nursing workforce shortages, needs, and retention challenges in your target service areas.
- Describes plan to establish a pathway that recruits, enrolls, and retains LPNs and/or unlicensed assistive personnel such as EMTs, CNAs, and HHAs to address shortages, needs, and barriers.
- Describes gaps in current training models and how you will use competency-based nursing education to overcome identified gaps.

- Identifies gaps in professional development and mentoring programs that support nursing students/trainees in their transition to practice.
- Describes the patient population served, and the challenges with access to community-based care in your target service areas.
- Uses and cites relevant data whenever possible.

## Criterion 2: Response (40 points)

See the project narrative [Approach](#), [High-level work plan](#), and [Resolving challenge](#) sections.

The panel will review your application for the following.

### Approach (25 points)

- How well the activities described will address the problem and meet project requirements and expectations.
- How well it describes your plan to recruit, train, and retain undergraduate registered nursing students/trainees—including with student-centered learning models, mentoring, and other innovative experiential trainings.
- How well it proposes strategies for professional development and supporting nursing students/trainees to improve retention.

### High-level work plan (10 points)

- The projected number of nursing students/trainees you will support over the period of performance.
- How well it describes plans to improve access to primary or community-based care and build partnerships for experiential training in the target areas.

### Resolution of challenges (5 points)

- How well it describes the obstacles and challenges you may face during project design and implementation. This includes the quality of your plan to deal with them.

## Criterion 3: Performance management (25 points)

See the project narrative [Performance reporting and evaluation](#) section.

The panel will review your application for how well it does the following.

### Evaluation (15 points)

- Demonstrates strong and effective methods to manage, secure, monitor, analyze, and evaluate project data and results.
- Includes measures to assess that program objectives have been met and to what extent the results are because of the project.
- Presents a quality plan to collect and manage data to ensure accurate and timely performance.
- Includes a process to collect data from trainees for up to one year after program completion.
- Includes a plan to use collected data to improve the program.
- Anticipates evaluation obstacles and explains how you will address them.
- Describes plans for effectively sharing project results that could be replicated by others or be national in scope.

### Performance measurement (10 points)

- Provides evidence that the measures assess how well program objectives have been met and to what extent the results are attributed to the project.
- Describes a clear plan to collect and manage data to ensure accurate and timely performance.
- Includes a process to collect, manage, store, and report NPI numbers for eligible participants.
- Describes the ability to track trainees after program completion for up to one year.

## Criterion 4: Impact (10 points)

The panel will review your application for:

- How effective the proposed project is likely to be.
- How strong a public health impact it is likely to have.
- How likely the project results could be national in scope.
- How easy it will be to replicate project activities.
- How likely it is that the program will continue beyond the federal funding.
- How clear and detailed your Standardized Work Plan is for carrying out the project.

## Criterion 5: Resources and capabilities (10 points)

See the project narrative [Organizational information](#) and [Performance reporting and evaluation](#) sections.

The panel will review your application to determine the extent to which:

- You provided organizational information describing the purpose, mission, structure, and scope of your current activities and how they will support your ability to carry out this program's requirements.
- Project staff have the training or experience to carry out the project.
- Project staff have the training and experience to carry out performance reporting (and program evaluations, if applicable).
- You have the capabilities to fulfill the needs of the proposed project.
- You have quality facilities available to carry out the project.
- You have the capacity to gather, manage, and use data.
- You have collaborative partners and practice sites available to fulfill the needs of the project.
- It includes letters of agreement, memoranda of understanding, and/or letters of support from collaborating partners and practice sites ([Attachment 3](#) and [Attachment 8](#)).

## Criterion 6: Support requested (5 points)

See the [Budget and budget narrative](#) section.

The panel will review your application to determine:

- How reasonable the proposed budget is for each year of the period of performance.
- How reasonable the costs are and how well they align with the project's scope.
- Whether it allots enough time for key staff to spend on the project to achieve project objectives.
- Whether the costs for trainee support are reasonable and support the project objectives.
- Whether you clearly describe the number of trainees and the cost per trainee.
- The extent to which simulation training equipment and other simulation costs are fully itemized and justified.

We do not consider **voluntary** cost sharing during merit review.

## Risk review

Before making an award, we review your award history to assess risk. We need to ensure all prior awards were managed well and demonstrated sound business practices. We:

- Review any applicable past performance.
- Review audit reports and findings.
- Analyze the budget.
- Assess your management systems.
- Ensure you continue to be eligible.
- Make sure you comply with any public policies.

We may ask you to submit additional information.

As part of this review, we use SAM.gov Entity Information [Responsibility/Qualification](#) to check your history for all awards likely to be more than \$250,000 over the period of performance. You can comment on your organization's information in SAM.gov. We'll consider your comments before making a decision about your level of risk.

If we find a significant risk, we may choose not to fund your application or to place specific conditions on the award.

For more details, see [2 CFR 200.206](#).

# Selection process

When making funding decisions, we consider:

- The amount of available funds.
- Assessed risk.
- [Alignment with HRSA Mission and Strategic Priorities](#)
- Merit review results. These are key in making decisions but are not the only factor.

We may:

- Consider the larger portfolio of agency-funded projects, including project type and geographic distribution.
- Consider the funding priorities, funding preferences, and special considerations listed.
- Fund out of rank order.
- Fund applications in whole or in part.
- Fund applications at a lower amount than requested.
- Decide not to allow a recipient to subaward if they may not be able to monitor and manage subrecipients properly.
- Choose to fund no applications under this NOFO.

Additionally, we may not make an award if you are delinquent on two or more Single Audit Reports.

You cannot appeal a denial, or the amount of funds awarded.

## Funding preferences

This program includes funding preferences, based on 42 U.S.C. § 296d (section 805 of the Public Health Service Act). Funding preference determinations will be made by HRSA program staff. If we determine that your application meets these criteria, we will move it up in our ranking of fundable applications. Qualifying for a funding preference does not guarantee that you will receive funding.

You can only qualify for one funding preference. HRSA staff will be responsible for determining the funding preference.

Qualifications to meet the funding preferences:

### Qualification 1: Substantially benefits rural populations.

You can request a funding preference if:

You insert the address of the partnering clinical training site into the [Rural Health Grants Eligibility Analyzer](#) or [Am I Rural? Tool—Rural Health Information Hub](#) and the

site's address is designated as rural. To request the funding preference, include a copy of the results from one of these sites in [Attachment 6](#). Only the first three pages will count toward the page limit.

## Qualification 2: Substantially benefits medically vulnerable populations.

You can request a funding preference if:

You partner with a clinical training site that is serving either:

- A federally-designated medically underserved area (MUA).
- A medically underserved population (MUP).

To confirm that your site is one of these, use the [Shortage Designation Advisor](#). Include the output in [Attachment 6](#). Only the first three pages will count toward the page limit.

## Qualification 3: Helps meet public health nursing needs in state or local health departments.

You can request a funding preference if:

You can demonstrate links or practice collaborations with state or local health departments for practitioners and/or student practicum experiences. You must include a copy of a signed practice agreement in [Attachment 6](#). Only the first three pages will count toward the page limit.

# Award notices

We issue Notices of Award (NOA) on or around the start date listed in the NOFO. See “how we make awards” in the [R&R Application Guide \[PDF\]](#) for more information.

By drawing down funds, you accept the terms and conditions of the award.



# Step 5: Submit Your Application

## In this step

Application submission and deadlines	<u>45</u>
Other submissions	<u>45</u>

# Application submission and deadlines

Your organization's authorized official must certify your application. See the section on [finding the application package](#) to make sure you have everything you need.

## Application deadline

**You must submit your application by 07/17/2026, at 11:59 p.m. ET.**

Grants.gov creates a date and time record when it receives applications.

If you need a deadline extension, see “requesting a waiver” in the [R&R Application Guide \[PDF\]](#).

## Submission method

### Grants.gov

You must submit your application through Grants.gov. You may do so using Grants.gov Workspace. This is the preferred method. For alternative online methods, see [Applicant System-to-System](#).

For instructions on how to submit in Grants.gov, see the [Quick Start Guide for Applicants](#). Make sure that your application passes the Grants.gov validation checks, or we may not get it. Do not encrypt, zip, or password protect any files.

If Grants.gov rejects your application due to errors, you must correct and resubmit before the deadline.

If you want to know more about correcting errors or tracking your application, you can refer to the [R&R Application Guide \[PDF\]](#).

**Have questions?** Go to [Contacts and Support](#).

## Other submissions

### Intergovernmental review

This NOFO is not subject to [Executive Order 12372](#), Intergovernmental Review of Federal Programs. No action is needed.



# Step 6: Learn What Happens After Award

## In this step

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# Post-award requirements and administration

## Administrative and national policy requirements

There are important rules you need to know if you get an award. You must follow:

- All terms and conditions in the Notice of Award. We incorporate this NOFO by reference.
- The regulations at [2 CFR 200](#), Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, modifications at 2 CFR 300, and any superseding regulations.
- The [HHS Grants Policy Statement](#). Your NOA will reference this document. If there are any exceptions to the GPS, they'll be listed in your Notice of Award.
- All federal statutes and regulations relevant to federal financial assistance, including those highlighted in [HHS Grants Policy Statement](#), Appendix D: HHS Administrative and National Policy Requirements.
- The requirements for performance management in [2 CFR 200.301](#).
- All anti-discrimination laws: By applying for or accepting federal funds from HHS, you certify compliance with all federal antidiscrimination laws and these requirements. Complying with those laws is a material condition of receiving federal funding streams. You are responsible for ensuring subrecipients, contractors, and partners also comply.

## Required alignment with HRSA mission and strategic priorities

Recipients must use funds awarded under this NOFO to implement program goals or agency priorities in accordance with the HRSA [vision, mission, core values, and strategic priorities](#), where authorized by law.

In administering programs under this and all funding announcements, HRSA prioritizes:

- **Evidence-based healthcare:** Funding activities supported by rigorous scientific evidence, particularly for programs serving children and adolescents, where HRSA is committed to approaches that reflect the highest standards of clinical care and child safety.
- **Biological and physiological integrity:** Recognizing the relevance of biological sex to health outcomes, HRSA encourages applicants to account for sex-based

health factors in program design, data collection, and service delivery where scientifically appropriate.

HRSA will implement these priorities consistent with applicable laws, regulations, court orders, and all required administrative procedures. Applicants are encouraged to describe how their proposed programs align with these priorities in their project narratives.

Funded activities must advance HRSA's vision of protecting and improving the health and well-being of Americans. The particular focus is on those who are medically vulnerable or live in areas with limited access to care. HRSA's duty is to serve wisely, effectively, and with measurable results that justify every taxpayer dollar invested.

Consistent with HRSA's priorities, in carrying out any project funded under this NOFO, the recipient must adhere to the following principles, where they are consistent with the authority and scope of the award and its activities:

- **Gold standard science:** Design and deliver services using gold standard evidence-based and evidence-informed approaches, establish measurable performance goals, and use data to monitor outcomes and drive continuous improvement.
- **Program integrity and fiscal stewardship:** Recipients must:
  - Administer funds in accordance with all applicable federal statutes, regulations, and award conditions.
  - Maintain strong internal controls.
  - Prevent waste, fraud, and abuse.
- **Partnership and local leadership:** Coordinate with state, tribal, territorial, local, and community partners, as appropriate, and tailor services to meet community-identified needs while respecting local decision-making authority.

Recipients must manage any project awarded under this NOFO in accordance with the following objectives in programs authorized to advance them:

**Make America Healthy Again (MAHA):** HRSA prioritizes the health and well-being of all Americans by supporting common-sense, evidence-based health policies that promote:

- Personal responsibility.
- Strong families and communities.
- Proper nutrition.
- The prevention and management of chronic disease, while ensuring access to high-quality, affordable physical and mental health care.

**Child protections, biological integrity, parental rights, and lawful use of funds:** HRSA prioritizes safeguarding children's health and safety by:

- Not supporting medical interventions for gender dysphoria in minors that lack a strong evidence base.
- Applying sex-based definitions grounded in biological reality.
- Supporting parental authority, transparency, and choice in education, including school-based health centers that respect parental rights and religious upbringing.
- Ensuring taxpayer funds are not used to promote or support elective abortions, consistent with federal law and the Hyde Amendment.

**Advancing evidence-based, merit-driven, and ethically grounded health care:** HRSA will prioritize unbiased, transparent science; merit-based workforce opportunities; and programs that demonstrate measurable outcomes, while deprioritizing organizations with:

- Conflicts of interest.
- “Harm reduction” models.
- Housing-first approaches .
- Activities that facilitate illegal drug use or unsafe medical practices.

**Promoting public safety, lawful use of federal funds, and national health priorities:**

To the extent permitted by law, HRSA will align funding with administration priorities by:

- Supporting ending the HIV epidemic through authorized, evidence-based care.
- Reserving benefits for eligible individuals.
- Discouraging illegal immigration and unsafe community practices.
- Prioritizing recipients that enforce public safety, address serious mental illness and substance use through treatment and recovery, and reduce homelessness responsibly.

To the extent allowable by law, under awards, HRSA will give priority to states and municipalities for programs to:

- Enforce prohibitions on open illicit drug use.
- Enforce prohibitions on urban camping and loitering.
- Enforce prohibitions on urban squatting.
- Enforce, and where necessary, adopt, standards that address individuals who are a danger to themselves or others and suffer from serious mental illness or substance use disorder, or who are living on the streets and cannot care for themselves. The approach must be through assisted outpatient treatment or by moving them into treatment centers or other appropriate facilities through civil commitment or other available means, to the maximum extent permitted by law.

HRSA will implement these priorities consistent with applicable laws, regulations, court orders, and any required procedures.

The recipient must demonstrate ongoing compliance with these priorities, in all programs that are authorized to advance them, through program design, implementation, reporting, and evaluation.

Failure to meaningfully align funded activities with the applicable requirements may result in corrective action, additional reporting requirements, or other actions consistent with federal grant regulations at [2 CFR Part 200](#) and the terms and

conditions of this award. This includes termination under [2 CFR § 200.340\(a\)\(4\)](#) if an award no longer effectuates the program goals or agency priorities.

## Cybersecurity

If awarded, you must develop plans and procedures, modeled after the [NIST Cybersecurity framework](#), to protect HHS systems and data.

## Health IT

Successful applicants under this NOFO agree that:

Where award funding involves:	Recipients and subrecipients are required to:
<p>Implementing, acquiring, or upgrading health IT for activities funded by any entity.</p>	<p>Use health IT that meets standards and implementation specifications adopted in 45 CFR 170, Subpart B, if such standards and implementation specifications can support the activity.</p> <p>Visit <a href="#">45 CFR 170, Subpart B</a> to learn more.</p>
<p>Implementing, acquiring, or upgrading health IT for activities by eligible clinicians in ambulatory settings, or hospitals, eligible under Sections 4101, 4102, and 4201 of the HITECH Act.</p>	<p>Use health IT certified under the <a href="#">ONC Health IT Certification Program</a> if certified technology can support the activity.</p>

If standards and implementation specifications adopted in [45 CFR part 170, subpart B](#) cannot support the activity, recipients and subrecipients are encouraged to use health IT that meets non-proprietary standards and implementation specifications developed by consensus-based standards development organizations. This may include standards identified in the [ONC Interoperability Standards Advisory](#).

# Reporting

If you are successful, you will have to follow the reporting requirements in Section 4 of the [R&R Application Guide \[PDF\]](#). The NOA will provide specific details.

- Progress report(s) each quarter.
- Annual performance reports.
- All HRSA recipients must collect and report performance data so that HRSA can meet its obligations under the Government Performance and Results Modernization Act of 2010 (GPRMA) and the Foundations for Evidence-Based Policymaking Act of 2018.
- The Annual Performance Report (APR) collects data on all academic year activities from July 1 to June 30. It is due to HRSA on July 31 each year. If award activity extends beyond June 30 in the final year of the grant, HRSA may require a Final Performance Report (FPR) to collect the remaining performance data. The FPR is due within 120 calendar days after the period of performance ends.
- You can find examples of APRs at [Report on Your Grant](#) on the HRSA website. Performance measures and reporting forms may change each academic year. HRSA will provide additional information in the Notice of Award (NOA).



# Contacts and Support

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# Agency contacts

## Program and eligibility

### **Michelle Osborne**

Project Officer

Attn: Nurse Education, Practice, Quality, and Retention - Transition to Practice Program  
(NEPQR-TPP)

Bureau of Health Workforce

Health Resources and Services Administration

[nepqrtp@hrsa.gov](mailto:nepqrtp@hrsa.gov)

301-594-3803

## Financial and budget

### **Sara Ritter**

Grants Management Specialist

Division of Grants Management Operations

Office of Financial Assistance and Acquisition Management (OFAAM)

Health Resources and Services Administration

[sritter@hrsa.gov](mailto:sritter@hrsa.gov)

301-945-3998

## HRSA Contact Center

**Open Monday through Friday, 7 a.m. to 8 p.m. ET**, except for federal holidays.

**Call:** 877-464-4772 / 877-Go4-HRSA

**TTY:** 877-897-9910

[Electronic Handbooks Contact Center](#)

# Help with systems

## Grants.gov

Grants.gov provides 24/7 support. You can call 800-518-4726, search the [Grants.gov Knowledge Base](#), or [email Grants.gov for support](#). Hold on to your ticket number.

## SAM.gov

If you need help, you can call 866-606-8220 or live chat with the [Federal Service Desk](#).

## Helpful websites

- [HRSA Grants page](#)
- [HHS Tips for Preparing Grant Proposals](#)
- [Frequently Asked Questions](#)
- [Applicant Training](#)
- [Bureau of Health Workforce Glossary](#)
- [HRSA R&R Application Guide \[PDF\]](#)

## Program-specific definitions

- **Competency-based education**, according to the U.S. Department of Education,<sup>[7]</sup> is an innovative approach in higher education that organizes academic content that measures progress by directly assessing whether a student can demonstrate that they have a command of a specific subject, content area, or skill and can demonstrate a specific quality of the program.
- **Non-traditional clinical training sites** are clinical training locations other than hospitals or private practices. These sites can include community health centers, schools, homeless shelters, nurse-managed clinics, home health environments, palliative care facilities, or mobile units. They offer unique learning opportunities, particularly in rural and medically vulnerable areas.

# Endnotes

1. Health Resources and Services Administration (HRSA), “Nurse Workforce Projections, 2022–2037,” National Center for Health Workforce Analysis, 2024. [↑](#)
2. American Association of Colleges of Nursing (2024). [Nursing Shortage Fact Sheet](#) . A significant segment of the nursing workforce is nearing retirement age. [↑](#)
3. Jackson, D., & Dean, B. A. (2023). [The contribution of different types of work-integrated learning to graduate employability](#). Higher Education Research & Development, 42(1), 93–110. [↑](#)
4. Administration for a Healthy America, [“Justification of Estimates for Appropriations Committees” \[PDF\]](#) (2026). [↑](#)
5. U.S. Department of Education, [“Direct Assessment \(Competency-Based\) Programs”](#) (January 14, 2025). [↑](#)