

Health and Public Safety Workforce Resiliency Training Program (HPSWRTP)

Frequently Asked Questions and Answers (FAQs) Notice of Funding Opportunity Number: HRSA-22-109

Table of Contents

I.	Application Submission	Page 1
II.	Applicant Eligibility	Page 2
III.	Accreditation	Page 4
IV.	Use of HPSWRTP Funds	Page 5
V.	Funding Preference and Priority	Page 7
VI.	Project Period	Page 7

Applicant Submission

1. How can I obtain a copy of the full Notice of Funding Opportunity (NOFO)?

The FY22 HPSWRTP NOFO can be found [HERE](#) on grants.gov. Click on the “Package” tab, and then choose “Preview.” When the window pops up, choose the “Download Instructions” button. You will then have access to the NOFO as a PDF file.

2. I am having trouble printing the NOFO. Can you help me?

For assistance accessing the NOFO, please contact GRANTS.GOV Applicant Support at 1-800-518-4726 or support@grants.gov

3. Where do I find access to the Training Program webinar recording?

The HPSWRTP Technical Assistance webinar is available [HERE](#) and on the Health and Public Safety Workforce Resiliency Training Program website at <https://www.hrsa.gov/grants/find-funding/hrsa-22-109>.

4. Do all attachments count toward the page limit?

Yes, all non-OMB required attachments count toward the page limit. We encourage applicants to print your application in its entirety including all attachments to ensure that you do not exceed the 70-page limit. If an application exceeds the page limit, it will be considered non-responsive and it will not go forward for panel review. See page 8 of the NOFO for more details.

5. Where do I find instructions about font size and other format requirements?

You can find formatting instructions in HRSA's SF-424 R&R Application Guide. The Guide can be found at <http://www.hrsa.gov/grants/apply/applicationguide/sf424rrguidev2.pdf>

6. Are Letters of Agreement and/or Description(s) of Proposed/Existing Contracts required for this cooperative agreement application?

Letters of Agreement and/or Description(s) should be submitted as applicable in Attachment 3. Letters of support should include a description of support and commitment for each organization or department involved in your proposed project. See page 20 of the NOFO for more details.

7. If an attachment is not applicable, should we skip that number in the attachment section or renumber the attachments?

Include all required and applicable attachments with your application. Please do not renumber the attachments. Attachments should be submitted with the same numbers as specified in the NOFO.

8. The SF-424 R&R Application Packet has a section on human subjects. Is this required for this cooperative agreement?

HRSA-22-109 is a training cooperative agreement and there are no human subject requirements for this funding opportunity.

9. What should the logic model include?

Per the NOFO (page 13), a logic model is a one-page diagram that presents the conceptual framework for the proposed project and explains the links among program elements to achieve the relevant outcomes. A logic model must contain the activities and processes and must summarize the connections between the goals of the project, assumptions, inputs, target population, activities, outputs, and outcomes. Additional information on developing logic models can be found here: https://www.cdc.gov/dhdsp/docs/logic_model1.pdf

10. Can an application have more than one Program Director/Program Investigator?

HRSA only recognizes one Program Director/Program Investigator, who will be accountable to for the project. However, applicants can identify multiple key personnel in their proposal.

Applicant Eligibility

11. Which entities are eligible to apply for HRSA-22-109?

Health professions schools, academic health centers, state or local governments, Indian tribes and tribal organizations, or other appropriate public or private nonprofit entities (or consortia of such entities, including entities promoting multidisciplinary approaches). Individuals are not eligible to apply under this NOFO. See section III.1 on page 6 of the NOFO for eligibility criteria.

12. Are hospital associations eligible for these funds?

Yes, hospital associations are eligible to apply as they are considered “appropriate public or private nonprofit entities.” .

13. Are Primary Care Associations and other associations eligible to apply for HRSA-22-109?

Yes, Primary Care Associations and other associations are eligible to apply as they are considered “appropriate public or private nonprofit entities.”

14. A prospective applicant is interested in applying for both the HRSA-22-110 and HRSA-22-109 grants. Are prospective applicants allowed to apply to both announcements?

Yes, prospective applicants may apply for both HRSA-22-110 and HRSA-22-109 grants.

15. Our University consists of 10 separate campuses. Each campus is a degree granting institution (2-year or 4-year degrees) with its own unique DUNS number, but shares the same EIN number. Are we limited to one application for the entire system or one application per DUNS number for each separate campus?

Universities with a different DUNS/UEI number for each campus may each submit an application. Where multiple programs within your organization that do not have separate DUNS/UEI numbers are interested in applying under this funding announcement, you may collaborate across programs to submit a single application.

16. What is the difference between the "Promoting Resilience and Mental Health among the Health Professional Workforce (PRMHW)" and "Health and Public Safety Workforce Resiliency Training (HPSWRTP)?"

The purpose of PRMHW (HRSA-22-110) is to provide support to entities providing health care, health care providers associations, and Federally Qualified Health Centers (FQHCs), taking into consideration the needs of rural and medically underserved communities, to establish, enhance, or expand evidence informed or evidenced-based programs or protocols to promote resilience, mental health, and wellness among their providers, other personnel, and members, collectively known as the “Health Workforce.” Please review the NOFO here.

The purpose HPSWRTP (HRSA-22-109) is to plan, develop, operate or participate in health professions and nursing training activities using evidence-based or evidence-informed strategies, to reduce and address burnout, suicide, mental health conditions and substance use disorders and promote resiliency among health care students, residents, professionals, paraprofessionals, trainees, public safety officers, and employers of such individuals, collectively known as the “Health Workforce,” in rural and underserved communities. Please review the NOFO here.

17. Could you provide further clarification on what would qualify as other “appropriate public or private nonprofit entities”?

Other “appropriate public or private nonprofit entities are eligible public or private nonprofit entities with the ability to address the programmatic goals, objectives, and requirements of the NOFO.

18. Are mental health disciplines included in the term Health Workforce?

Yes, mental health disciplines are included in the term Health Workforce.

19. How does HRSA define entities providing health care?

“Entities providing health care” are entities that provide direct patient care services provided by a licensed health care professional.

20. What is HRSA’s definition of burnout?

HRSA has not established a definition for burnout; however, as noted by the American Psychological Association (APA) on page 2 of the HPSWRTP NOFO, burnout consists of three components: emotional exhaustion, depersonalization of clients, and feelings of ineffectiveness or lack of personal accomplishment. Emotional exhaustion may include feeling overextended, being unable to feel compassion for clients, and feeling unable to meet workplace demands. Depersonalization is the process by which providers distance themselves from clients to prevent emotional fatigue. Finally, feelings of ineffectiveness and lack of personal accomplishment occur when practitioners feel a negative sense of personal and/or career worth.¹

21. Is the consortium approach, wherein an applicant applies in partnership with organizations representing a multi-disciplinary approach preferred as part of the merit-review process? Are single-applicant approaches discouraged?

There is no preference for a consortium. Any eligible applicant may apply, whether or not they are part of a consortium. There is no requirement that an applicant must apply as a consortium. All eligible applicants are encouraged to apply.

Accreditation

22. Are individual programs required to have specialized accreditation to apply?

As stated in the NOFO on page 6, applicants that are institutions of higher education, health professions schools and academic health centers must be accredited by a nationally

¹ Staff, P. (n.d.). Research roundup: Burnout in mental health providers. Retrieved April 13, 2021, from <https://www.apaservices.org/practice/update/2018/01-25/mental-health-providers#:~:text=Burnout%20commonly%20affects%20individuals%20involved,Jackson%20%26%20Lieter%2C%201997>

recognized accrediting body, and must submit their accredited documentation as Attachment 6. Other eligible entities should submit relevant documentation of their approval status to conduct business or provide services by the appropriate approval agency, in place of the accreditation document.

Use of HPSWRTP Funds

23. Does this funding opportunity fund a FTE position(s) to conduct or facilitate this work?

Yes. You must submit as Attachment 1 a complete staffing plan and job descriptions for key personnel that will work on this project.

24. We currently do not have a person hired to do this work, will this fund a new position to provide this training?

Yes, awarded funds can be used to fund a new position working on the grant.

25. I attended the webinar for the HRSA-22-109 and wanted to make sure that I understood correctly – the grant funding cannot be used to create stipends for the participants/trainees, is that correct? But it can be used to pay for providers who provide services for the trainees?

Yes, this is correct. Awarded funds may not be used for stipends as referenced on page 17 of the NOFO. Applicants must use grant funds to pay for participant support costs (training costs for workshops, tuition/ fees, supplies, CEU costs, etc.) for short term training to reduce and address burnout, suicide, mental health conditions and substance use disorders and promote resiliency among healthcare students, residents, professionals, paraprofessionals, trainees, public safety officers, and employers of such individuals that promotes wellness and resiliency for those at risk for or experiencing burnout. Participants can be enrolled full time or part time.

26. Is the applicant required to address all of the program requirements on page 9 of the NOFO?

It is highly recommended that applicants address all the program requirements listed in the NOFO.

27. Is the applicant required to have prior experience delivering specific evidence based trainings to the target population, or can they bring a new training to the organization to meet needs?

The NOFO does not state an applicant has to have prior experience delivering specific evidence based trainings. However, the purpose of this program is to plan, develop, operate or participate in health professions and nursing training activities using evidence-based or

evidence-informed strategies. Reviewers will score based on the applicant's ability to prove that they are capable of providing specific evidence-based trainings.

28. In several places in the NOFO, it says "in rural and medically underserved communities." It seems that this grant mechanism is limited to those populations - is that correct?

Although there is an emphasis on rural and medically underserved communities, this announcement is not limited to those populations. There is no requirement in the NOFO to serve a rural population. However, the program is required to consider the needs of rural and medically underserved communities. The authority for this program is funded under Section 2703 of the American Rescue Plan Act of 2021 which states, "The Secretary, acting through the Administrator of the Health Resources and Services Administration, shall, taking into consideration the needs of rural and medically underserved communities, use amounts appropriated by subsection (a) to award grants or contracts to health professions schools, academic health centers, State or local governments, Indian Tribes and Tribal organizations, or other appropriate public or private nonprofit entities (or consortia of entities, including entities promoting multidisciplinary approaches), to plan, develop, operate, or participate in health professions and nursing training activities for health care students, residents, professionals, paraprofessionals, trainees, and public safety officers, and employers of such individuals, in evidence-informed strategies for reducing and addressing suicide, burnout, mental health conditions, and substance use disorders among health care professionals."

29. We serve rural areas and medically underserved populations at all of our locations. How are you defining "rural and medically underserved areas" for the purpose of programs eligible for grant funding?

Medically Underserved Areas/Populations are areas or populations designated by HRSA as having too few primary care providers, high infant mortality, high poverty or a high elderly population. "Rural" encompasses all population, housing, and territory not included within an urban area. Whatever is not urban is considered rural. Please see the link for more information about rural populations. <https://www.hrsa.gov/rural-health/about-us/definition/index.html>

30. I am trying to reconcile the "no stipends" directive in the NOFO with the program we are designing that will train advanced doctoral students in clinical psychology to deliver an evidence-based resiliency program to dental students, nurses, and social workers. Can we pay the doctoral psychology students? And if so, what methods of payment are allowable and what terminology can we use to comply with the NOFO instructions.

Compensation is allowed for students (i.e., Fellows, Residents, grad students) to work on the grant; however, there must be an employee/employer relationship. Under no circumstances can the student receive compensation under a grant where they are participants in the training program.

31. Does this NOFO include Overtime and Backfill costs for firefighters and other public safety to attend the training?

Costs for overtime for personnel (emergency responder/public safety organizations) who engage in programmatic training on their days off and offering overtime to the backfill personnel covering for is allowable. As with all costs, the costs must be reasonable and necessary, and in accordance with institutional policy and applied consistently to both Federal and Non-Federal funding sources. The budget and budget justification must itemized all costs and include a clear narrative description of the need for the costs and why they are necessary for successful performance of the project.

Funding Preference and Priority

32. Is there a funding preference and/or priority for this NOFO?

This NOFO does not have a funding preference or priority, however, there is an emphasis on service to certain populations or areas.

Project Period

33. Can you confirm the project period start date?

The project period for HPSWRTP is January 1, 2022 through December 30, 2024. Page 30 of the NOFO refers to the “Annual Performance Report” and the reporting period of July 1 thru June 30 for each year of the grant.

34. Can you confirm the dates for the annual and final performance report?

The annual performance report will address all academic year activities from July 1 to June 30, and will be due to HRSA on July 31 each year. If award activity extends beyond June 30 in the final year of the period of performance, a Final Performance Report (FPR) may be required to collect the remaining performance data. The FPR is due within 90 calendar days after the period of performance ends. See Section VI.3.2 Annual Performance Report for additional details.

35. When will HRSA issue the Notice of Award?

HRSA will issue the Notice of Award (NOA) prior to the start date of January 1, 2022.