



Geriatrics Workforce Enhancement Program (GWEP) Pre-application Technical Assistance Webinar for HRSA-24-018

December 11, 2023
2:30 to 4:00 PM

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Division of Medicine and Dentistry (DMD)
Bureau of Health Workforce (BHW)

Vision: Healthy Communities, Healthy People



Agenda

- 1 Welcome and Introductions
- 2 GWEP NOFO Overview
- 3 Program Requirements
- 4 Application Deadlines and Submission Resources
- 5 Q&A Session



Welcome and Introductions



Ms. Cynthia Harne
Branch Chief
Medical Training and Geriatrics
Division of Medicine and Dentistry



GWEP NOFO Overview



Legislative Authority



The GWEP Program is authorized by Sections 753(a), and 865 of the Public Health Service (PHS) Act (42 U.S.C. § 294c(a) and 298).

Summary of Funding

**Expected
Funding**

\$43,000,000

**Award
Amount**

**Up to \$1,000,000, per award; at least \$230,000 must be used
for Alzheimer's Disease and Related Dementia activities**

**Number of
Awards**

Approximately 43

**Period of
Performance**

**July 1, 2024 through June 30, 2029
5-years**



GWEP Goal and Purpose

Purpose: The purpose of the GWEP is to educate and train the health care and supportive care workforces to care for older adults by collaborating with community partners. Applicants must maximize patient and family engagement to address care gaps and improve health outcomes for older adults by integrating geriatrics with primary care and other appropriate specialties using the Age-Friendly Health Systems Framework.

Goal: The goal of the GWEP is to educate and train the primary care and geriatrics workforces and other appropriate specialties to provide age-friendly and dementia-friendly care for older adults in integrated geriatrics and primary care sites/delivery systems.



GWEP Program Objectives

- Develop reciprocal partnerships between academia, primary care sites/delivery systems (including nursing homes), and community organizations, to transform clinical training environments into integrated geriatrics and primary care sites/delivery systems that are age-friendly and dementia-friendly.
- Provide interprofessional geriatrics clinical training and education to students, residents, fellows, faculty, and preceptors in Tribal, Tribal Organizations, Underserved and/or Rural (TTOUR) primary care sites/delivery systems with the intent to have them practice in these sites upon completion of their program.
- Establish and/or maintain education and training programs in TTOUR primary care sites/delivery systems that provide the supportive care workforce, direct care workers, and the primary care workforce with the knowledge and skills to improve the care of older adults, including persons living with dementia, by using innovative technology and methods.



GWEP Program Definitions

- **Age-Friendly Health System** means a healthcare system that improves the quality of care for older adults and optimizes value for health systems by providing older adults with the best care possible; reducing healthcare related harms to older adults to close to zero; satisfying older adults with their care; and optimizing value for individuals including patients, families, caregivers, direct care workers, healthcare providers, and health professions students, residents, fellows, and faculty, and health systems. The essential elements of age-friendly health systems are a) What Matters (to the older adult); b) Medication; c) Mentation; and d) Mobility.
- **Health Care Workforce** means geriatrics specialists, primary care providers, other appropriate specialists, direct care workers, community health workers, health care support workers, and health professions students, residents, fellows, faculty, and other health care professionals.
- **Supportive Care Workforce** means patients, families, caregivers, and nonmedical service providers (such as housekeepers, food servers, and transportation providers).



TTOUR Primary Care Sites /Delivery System Include

- Adult Daycare Sites
- Nursing Homes/Facilities
- Ambulatory Care Clinics Primary Care Clinics
- Assisted Living Sites
- Rural Health Clinics
- Critical Access Hospitals
- Ryan White Centers
- Emergency Care
- Federally Qualified Health Centers
- Home and Community-based Services
- Medical Homes
- Senior Centers
- Senior Housing
- HRSA Funded Teaching Health Center



Summary of Funding

- \$43,000,000 will be available each year to fund 43 recipients. You may apply for a ceiling amount of up to \$1,000,000 annually (reflecting direct and indirect costs).
- Your request for each subsequent year of the period of performance **cannot exceed** your year 1 request.
- At least \$230,000 must be budgeted to provide ADRD education and training annually. Funds must be used to educate and train the health care and supportive care workforces in ADRD in TTOUR primary care sites and delivery systems and provide financial support to trainees in these sites.
- A budget that is 100% for ADRD education is allowed if it includes stipend/traineeships/fellowships support activities.
- Training awards are budgeted and reimbursed at 8 percent of modified total direct costs.



Applicant Eligibility

Accredited Schools or Programs

- Schools of Allopathic Medicine
- Schools of Osteopathic Medicine
- Schools of Nursing
- Schools of Allied Health
- Schools of Pharmacy
- Schools of Dentistry
- Schools of Public Health
- Schools of Optometry
- Schools of Chiropractic
- Schools of Veterinary Medicine
- Schools of Podiatric Medicine
- Physician Assistant Education Programs

Accredited Graduate Programs

- Health Administration
- Behavioral Health and Mental Health Practice including:
 - Clinical Psychology
 - Clinical Social Work
 - Professional Counseling
 - Marriage and Family Therapy



Applicant Eligibility Continued

Additional Eligible Applicants Include:

- a health care facility
- a program leading to certification as a certified nurse assistant,
- a partnership of a school of nursing and health care facility, or
- a partnership of a program leading to certification as a certified nurse assistant, and a health care facility.

If otherwise eligible:

- Community-based organizations,
 - Tribes, and
 - Tribal organizations
- may apply if otherwise eligible.



Applicant Eligibility

All eligible applicants must be accredited.

- In Attachment 7 the applicant organization must provide:
 - a statement that they hold continuing accreditation from the relevant accrediting body and are not under probation, and
 - the dates of initial accreditation and next accrediting body review. The full letter of accreditation is not required.
 - CNA programs must document state level approval of their CNA program.

Note: If a partner institution holds the accreditation or state level approval for the training program, a letter of agreement should be provided as well.



Multiple Applications

- Multiple applications from an institution will be accepted.
 - However, only one application will have the potential for being funded.
- HRSA will only review your last validated application for each distinct project before the Grants.gov due date.



Maintenance of Effort

- You must agree to maintain non-federal funding for award activities. This must be at least at the same spending level for the fiscal year prior to the fiscal year for which you receive the award, as 42 U.S.C. § 295n-2(b) requires.
- Federal funds should add to, not replace, existing non-federal spending for such activities.
- We will enforce statutory Maintenance of Effort requirements through all available mechanisms.



Beneficiary Eligibility Requirement

- A trainee receiving support from award funds under this program must be a citizen, a non-citizen national of the United States, an individual lawfully admitted for permanent residence to the United States, or 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.



Application and Submission Information

- Application Due Date:
 - Eastern Standard Time
 - **February 26, 2024, by 11:59 p.m. ET**
- Link to HRSA's SF-424 R & R Application Guide:
 - <http://www.hrsa.gov/grants/apply/applicationguide/sf424rrguidev2.pdf>
- Application Page Limit is 80 pages.
 - We will not review any pages that **exceed** the page limit.



Application and Submission Information (Cont'd)

- These items do not count in the 80-page limit:
 - Standard OMB-Approved Forms you find in the NOFO's workspace application package
 - Abstract (Standard Form (SF) "Project_Abstract Summary
 - Indirect Cost Rate Agreement
 - Proof of non-profit status (if it applies)
 - Accreditation Documentation
 - Biographical Sketches

- Applications must be complete and validated by Grants.gov under HRSA-24-018 before the deadline.



Program Requirements



GWEP Program Requirements

Successful recipients must address the following program requirements:

1. Develop reciprocal partnerships between applicant and a) academic schools of health professions, b) TTOUR primary care sites/delivery systems, and c) community organizations to transform primary care sites/delivery systems that provide age-friendly and dementia-friendly care for older adults.
2. Train the health care workforce in TTOUR primary care sites/delivery systems to provide age-friendly and dementia-friendly health care for older adults and achieve and maintain Level 1 and/or Level 2 Age-Friendly Health System recognition.
3. Provide students, residents, and/or fellows with a minimum of eight weeks per year of longitudinal clinical rotations in TTOUR primary care sites/delivery systems including nursing homes. Provide stipends/traineeships/fellowships to students, residents and/or fellows while they are in clinical rotation(s) at TTOUR primary care sites/delivery systems.



GWEP Program Requirements (Cont'd)

Successful recipients must address the following program requirements:

4. Provide faculty and preceptors with the knowledge and skills to educate the health care workforce to provide age-friendly and dementia-friendly care to older adults in TTOUR primary care sites/delivery systems.
5. Using the apprenticeship framework, provide education and training for direct care workers to support career advancement (ex. Certificate, etc.) within their discipline as geriatrics specialists. For example, the development of career ladders for certified nursing assistants to become advanced geriatrics specialists and/or community health workers to become advanced geriatrics specialists.



GWEP Program Requirements (Con't)

Successful recipients must address the following program requirements:

6. Provide interprofessional training that involves at least three health care professions, one of which is medicine. Interprofessional training and education must address the primary care needs of older adults in TTOUR primary care sites/delivery systems including all of the following topics:
 - continuum of care for older adults;
 - ADRD and other mental health issues including delirium, anxiety, depression, substance use and opioid use disorders, and serious mental illness;
 - risk reduction for chronic disease, including dementia;
 - early detection, diagnosis, treatment, and management of dementia;
 - enrollment of older adults in clinical trials;
 - impact of climate change, emergencies, and disasters on the health and health care of older adults;
 - health inequities, disparities, social determinants of health, and culturally and linguistically competent health care;
 - elder justice;
 - training on performing the annual wellness visit;
 - training on vaccinations; and
 - use of methods such as MCC e-Care Plan, artificial intelligence and assistive technology, and mobile health technologies to provide telehealth and in-person care delivery.



GWEP Program Requirements (Con't)

Successful recipients must address the following program requirements:

7. Deliver age-friendly and dementia-friendly programs that provide health care and supportive care workers with the knowledge and skills to improve care to older adults.

8. Partner with schools of nursing and nursing homes to integrate into the curriculum age-friendly didactic content and clinical care learning opportunities on care of older adults, including persons living with dementia, who reside in nursing homes. The overall goal is to increase the number of nurses who elect to practice in nursing homes after graduation.

9. Adhere to HHS Evaluation Policy and evaluation standards and best practices described in OMB Memorandum M-20-12 when evaluating their program.

10. Participate in federally-designed evaluations to assess program effectiveness and efficiency upon request.



Program - Specific Instructions

Include application requirements and instructions from Section 4 of the R&R Application Guide

Also includes:

- Project Abstract
 - OMB-approved Project Abstract Summary
- Project Narrative
- Budget
- Budget Justification Narrative
- Standardized Workplan (SWP) Form
- Attachments



Project Specific Instructions (Cont'd)

Project Narrative

- Introduction and Purpose
- Organizational Information
 - Biographical Sketches
- Need
- Approach
- Work Plan
 - include a brief narrative element in addition to completing the standardized workplan (SWP)
- Resolution of Challenges
- Evaluation and Technical Support Capacity
- Sustainability



Project Specific Instructions (Cont'd)

- Budget: SF424 line item budget for all 5 years
- Budget Justification
 - The budget and budget justification must document how funds are provided to each partner in proportion to its contribution to the partnership and the education and training projects. If a partner does not have the administrative capacity to spend the funds directly, the budget justification must show what funds the eligible entity is expending on behalf of that partner.
 - Describe all line-item federal funds (including subawards), proposed for this project.
 - Provide justification for all line-items for each of the five years of your program and provide a summary describing total direct and indirect costs annually and across all five years of the project.

Note: The SF-424 line item budget and the budget justification narrative must match.

- Standardized Workplan (SWP)
 - SWP form is organized by budget period and must include all activities and deliverables for each objective and program goal.
- Attachments



Attachments

1. Staffing Plan and job descriptions for key personnel (R)
2. Project Organization Chart (R)
3. Letters of Agreement, Memorandum of Understanding, and/or Contracts (R)
4. MOE (R)
5. ADRD Documentation Table (R)
6. Applicant Organization Letter of Support (R)
7. Accreditation Documentation (R)
8. Documentation of TTOUR Training Sites (R)
9. Letters of Support - as applicable
10. Request for Funding Priority or Priorities – as applicable

(R = required)



Standardized Work Plan Form – Instructions

- Your work plan must be submitted through the SWP Form located in the Grants.gov workspace.
- **Enter the following NOFO Goal into the Program Goal section of the SWP Form:**
“To educate and train the primary care and geriatrics workforces and other appropriate specialties to provide age-friendly and dementia-friendly care for older adults in integrated geriatrics and primary care sites/delivery systems.”



Standardized Work Plan Form – Instructions (Cont'd)

- The SWP Form is organized by budget period and **must** include all activities and deliverables for each of the three project objectives listed below and the program goal.
- The three project objectives that you will use in your SWP are:
 - Develop reciprocal partnerships between academia, primary care sites/delivery systems (including nursing homes), and community organizations, to transform clinical training environments into integrated geriatrics and primary care sites/delivery systems that are age-friendly and dementia-friendly.
 - Provide interprofessional geriatrics clinical training and education to students, residents, fellows, faculty, and preceptors in Tribal, Tribal Organizations, Underserved and/or Rural (TTOUR) primary care sites/delivery systems with the intent to have them practice in these sites upon completion of their program.
 - Establish and/or maintain education and training programs in TTOUR primary care sites/delivery systems that provide the supportive care workforce, direct care workers, and the primary care workforce with the knowledge and skills to improve the care of older adults, including persons living with dementia, by using innovative technology and methods.



Standardized Work Plan Form – Instructions (Cont'd)

- The three project objectives in your application are the same for each year of the grant (each budget period).
- Your sub-objectives can be either the same or different for each year of the grant and can be tailored to your project needs.
- Identify and describe specific activities or steps you will use to achieve each of the project objectives during the entire 5-year project period and indicate who is responsible for each activity (by title, not by name).
- Form instructions are provided along with the SWP form and are included in the application package found on Grants.gov.
- **The Project Director must register in the HRSA electronic handbook (EHB) once an award is made, in order to review and finalize the completed SWP.**



Funding Restrictions

General Provisions in Division H of the Consolidated Appropriations Act, 2023 (P.L. 117-328) apply to this program. See Section 4.1 of the R&R Application Guide for information.

You **cannot use funds** under this notice for the following purposes:

- To acquire real property or for construction.
- To pay for equipment costs not directly related to the purposes of this award.
- To pay for continuing education certificates.



Program-Specific Restrictions

- The Project Director (PD) must:
 - Be at least a masters-prepared health professional or masters-prepared health educator who is also a geriatrics specialist (except for project directors of certified nursing assistant (CNA) programs who must be at least bachelor's-level prepared health professional).
 - Be employed by the applicant organization at the time of application.
 - Dedicate approximately 20 to 50 percent of his/her time (may be in-kind or funded by grant funds) to grant activities appropriate to their level of work on the project.
 - Document at least five years of experience in geriatrics care, education and training, and workforce development in his/her bio sketch.



Crosswalk between Narrative and Review Criteria

Narrative Section	Review Criteria
Introduction and Purpose	Criterion 1: PURPOSE AND NEED
Organizational Information	Criterion 4: ORGANIZATIONAL INFORMATION, RESOURCES, AND CAPABILITIES
Need	Criterion 1: PURPOSE AND NEED
Approach	Criterion 2: RESPONSE TO PROGRAM PURPOSE sub-section (b) APPROACH
Work Plan	Criterion 2: RESPONSE TO PROGRAM PURPOSE sub-section (a) WORK PLAN
Resolution of Challenges	Criterion 2: RESPONSE TO PROGRAM PURPOSE sub-section (c) RESOLUTION OF CHALLENGES
Evaluation and Technical Support Capacity	Criterion 3: IMPACT sub-section (a) EVALUATIVE MEASURES
Sustainability	Criterion 3: IMPACT sub-section (b) SUSTAINABILITY
Budget and Budget Justification Narrative	Criterion 5: SUPPORT REQUESTED



Review Criteria

- **Criterion 1: PURPOSE AND NEED (15 points)**
- **Criterion 2: RESPONSE TO PROGRAM PURPOSE (50 points)**
 - Work Plan (20 points)
 - Methodology/Approach (25 points)
 - Resolution of Challenges (5 points)
- **Criterion 3: IMPACT (15 points)**
 - Evaluation and Technical Support Capacity (10 points)
 - Sustainability (5 points)
- **Criterion 4: ORGANIZATIONAL INFORMATION/RESOURCES/CAPABILITIES (10 points)**
- **Criterion 5: SUPPORT REQUESTED (10 points)**



Funding Priority

- This program includes a funding priority, as authorized by PHS Act section 753(a)(5). A funding priority is the favorable adjustment of review scores of individually approved applications when applications meet specified criteria.
- HRSA staff adjusts the score by a set, pre-determined number of points.



Two GWEP Funding Priorities

- Priority 1- HRSA shall give priority to programs that demonstrate coordination with another Federal or State program or another public or private entity (2 points), and
- Priority 2 – HRSA shall give priority to applicants with programs or activities that are expected to substantially benefit rural or medically underserved populations of older adults or serve older adults in Indian Tribes or Tribal organizations (3 points).
- You may apply for Priority 1 and/or Priority 2.



Qualifying for Funding Priority 1

- To qualify for Priority 1, applicants must submit as Attachment 10-Priority 1, a letter from the applicant that demonstrates coordination with a Federal or State program or other public or private entity that provides education and engagement of patients, families, and caregivers on disease management strategies to meet the needs of caregivers of older adults in the community.
- Please label as Priority 1.



Qualifying for Priority 2

- To qualify for Priority 2, applicants will need to demonstrate in Attachment 10-Priority 2, their ability to provide access to health care in one of the four areas: tribal, tribal organization, medically underserved or rural, as defined in this NOFO using the following three criteria below:
 - Located in primary care HPSAs with a score of 17 or above as found in the HPSA Find tool (<https://data.hrsa.gov/tools/shortage-area/hpsa-find>) OR
 - Located in an area considered rural as determined by the Federal Office of Rural Health Policy (FORHP), using the Rural Health Grants Eligibility Analyzer at <https://data.hrsa.gov/tools/rural-health> OR
 - Located in a tribal facility serving American Indians or Alaskan Natives, listed in <https://www.ihs.gov/findhealthcare/>
- Please provide documentation of meeting the criteria for Priority 2 in table format. See table on page 33 of the NOFO.
- Please label as Priority 2.



Qualifying for Funding Priority 2

In order to qualify for Priority 2, applicants must provide documentation of meeting the criteria for Priority 2 in table format in Attachment 10-Priority 2, that includes:

Name of Health Clinic Training Site	Clinic Training Site Full Address (Street, town, state, extended zip code)	<i>Is site located in a tribal facility listed in https://www.irs.gov/findhealthcare/?</i> (Yes or No)	Is site located in rural area as determined by the Federal Office of Rural Health Policy (FORHP), using the Rural Health Grants Eligibility Analyzer at https://data.hrsa.gov/tools/rural-health (Yes or No)	<i>Is site located in a Primary Care HPSA with a score of 17 or higher as listed at https://data.hrsa.gov/tools/shortage-area/hpsa-find</i> (Yes or No)



Funding Special Consideration

- A special consideration is the favorable consideration of an application by HRSA funding officials. It is based on the extent to which your application addresses the specific focus of special consideration. If your application does not receive special consideration, it will be given full and equitable consideration during the review process.
- This program includes special consideration, as authorized by Section 753(a)(5)(B) of the PHSA to entities that provide services in states with the highest demand for long-term care services and geriatric workforce professionals.
 - HRSA will use this special consideration in order to fund no more than one awardee per state with the exception of these states, where up to two awards per state may be made.
 - For the purposes of this NOFO, these states with the highest demand for these services and professionals are California, New York, Pennsylvania, Florida and Texas.
 - HRSA may need to fund out of rank order in order to make up to two awards for these states.



Reporting Requirements

Award recipients will fulfill reporting requirements throughout the project period to include:

- Progress Reports
- Performance Reports
- Final Program Report
- Federal Financial Report
- Federal Awardee and Integrity Reporting



Other Information

- **Tips for Writing a Strong Application** See Section 4.7 of the HRSA R&R Application Guide (R&R Application Guide).
- **Appendix A: Page Limit Worksheet**
 - Purpose of this worksheet is to give you a tool to ensure the number of pages uploaded into your application is within the specified page limit. (Do not submit this worksheet as part of your application.)
- **Appendix B: Resources**



Contact Us

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Grants Management GWEP / HRSA – 24 - 018

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Vision: Healthy Communities, Healthy People



The Budget



Budget

- Describe all line-item federal funds (including subawards), proposed for this project.
- The SF424 budget form must coincide with the line item budget narrative.
- Provide separate SF424 budget forms and budget narrative justification breakouts for each future budget year.
- Please note: all budget justification narratives count against the page limit.



Budget - Personnel Costs

- *Personnel:* Provide Bio Sketches/Resumes for all key personnel
 - If the Project Director's time and effort is in kind you must provide the percentage of time and effort they will be donating towards the goals and objectives of the program.
 - Salary Limitation: HRSA's competing grants, cooperative agreements, or applications that request direct salaries for individuals in excess of the applicable rate of \$212,100 per year. The salary rate limitation also applies to all subawards and subcontracts.



Budget -Stipends, Traineeships, Fellowships

A stipend is a payment to an individual to help meet that individual's expenses during the training period. Stipends are not salary and should not be provided as a condition of employment with either the Federal Government or the recipient/subrecipient organization.

- Stipends, traineeships, and fellowships are allowed for students, residents and/or fellows while they are in training in clinical rotation(s) at a TTOUR clinical site.
- Stipend support for health care and supportive care workers during the period of training is allowed.



Budget – Consultant Services

Consultant Services: If you are using consultant services:

- List the total costs for all consultant services.
- In the budget justification:
 - identify each consultant,
 - the services they will perform,
 - the total number of days,
 - breakdown of travel costs, and
 - the total estimated costs.



Budget - Travel

Travel: Include travel support for up to four individuals to attend one recipient meeting to be held annually over 2 days.

- During the 5-year period of performance, two of the meetings will be in the Washington, D.C. area and the other three will be held in conjunction with a national geriatrics meeting.
- In addition to the project director, representation should include individuals from your reciprocal partners (academia, a primary care delivery site, and a community-based organization).

Provide the name of the person traveling, reason for travel, local/long distance, and breakout of all cost per person traveling, i.e., hotel/airfare, per diem.



Budget – Participant/Trainee Support Costs

For applicants with participant/trainee support costs:

- list tuition/fees/health insurance,
- stipends, travel, subsistence,
- other, and
- the number of participants/trainees.

Ensure that your budget breakdown separates these trainee costs, and includes a separate sub-total entitled “Total Participant/ Trainee Support Costs” which includes the summation of all trainee costs.



Budget – ADRD Budget Documentation

ADRD Budget Documentation:

- Prepare a budget in table format in Attachment 5 for your ADRD activities and costs associated with these activities for each of the five years of the award.
- These cost must be included in the total award cost on the SF424 budget form as well.



Business, Administrative, Fiscal Issues Contact

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Questions



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