



# HRSA Technical Assistance Webinar

**Fiscal Year 2021 Notice of Funding Opportunity**  
**National Maternal and Child Oral Health Consortium**  
**for Systems Integration and Improvement (*the Consortium*)**

**December 16, 2020**

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**Senior Public Health Analyst**  
**Maternal and Child Health Bureau (MCHB)**

**Vision: Healthy Communities, Healthy People**



# HRSA-21-037 NOFO: *The Consortium*

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## Technical Assistance

The webinar is being recorded and will be accessible at:  
<https://mchb.hrsa.gov/fundingopportunities/default.aspx>.

## Instant Replay

*Generally available one hour after a call ends.*

Call-In Number: 1-800-841-8614

Passcode: 21921



# HRSA-21-037 NOFO: *The Consortium*

## Webinar Agenda

- Brief Introduction
- Award Details
- Purpose, Goal, Objectives
- Program Expectations
- Additional Funding
- Budget – Program Expectations
- Project Narrative
- Review Criteria
- Recipient's Responsibilities
- What Not to Forget
- Grants Management Guidance

The intent of this webinar is to highlight for you the content of the HRSA-21-037 funding announcement.



# HRSA-21-037 NOFO: *The Consortium*

- The purpose of the Consortium is to **develop and expand accessible, high-quality integrated preventive oral health care for maternal and child (MCH) populations**, utilizing targeted technical assistance (TA) that includes a learning collaborative approach.
- This notice includes an opportunity to apply for additional funding for the ***Oral Health Core Clinical Competencies (OH3C) Project***



# HRSA-21-037 NOFO: *The Consortium*

- ❑ **Number and Type of Award: One (1) cooperative agreement**
  - MCHB will award one recipient to lead a group of nationally recognized expert organizations in oral health care
- ❑ **Award Amount: \$1,325,000 per year**
  - Consortium: \$1,075,000
  - OH3C Project: \$250,000
- ❑ **Project Period: July 1, 2021 – June 30, 2024 (3 Years)**
  - Application due date: February 17, 2021



# *The Consortium:* **PURPOSE**

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**One award recipient** will lead a group of nationally recognized expert organizations whose purpose is two-fold...

1. **Advance excellence in oral health care technical assistance** in support of preventive oral health care delivery, with an emphasis on MCH safety net services.
2. **Develop and expand accessible, high-quality integrated preventive oral health care** by providing targeted TA to MCHB oral health SPRANS and Title V award recipients, utilizing a learning collaborative approach.



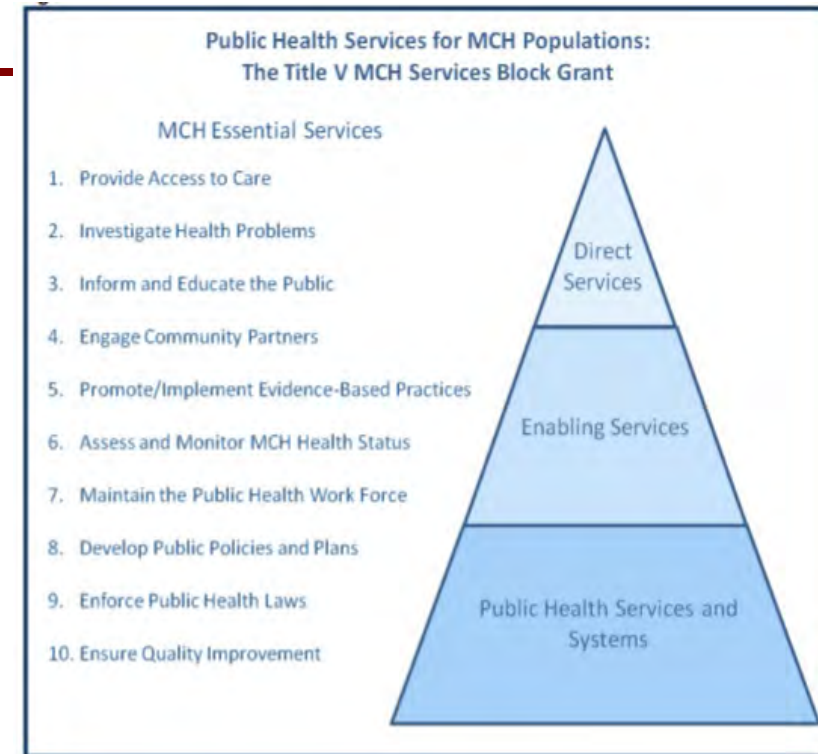
# The Consortium: GOAL

## PROGRAM GOAL

To advance evidence-driven transformations within MCH systems of care that reduce the oral health disparities among MCH populations.

To achieve this goal the Consortium will perform 3 core functions:

1. Identify Gaps and Barriers
2. Improve MCH Systems of Care
3. Translate Evidence into Practice



### MCH Pyramid of Services

Health Resources and Services Administration. Maternal and Child Health Bureau. (December, 2020). Title V Maternal and Child Health Services Block Grant To States Program Application/Annual Report Guidance, 8th Edition. (OMB NO: 0915-0172). Retrieved from: <https://mchb.tvisdata.hrsa.gov/uploadedfiles/TvisWebReports/Documents/blockgrantguidance.pdf>

# ***The Consortium:* Program Objectives**

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**The successful applicant will develop a work plan, including data collection and analysis, that achieves the following objectives, representing implementation and impact of effort:**

## **Program Implementation**

- By June 2022, 90 percent of the Title V programs participating in Consortium-led learning collaboratives (LCs) will complete a MCH Oral Health Integration Capacity Inventory and identify priority TA needs.
- By June 2022, 90 percent of Title V programs participating in Consortium-led LCs will select common metrics, develop a common plan for evaluating progress, and create timelines for implementing system improvements.





# *The Consortium:* Program Objectives

## Program Impact

- By June 2024, 75 percent of MCHB oral health SPRANS and Title V programs participating in Consortium-led LCs will report annually to the Consortium on all common metrics.
- By June 2024, 75 percent of MCHB oral health SPRANS and Title V programs participating in Consortium-led LCs will report system improvements (among those who report annually on all common metrics).
- By June 2024, average an annual 10 percent increase in website traffic, including (but not limited to): direct access and referral traffic linked to built-in links within social media and/or email outreach, and top referring sites that represent key-stakeholders in the field of oral health.



# ***The Consortium:* Program Expectations**

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In response to this notice, the successful applicant will be expected to address Program Expectations (see Section IV.2.).

## **Consortium Members**

Expertise and demonstrable knowledge in providing TA to improve the delivery of oral health care, strategies to maximize reimbursement and state practice guidance and policy innovations.

## **Consortium Management Team**

Oversee the full implementation of this project.



# ***The Consortium: Program Expectations***

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## **Seek counsel from a national perspective...**

**The Consortium Management Team is encouraged to convene and lead a national advisory collective:**

...to include key federal and non-federal partners

...whose collective aim can magnify a coordinated effort in addressing systematic barriers that perpetuate oral health disparities, restricting access to and utilization of high-quality preventive oral health care among MCH populations.



# ***The Consortium:* Program Expectations**

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## **Core Function 1 – Identify Gaps and Barriers**

The Consortium will be instrumental in **identifying a MCH Oral Health Integration Capacity Inventory tool** to assist MCH Safety Net service sites and state Title V programs

## **Core Function 2 – Improve MCH Systems of Care**

The Consortium will be instrumental in delivering a **Two-Tiered TA Approach**: (1) providing **Targeted TA utilizing a learning collaborative approach**; and (2) offering **general assistance and education opportunities**.



# *The Consortium:* Program Expectations

## 3 Learning Collaboratives

- ❑ One LC will continue, with minimal disruption, the collaboration among the three MCHB-funded Networks for Oral Health Integration within the Maternal and Child Health Safety Net (NOHI) projects.
  - Links to learn about the NOHI project are embedded in the NOFO.
- ❑ One LC will target Title V programs who selected the Title V oral health national performance measure or an oral health state measure (NPM13).
- ❑ One LC will target Title V program capacity for improving integration of oral health and primary care with a focus on oral health clinical competency among non-dental providers (OH3C).



# ***The Consortium:*** Program Expectations

This notice includes an opportunity to apply for additional funding for the ***Oral Health Core Clinical Competencies (OH3C) Project***

- ❑ Implement an oral health competency improvement project should these funds become available and identified for such activity within the fiscal year (FY) 2021 Appropriations bill.
- ❑ The purpose is to support implementation of oral health core clinical competencies within primary care settings as described in HRSA's 2014 report, *Integration of Oral Health and Primary Care Practice*.
- ❑ The objective is to utilize a learning collaborative approach to increase the adoption of oral health core clinical competencies among non-dental providers and likelihood of sustained implementation within participating primary care sites.



# ***The Consortium:* Program Expectations**

## **Core Function 3 – Translate Evidence into Practice**

The Consortium will be instrumental in development, compilation, and dissemination of new and reliable tools and education materials to inform professional and organizational development.

- Recruit and onboard content experts** to update and reaffirm materials, and to **include parent/caregiver representation** in the development of consumer materials.
- Collaborate with MCHB-funded organizations and projects** in an effort to **increase and/or broaden dissemination** of reliable resources.
- Make available upon award a publicly-accessible website.**



# The Consortium: Your Project Narrative

## NARRATIVE GUIDANCE

To ensure that you fully address the review criteria, this table provides a crosswalk between the narrative language and where each section falls within the review criteria. Any attachments reference in a narrative section may be considered during the objective review.

<u>Narrative Section</u>	<u>Review Criteria</u>
Introduction	(1) Need and (5) Resource/Capabilities
Needs Assessment	(1) Need
Methodology	(2) Response, (3) Evaluative Measures, and (4) Impact
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (5) Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested





# *The Consortium:* Your OH3C Project Narrative

## **Attachment 8:** *The Oral Health Core Clinical Competencies (OH3C) Work Plan, Budget and Budget Justification*

- Detailed instructions are provided in the description of Attachment 8. A separate Work Plan, Budget, and Budget Justification is required to receive the additional funding to implement the OH3C Project.
- The OH3C Work Plan, Budget and Budget Justification should be no longer than five pages, which **WILL** count against the 75-page limit of the National Maternal and Child Health Consortium for Oral Health Systems Integration and Improvement application.
- You may request up to \$250,000 per year (for 3 years), for the OH3C Project (inclusive of indirect costs).
- The actual funding amount available will not be determined until enactment of the final FY 2021 federal appropriation.



# *The Consortium:* Your Budget – Program Expectations

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**REMINDER** - The Total Project or Program Costs (inclusive of direct and indirect costs) incurred to carry out the OH3C Project will **NOT** to be included in the total costs (inclusive of direct and indirect costs) that will support the Consortium project. The OH3C Work Plan, Budget and Budget Justification will be submitted as Attachment 8 (to be discussed at the end of this webinar).



# ***The Consortium:*** Your Budget – Program Expectations

## **MCHB expects the following in the proposed budget:**

- Identify a **project director and/or project manager, permanent staff of your organization, who will devote no less than 1.0 FTE to the project**, who will (together) have administrative and programmatic direction over funded activities.
- **Identify staff with qualified epidemiological/biostatistical expertise** and include clear and convincing justification for time allotted to this project.
- Host an **annual in-person, multi-day learning forum**, and include a plan (to be approved by the project officer) for the re-direction of funds should an in-person gathering not be possible.



# The Consortium: Review Criteria

## NARRATIVE GUIDANCE

To ensure that you fully address the review criteria, this table provides a crosswalk between the narrative language and where each section falls within the review criteria. Any attachments reference in a narrative section may be considered during the objective review.

<u>Narrative Section</u>	<u>Review Criteria</u>
Introduction	(1) Need and (5) Resource/Capabilities
Needs Assessment	(1) Need
Methodology	(2) Response, (3) Evaluative Measures, and (4) Impact
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (5) Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested



# ***The Consortium:* The Review Criteria**

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**Six review criteria are the basis upon which the reviewers will evaluate and score the merit of the application.**

- Provides the reviewer with a standard for evaluation, and
- Assists you in presenting pertinent information related to that criterion.

# ***The Consortium: The 6 Review Criteria***

**Criterion 1: NEED** (10 points) – Corresponds to your *Introduction & Needs Assessment*

**Criterion 2: RESPONSE** (30 points) – Corresponds to your *Methodology, Work Plan, & Resolution of Challenges*

**Criterion 3: EVALUATIVE MEASURES** (15 points) – Corresponds to your *Methodology & Evaluation and Technical Support Capacity*

**Criterion 4: IMPACT** (10 points) – Corresponds to your *Methodology & Work Plan*

**Criterion 5: RESOURCES/CAPABILITIES** (25 points) – Corresponds to your *Introduction, Evaluation and Technical Support Capacity, & Organizational Information*

**Criterion 6: SUPPORT REQUESTED** (10 points) – Corresponds to your *Budget & Budget Narrative*



# *The Consortium:* THE RECIPIENT'S RESPONSIBILITIES

- ✓ HRSA will provide funding in the form of a cooperative agreement.
  - The HRSA-21-037 cooperative agreement recipient's responsibilities are listed on pages 8 and 9 of the NOFO.
- ✓ For reporting purposes, award recipients must comply with Section 6 of HRSA's *SF-424 Application Guide* **AND** submit annual Progress and Final Reports, and the annual Discretionary Grant Information System (DGIS) Performance Reports

# *The Consortium:* WHAT NOT TO FORGET

- ✓ You are responsible for reading and complying with the instructions included in HRSA's *SF-424 Application Guide*, except where instructed in this NOFO to do otherwise.  
<http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf>.
- ✓ The total size of all uploaded files included in the **page limit may NOT exceed the equivalent of 75 pages.**
- ✓ The due date for applications under this NOFO is:
  - ☐ **February 17, 2021 at 11:59 p.m. ET**
- ✓ HRSA suggests submitting applications to Grants.gov at least 3 calendar days before the deadline to allow for any unforeseen circumstances.







# HRSA Technical Assistance Webinar

**HEALTH RESOURCES & SERVICES ADMINISTRATION**

**Office of Federal Assistance Management**

**DIVISION OF**

**GRANTS MANAGEMENT OPERATIONS**

**Djuana Gibson**

**Grants Management Specialist**

**Division of Grants Management Operations (DGM)**

**Vision: Healthy Communities, Healthy People**



# Grants Management's Role

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The Grants Management role is to advise and assist with the interpretation of grants management policies, oversee the business, fiscal, and other non-programmatic aspects of grants and/or cooperative agreements.



# Key Requirements

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- ✓ Valid DUNS
- ✓ Register with System for Awards Management (SAM) and maintain the account
- ✓ Standards for Financial Management  
<https://www.hrsa.gov/grants/manage-your-grant/financial-management>

# SF-424 Application Guide

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Applicants are responsible for reading and complying with the instructions included in HRSA's SF-424 Application Guide.

<https://www.hrsa.gov/sites/default/files/grants/hhsgrantspolicy.pdf>



# Salary Limitations

The Consolidated Appropriations Act, 2020 (P.L. 116-94), Division H, Section 202:

- provides a salary rate limitation on salary amounts that may be awarded and charged to HRSA grants and cooperative agreements
- award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II, which is \$197,300

**Please carefully review the additional information found in the NOFO and the SF-424 Application Guidance.**



# Budget Narrative

Must explain the amounts requested for each budget line-item/object class categories:

- ✓ annual salaries, percentages of full-time equivalency (FTE), position title, and duties for all personnel must be provided in the budget narrative
- ✓ contract - provide a clear explanation as to the purpose of each contract/subaward, how the costs were estimated, and the specific contract/subaward deliverables
- ✓ submit a copy of the most recent indirect cost rate agreement

# Budget Narrative

Must explain the amounts requested for each budget line-item/object class categories:

- ✓ Budget for each year of the project period
- ✓ SF-424A budget form must support the narrative
- ✓ Describe how each item will support the achievement of proposed objectives
- ✓ Provide cost calculations
- ✓ Cannot be used to expand the project narrative



# Gentle Reminders (cont.)

- ✓ Provide sufficient justification
- ✓ Budget and narrative for ALL years of support
- ✓ Cost should be broken out, please do not co-mingle personnel and fringe
- ✓ Identify sub-awardees as EITHER consultants or contractors
- ✓ Personnel under contractual agreements should include the annual salaries and level of efforts and can include fringe; with consultants: the fee of service should be provided and fringe is **NOT** an allowable cost



# Gentle Reminders

- ✓ Contractual standards, recipients should have their own procedures in place that reflect applicable state and local laws and regulations, and conform to the applicable HHS regulations. Contracts should be structured to ensure that they are consistent with the guidelines set out in the NOFO.

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# Thank You!

# QUESTIONS??



# Contact Information – Fiscal Issues

You may request additional information regarding business administrative or fiscal issues related to this NOFO by contacting:

**Djuana Gibson**

**Grants Management Specialist**

**Division of Grants Management Operations (DGM)**

**Health Resources and Services Administration (HRSA)**

**Email: [DGibson@hrsa.gov](mailto:DGibson@hrsa.gov)**

*ATTN: HRSA-21-037*



# Contact Information - Program

You may request additional information regarding the overall program issues related to this NOFO by contacting:

**Pamella Vodicka**

**Senior Public Health Analyst**

**Maternal and Child Health Bureau (MCHB)**

**Health Resources and Services Administration (HRSA)**

**Email: [PVodicka@hrsa.gov](mailto:PVodicka@hrsa.gov)**

*ATTN: HRSA-21-037*



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