



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

**Health Resources and Services Administration**



## **HRSA-21-034 Technical Assistance Webinar**

**Maternal and Child Health (MCH) Leadership, Education, and Advancement in Undergraduate Pathways (LEAP) Training Program (formerly known as the MCH Pipeline Program)**

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**Vision: Healthy Communities, Healthy People**



## Transcript

>> Welcome. Thank you for standing by. All participants will be in listen only mode until the question and answer session. During that time if you would like to ask a question please press star 1 and clearly record your first and last name for your question to be introduced. I'd like to inform all parties that today's conference is being recorded. If you have any objections, you may disconnect at this time. I'd like to turn the call over to your host Miss Claudia Brown. Thank you. You may begin.

>> CLAUDIA BROWN: Thank you, Rebecca. Hello and welcome to the Notice of Funding Opportunity Technical Assistance Session for HRSA-21-034. Going forward we will refer to this program, the Maternal and Child Health (or MCH) Leadership, Education, and Advancement in Undergraduate Pathways Training Program, as the "LEAP" program. This program was last funded, in 2016, as the MCH Pipeline Program. My name is Claudia Brown and I am the Project Officer for the LEAP Program, and I am delighted to be joined today by my colleagues from HRSA – Lauren Ramos, Director of the Division of MCH Workforce Development; Michelle Tissue, the Division's Supervisory Public Health Team Lead and Marc Horner, the Grants Management Specialist for the LEAP Program.

Before we begin, I want to share some additional information and then briefly review logistics for the session today. First, two areas in the Notice of Funding Opportunity, which you will hear referred to as the "NOFO" during this presentation, were modified. A link to the modified NOFO instructions is included in the top left "Notes" pod and I encourage you to download and refer to the modified NOFO instructions going forward. During the presentation, I will specifically note these two areas that were modified. Also included in the "Notes" pod is the link to the Division of MCH Workforce Development's website, where you can find additional information and resources about our programs, which I will outline in a few minutes. Next, you may ask a question at any time throughout the presentation by using the "Chat" pod in the bottom left. You may also hold your questions for an operator-assisted question and answer session over the phone. All questions will be addressed following the formal portion of today's presentation. Finally, you may make the slides full screen by clicking the icon with four arrows in the top right corner of the slides view.

During today's technical assistance session, we will briefly review background information on the Health Resources and Services Administration (or HRSA) and the Division of MCH Workforce Development. First, I will summarize the "NOFO;" and again, I will note the two areas that were modified. Next, Marc will provide an overview of grants management and the budget process followed by the question and answer session.

HRSA supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically challenged. HRSA does this through grants, such as the LEAP program, and cooperative agreements to more than 3,000 awardees serving tens of millions of people every year. Our mission at HRSA is to improve health outcomes and address health disparities through access to quality services, a skilled health workforce, and innovative, high-value programs. HRSA's 2019-2022 strategic plan has five key goals that revolve around improving access to quality health care and services; fostering a health care workforce able to address current and emerging needs; enhancing population health and addressing health disparities; maximizing the value and impact of HRSA programs, and optimizing HRSA operations to enhance efficiency, effectiveness, innovation, and accountability.

There are 5 Bureaus and 11 offices within HRSA, one of which is the Maternal and Child Health Bureau, or MCHB. The Division of MCH Workforce Development is one of the divisions within MCHB and is responsible for developing current and future generations of MCH leaders through undergraduate and graduate education; workforce development and support for practicing MCH professionals; and community-based programs.

The Division of MCH Workforce Development supports a continuum of training programs with an emphasis on supporting the Title V MCH Workforce. These programs include exposure to MCH concepts through our undergraduate pathways program, the LEAP program about which we are here today; interdisciplinary graduate education programs; and support for the practicing MCH workforce. The Division also supports community-based programs through our Healthy Tomorrows Partnership for Children Program. You can learn more about MCHB and the Division through the Bureau and Division websites.

We will now move into an overview of the LEAP NOFO. This presentation will provide a high-level summary of the NOFO, so please review the modified NOFO in its entirety. All applications are due through Grants.gov on January 7, 2021. Up to 6 grants totaling up to \$155,000 per year for 5 years will be awarded through this competition, subject to the availability of funding. The period of performance is June 1, 2021 through May 31, 2026 for eligible domestic public or nonprofit private institutions of higher learning.

The LEAP Program is authorized by Title V of the Social Security Act as part of the Special Projects of Regional and National Significance or “SPRANS”. The purpose of the LEAP Program is to promote the development of a diverse and representative public health and health care workforce by recruiting undergraduate students from underserved or underrepresented backgrounds, including those from racially and ethnically diverse backgrounds, into MCH public health and MCH-related health professions. As a result of LEAP programs, we hope to improve levels of representation, reduce health disparities, and increase access to health care for vulnerable and underserved MCH populations.

The LEAP program fills a critical gap by building and maintaining a diversified workforce reflective of MCH populations and prepared to address its distinct needs. There are four specific objectives through which this is accomplished: recruiting and supporting undergraduate trainees from diverse, underserved, and underrepresented backgrounds; fostering development of interdisciplinary leadership and research skills training at the undergraduate level in MCH public health and MCH-related health professions; providing mentorship and internship opportunities to undergraduate students through preceptorships with MCH professionals, graduate students, and MCH/Title V organizations; and increasing access to MCH undergraduate education and training through innovative and alternative methods, such as telehealth, virtual instruction, or distance-learning modalities.

We will now move into an overview of the narrative requirements of the NOFO, which begin on page 7. We recommend that you use the same section headers, as included in the NOFO, for the narrative in your application. Under the introduction, you should briefly describe the purpose of the proposed project.

Within your Needs Assessment, you should: state the importance of the project by documenting relevant background information and the potential of the project

to meet the purposes of the LEAP program; demonstrate comprehensive knowledge of MCH public health and health workforce needs and how a well-trained MCH workforce contributes to improved MCH population health outcomes; use national, regional, or local data to describe the need for the training program and include a Needs Assessment Summary in Attachment 1.

Your Methodology narrative should begin with your goals and objectives. You should: state the overall goals of the project and list the specific objectives that respond to the stated need and purpose; include goals and objectives that are specific, measurable, achievable, relevant, and time-oriented with explicit outcomes for each project year, which are attainable in the stated time frame; and that address the four overarching program objectives as stated in the Purpose section. Additionally, these explicit outcomes should serve as the criteria for evaluation of the LEAP program.

Next, your Methodology should include information about your Undergraduate Trainees. Please review Appendix A prior to developing this section related to undergraduate trainees. You should include various undergraduate trainee “types” in your LEAP program. The 3 types of LEAP trainees are based on hours of participation in the LEAP program during a 12-month period as follows: Long-term trainees participate in the program for a minimum of 300 hours; Medium-term trainees participate in the program for a minimum of 40-299 hours and Short-term trainees participate in the program for less than 40 hours

Program hours are defined, on page 8, in the NOFO as “hours” spent in: Didactic training, such as hours of course work or number of academic hours for which a trainee is registered; On site clinical work or “hands-on supervised” clinical work. and Experiential activities and projects conducted under the supervision of faculty, such as research, presentations, or proposal development. With this being said, trainee status in your LEAP program is independent of a trainee’s student enrollment status at the academic institution; however, maternal and child health, public health, and related health coursework or academic courses in which a trainee is registered could be included as an equal number of LEAP program hours. LEAP trainees are usually in medium- and -short-term traineeships, but as provided in Appendix A, it is allowable to recruit and train long-term trainees.

Continuing with undergraduate trainees in the Methodology section, you should include demographic information about trainees participating in the program with an assessment of the program participants' knowledge, skills and abilities and proposed entry into a graduate program in public health or a related health profession. You should describe activities in which trainees will be engaged, identifying measurable training objectives, expected outcomes, and outcome measures appropriate to the training activities conducted. You should include criteria for recruitment and methods of selecting undergraduate trainees who are from underrepresented backgrounds and have the interest and potential to pursue a career in a MCH public health or a related health profession. You should describe special efforts directed toward recruitment of qualified students from underrepresented groups with examples of such efforts provided on page 8 in the NOFO. You are strongly encouraged to start recruitment of undergraduate trainees during the freshman or sophomore year of studies before trainees have made post-graduate commitments. Additionally, you should consider the educational discovery stage of undergraduate trainees to determine how best to build interest in MCH public health and related fields, and to assist trainees with MCH course selection, practicum placements, navigating available resources, and making post graduate decisions.

As we conclude the summary on undergraduate trainees in the Methodology section, we once again remind you to review Appendix A prior to determining financial support for your trainees. Stipends, tuition assistance, or other financial support may be provided to LEAP trainees enrolled full-time or part-time for academic credits. Only long-term or medium-term trainees may receive stipends, tuition assistance, or other financial support from LEAP grant funds, and a trainee can only participate in a LEAP Program for up to 4 years (or 4 budget periods). In a situation where particular needs cannot be met within the categories described above, you may place a request with your HRSA project officer to recruit and train a candidate under special and unusual circumstances, known as a special trainee. The trainee receiving a stipend must be a citizen or a non-citizen national of the United States or have been lawfully admitted in to the U.S. for permanent residence.

At this time we are going to take a break to share questions based scenario and response related to the LEAP program. Michelle?

>> Thanks, Claudia. I understand graduate students cannot participate as LEAP trainees, can students and graduates or other programs participate in activities such as leadership seminars, supported through LEAP funds?

>> CLAUDIA BROWN: Great question. If all of eligible LEAP trainees in the program are participating (to the extent possible) in an activity supported through LEAP funds, such as Leadership Seminars, or it is purposefully a jointly-sponsored activity (for example to meet objective 3 to provide mentorship and internship opportunities to undergraduate students through preceptorships with MCH professionals, graduate students, and MCH/Title V organizations in preparation for graduate/post-graduate education/training in MCH)(p.1), then the LEAP programs can use their discretion in allowing others, not-funded through the LEAP award, to participate in such activities supported through LEAP funds.

Still in the Methodology section, let's move on to the program components. The training plan should describe new opportunities for public health classroom and field experiences that will develop leadership skills and foster a broad public health perspective. You should describe a variety of content and learning experiences that will be offered to trainees in your application. On pages 9-13 of the NOFO, you can find additional information, about the areas listed on the slide that you should address, in your LEAP program, at a minimum.

On this final slide related to the Methodology section, we start with the curricula. Your curricula should include appropriate undergraduate didactic, research, clinical, and field experiences; expose trainees to the many MCH health professionals who serve children, youth, and families; expose trainees to the differing social, cultural and health practices of various ethnicities and nationalities, considering the implications of these differences relative to health status and provision of health care and reflect awareness of emerging health problems and practice issues. Finally, you should include a 1-page MCH Curriculum Summary in Attachment 2. You should demonstrate proposed linkages to one or more existing MCH Long-Term Graduate Training Programs. The MCH graduate training programs are listed on this slide. More detailed information about these program can be found through the link to the Division's website, on page 13 in the NOFO, and in the Notes pod on the left. Linkages, with MCH Graduate Training Programs, should provide LEAP trainees with educational and

practical experience in leadership, public health, interdisciplinary training and practice, cultural competence, emerging issues, and research processes. It is also anticipated that collaboration, with MCH Graduate Training Programs, will enhance undergraduate training and experience in MCH fields while also facilitating future graduate placement into MCH programs. Documentation should include a detailed description, of collaborative relationships with at least one MCH Graduate Training Program, in Attachment 3. Last on this slide, let's talk about dissemination of educational resources. As you revise and develop new curricular materials, models, and other educational resources and references in the field of MCH, you should also disseminate information about them and make them available to other public health programs, professional associations, and training programs in order to enhance the purpose of your LEAP program and increase lasting program sustainability. It is expected that you document the plans for dissemination of project results; the extent to which project results may be regional and/or national in scope; and the degree to which the project activities will be collaboratively shared with other HRSA stakeholders.

Let's now talk about the Work Plan, which should be included in Attachment 4. In your Work Plan, you should describe the activities or steps that will be used to achieve each of the objectives proposed in the Methodology section; include a timeline that describes each activity and identifies responsible staff; include performance measures and annual performance objectives for assessing progress and program impact; and identify meaningful support and collaboration, as appropriate with key stakeholders in planning, designing, and implementing program activities.

Interchange with other LEAP programs and recipients is the first area that was modified in the NOFO. Interchange with other LEAP Programs, through program calls and annual recipient meetings, is required. These recipient calls and meetings are intended to enable connections across programs, promote dissemination of new information, and facilitate development of collaborative activities. You should include a statement, in the Work Plan, generally outlining willingness and capability to develop and convene the LEAP Program recipient meeting at least one time, during the period of performance and to host program calls at least quarterly during one year. In wrapping up the information on this slide, you should submit a logic model for designing and managing your project; presenting your conceptual framework; and explaining the links among program

elements for your LEAP project in Attachment 5. Appendix B of this NOFO, beginning on page 34, includes the overall LEAP Program logic model for your reference.

For the narrative section in Resolution of Challenges, you should discuss challenges that you are likely to encounter in designing and implementing the activities described in the Work Plan, and approaches that you will use to resolve such challenges.

In the Evaluation and Technical Support Capacity section of your application, you should submit a plan for evaluation of the LEAP Program that is reflective of how the program will be assessed and contribute to continuous quality improvement. In the Evaluation plan, you should include how you will achieve the project goals and objectives and link data collection activities to these goals and objectives; monitor ongoing processes and the progress towards achieving the goals and objectives; utilize inputs, such as your organizational profile, collaborative partners, key personnel, budget, and other resources and implement key processes and measure expected outcomes of the funded activities.

Your Evaluation plan should also describe the strategy for analyzing and measuring the achievement of process and impact outcomes; explain how the data will be used to inform and enhance evidence-based decision-making around program development and service delivery; describe any potential obstacles for implementing the program performance evaluation and your strategy for addressing those obstacles; include a description of how data will be collected and managed in a way that allows for accurate and timely tracking and reporting of performance measures; and finally, describe the process and method that will be used to track trainees who finish the LEAP Program and report on the following outcomes at 2 and 5 years post-program completion: Training Measure #7, which measures the number and percentage of program completers engaged in work focused on MCH populations; Training Measure #8, which measures the number and percentage of program completers engaged in work with underserved and/or vulnerable populations and Training Measure #9, which measures the number and percentage of program completers entering graduate programs. Additional information, as well as a complete list of administrative forms and performance measures for the LEAP program, is available through the link on page 27 under “Reporting.”

In your Organizational Information narrative, briefly describe the physical setting in which the program will take place, including a summary of the available resources, such as faculty, staff, space, equipment, clinical facilities, and related community services that are available and will be used to carry out the program. Provide a position description for each key faculty and staff person, in Attachment 6, specifically describing the duties and responsibilities and the minimum qualifications of the position. Briefly describe the administrative and organizational structure within which the LEAP program will function, including relationships with other departments, institutions, organizations or agencies relevant to the program and include an organizational chart and any other charts outlining these relationships in Attachment 7. Lastly, provide biographical sketches of key faculty and staff, which should be uploaded in the SF-424 Research & Related Senior Key Person Profile form that can be accessed in the Grants.gov Application Package under “Mandatory Forms.”

The LEAP project director should be a faculty member, preferably full-time and at the doctoral level, at the institution of higher learning with appropriate credentials in public health, social science, or another health-related discipline. The project director is expected to have direct, functional responsibility for the LEAP program devoting a minimum of 20 percent of their time and effort to the LEAP project, which may be a combination of grant and in-kind support. Finally, the project director position cannot be a shared position.

It is essential that your core faculty are knowledgeable about MCH and its various disciplines. You should document appropriately qualified core faculty: Who are from diverse public health, social science, or related health disciplines with a strong record of assisting students enter graduate schools concentrating in these careers; who have demonstrated leadership, required levels of education, relevant experience pertaining to MCH science, scholarship, and academic enrichment activities; who have a strong track record of working with underrepresented students; aiding with graduate school admissions preparation; assisting with application for financial aid as well as obtaining necessary supportive resources once offered graduate school admission; who are from underrepresented groups with a strong track record of recruiting, retaining and mentoring students from underrepresented groups and who are given adequate time to commit and participate in the LEAP program.

HRSA anticipates funding up to six LEAP awards at \$155,000 per year and supplementing \$10,000 to one recipient to host the annual meeting.

The level of support available annually for the LEAP Program is up to \$155,000 and is intended to build upon existing resources. Indirect costs will be budgeted and reimbursed at 8%. Ten thousand dollars (\$10,000) will be made available, to one LEAP recipient on a rotating basis to host the annual recipient meeting, each year during the period of performance based on the availability of supplemental funding. Do not include this \$10,000 supplemental funding in your annual budget requests since the recipient meeting host will be determined, by the six LEAP Program recipients, post award.

The budget narrative was the second area that was modified in the NOFO. Justify your budget requests, in your Budget Narrative, by describing and identifying goals, objectives, activities, and outcomes that will be achieved by the program during the period of performance. It is expected that support for students will be a significant portion of requested funds. In the annual budget travel category, you should include transportation costs and one half per diem, for at least two faculty members, to attend the LEAP Program recipient meeting.

At this time we will break for one last question based scenario and respond related to the LEAP program. What do you have for me, Michelle?

>> Thanks, Claudia. Can you clarify again if the project director role can be a shared position?

>> CLAUDIA BROWN: The Project Director/Investigator (PD/I) role cannot be a shared position for HRSA's purposes. All LEAP program applicants must designate one person, who meets the PD/I qualifications, to serve as the PD/I and maintain direct, functional responsibility for the LEAP Program, which can be combined grant and in-kind support. All LEAP applicants should ensure that the application staffing plan clearly delineates and describes the designated PD/I as fully meeting the 20% time/effort requirement and responsibilities of the PD/I role as well as how the PD/I will be fiscally supported in the budget narrative (p.17). Past LEAP programs have structured their programs, so that a second key person functionally supports the designated PD/I in the PD/I's roles

and responsibilities. In this case, it is recommended that your staffing plan also clearly delineate and describe the role and responsibilities of the second key person, who will be functionally supporting the designated PD/I within the LEAP program, including how this other key personnel will be supported in the budget narrative.

You should clearly label each attachment and provide the attachments in the order specified, on this slide and on pages 19-20 of the NOFO, to complete the content of the application. These attachments will count toward the application page limit. Please note that competing continuations will NOT submit an Accomplishment Summary Progress Report as part of this application.

This slide contains a crosswalk of the six LEAP review criteria, the narrative guidance of which we just discussed, and the associated point values. These review criteria are outlined with specific detail and scoring points on pages 22-25 of the NOFO. Please ensure that you carefully examine the review criteria, as these criteria are the basis upon which the reviewers will evaluate and score the merit of your application.

The total size of all uploaded files included in the page limit may not exceed 80 pages when printed by HRSA. The page limit does include the abstract, project narrative, budget narrative, attachments including biographical sketches, and letters of commitment and support. The standard OMB-approved forms in the workspace application package do not count in the page limit.

This concludes the program summary; and at this time, I am pleased to introduce and turn the session over to the Grants Management Specialist for the LEAP Program, Marc Horner.

>> MARC HORNER: Thank you, Claudia as well as thanking you I thank my contemporaries in the program department for their continued efforts and hard work for this program. Given that we are on the first slide right now, allow me to echo what was previously stated within the program presentation, this is the maternal and child health bureau, this funding opportunity is HRSA-21-034 and this is a competing continuation which is a new application.

Next slide, please. The mission of the program regarding of the grants management perspective, first and foremost, our mission is to support the fundamental principles of

the award by assisting with programmatic goals, objectives and activities from a budgetary position. Our job is basically allowing you as the applicant and soon to be grantee as much guidance as possible from a financial standpoint to complete your program in the best way possible. Your respective grants management specialist will give clarity to any of the allowable or possible unallowable costs throughout the four-year period of the active status of your grant. We provide guidance during the grant and post grant award period. Even at the time when your grant is actually officially closed, we are still the grants management specialist for that particular program, and is still willing to provide any assistance that may be needed. We bridge gaps of communication in order to execute timely actions associated with the award. If there is any misunderstanding internally with your program or organization regarding financial matters, your grants management specialist is the one who can help aid and bridge those gaps and provide clarity to any kind of miscommunication.

Next slide, please. The budget overview, this has been stated earlier in the presentation, but I do echo what was said earlier because of the importance of it. HRSA has approximately 940,000 to be available annually for the fund up to six LEAP recipients, recipient can receive up to 155,000 per year. One recipient will receive an additional 10,000 for annual recipient meeting. There is no cost sharing matching, which is a specialized form of spending which will not be allowed in this particular program. In reference to indirect costs, indirect costs under training awards organizations other than state, local or Indian tribal governments will be budgeted and reimbursed at 8 percent of the modified total direct costs, rather than on the basis of negotiated rate agreement. This 8 percent will be the fixed rate for the entire four-year period of the funding of this program.

Next slide, please. Regarding the budget overview, to extend more on to this topic, no funds within this title shall be used to pay the salary of an individual, through a grant or other extra mural mechanism at a rate that exceeds the executive level 2 which is 197300.00. For a full list of allowable cost, look back at the application guide which will give you a litany of different items that are allowable or unallowable, should you need further assistance after reviewing those allowable and unallowable costs, be sure to get in contact with your grants management specialist which would be me, Marc Horner. We can provide definitive answer regarding those costs.

One note though that I do believe is extremely important, if we can speak up now, that references on allowable cost which will be promotional items and memorabilia, gifts and souvenirs designed to promote the recipients' organization are unallowable as advertising to public relations costs.

Next slide, please. The recipient meeting of LEAP training programs, this is for years 1 through 4, in order to establish a clear and precise budget, grantees are not to include the \$10,000 supplemental funding in your budget requests. This was mentioned earlier from our program department, that the 10,000 for the annual meeting, although we encourage and request that you include and convey the descriptive information regarding the 10,000 on how it will be used within the budget narrative, your specific itemized budget, that is within your 424 form, you are not to incorporate that \$10,000 through your annual budget.

Due to the required budgetary obligations of all six grantees the LEAP applicants should include a brief plan in the budget discussion narrative. This allows us to get a clear perspective as to how this meeting will be orchestrated when it becomes your specific turn. Please note that the total program or program costs are the total obligated costs -- total allowable costs, this is inclusive of direct and indirect costs and you incur to carry out for the HRSA supported project or activities. Next slide, please. Lastly, I want to give my contact information, as you see before you on this slide, as the lead grants management specialist, my number here is 301-443-4888, however, also what is best to get in contact with me is by way of E-mail, should there be any type of immediate response that would be needed, that is not identified within the NOFO, please do not hesitate in sending me a E-mail, composing a E-mail and I will respond to you as soon as possible.

At this particular time now, I would like to pivot back to Claudia Brown who will continue on with this presentation. Claudia.

>> CLAUDIA BROWN: Thank you, Marc. HRSA is recording this webinar and the recording will be available at the link on the screen, which is also available on roman-numeral page ii and on page 29 in the NOFO.

At this time, I will ask Rebecca to open the lines for questions, and as that is being done we will address questions in the chat pod.

>> If you would like to ask a question, please star 1 and record your first and last name for the question to be introduced. Star 1 to ask a question. One moment to see if we have any questions.

>> CLAUDIA BROWN: In the meantime, for Sarah's question, the main focus of the program is on domestic MCH training, is it possible to also include global learning experiences for MCHB. If you can reach out to me about that one, Sarah, so I can learn a little more about what you are asking in relation to global issues, I'd appreciate that. Will the slides be available during or after the webinar? The slides will not be available, however, the recording of the TA webinar will be available and you view the slides again via the recorded webinar.

Was there discussion as to the expected students touch by the program, can you key in on the phone, Kim, and give us more information on what you are asking? Are you still qualified to submit if your institution does not have a current training program listed on slide 19. Slide 19 includes a list of the MCHB-funded graduate education training programs that you can work in collaboration with and collaboration can include virtual collaboration or distance learning modalities. You are eligible if you are a nonprofit or public institution of higher learning. Will the six awardees be a combination of renewals and new? That will be determined by the peer review panel, as applications will be scored and ranked. Then the six awardees will be determined based on the scores of the ranking.

Can I, Rebecca, are there any questions on the phone?

>> There are no questions in queue as of now. If you do have a question, you can press star 1, and clearly record your first and last name, that is star 1.

>> CLAUDIA BROWN: Kim, you are asking if there is a number of students that we should be targeting. We are actually going to leave the number of targeted students up to you as applicants. We just do encourage that you recruit and train a variety of

the types – short- term and medium-term trainees and of course long-term trainees, if your program plan allows.

Audrey, can maternal and child health graduate programs for nurses considered in the graduate program participants -- maternal and child health help graduate programs? Many of our graduate education training programs do include nurse cohorts within them. We are looking for you to actually collaborate with one of the 7 MCH Graduate Training programs that were included on the slide. As I mentioned, there are various ways you can collaborate with them. Added note: Collaboration can be with either an MCHB-funded or Non-Funded MCH-Related Long-Term Graduate Training Program.

Audrey said I, I meant health, not help. Okay. Do undergraduate students have to be in public health programs? We ask that they are in MCH Public health or MCH-related health programs. The answer is they can be in a variety of programs in addition to public health. Are there any other questions on the phone, Rebecca?

>> Looks like we have one question, it comes from (indecipherable) your line is now open. You may ask a question.

>> Hi, I just also submitted the question on the webinar, in case I didn't make it through. Maybe I missed it but can you define more what you mean by a internship, whether there are specific number of hours or experiences that you are looking for?

>> CLAUDIA BROWN: I'm sorry, I think I did miss that question. What I want to do is refer you to page 11 of the NOFO. Basically, we give you the guidance that the program should initiate internship opportunities designed to encourage students from underrepresented groups to pursue graduate careers in MCH. In addition, the program should consider conducting summer bridge courses that incorporate community engagement to enhance exposure to MCH public health and related health professions outside of the regular classroom setting. Successful applicants of this funding opportunity will be encouraged to discuss opportunities to engage with state MCH professionals, including the Title V Internship Program, with LEAP trainees. I encourage you to look at the link to the Title because a lot of LEAP trainings have been in that internship. Basically we ask you to document how faculty and staff will provide guidance to support the students in applying and competing. We give you flexibility to

determine that, based on the needs and the trainees that you do recruit in your program, apologies for missing that. What about business students or other majors who want to work with MCH businesses? We are going to, Rachel, focus on either MCH Public Health or related MCH professions. Some of the past participants have been in nursing programs, they have been in nutrition, medicine, public health of course, social work, and psychology. We do encourage those types of MCH-related health disciplines.

As follow up, do we need letters of support from sites that will provide internship experiences? You definitely can include them, because that would be an area of one of the collaborations that meets one of the criteria, the goals of the program. I would strongly recommend you include them if you have them available. I'm on the computer and raised my hand for a question, okay, says Sophie, would you like to type the question, okay, or dial.

I would encourage a letter of support for, if you do have one for a site internship.

Sophie, again, we just said that it was preferred that a doctorate, that you had a doctorate level if you were the PD, but as long as you meet the qualifications as faculty at the institution, that is the requirement. Will you clarify whether students must be enrolled in public health program as their major, working with other health disciplines -- a lot of times we encourage that you start recruiting undergraduate trainings at the freshmen and sophomore years, and in many instances they haven't declared a major yet. So you have flexibility to help guide those students and expose them to experiences in MCH public health, nursing or other related MCH disciplines, and hope that they will continue on into MCH or other related profession.

Are UCCED centers able to apply [inaudible] school of nursing and public health in this grant? If I understand, I think school of nursing or school of public health would be the institution of higher learning, and the UCEDD can partner, is that what you are asking, if you can clarify that a little more, I think if that is what you are asking the answer would be you could definitely partner with the institution of higher learning that applies for the LEAP grant program, with students that would be able to participate during the undergraduate portion of their program, up to four years. If there is a special trainee or different training requirement for instance, they go beyond that four years as an

undergraduate, that would be a special training request and would you reach out to the HRSA project officer. But at the time that trainees enter the graduate portion of the program, and are taking graduate courses, they would no longer be eligible to participate in the LEAP program. Can you talk about the partnership expectation encouraged with MCH funded programs, so if you go back to, it's actually the third goal on page number 1. What we are basically looking at is partnerships with MCH Graduate Training Programs to help you meet goal 3 which is to provide mentorship and internship opportunities to undergraduate students through the preceptorship with MCH graduate students and Title V organizations in preparation for graduate/post-graduate education/training in MCH. We are hoping that you will partner with those programs to, going back to the question that asked about the internship, to help provide mentorship and internship opportunities for the undergraduate students to participate in LEAP program, so exposing them to graduate programs and activities of graduate programs will help to hopefully encourage the LEAP participants to move on to graduate programs when they graduate from undergraduate programs. Is PD the same as PI, yes, Rachel it is, the project director or the principal investigator is the same thing/person for HRSA's purposes.

Are there any questions on the phone?

>> There are no further questions at this time.

>> CLAUDIA BROWN: Is there an expectation as to how much should be budgeted for evaluation? Again that is going to be up to your discretion based on your evaluation plan, so as long as it meets the criteria and guidelines outlined in the evaluation plan of the NOFO, it is up to your discretion.

Looks like Sophie is typing. If we have core seminars for another MCH program, can we have our LEAP trainees also participate in these seminars, yes, you can. The only restriction that we have in relation to that is, the LEAP program should not be participating in graduate courses and having that counted for the LEAP program. But if you are talking about a core seminar that is part of your program, that goes back to the question about meeting the objective of number 3, that is when you might have joint participation with a graduate student in a seminar, but not in academic graduate courses (if that makes sense). If appropriate for the undergrad, yes, Sophie, that is

exactly correct. On page 33 is an amount listed for undergraduate stipends, and I encourage you to look at appendix A because those are the maximum levels of stipend support that you can provide using LEAP funds. If your institution, allows you to supplement funds from different in-kind funds as I know that has been done in the past, but for purposes of LEAP funding, that is a maximum level of stipends that you can provide on page 33, that's correct. There is also a link at the top of that page that gives you additional information about the stipend, and stipend guidelines and maximum amount. Usually it is updated every January or February of the next year. So they can increase. I would recommend that you keep an eye out on, or reach out to the project officer and we can definitely assist you with the link to the updated stipend levels.

Any other questions on the phone, Rebecca? >> There are no further questions at this time.

>> CLAUDIA BROWN: Someone is still typing. Sophie, this program was previously known as the MCH Pipeline program. That program began in 2006 (and was last competed in 2016). So this is the same program, we just revised the name and updated the purpose.

Okay. Well, it looks like those are all the questions we have. I want to thank you for joining us today, again I want to remind you that this webinar has been recorded, and it will be available on the link in the NOFO on page Roman numeral ii, and page 29 of the NOFO. Once the TA webinar recording is available, you are welcome to review the webinar as many times as you would like. Thank you and everybody have a great rest of the afternoon.

>> Thank you for your participation. This concludes today's call. You may disconnect at this time.

(end of session at 1:51 p.m. CST)