Pre-Application Technical Assistance (TA) Webinar

System-level Workforce Capacity Building for Integrating HIV Primary Care in Community Health Care Settings - Demonstration Sites

Competitive Grant Application HRSA-14-055
January 29, 2014
2:00 – 4:00 PM EDT

Application Deadline: March 10, 2014
Welcome and Introductions

Today’s Presenters

Adan Cajina   SPNS Branch Chief
Melinda Tinsley   SPNS Project Officer
Chau Nguyen   SPNS Project Officer
Potie Pettway   HRSA Grants Management Specialist
Pre-Application Technical Assistance Webinar

Agenda

- HRSA’s New Streamlined FOA
- SPNS Background
- Purpose, Goals and Objectives
- Funding
- Eligibility
- Program Expectations
- Application
- Review
- Contacts
- Questions & Answers
Introduction

HRSA’s New Streamlined FOA

• Funding Opportunity Announcement (FOA) focuses on the program-specific content, including goals, expectations, and requirements of the program.


• Applicants must use both the FOA and the *SF424 Application Guide* to successfully complete and submit an application.
Background

Special Projects of National Significance (SPNS)


• SPNS Program supports the development of innovative models of HIV care to quickly respond to the emerging needs of clients served by the Ryan White HIV/AIDS Program.

• SPNS evaluates the effectiveness of these models’ design, implementation, utilization, cost, and health-related outcomes, while promoting dissemination and replication of successful models.

• SPNS’ mission is to improve HIV service delivery through demonstration projects and evaluation focused on primarily underserved, underinsured, and uninsured populations.
Background

NHAS and HIV Care Continuum

• Aligns with Goals 2 & 3 of the National HIV/AIDS Strategy (NHAS): To increase access to care and improve health outcomes of people living with HIV/AIDS; and to reduce HIV-related health disparities

• Aligns with HIV Care Continuum Initiative: Directs Federal agencies to prioritize the continuum of HIV care by accelerating efforts and directing existing Federal resources to increase HIV testing, services, and treatment, while improving patient access
Purpose

**System-level Workforce Capacity Building for Integrating HIV Primary Care in Community Health Care Settings – Demonstration Sites** (HRSA-14-055) FOA

- This initiative seeks to enhance the capacity and readiness of funded organizations to adapt and re-align their workforce systems to improve the provision of quality care to people living with HIV (PLWH)

- Funding will be provided to support organizations to promote the design, implementation, and evaluation of system-level changes in staffing structures that improve health outcomes along the HIV Care Continuum
Goals and Objectives

*System-level Workforce Capacity Building for Integrating HIV Primary Care in Community Health Care Settings (HRSA-14-055) FOA*

- To assess workforce capacity issues to better respond to increasing demands in HIV care

- To promote system-level change in staffing structures and access to well trained, qualified, and diverse HIV care providers and support staff to improve health outcomes along the HIV Care Continuum

- To identify successful practice transformative models (PTM) and best practices to ensure that PLWH receive optimal care with the goal of achieving increased rates of viral suppression
Summary of Funding
HRSA 14-055

• Applicants may apply for a ceiling amount of up to $300,000 per year

• The project period is 4 years (FY 2014-FY2017)

• Up to 15 demonstration site grantees expected to be awarded

• Approximately $4,500,000 is expected annually, pending availability of appropriated funds

• Closing Date: 3/10/2014
Eligibility
HRSA 14-055

• Eligible demonstration site applicants must be public or private non-profit organizations that receive funding under Ryan White HIV/AIDS Treatment Extension Act of 2009

• This includes [Ryan White-funded] Community Health Centers (CHCs) receiving support under Section 330 of the PHS act; Federally Qualified Health Centers (FQHCs) as described in Title XIX, Section 1905 of the Social Security Act, faith-based and community-based organizations, and/or Indian Tribes or tribal organizations

• Note: This also includes all organizations which receive funding under any Ryan White HIV/AIDS Program Parts, including subgrantees and subcontractors
Background

Workforce Shortage

• A shortage of providers is expected. HIV workforce shortages can have particularly negative impact on the care and treatment of PLWH

• The number of HIV patients seeking care may grow larger in the future. Increases in caseload have been reported

• This shortage of HIV providers and increase in demand poses challenges to clinical capacities

• Need to advance our understanding of system-level structural changes in the HIV care workforce
Background

Successful Models

• Successful models of HIV care in Ryan White HIV/AIDS Program-funded sites have included:
  
  • Interdisciplinary care
  • Integrated care and/or co-located services
  • Patient-centered approaches in a safe and stigma-reducing environment
  • Diverse teams of clinical and support service providers
Program Expectations

Practice Transformative Model (PTM)

• Applicants must propose innovative strategies to increase their capacity to achieve efficient and sustainable service delivery practices to optimize human resources and improve HIV health outcomes

• Demonstration projects will implement these innovative practice transformative models (PTMs) for the efficient delivery of HIV treatment and comprehensive care and support services

• Evaluation of these PTMs will identify best practices and methods to support organizations in re-aligning their workforce and increase the potential for successful integration of HIV care into primary care and community health care settings
Program Expectations
Practice Transformative Model (continued)

• Innovative methods and strategies for PTM structural changes may include, but are not limited to:

  o Task shifting or physician extension;
  o Restructuring staff to meet the standards of patient-centered medical home;
  o Integration of community health workers and patient navigators into the medical team; and
  o Inter-professional team-based coordination and/or co-management
Program Expectations

AETC Partnership

• Successful applicants will be required to partner with their Regional AIDS Education and Training Center (AETC) for clinical training activities

• Applicants should include training needs in their proposed plans

• Applicants should include a Memoranda of Agreement/Understanding or Letter of Support from their regional AETC describing their commitment on the project
Program Expectations

ETAC Collaboration

• Successful awardees will be required to collaborate with and participate in a comprehensive multi-site evaluation led by an Evaluation and Technical Assistance Center (ETAC)

• Funding for the ETAC to conduct the initiative’s multi-site evaluation is being made available under a separate announcement (HRSA-14-058)
## Program Expectations

### Data Requirements

<table>
<thead>
<tr>
<th>Measure</th>
<th>Numerator</th>
<th>Denominator</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV Positivity</td>
<td>Number of HIV positive tests in the 12-month measurement period</td>
<td>Number of HIV tests conducted in the 12-month measurement period</td>
</tr>
<tr>
<td>Linkage to HIV Medical Care</td>
<td>Number of persons who attended a routine HIV medical care visit within 3 months of HIV diagnosis</td>
<td>Number of persons with an HIV diagnosis in 12-month measurement period</td>
</tr>
<tr>
<td>Retention in HIV Medical Care</td>
<td>Number of persons with an HIV diagnosis who had at least one HIV medical care visit in each 6 month period of the 24 month measurement period, with a minimum of 60 days between the first medical visit in the prior 6 month period and the last medical visit in the subsequent 6 month period</td>
<td>Number of persons with an HIV diagnosis with at least one HIV medical care visit in the first 6 months of the 24-month measurement period</td>
</tr>
<tr>
<td>Antiretroviral Therapy (ART)</td>
<td>Number of persons with an HIV diagnosis who are prescribed ART in the 12-month measurement period</td>
<td>Number of persons with an HIV diagnosis and who had at least one HIV medical care visit in the 12-month measurement period</td>
</tr>
<tr>
<td>Viral Load Suppression</td>
<td>Number of persons with an HIV diagnosis with a viral load &lt;200 copies/mL at last test in the 12–month measurement period</td>
<td>Number of persons with an HIV diagnosis and who had at least one HIV medical care visit in the 12-month measurement period</td>
</tr>
</tbody>
</table>

### HHS Common HIV Indicators
Application Format

As outlined in Section 4 of *SF-424 Application Guide* (pgs. 25–35), your application must include the following:

i. Application Face Page
ii. Intergovernmental Review
iii. Table of Contents
iv. Budget
v. Budget Justification Narrative
vi. Staffing Plan
vii. Assurances
viii. Certifications
ix. Project Abstract
x. Project Narrative
xi. Attachments

Items in **RED** are discussed in following slides.
Application

Project Abstract

The *Project Abstract* is a brief summary of the application (proposed project, services, needs, and population to be served). It must be single-spaced and limited to *one page* in length.

**Place the following at the top of the abstract:**
- Project Title
- Applicant Organization Name
- Address
- Project Director Name
- Contact Phone Numbers
- Email Address
- Web Site Address, if applicable
The Project Narrative provides a comprehensive framework and description of all aspects of the proposed project. It contains the following seven (7) sections:

- Introduction
- Needs Assessment
- Methodology
- Work Plan
- Resolution of Challenges
- Evaluative Measures
- Organizational Information

N.B. – In order for reviewers to understand the your proposal, ensure that the Project Narrative is succinct, self-explanatory and well-organized.
Application

Staffing Plan

Staffing plan should include sufficient personnel to successfully implement proposed project activities and goals, including education, experience, qualifications, and rationale for the amount of time being requested for each staff.

In addition to the Principle Investigator/Project Director, proposed staffing plan must include at minimum:

- A 10 percent full-time equivalent (.10 FTE) Evaluator - to oversee the implementation of the multi-site evaluation activities conducted by the ETAC; and
- A 25 percent full-time equivalent (.25 FTE) Data Manager - to assist in the collection and reporting of data

The above proposed staff should have demonstrated experience in clinical quality improvement and/or data collection and reporting for the Ryan White Services Report (RSR).
Your Work Plan should include objectives and key action steps that are:

- **SPECIFIC**
- **MEASUREABLE**
- **ACHIEVABLE**
- **REALISTIC &**
- **TIME FRAMED**
Application

Budget

This FOA is for a **multi-year (4-year)** non-construction program. Accordingly:

- **SF-424A:** Complete Sections A-F for each year of the 4-year project period

- **Line Item Budget:** While the budget period is for one year, you must submit line item budgets for each of the 4 budget periods (Attachment 1)

- **Budget Justification:** Describe each cost element and explain how each cost contributes to meeting the project’s objectives/goals
Application

Funding Restrictions

Funds under this announcement may not be used for the following purposes:

• Not to be used to supplant or supplement concurrent Ryan White HIV/AIDS Program activities or services already funded under any other Parts

• May not be used for direct services, including HIV care and counseling and testing, that are billable to third party payers

Other funding restrictions (e.g., construction, lobbying, alcohol, entertainment, cash payments, food, etc.) are described in the Guide (pg. 29) and FOA (pgs. 20 & 21).
<table>
<thead>
<tr>
<th>Attachment</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attachment 1</td>
<td>Line Item Budgets Spreadsheet for Years 1 through 4</td>
</tr>
<tr>
<td>Attachment 2</td>
<td>Position Descriptions for Key Personnel</td>
</tr>
<tr>
<td>Attachment 3</td>
<td>Biographical Sketches of Key Personnel</td>
</tr>
<tr>
<td>Attachments 4</td>
<td>Signed and Dated Letters of Support and MOUs</td>
</tr>
<tr>
<td>Attachment 5</td>
<td>Statement of Consistency with Statewide Coordinated Statement of Need</td>
</tr>
<tr>
<td>Attachment 6</td>
<td>Work Plan</td>
</tr>
<tr>
<td>Attachment 7</td>
<td>Project Organizational Chart</td>
</tr>
<tr>
<td>Attachment 8</td>
<td>Cultural and Linguistic Factors Competency Statement</td>
</tr>
<tr>
<td>Attachment 9</td>
<td>Statement of Consistency with Healthy People 2020</td>
</tr>
<tr>
<td>Attachment 10-15</td>
<td>Other Relevant Documents, as necessary</td>
</tr>
</tbody>
</table>
## Application Cross Walk

<table>
<thead>
<tr>
<th>Application Content</th>
<th>SF424 Application Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Abstract</td>
<td>Section 4.1.ix</td>
</tr>
<tr>
<td>SF424</td>
<td>Section 4.1.i</td>
</tr>
<tr>
<td>Budget</td>
<td>Section 4.1.iv</td>
</tr>
<tr>
<td>Budget Justification</td>
<td>Section 4.1.v</td>
</tr>
<tr>
<td>Staffing Plan</td>
<td>Section 4.1.vi</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Application - Attachments</th>
<th>SF424 Application Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Position Descriptions (Attachment 2)</td>
<td>Section 4.1.vi</td>
</tr>
<tr>
<td>Biosketches (Attachment 3)</td>
<td>Section 4.1.vi</td>
</tr>
<tr>
<td>Cultural and Linguistic Competence (Attachment 8)</td>
<td>Section 2.2</td>
</tr>
<tr>
<td>Healthy People 2020 (Attachment 9)</td>
<td>Section 2.2</td>
</tr>
</tbody>
</table>
Review

Criteria

- Review Criteria are used to review and rank applications. For this FOA, SPNS has 6 review criteria:

<table>
<thead>
<tr>
<th>Criterion 1: Need</th>
<th>20 points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Criterion 2: Response</td>
<td>30 points</td>
</tr>
<tr>
<td>Criterion 3: Evaluative Measures</td>
<td>20 points</td>
</tr>
<tr>
<td>Criterion 4: Impact</td>
<td>10 points</td>
</tr>
<tr>
<td>Criterion 5: Resources/Capabilities</td>
<td>10 points</td>
</tr>
<tr>
<td>Criterion 6: Support Requested</td>
<td>10 points</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>100 points</strong></td>
</tr>
</tbody>
</table>
## Review

### Corresponding Criteria

<table>
<thead>
<tr>
<th>Project Narrative</th>
<th>Review Criterion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>Need</td>
</tr>
<tr>
<td>Needs Assessment</td>
<td>Need</td>
</tr>
<tr>
<td>Methodology</td>
<td>Response, Evaluative Measures and Impact</td>
</tr>
<tr>
<td>Work Plan</td>
<td>Response</td>
</tr>
<tr>
<td>Resolution of Challenges</td>
<td>Response</td>
</tr>
<tr>
<td>Evaluation and Technical Support Capacity</td>
<td>Resource/Capabilities</td>
</tr>
<tr>
<td>Organizational Information</td>
<td>Resource/Capabilities</td>
</tr>
<tr>
<td>Budget / Budget Justification</td>
<td>Support Requested</td>
</tr>
</tbody>
</table>
Review

Selection Process

• Division of Independent Review (DIR) is responsible for managing objective reviews within HRSA

• Applications competing for Federal funds receive an objective and independent review performed by a committee of relevant and qualified experts (ORC)

• Applications that pass the initial HRSA eligibility screening will be reviewed and rated by a panel based on the program elements and review criteria

• The competitive objective review process is based solely on the merits of the application. It is critical that the applicant paint a clear picture of the approach and the specific work plan proposed and the capabilities that the applicant brings to the work
Application

Page Limit

• The total size of all uploaded files may not exceed the equivalent of **80 pages** when printed by HRSA or a total file size of 10 MB

• This 80-page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support. Standard forms are NOT included in the page limit

• Applications that exceed the specified limits (that exceed the equivalent of 80 pages when printed by HRSA or 10 MB file size) will be deemed non-compliant
Application Submission (Registration and How to Apply)

For registration and other application-related information, Go to: www.Grants.gov

To apply for HRSA-14-055, download instructions and application package at:
http://www.grants.gov/web/grants/view-opportunity.html?oppId=249905

For application assistance, contact Grants.gov
Phone: 1-800-518-4726
E-mail: support@grants.gov
Application Submission

Key Dates

Electronic applications must be received through Grants.gov by

Closing Date:

March 10, 2014 at 11:59 PM ET

Project Start Date: September 1, 2014
Project Period: September 1, 2014 – August 31, 2018
Contacts

Program Questions
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For an archive of this session, go to the TARGET Center Website:
https://careacttarget.org/
Questions and Answers