



The State of Oregon is committed to ensuring that all Oregonians have appropriate access to high quality healthcare across the state. It is therefore important to ensure that the distribution of the healthcare workforce appropriately meets the needs of all Oregonians no matter where they live. To help achieve this, the State of Oregon has made available ~\$8 million in funding for grant awards for the new Healthy Oregon Workforce Training Opportunity (HOWTO) grant program for the 2017-19 biennium. This grant program is being administered under the direction of the Oregon Health Policy Board and in partnership with the Oregon Health Authority and Oregon Health & Science University (OHSU).

The HOWTO grant program is intended to expand health professional training within the state to address current and future shortages in the healthcare workforce in rural and medically underserved areas of Oregon. The program is designed to support innovative, transformative, community-based training initiatives that will address identified local healthcare workforce shortages and expand the diversity of the health professional workforce.

Applications are invited from Oregon community-based educational institutions, consortia, health care service organizations, and others seeking funding to help launch new, innovative training initiatives to address documented shortages in specific areas of their local healthcare workforce.

As a part of the HOWTO grant program, in addition to assembling a review committee, the Grant Program Administrator will also convene an Advisory Committee of key stakeholders to provide guidance to the grant program and help identify strategic priorities for the State.

Potential initiatives and application requirements and parameters:

The list below is a lens through which applications will be viewed. Item 1 is required; applications that also address Items 2 and 3 will be considered to be fully responsive to the core tenets of the HOWTO grant program.

1. Expand current and/or develop new health professional training in a local area, which may include Graduate Medical Education
2. Address health disparities¹ and social determinants of health²
3. Support greater ethnic, racial, and linguistic diversity and inclusion in Oregon's healthcare workforce

Applications in collaboration with established programs elsewhere in the state are strongly encouraged.

Applications must leverage existing community resources and demonstrate a financial investment beyond the funds sought in the application.

Applicants must clearly demonstrate a data-supported healthcare workforce shortage in their community and describe how the proposed initiative will address this shortage.

All applications must include a detailed evaluation plan for their initiative.

Applicants must also provide information on how the new initiative will continue to be supported in a sustainable manner once the grant has expired.

Funding may be requested for up to 3 years.

At this time, we strongly encourage proposals of \$500,000 and under; however, applications of up to \$1 million are allowed.

The application must include all costs, including leveraged funding and in-kind support.

Grant funds may not be used for capital construction costs.

Grant funds may not be used for maintenance of effort (MOE) of existing activities.

Any grant recipient must represent it has not discriminated against and will not discriminate against minority, women or emerging small business enterprises certified under ORS 200.055 in obtaining any required subcontracts.

For those interested in applying, please refer to the Application Guidelines that outlines eligibility requirements, expected contents of the application packet, review process and timeline.

1. As defined by the Surgeon General's Website, "A health disparity is a difference in health outcomes across subgroups of the population. Health disparities are often linked to social, economic, or environmental disadvantages (e.g., less access to good jobs, unsafe neighborhoods, lack of affordable transportation options). Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health on the basis of their racial or ethnic group, religion, socioeconomic status, gender, age, mental health, cognitive, sensory, or physical disability, sexual orientation or gender identity, geographic location, or other characteristics historically linked to discrimination or exclusion. Many health concerns, such as heart disease, asthma, obesity, diabetes, HIV/ AIDS, viral hepatitis B and C, infant mortality, and violence, disproportionately affect certain populations. Reducing disparities in health will give everyone a chance to live a healthy life and improve the quality of life for all Americans."

<https://www.surgeongeneral.gov/priorities/prevention/strategy/elimination-of-health-disparities.html>

Accessed: 3/25/2019

2. The CDC explains Social Determinants of Health as "Conditions in the places where people live, learn, work, and play affect a wide range of health risks and outcomes. These conditions are known as social determinants of health (SDOH)" and provides a list of examples at the following internet address:

<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

Application Guidelines

Submission Deadline

May 24, 2019

Contact Information for Inquiries

For questions regarding the program, contact howto@ohsu.edu

For questions about the application portal, contact funding@ohsu.edu

Submission Process Details

Applications will be submitted electronically through the Competitive Application Portal at Oregon Health & Science University: <https://ohsu.infoready4.com>. To submit an applicant will need an account which can be done automatically on the website using an email address. Please be sure to add support@infoready.com to your list of trusted senders so you don't miss important information. If you have questions about the portal, please contact funding@ohsu.edu.

Content and Form of Application

1. Project Abstract Summary
2. Project Narrative
3. Budget Narrative/Budget Table
4. Appendices

Applicants must follow the RFA guidelines. Any proposal exceeding the page maximums will not be reviewed and will be returned to the applicant. Proposals not meeting other RFA requirements may be returned to applicants upon administrative review/determination.

While there is no required format for citing references at this time, we suggest AMA Style, with a reference list at the end of the application included as an Appendix.

1. **Project Abstract Summary:** The abstract will be used to provide reviewers with an overview of the application and will form the basis for the application summary in grants management and program summary documents. If the project is funded, the Project Abstract may be published on the Community Partnership website and in other online and hard-copy publications. Please submit the abstract using the text field in the application portal.

The following documents should be combined into a single PDF and uploaded to the application portal with the naming convention: `IdentifyOrganization_LastNameOfMainContact_HOWTO_2`. Applications should use an 11-point font with margins of 1" all around.

2. **Project Narrative:** The Project Narrative is the most important part of the application, since it will be used as the primary basis to determine whether or not a project meets the minimum requirements for a grant under the Community Partnership program. The Project Narrative must provide a clear and concise description of the project, addressing documented shortages in specific areas of a community's healthcare workforce. The Project Narrative should include the following components:

- I. Executive Summary
- II. Problem Statement
- III. Organizational Capability
- IV. Goals and Objectives
- V. Outcomes
- VI. Program Plan
- VII. Plan for Program Sustainability
- VIII. Evaluation

I. Executive Summary [1 Page Maximum]: This section should include a brief description of the proposed project, including: target workforce need, goal(s), objectives, outcomes, and evaluation plan. The Executive Summary should also clearly state if the application is for a new program, to expand on an existing program, and/or contribute to increasing the diversity of Oregon's healthcare workforce.

II. Problem Statement [2 Page Maximum]: Identify and define the workforce shortage and contributing factors that will be addressed by the proposed project and activities. Describe and document (with data) the significance or prevalence of the problem or issues affecting the healthcare workforce shortage being addressed. Describe the populations in the community that will be targeted by the program being proposed.

III. Organizational Capability [1 Page Maximum]: The application should include an organizational capability statement describing how the applicant agency (or the particular division of a larger agency which will have responsibility for this project) is organized, the nature and scope of its work, and the capabilities it possesses. This description should cover capabilities of the applicant agency not included in the program narrative, such as any current or previous relevant experience and/or the record of the project team in preparing cogent and useful reports, publications, and other products. The applicant should document significant experience working in healthcare workforce development. Please include vitae or biographical sketches as appendices for key project personnel.

IV. Goals and Objectives [1 Page Maximum]: Overall project goals, annual short-term and project long-term objectives must be provided. Identify impact outcomes and performance measures for the proposed activities. Tie outcomes/impacts and measures to long-term goals and objectives. Goals must be ambitious and achievable in the project's timeframe.

V. Outcomes [2 Page Maximum]: This section of the project narrative must clearly identify the measurable outcome(s) that will result from the proposed project. In addition to discussion in the narrative, applicants must describe how they envision the project may be applicable to other communities across the state.

A “measurable outcome” is an observable end-result that describes how a particular intervention benefits program participants. It demonstrates the “impact” of the intervention. A measurable outcome is not a measurable output, such as: the number of individuals served or the number of training sessions held.

The focus of this section should be kept on describing what outcome(s) will be produced by the project and should use the Evaluation section noted below to describe how the outcome(s) will be measured and reported. The application will be scored on the clarity, nature, and ambition of the proposed outcomes, not on the number of outcomes cited.

VI. Program Plan [3 Page Maximum]: Specify evidence-based strategies and practices to be used in proposed project activities in relation to the workforce shortage to be addressed. Clearly describe how the project will be carried out and the role(s) of collaborating organizations or subcontractors. Describe specific strategies, practices or activities planned to achieve each objective. For each, describe how, when, where, by whom, and for whom it will be conducted.

Describe any products to be developed by the project. The application should strive to demonstrate the effectiveness of a highly innovative and multi- partnership collaborative approach.

Provide a description of proposed program staff, including job descriptions for key staff (including the Project Director), qualifications and responsibilities of each staff member and percentage time each will commit to the project. Provide a description of duties for proposed consultants and volunteers, if applicable. Include an organization chart that illustrates the project reporting structure and timeline. Include charts of the required partnership organizations’ structure. Discuss how these organizations will interface with the applicant organization and each other. Also describe the approach that will be used to monitor and track progress on the project’s tasks and objectives.

VII Plan for Program Sustainability [1 Page Maximum]: A detailed description of how the applicant expects to sustain the proposed program after the end of the award. Ongoing sustainability is a key factor considered in the review process.

VIII. Evaluation Plan [2 Page Maximum]: The evaluation plan must clearly articulate how the applicant will evaluate project components. The applicant is expected to implement the evaluation plan at the beginning of the project in order to capture and document actions contributing to relevant project impact and outcomes.

3. Budget Narrative [2 Page Maximum] + Provided Budget Table [Not Counted in Page Maximum]

The applicant must submit a Budget Table (on the form provided) and separate narrative (2 page maximum) with detailed justification as part of their application. Discuss the necessity, reasonableness, and allocation of the proposed costs. Project budget calculations must include estimation methods, quantities, unit costs, and other similar quantitative detail sufficient to verify the calculations. While proposals must clearly identify the investments and/or resources being committed by the communities or partners in support of the proposed program, there is not a specified financial match requirement.

The applicant must include a detailed listing of any community/partner funding sources identified. The applicant must indicate the method being used to calculate any overhead/indirect costs.

The applicant must provide an "object class category" budget using the provided Budget Table for the life of the proposed project.

Object Class Descriptions and Required Justifications

Personnel Description: Costs of staff salaries and wages, excluding benefits.

Personnel Justification: Identify the project director or principal investigator, if known at the time of application. Provide personnel costs detailing for each proposed staff person: the title; full name (if known at time of application), time commitment to the project as a percentage or full-time equivalent; annual salary and/or annual wage rate. Do not include the costs of consultants, personnel costs of delegate agencies, or of specific project(s) and/or businesses to be financed by the applicant. Contractors and consultants should not be placed under this category.

Fringe Benefits Description: Costs of employee fringe benefits unless treated as part of an approved indirect cost rate.

Fringe Benefits Justification: Provide a breakdown of the amounts and percentages that comprise fringe benefit costs such as health insurance, Federal Insurance Contributions Act (FICA) taxes, retirement insurance, and taxes.

Travel Description: Costs of travel by staff of the applicant organization.

Travel Justification: For each trip, show the date of the proposed travel, total number of traveler(s); travel destination; duration of trip; per diem; mileage allowances, if privately owned vehicles will be used; and other transportation costs and subsistence allowances. Equipment Description: "Equipment" means an article of nonexpendable, tangible personal property having a useful life of more than one year per unit and an acquisition cost that equals or exceeds the lesser of: (a) the capitalization level established by the organization for the financial statement purposes, or (b) \$5,000. (Note: Acquisition cost means the net invoice unit price of an item of equipment, including the cost of any modifications, attachments, accessories, or auxiliary apparatus necessary to make it usable for the purpose for which it is acquired. Ancillary charges, such as taxes, duty, protective in-transit insurance, freight, and installation, shall be included in or excluded from acquisition cost in accordance with your organization's regular written accounting practices.)

Equipment Justification: For each type of equipment requested applicants must provide a description of the equipment; the cost per unit; the number of units; the total cost; and a plan for use of the equipment in the project; as well as a plan for the use, and/or disposal of, the equipment after the project ends. An applicant organization that uses its own definition for equipment should provide a copy of its policy, or section of its policy, that includes the equipment definition as an Appendix. Reference the policy in this justification.

Supplies Description: Costs of all tangible personal property other than those included under the Equipment category. This includes office and other consumable supplies with a per-unit cost of less than \$5,000.

Supplies Justification: Specify general categories of supplies and their costs. Show computations and provide other information that supports the amount requested.

Contractual Description: Costs of all contracts or subawards for services and goods except for those that belong under other categories such as equipment, supplies, construction, etc. Include third-party evaluation contracts, if applicable, and contracts or subawards with subrecipient organizations (with budget detail), including delegate agencies and specific project(s) and/or businesses to be financed by the applicant. This line item is not for individual consultants.

Contractual Justification: Demonstrate that all procurement transactions will be conducted in a manner to provide, to the maximum extent practical, open, and free competition. Recipients may be required to make pre-award review and procurement documents, such as requests for proposals or invitations for bids, independent cost estimates, etc., available upon request.

Other Description: Enter the total of all other costs. Such costs, where applicable and appropriate, may include but are not limited to: consultants; insurance; professional services (including audit charges); space and equipment rent; printing and publication; training, such as tuition and stipends; staff development costs; and any other costs not addressed elsewhere in the budget. Food is not generally allowed unless an allowable program expense within the applying organization.

Other Justification: Provide computations, a narrative description, and a justification for each cost under this category.

Overhead Cost Description: Total amount of overhead costs requested (if applicable) and justification for such costs in the execution of the project.

Program Income Description: Program income means gross income earned by your organization that is directly generated by this project if it is funded. Program income includes but is not limited to income from fees for services performed or the use or rental of real or personal property acquired under the award. Interest earned on advances of funds is not program income. Program income does not include rebates, credits, discounts, and interest earned on any of them.

Program Income Justification: Describe and estimate the sources and amounts of Program Income that this project may generate if funded.

Community Resources: Detailed description of the community investment and other resources that will be used to support the project.

Plan for Oversight of Award Funds

The applicant must include a plan for oversight of award funds which:

- Describes how your organization will provide oversight of funds
- Describes the organizational systems that demonstrate effective control over and accountability for funds and program income, compare outlays with budget amounts, and provide accounting records supported by source documentation.
- Describes organizational controls that will ensure timely and accurate submission of annual and final financial reports.

4. Appendices

A Letter of Commitment from all Participating Organizations and Agencies.

The applicant must submit with its application a Letter of Commitment (LOC) between the applicant organization and each partner organization. Each LOC must clearly delineate the roles and resources (including in-kind) that each entity will bring to the project; state the duration and terms of the agreement and cover the entire project period. Each LOC must include all partners and be signed by the authorized representatives of each Partnership program partner.

Signatures may be by facsimile transmission or other electronic means, and the LOC may be executed in any number of counterparts, all of which together shall constitute one signed LOC.

Letters of commitment are not the same as letters of support. Letters of support are letters that are general in nature that speak to the writer's belief in the capability of an applicant to accomplish a goal/task. Letters of support also may indicate an intent or interest to work together in the future, but they lack specificity. You should NOT provide letters of support, and letters of support such as this will not be considered during the review.

Curriculum Vitae/Resume for Key Project Personnel [3 Page Maximum for each].

The applicant must submit with its application curriculum vitae and/or resumes of all key personnel.

Equipment Policy (as applicable)

Organizational Chart

Include an organization chart showing the relationship of the project to the current organization; this chart may also include the contractual and/or supportive organizations that will become part of the network. Also include information about any contractual and/or supportive staff/organization(s) that will have a secondary role(s) in implementing the project and achieving project goals.

Reference List (as applicable)

Application Review Process

Complete applications submitted by the grant deadline will be reviewed by an independent panel of individuals from across Oregon who have a deep understanding of the healthcare workforce, community workforce needs, community-based research, community-based program implementation and ongoing management, pedagogy, and program assessment methodologies. The Grant Review Panel (GRP) will comprise of about 7 individuals who will review and score each application based on the following criteria.

Factor 1: Executive Summary and Problem Statement (10 points)

- Quality and soundness of the Executive Summary and the description in the Problem Statement of the proposed project and the nature and scope of the specific problem and/or issue(s) and proposed intervention.
- The depth and breadth of knowledge of the problem demonstrated by the application.

Factor 2: Organizational Capability (10 points)

- Appropriateness of the applicant's organizational structure and organizational chart provided to implement the project as proposed
- Evidence of the organization's (and any partners') ability to successfully conduct the proposed program.
- Demonstrated ability of the organization to effectively implement community or regional initiatives and manage multiple projects.
- Demonstrated ability to collaborate with other non-affiliated organizations.
- Appropriateness of defined roles and responsibilities of project staff including any proposed consultants.
- Extent to which the organization demonstrates its ability to collect, and analyze project outcome data.

Factor 3: Goals and Objectives (10 points)

- Merit of the stated goals and objectives.
- Number of program goals addressed by the proposal if more than one.
- The extent to which the stated problem to be addressed by the proposed project and the proposed project itself appear to meet the Community Partnership program purpose and expectations.
- Degree to which the objectives focus on the overall goal of the program rather than program activities.

Factor 4: Outcomes (20 points)

- The quality and nature of the proposed measureable outcomes.
- The extent of the expected impact on the healthcare workforce of the proposal's measurable outcomes.

Factor 5: Program Plan including Proposed Interventions/Plan, Target Populations and Organizations, and Project Management (20 points total)

5.1: Program Interventions/Plan and Project Management (15 of 20 points)

- Extent to which proposed strategies and overall project is designed to improve upon an evidence-based model.
- Appropriateness and merit of proposed approach, strategies, and specific activities for each objective.
- Logic and sequencing of the planned approaches as they relate to the specified targeted healthcare workforce shortage to be addressed.
- Appropriateness of defined roles including staff reporting channels and that of any proposed consultants;
- The soundness of applicant's organizational structure, inclusive of clearly defined roles and responsibilities and lines of authority among the proposed staff within and between partnering organizations.
- The strength of commitment of the applicant organization in terms of managerial and leadership support and staffing necessary to carry out proposed plan.
- Soundness of the established community network and the detail provided relative to the experience, roles, resources/and or services each entity will provide for the project (must cover the entire project period).
- The quality and completeness of the signed Letter of Commitment between the applicant and its subrecipients/partners.

5.2 Healthcare Workforce Assessment (5 of 20 points)

- The quality of applicant's description and documentation with data of the healthcare workforce shortage to be served by the project.

Factor 6: Evaluation Plan and Innovation (20 points total)

6.1: Clarity and appropriateness of methodology for evaluation. (10 of 20 points)

- The degree to which expected results are appropriate for the proposed objectives and activities.
- Appropriateness of the proposed methods for data collection, analysis and reporting.
- The quality and suitability of the applicant's outcome measures.
- The quality and soundness of a clearly articulated and detailed plan for tracking, assessing, and documenting progress toward achieving objectives, planned activities, and intended outcomes.
- The quality, soundness and clarity of the applicant's plan for measuring project outcomes and accomplishments.
- The potential for the proposed project to have a sustained impact on the targeted healthcare workforce shortage.
- The soundness of applicant's plan to document the project for replicability in similar communities.

6.2: Innovation (10 of 20 points)

- The extent to which the proposal represents an innovative or new approach that is expected to result in a substantial and significant improvement over current approaches.

Factor 7: Budget (10 points)

- The quality and completeness of the applicant's Budget Narrative.
- The degree to which the proposal demonstrates a clear and strong relationship between the stated objectives, project activities, and the budget.
- The degree to which the Budget Narrative defines the amount of work that is planned and expected to be performed and what it will cost with an explanation of how it will be cost effective.

Factor 8: Mission Alignment (20 points total)

- 8.1 (10 of 20 points) The extent to which the proposal will expand current and develop new health professional training a local area, which may include Graduate Medical Education.
- 8.2 (5 of 20 points) The extent to which the proposal will address health disparities and social determinants of health.
- 8.3 (5 of 20 points) The extent to which the proposal will support greater ethnic, racial and linguistic diversity, and inclusion in Oregon's healthcare workforce.

Post-Award Requirements

Awardees will be expected to provide an annual report at the end of each year of their award. This annual report should include a description of activities over the past year, performance against goals described in the grant application, an explanation of steps taken if goals were not met, plans for the following year and any changes to budget expenditures in the upcoming year. The annual report should also include a detailed financial summary of grant expenditures. After the last year of the grant, awardees will be required to submit a final progress report summarizing the work achieved throughout the grant and the outcomes in relation to those initially described in the grant application. The final report should also describe how the program will be maintained following the end of the award.