

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Health Resources and Services Administration**

Healthcare Systems Bureau
Division of Transplantation

Public Education Efforts to Increase Solid Organ Donation

Announcement Type: New
Announcement Number: HRSA-14-013

Catalog of Federal Domestic Assistance (CFDA) No. 93.134

FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2014

Application Due Date: December 3, 2013

Modified 10/24/13 – Added language under Award Information to indicate HRSA’s intent to fund, at a minimum, one award in each of two areas : (1) increase the number of individuals who make a commitment to become a deceased organ donor or (2) increase knowledge among parents/guardians, and minors if age appropriate, about the need for transplantation and organ donation among minors, and willingness of parents/legal guardians to authorize organ donation for a minor child in the event of death.

*Ensure your Grants.gov registration and passwords are current immediately!
Deadline extensions are not granted for lack of registration.
Registration may take up to one month to complete.*

Release Date: August 9, 2013

Issuance Date: August 9, 2013

Rita Maldonado, MPH
Project Officer
Organ, Tissue and Blood Stem Cell Donation Branch
Email: rmaldonado@hrsa.gov

Telephone: (301) 443.3622
Fax: (301) 594-6095

Authority: Section 377A (b) of the Public Health Service (PHS) Act, as amended. (42 U.S.C. 274f-1(b))

EXECUTIVE SUMMARY

The Health Resources and Services Administration, Healthcare Systems Bureau, Division of Transplantation is accepting applications for fiscal year (FY) 2014 Public Education Efforts to Increase Solid Organ Donation Program. The purpose of this grant program is to promote broader implementation of interventions that work to increase public commitment to solid organ donation.

Funding Opportunity Title:	Public Education Efforts to Increase Solid Organ Donation
Funding Opportunity Number:	HRSA-14-013
Due Date for Applications:	December 3, 2013
Anticipated Total Available Funding:	\$1,000,000
Estimated Number and Type of Awards:	3-5 grant(s)
Estimated Award Amount:	Up to \$200,000 - \$300,000 per year
Cost Sharing/Match Required:	None
Length of Project Period:	Up to 2 years
Project Start Date:	September 1, 2014
Eligible Applicants:	Public or nonprofit private entities [See Section III-1 of this FOA for complete eligibility information.]

All applicants are responsible for reading and complying with the instructions included in [HRSA's SF-424 R&R Application Guide](#), except where instructed in this funding opportunity announcement to do otherwise. A short video for applicants explaining the new *Application Guides* is available at <http://www.hrsa.gov/grants/apply/applicationguide/>.

Table of Contents

I. FUNDING OPPORTUNITY DESCRIPTION	1
1. PURPOSE.....	1
2. BACKGROUND	3
II. AWARD INFORMATION	4
1. TYPE OF AWARD	4
2. SUMMARY OF FUNDING	4
III. ELIGIBILITY INFORMATION.....	4
1. ELIGIBLE APPLICANTS.....	4
2. COST SHARING/MATCHING	4
3. OTHER	4
IV. APPLICATION AND SUBMISSION INFORMATION.....	5
1. ADDRESS TO REQUEST APPLICATION PACKAGE.....	5
2. CONTENT AND FORM OF APPLICATION SUBMISSION.....	5
i. <i>Project Abstract</i>	5
ii. <i>Budget and Budget Justification Narrative</i>	5
iii. <i>Project Narrative</i>	6
iv. <i>Attachments</i>	11
3. SUBMISSION DATES AND TIMES.....	12
4. INTERGOVERNMENTAL REVIEW	12
5. FUNDING RESTRICTIONS	12
V. APPLICATION REVIEW INFORMATION	13
1. REVIEW CRITERIA	13
2. REVIEW AND SELECTION PROCESS.....	15
3. ANTICIPATED ANNOUNCEMENT AND AWARD DATES	15
VI. AWARD ADMINISTRATION INFORMATION.....	15
1. AWARD NOTICES	15
2. ADMINISTRATIVE AND NATIONAL POLICY REQUIREMENTS.....	16
3. REPORTING	16
VII. AGENCY CONTACTS	16
VIII. OTHER INFORMATION.....	17
IX. TIPS FOR WRITING A STRONG APPLICATION.....	19

I. Funding Opportunity Description

1. Purpose

This announcement solicits applications for the Public Education Efforts to Increase Solid Organ¹ Donation Program.

Qualified public and non-profit private entities are eligible to apply. This grant program is administered by the Division of Transplantation (DoT), Healthcare Systems Bureau (HSB), Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services (HHS).

The mission of this grant program is to educate the public about the need for solid organ donation and to encourage positive deceased donation decisions, documentation, and family discussions. The specific purpose of this two (2)-year grant program is to promote broader implementation and evaluation of interventions that increase public commitment to solid organ donation. All projects funded under this grant program are intended to support public education and outreach strategies to: (a) increase the number of individuals who make a commitment to become a deceased organ donor or (b) increase knowledge among parents/guardians, and minors if age appropriate, about the need for transplantation and organ donation among minors, and willingness of parents/legal guardians to authorize organ donation for a minor child in the event of death. All components of the proposed interventions must be evaluated, as described below. Funds under this grant program shall not be used for projects that educate about and/or promote living donation.

Two types of projects may be funded under this grant program, both of which must include an evaluation component:

Category 1: Replication of Empirically Validated Interventions. Numerous interventions have been shown to be effective in increasing donor designation or in changing other types of health behavior. Applicants may replicate in their own areas specific interventions that have been demonstrated through research studies to increase public commitment to deceased donation, or may adapt strategies or components of interventions that have demonstrated effectiveness in promoting behavior change in other disciplines. A replication should be conducted in a geographic area that is different from the original and should closely resemble the original study. Projects proposed under this category must have strong evaluation components as described below.

¹ For purposes of this grant program, the term ‘organ’ is used consistently with the definition provided in the final rule governing the operation of the Organ Procurement and Transplantation Network (OPTN), 42 CFR 121.2. This regulation currently provides that “Organ means a human kidney, liver, heart, pancreas, or intestine (including the esophagus, stomach, small and/or large intestines, or any portion of the gastrointestinal tract). Blood vessels recovered from an organ donor during the recovery of such organs are considered part of an organ with which they are procured for purposes of this part if the vessels are intended for use in organ transplantation and labeled ‘For use in organ transplantation only.’” Although the focus of this grant program concerns organ donation, a project also may have the effect of increasing the number of tissues and/or eye donors.

Category 2: Combined Community Outreach Interventions. In recognition of the well demonstrated link between behavior change and carefully designed outreach strategies consisting of community-based motivational interventions and reinforcing media outreach strategies, applicants may construct a project that contains both of these elements in a coordinated and well justified approach for increasing public commitment to deceased donation. Media may be radio, television, print, or Internet-based and must be appropriate for reaching the population(s) targeted in the application. Identification and justification of each component of the intervention as either community-based or media is required. Projects proposed under this category must have strong evaluation components as described below.

Applicants have considerable flexibility in the selection of strategies to implement and populations to target. Applications that propose to replicate a successful practice must carefully describe the project being replicated, including its procedures, target population(s), intervention(s), materials, evaluation measure(s), and outcomes. If replication projects need to make minor adjustments from the original project to accommodate local circumstances, these deviations must be thoroughly described and well justified.

Applications that propose a combined community outreach project have considerable flexibility as to methods, materials, delivery, and settings for the intervention. However, proposed activities should be appropriate and well justified for the target population.

Examples of settings in which a project might be conducted include motor vehicle offices; grassroots, faith-based, and community organizations; health centers; education institutions; worksites; community centers; sports arenas; fraternal organizations; etc. The preceding examples are illustrative only and should not be construed as a mandatory or finite list of settings. Applicants are encouraged to consider including faith-based and grassroots community organizations in their projects.

Applications must include both process and outcome evaluation. For those projects focusing on adult deceased donation, one measure of outcome evaluation must be increases in the number/rate of state donor registry enrollments. At minimum, baseline benchmarks must be identified for organ donation sign-up rates along with a proposed project improvement goal and annual targets for each project year and target population. Both actual and projected rates should be included.

Project evaluation must account for other efforts to increase donor enrollment that may impact project outcomes and distinguish the impact of grant-funded efforts from external or on-going activities in the target communities conducted by the applicant or other organizations. Other such activities can include those related to other DoT grant projects, Donate Life America activities, random media events or television programming.

This grant program also seeks to promote greater collaboration between transplant community organizations and those organizations with expertise and experience in evaluation research. Applicants are strongly encouraged to prepare their applications and, if funded, implement their projects as a consortium of organizations relevant to the project goals. Specifically, applicants are encouraged to work as a team consisting of the following two types of organizations:

- 1) at least one organization/institution currently involved with demonstrated expertise in community education and outreach strategies to encourage public commitment to organ donation; and
- 2) at least one organization/institution with demonstrated expertise and experience in evaluation design and methods in the behavioral and social sciences.

Funds must be used to implement efforts that are not already part of the applicant's ongoing activities.

2. Background

This program is authorized under Section 377A(b) of the Public Health Service Act (42 U.S.C. 274f-1(b)), as amended by the Organ Donation and Recovery Improvement Act, P.L. 108-216.

Transplantation is the therapy of choice and often the only choice to treat conditions leading to life-threatening end-stage-organ failure. Over the past two decades, advances in surgical techniques and post-transplant therapies have improved both short- and long-term graft survival. Ongoing and future research will continue to contribute to overcoming some of the remaining medical and biological obstacles. However, even if these obstacles are overcome, the growing number of individuals needing transplants and the inadequate number of organ donors remain major barriers to providing this lifesaving treatment for all who need it. The critical shortage of donor organs and the disparity between donor potential and actual donation rates have been well documented. The number of patients waiting for transplants as of July 2013 was nearly 119,000. Only 8,143 deaths resulted in donation in 2012, a figure far smaller than the need. Even with a national recovery average of 3.01 organs per deceased donor and with the contributions of 5,872 living donors, only 30,429 patients received transplants in the United States in 2012, while 6,876 individuals died waiting (Organ Procurement and Transplantation Network ("OPTN"), July 24, 2013).

An important way to address this growing need for organs is to strengthen and implement public education initiatives to promote individual commitment to deceased donation, and promote documentation of that commitment so that it can be safely recorded and reliably retrieved at an individual's time of death. For minors who cannot themselves make an official commitment to donation it is important to implement public outreach initiatives that increase the likelihood that their parent or legal guardian would be willing to authorize their donation in the event of death.

The need to increase the number of solid organ donations has been consistently recognized in the Uniform Anatomical Gift Act (UAGA). The original model act was developed in 1968 and revised in 1987. The 2006 revision of the UAGA has been adopted in some form by 47 states and territories.

This grant program recognizes the importance of public education and outreach in influencing behavior change. It also recognizes the importance of evidence-based research in laying the foundation for building sound and effective public outreach campaigns. Since FY 1999, DoT has supported 95 projects under the Social and Behavioral Interventions to Increase Solid Organ Donation grant program to test specific strategies for their effectiveness in increasing public commitment to become organ donors. Sixty-seven of these focused entirely or in part on public outreach, using numerous strategies and addressing various populations. Other strategies also have been identified in research studies and reported in peer reviewed professional literature as

effectively increasing donation designation. Since FY 2007, 21 projects have been supported under the Public Education Efforts to Increase Solid Organ Donation grant program. Brief descriptions of all projects are available on <http://www.organdonor.gov>.

II. Award Information

1. Type of Award

Funding will be provided in the form of a grant.

2. Summary of Funding

This program will provide funding during Federal fiscal years 2014 – 2015. Approximately \$1,000,000 is expected to be available annually to fund 3 – 5 grants. It is anticipated that the average award for each project year will be \$200,000 - \$300,000 (direct and indirect costs). The period of support is up to two (2) years. Funding beyond the first year is dependent on the availability of appropriated funds for the Public Education Efforts to Increase Solid Organ Donation Program in subsequent fiscal years, satisfactory grantee performance, and a decision that continued funding is in the best interest of the Federal Government.

HRSA intends to fund, at a minimum, one award in each of two areas : (1) increase the number of individuals who make a commitment to become a deceased organ donor or (2) increase knowledge among parents/guardians, and minors if age appropriate, about the need for transplantation and organ donation among minors, and willingness of parents/legal guardians to authorize organ donation for a minor child in the event of death.

III. Eligibility Information

1. Eligible Applicants

Eligible applicants are public or nonprofit private entities and may include State and local governments, Indian Tribal Governments, institutions of higher education, other nonprofit organizations such as faith-based and community organizations, and Tribal organizations. Eligible applicants include Federally-designated organ procurement organizations (OPOs) and other nonprofit private or public entities eligible for funds under Section 377A(b) of the Public Health Service (PHS) Act as amended, (42 U.S.C. 274f-1(b)). Applications that fail to meet the eligibility criteria by the time of the application deadline will not be considered for funding.

If the applicant or any member of the project team is a member of the Organ Procurement and Transplant Network (OPTN), the applicant and all other OPTN members involved in the project are required to be in compliance with the final rule governing the operation of the OPTN, see 42 CFR part 121 or visit <http://optn.transplant.hrsa.gov/>.

2. Cost Sharing/Matching

Cost Sharing/Matching is not required.

3. Other

Any application that fails to satisfy the deadline requirements referenced in *Section IV.3* will be considered non-responsive and will not be considered for funding under this announcement.

NOTE: Multiple applications from an organization are allowable.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA *requires* applicants for this funding opportunity announcement to apply electronically through Grants.gov. Applicants must download the SF-424 Research and Related (R&R) application package associated with this funding opportunity following the directions provided at [Grants.gov](https://www.grants.gov).

2. Content and Form of Application Submission

Section 4 of HRSA's [SF-424 R&R Application Guide](#) provides instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract. You must submit the information outlined in the Application Guide in addition to the program specific information below. All applicants are responsible for reading and complying with the instructions included in [HRSA's SF-424 R&R Application Guide](#), except where instructed in the funding opportunity announcement to do otherwise.

Application Page Limit

The total size of all uploaded files may not exceed the equivalent of 80 pages when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support required in the *Application Guide* and this FOA. Standard OMB-approved forms are NOT included in the page limit. **We strongly urge you to print your application to ensure it does not exceed the specified page limit.**

Applications must be complete, within the specified page limit, and submitted prior to the deadline to be considered under the announcement.

Program-specific Instructions

In addition to application requirements and instructions in Section 4 of [HRSA's SF-424 R&R Application Guide](#) (including the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract), please include the following:

i. Project Abstract

See Section 4.1.ix of [HRSA's SF-424 R&R Application Guide](#).

ii. Budget and Budget Justification Narrative

In addition to the instructions in Section 4.1.iv and v. of [HRSA's SF-424 R&R Application Guide](#) the Public Education Efforts to Increase Organ Donation program requires the following:

- If a consortium of organizations is conducting the project, applicants should include as attachments itemized budgets for each year of grant support for each

organization in the consortium. These attachments are submitted via the *SF-424 R&R Sub-award Budget Attachment(s) Form*. It is not necessary to submit cumulative budgets for the separate organizations. It is important to clearly indicate on each budget page which organization it represents. These forms will represent the full project period of Federal assistance requested. All budgets must be well justified, with explanations of each line item in the narrative of the associated budget justification.

iii. Project Narrative

This section provides a comprehensive framework and description of all aspects of the proposed project. It should be succinct, self-explanatory and well organized so that reviewers can understand the proposed project.

The narrative should include sufficient information to enable the evaluation of the project. It should be specific and informative and without redundancies. Applicants submitting revisions of proposals that were previously not funded are encouraged to include point-by-point discussion of how weaknesses identified in the summary statement have been addressed.

Use the following section headers for the Narrative:

- **INTRODUCTION - Corresponds to Section V's Review Criterion(a) 1**

This section should briefly describe the purpose of the proposed project. Indicate in the Introduction whether the application is being submitted as a Category 1 or Category 2 project.

Category 1: Replication of Empirically Validated Interventions

Discuss the overriding reason (purpose) that the project is to be undertaken. Indicate that a Category 1 project is being proposed. Provide a brief overview of the original project components and results. Discuss why a replication of that project is expected to be effective when applied to your proposed target area and population. Discuss your goals and measurable steps (objectives) to achieve your goals.

Category 2: Combined Community Outreach Interventions

Discuss the overriding reason (purpose) that the project is to be undertaken. Indicate that a Category 2 project is being proposed and provide an overview of the project. Discuss goals, and measurable steps (objectives) to achieve the goals. Discuss why the proposed project is expected to have a substantial positive impact on increasing public commitment to donation and documentation of that commitment in state registries.

- **NEEDS ASSESSMENT - Corresponds to Section V's Review Criterion(a) 1**

This section outlines the needs of your community and/or organization. The target population and its unmet health needs must be described, documented, and justified in this section (and discussed in greater detail below under *Methodology*). Include socio-cultural determinants of health and health disparities impacting the target population or communities served and unmet. Demographic data should be used and cited whenever possible to support the information provided. Cite relevant published and unpublished local and national data. Identify and justify selection of the target population(s) and communities. Discuss any relevant barriers in the service area that the project hopes to overcome. Provide relevant data including the number of individuals in the target area who are eligible to enroll their donation intentions. Discuss existing public education and outreach efforts and justify the need for the

proposed intervention. For deceased donation outreach efforts among adults, indicate the existing number of licensed drivers, the total number of licensed drivers who are designated donors, and the average number and/or rate of monthly enrollments. This section should help reviewers understand the need for the proposed project in the targeted community.

- *METHODOLOGY - Corresponds to Section V's Review Criterion(a) ,2, 3, 4, 5*
Propose methods that will be used to meet each of the previously described program requirements and expectations in this funding opportunity announcement. Include development of effective tools and strategies for ongoing staff training, outreach, collaborations, clear communication, and information sharing/dissemination with efforts to involve patients, families and communities of culturally, linguistically, socio-economically and geographically diverse backgrounds, if applicable.

Category 1: Replication of Empirically Validated Interventions

This section should provide a thorough and complete description of the following elements for both the original project and your proposed project, highlighting and justifying any adjustments made in your proposed project.

Target Population

[a] description of the size and demographic composition of the target population; [b] discussion of the current donation patterns of the target population; [c] presentation of any other factors related to the population that will have an influence on donor registry enrollment; [d] differences between the target population of the original project and the proposed target population; [e] size of the original and proposed samples; and [f] adequacy of the proposed sample size for measuring project impact.

Description and Implementation Plan of the Public Education and Outreach Intervention

[a] a more detailed description of the original study including its methods, procedures, intervention points, timing, and sequencing of the various intervention components(s), and materials, [b] a description of how the original strategy will be implemented in the proposed project, including modifications if any, [c] identification and documentation of critical project components and key relationships, and [d] a description of how this project addresses the goals of Healthy People 2020 <http://www.healthypeople.gov/2020/default.aspx>.

Evaluation Plan

For projects focusing on deceased donation among adults, an evaluation plan addressing project implementation and impact consisting of: [a] presentation of baseline donor designation data for the target population and projections for each project year; [b] thorough discussion of the methods to be used to measure the project's impact on increasing the number and/or rate of individuals who enroll in a donor registry and any additional methods used to measure project impact; [c] efforts to distinguish the project's impact from other purposeful or incidental efforts to increase donation commitment and enrollment; and [d] detailed description of process evaluation plan to assess implementation and completion of key tasks and project milestones during the project period.

For projects focusing on deceased donation among minors, an evaluation plan must address the impact of the outreach strategy on [a] the knowledge among parents and guardians of the need for transplantation and donation among minors; [b] the willingness of parents/legal guardians to donate their children's organs in the event of death; [c] if older minors are among the target population, knowledge of the need for donation and transplantation among minors, willingness to be a deceased donor and sharing that decision with their family; [d] efforts to distinguish the project's impact from other purposeful or incidental efforts to increase knowledge of and commitment to donation among parents and minors; and [e] detailed description of a process evaluation plan to assess implementation and completion of key tasks and project milestones during the project period.

For all projects, the evaluation strategy must be directly connected to the project objectives and projected project outcomes. It must specify appropriate quantitative and qualitative evaluation measures for each objective, including baseline and annual projected figures, specific data to be collected, and methods of data collection, analysis, and reporting. As appropriate, it should describe the strategy to collect, analyze and track data to measure process and impact/outcomes, with different cultural groups (e.g. race, ethnicity, language) and explain how the data will be used to inform program development and service delivery.

If the data must be obtained from an organization that is not the applicant organization (such as registry data from the department of motor vehicles) include a letter of support from that organization confirming the applicant's access to the data.

Process evaluation must include, at minimum, assessment of progress in achieving key project milestones as identified in the project's stated objectives. Applications must include a timeline for the project, indicating the phasing, sequencing, duration, and staffing of various outreach components. The application shall clearly describe and justify purposeful sequencing and interrelatedness of various activities, such as media and community level strategies, over the project period. The timeline must integrate evaluation activities throughout the period of grant funding.

Dissemination Plan

Include plans for dissemination of the project findings and lessons learned to the public and to other organizations who may wish to replicate the project, if shown to be successful. The dissemination plan can include submission of articles to academic journals, presentation of findings via appropriate conferences, newsletters, and social media outlets to maximize the impact of the project on the field of donation outreach.

Category 2: Combined Community Outreach Interventions

Describe the strategies and the appropriateness of the selected strategies to accomplish the specific goals of the proposed project. This section should provide a thorough and complete description of the following elements:

Target Population

[a] description of the size and demographic composition of the target population; [b] discussion of the current donation patterns of the target population; [c] presentation of any

other factors related to the population that will have an influence on donor registry enrollment; [f] adequacy of the proposed sample size for measuring project impact.

Description and Implementation of Public Education and Outreach Interventions

[a] a detailed description of the proposed public education and outreach materials and interventions to be employed to motivate individuals to make a personal commitment to donation and enroll in a donor registry or otherwise designate their consent to be a donor; [b] a discussion of plans for purposeful sequencing, timing, or pairing of strategies to maximize impact on behavior change, [c] identification and documentation of critical project components and key relationships, and [d] a description of how the project addresses the goals of Healthy People 2020, <http://www.healthypeople.gov/2020/default.aspx>.

Evaluation Plan

For projects focusing on deceased donation among adults, an evaluation plan addressing project implementation and impact consisting of: [a] presentation of baseline donor designation data for the target population and projections for each project year; [b] thorough discussion of the methods to be used to measure the project's impact on increasing the number and/or rate of individuals who enroll in a donor registry and any additional methods used to measure project impact; [c] efforts to distinguish the project's impact from other purposeful or incidental efforts to increase donation commitment and enrollment; and [d] detailed description of process evaluation plan to assess implementation and completion of key tasks and project milestones during the project period.

For projects focusing on deceased donation among minors, an evaluation plan must address the impact of the outreach strategy on [a] the knowledge among parents and guardians of the need for transplantation and donation among minors; [b] the willingness of parents/legal guardians to donate their children's organs in the event of death; [c] if older minors are among the target population, knowledge of the need for donation and transplantation among minors, willingness to be a deceased donor and sharing that decision with their family; [d] registration by minors in states where they can indicate their commitment to donation on the state registry; [e] efforts to distinguish the project's impact from other purposeful or incidental efforts to increase knowledge of and commitment to donation among parents and minors; and [f] detailed description of a process evaluation plan to assess implementation and completion of key tasks and project milestones during the project period.

For all projects, the evaluation strategy must be directly connected to the project objectives and projected project outcomes. It must specify appropriate quantitative and qualitative evaluation measures for each objective, including baseline and annual projected figures, specific data to be collected, and methods of data collection, analysis, and reporting. As appropriate, it should describe the strategy to collect, analyze and track data to measure process and impact/outcomes, with different cultural groups (e.g., race, ethnicity, language) and explain how the data will be used to inform program development and service delivery.

If the data must be obtained from an organization that is not the applicant organization (such as registry data from the department of motor vehicles) include a letter of support from that organization confirming the applicant's access to the data.

Process evaluation must include, at minimum, assessment of progress in achieving key project milestones as identified in the project's stated objectives. Applications must include a timeline for the project, indicating the phasing, sequencing, duration, and staffing of various outreach components. The application shall clearly describe and justify purposeful sequencing and interrelatedness of various activities, such as media and community level strategies, over the project period. The timeline must integrate evaluation activities throughout the period of grant funding.

Dissemination Plan

Include plans for dissemination of the project findings and lessons learned to the public and to other organizations who may wish to replicate the project if shown to be successful.

▪ *WORK PLAN - Corresponds to Section V's Review Criterion(a) 5*

Describe the activities or steps that will be used to achieve each of the activities proposed during the entire project period in the Methodology section. Use a timeline that includes each activity and identifies responsible staff. As appropriate, identify meaningful support and collaboration with key stakeholders in planning, designing and implementing all activities, including development of the application and the extent to which these contributors reflect the cultural, racial, linguistic and geographic diversity of the populations and communities served. **The timeline must indicate when the messages and data collection instruments will be submitted to HRSA for review. It is recommended that materials be sent to HRSA for review in draft form (such as scripts for films). Allow at least two weeks for HRSA review.** A graphic representation as an attachment is helpful in the review process and for monitoring grantee progress.

If appropriate, and for all Category 2 projects, include a media plan with a description of media, description of media outlets, and timeline for the development, production and release of media messages. All elements of the media plan should coordinate with the grassroots elements of the intervention and be supported by the budget and budget narrative.

▪ *RESOLUTION OF CHALLENGES - Corresponds to Section V's Review Criterion(a) 2*

Discuss challenges that may be encountered in designing and implementing the activities described in the Work Plan, and approaches that will be used to resolve such challenges.

▪ *EVALUATION AND TECHNICAL SUPPORT CAPACITY - Corresponds to Section V's Review Criterion(a) 5*

Describe current experience, skills, and knowledge of key project staff, including materials developed, publications, and previous work of a similar nature. It is not necessary to repeat all information included in biosketches, but rather to justify staff qualifications and appropriateness for the project role.

▪ *ORGANIZATIONAL INFORMATION - Corresponds to Section V's Review Criterion(a) 5*

Provide information on the key organizations' current mission and structure, scope of current activities, and an organizational chart, and describe how these all contribute to the ability of the organizations to conduct the program requirements and meet program expectations. Provide information on the program's resources and capabilities to support provision of culturally and linguistically competent and health literate services (see [HRSA's SF-424 R&R Application Guide](#) for more information on cultural competence and health literacy).

Describe how the unique needs of the target population and the communities served are routinely assessed and improved. In order to conserve space, it is recommended that applicants provide this information in the project narrative in approximately one paragraph per organization; the organizational chart may be included as an attachment.

iv. ***Attachments***

Provide the following items in the order specified below to complete the content of the application. Please note that these are supplementary in nature, and are not intended to be a continuation of the project narrative. Unless otherwise noted, attachments count toward the application page limit. **Each attachment must be clearly labeled.**

Attachment 1: Work Plan (Required, counted in the page limit.)

Attach the Work Plan for the project that includes all information detailed in Section IV.
i. Project Narrative.

Attachment 2: Staffing Plan and Job Descriptions for Key Personnel (Required, counted in the page limit.) (see section 4.1.vi. of HRSA's SF-424 R&R Application Guide)

Applications must contain a staffing plan and justification for the plan that includes rationale for the amount of time being requested for each project component. Job descriptions that include the roles, responsibilities, and qualifications for proposed project positions must be included. Keep each job description to one page in length as much as possible. Include the role, responsibilities, and qualifications of proposed project staff.

Attachment 3: Letters of Agreement and/or Description(s) of Proposed/Existing Contracts (project specific) (Required, counted in the page limit.)

Provide any documents that describe working relationships between the applicant organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual agreements should clearly describe the roles of the contractors and any deliverable. Letters of agreement must be signed, dated and on letterhead. Letters that are not submitted as part of the application package itself will not be considered in the review.

Attachment 4: Letters of Support (Required, counted in the page limit.)

Documentation from organizations and individuals who are not consortium members but have important roles in the project, e.g., implementation or control sites, associated community organizations. Form letters or letters indicating only vague support generally are not useful. **Include only letters of support that specifically indicate a commitment to the project/program (in-kind services, dollars, staff, space, equipment, etc.). List all other support letters on one page.** Letters of support must be signed, dated and on letterhead. Letters that are not submitted as part of the application package itself will not be considered in the review.

Attachment 5: Project Organizational Chart (Required, counted in the page limit.)

Provide a one-page figure that depicts the organizational structure of the project, including consortium members, subcontractors and other significant collaborators, if any.

Attachment 6: Tables, Charts, etc. (Counted in the page limit.)

To give further details about the proposal (e.g., Gantt or PERT charts, flow charts, etc.).

Attachments 7-15: Other Relevant Documents (Counted in the page limit.)

3. Submission Dates and Times

Application Due Date

The due date for applications under this funding opportunity announcement is *December 3, 2013 at 11:59 P.M. Eastern Time.*

4. Intergovernmental Review

Public Education Efforts to Increase Solid Organ Donation is subject to the provisions of Executive Order 12372, as implemented by 45 CFR 100. See Executive Order 12372 in the [HHS Grants Policy Statement](#).

5. Funding Restrictions

Applicants responding to this announcement may request funding for a project period of up to two (2) years. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

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

- to purchase or improve land, or to purchase, construct, or make permanent improvements to any building except for minor remodeling
- to make payments to recipients of services, except for reimbursement of reasonable and allowable out-of-pocket expenses associated with participation in project activities, for more information on cost principles please see page II-25 of the HHS Grants Policy Statement available online at <ftp://ftp.hrsa.gov/grants/hhsgrantspolicystatement.pdf>.
- to support: (a) projects that educate about and/or promote living donation; (b) biomedical and clinical research; (c) the development and/or assessment of the efficacy of new or improved clinical methods of donor management, organ recovery, or organ preservation; (d) fundamental research focused on new or improved evaluation tools and methodologies; (e) fundamental research focused on the development of new behavioral theories relevant to health attitudes, practices, and decision-making; or (f) interventions inconsistent with existing Federal law
- to fund OPO staff for time devoted to project activities that are reimbursed from other sources for the same activities

The General Provisions in Division F, Title V of the Consolidated Appropriations Act, 2012 (P.L. 112-74) enacted December 23, 2011 apply to this program. Please see Section 4.1 of [HRSA's SF-424 R&R Application Guide](#) for additional information.

All program income generated as a result of awarded grant funds must be used for approved project-related activities.

V. Application Review Information

1. Review Criteria

Procedures for assessing the technical merit of applications have been instituted to provide for an objective review of applications and to assist the applicant in understanding the standards against which each application will be judged. Critical indicators have been developed for each review criterion to assist the applicant in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation. Review criteria are outlined below with specific detail and scoring points. **Applicants should pay strict attention to addressing all these criteria, as they are the basis upon which the reviewers will evaluate applications.**

Review Criteria are used to review and rank applications. The Public Education Efforts to Increase Solid Organ Donation program has six (6) review criteria:

Criterion 1: NEED (10 points) – Corresponds to Section IV.2.x Program Narrative Section: Needs Assessment

The extent to which the application demonstrates the problem and associated contributing factors to the problem, including national and local supporting data; relevant barriers, if any, that the project aims to overcome; previous or ongoing attempts to address the need; identification and justification for selection of the target population or communities; and prior and existing public education and outreach efforts and the need for the proposed educational effort in the targeted community. For adult deceased donation projects, the extent to which the application describes relevant demographic data including the number of individuals eligible to enroll as donors, existing number of licensed drivers and number or estimated number of designated donors; average number and rate of donor enrollments each month.

Criterion 2: RESPONSE (20 points) – Corresponds to Section IV.2.x Program Narrative Section: Methodology

Category 1: **Replication of Empirically Validated Interventions**

Extent to which the proposed project is responsive to the intent of the grant program for Category 1 projects as discussed under *I.A. Purpose*, and is responsive to and shows promise of successfully meeting the specific need for the project as discussed in the application; adequacy of the original project to serve as a model for replication; clarity of the description of the original project proposed goals and objectives; extent to which the proposed project adequately emulates the original project; adequacy of and justification for any modifications to the original project; adequacy of linkages with donor registries in States (deceased donation projects only); feasibility of a project timeline including process and impact or outcome evaluation; and the degree to which the application discusses the relevance of the project to the goals of Healthy People 2020.

Category 2: **Combined Community Outreach Interventions**

Extent to which the proposed project is responsive to the intent of the grant program as discussed under *I.A. Purpose* and is responsive to and shows promise of successfully meeting the specific need for the project as discussed in the application; clarity of the proposed goals and objectives; extent to which the described activities are capable of addressing the issue and attaining the project objectives; quality of and justification for the proposed plan and purposeful timing and coordination of the various public education and outreach strategies proposed; identification and justification of the strategies as either grassroots or media; adequacy of linkages with donor

registries; feasibility of a project timeline and the process and impact or outcome evaluation; feasibility of a media plan describing media outlets, and a timeline for development, production and release of media messages which coordinates with the community-based intervention elements; and the degree to which the application discusses the relevance of the project to the goals of Healthy People 2020.

Criterion 3: EVALUATIVE MEASURES (20 points) – Corresponds to Section IV.2.x Program Narrative Section: Methodology, Evaluation Plan.

Category 1: Replication of Empirically Validated Interventions

Effectiveness of measurement instruments and the methods of the original project to evaluate project results; effectiveness of any modifications made to the measurement instruments or methods in the proposed project; adequacy of baseline data presentation and projected increases for the target population(s), and feasibility of goals and objectives; strength and feasibility of the plan to assess the impact of the interventions on the number or rate of monthly organ donation registrations (deceased donation only); strength and feasibility of the plan to assess the impact of the interventions on the number parents/guardians who are willing to donate their children's organs in the event of death (minor deceased donation only); adequacy and feasibility of the plan to distinguish impact of ongoing and external public education activities from activities sponsored by this grant; capacity of the proposed process evaluation plan to assess project implementation, e.g., the extent to which and timeliness with which key project tasks, milestones, and goals have been met. As appropriate, adequacy of the description of the proposed strategy to collect, analyze and track data to measure process and impact/outcomes, with different cultural groups (e.g., race, ethnicity, language); indication, as in a letter of support, of the applicant's access to necessary data and the explanation of how the data will be used to inform program development and service delivery.

Category 2: Combined Community Outreach Interventions

Effectiveness of methods proposed to monitor and evaluate project results; adequacy of baseline data presentation and projected increases for the target population(s); adequacy and feasibility of goals and objectives; adequacy and feasibility of the plan to assess the impact of the public education and outreach interventions on numbers and/or rates of monthly donor registry enrollment or other sign-up methods; strength and feasibility of the plan to assess the impact of the interventions on the number parents/guardians who are willing to donate their children's organs in the event of death (minor deceased donation only); adequacy and feasibility of the evaluation plan to distinguish impact of ongoing and external public education activities from activities sponsored by this grant; capacity of the proposed process evaluation plan to assess project implementation, e.g., the extent to which and timeliness with which key project tasks, milestones, and goals have been met. As appropriate, adequacy of the description of the proposed strategy to collect, analyze and track data to measure process and impact/outcomes, with different cultural groups (e.g., race, ethnicity, language), indication, as in a letter of support of the applicant's access to necessary data; and the explanation of how the data will be used to inform program development and service delivery.

Criterion 4: IMPACT (20 points) – Corresponds to Section IV.2.x Program Narrative Section: Methodology, Dissemination Plan

Likelihood of the project to increase public commitment to donation as evidenced by increased enrollment in donor registries and the specificity of the project's projected impact on the number of new registrants (deceased donation projects only); likelihood of the project to increase

willingness among parents/guardians to donate a child's organs upon death (minor deceased donation projects only); the extent and potential effectiveness of plans for dissemination of project information and results, along with lessons learned; and the degree to which project activities are replicable given similar fiscal resources. The cost-effectiveness of the intervention relative to the size or magnitude of the impact (e.g., potential number of new registrants, donors or family consent per cost of implementing the project).

Criterion 5: RESOURCES/CAPABILITIES (20 points) – Corresponds to Section IV.2.x Program Narrative Section: Work Plan, Evaluation and Technical Support Capacity, and Organizational Information

Extent to which project personnel and consortium members, if any, are qualified by training and/or experience to implement and carry out the project; expertise and experience of proposed project staff as supported by education and/or work history; sufficiency of staffing for the magnitude of the proposed project; capabilities of the applicant organization and other key organizations to carry out project activities proposed; capabilities of the donation staff and the research/evaluation staff or consultants to carry out project activities proposed; quality and availability of facilities, personnel, and resources to fulfill the needs and requirements of the proposed project and to accomplish the project objectives; strength of the cooperative arrangements with other organizations or groups, and the proposed participation of grassroots, faith-based, and community organizations, if any; and sufficiency of information on organizational responsibilities and project tasks.

Criterion 6: SUPPORT REQUESTED (10 points) – Corresponds to Section IV.2.iv. Budget and Budget Justification Narrative and SF-424 R&R Application Guide Section 4.1 iv. Budget and v. Budget Justification Narrative.

The reasonableness of the proposed budget for each year of the project period in relation to the objectives, the complexity of the project activities, and the anticipated results.

- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work.
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives.
- Thoroughness of line item explanations in the budget justification.

2. Review and Selection Process

Please see section 5.3 of the [HRSA's SF-424 R&R Application Guide](#).

3. Anticipated Announcement and Award Dates

It is anticipated that awards will be announced prior to the start date of September 1, 2014.

VI. Award Administration Information

1. Award Notices

The Notice of Award will be sent prior to the start date of September 1, 2014. See section 5.4 of [HRSA's SF-424 R&R Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

See section 2 of [HRSA's SF-424 R&R Application Guide](#).

3. Reporting

The successful applicant under this funding opportunity announcement must comply with Section 6 of [HRSA's SF-424 R&R Application Guide](#) and the following reporting and review activities:

1) **Progress Report(s)**. The awardee must submit a progress report to HRSA on a **semi-annual** basis. Submission and HRSA approval of a Progress Report(s) triggers the budget period renewal and release of subsequent year funds. This report has two parts. The first part demonstrates grantee progress on program-specific goals. The second part collects core performance measurement data to measure the progress and impact of the project. Further information will be provided in the award notice.

2) **Final Report**. A final report is due within 90 days after the project period ends. The final report collects program-specific goals and progress on strategies; core performance measurement data; impact of the overall project; the degree to which the grantee achieved the mission, goal and strategies outlined in the application especially related to number of registry enrollments and/or other methods of indicating registry enrollment; grantee objectives and accomplishments; barriers encountered; and responses to summary questions regarding the grantee's overall experiences over the entire project period. The final report shall include strategies to assist others in replicating the project, e.g., implementation guidelines, materials or software to be shared. The final report must be submitted on-line by awardees in the Electronic Handbooks system at <https://grants.hrsa.gov/webexternal/home.asp>.

VII. Agency Contacts

Applicants may obtain additional information regarding business, administrative, or fiscal issues related to this funding opportunity announcement by contacting:

Ernsley Charles, Grants Management Specialist
Attn.: *Public Education Efforts to Increase Solid Organ Donation*
HRSA Division of Grants Management Operations, OFAM
Parklawn Building, Room 11A-05
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 443-8329
Fax: (301) 443-8390
Email: ECharles@hrsa.gov

Additional information related to the overall program issues and/or technical assistance regarding this funding announcement may be obtained by contacting:

Rita Maldonado, MPH
Project Officer
Organ, Tissue and Blood Stem Cell Donation Branch
Division of Transplantation
Healthcare Systems Bureau, HRSA
5600 Fishers Lane, Room 12C-06
Rockville, MD 20857
Telephone: 301-443-3622
Fax: 301-594-6095
E-Mail: rmaldonado@hrsa.gov

Applicants may need assistance when working online to submit their application forms electronically. Applicants should always obtain a case number when calling for support. For assistance with submitting the application in Grants.gov, contact Grants.gov 24 hours a day, 7 days a week, excluding Federal holidays at:

Grants.gov Contact Center
Telephone: 1-800-518-4726 (International Callers, please dial 606-545-5035)
E-mail: support@grants.gov
iPortal: <http://grants.gov/iportal>

Successful applicants/awardees may need assistance when working online to submit information and reports electronically through HRSA's Electronic Handbooks (EHBs). For assistance with submitting information in HRSA's EHBs, contact the HRSA Call Center, Monday-Friday, 9:00 a.m. to 5:30 p.m. ET:

HRSA Contact Center
Telephone: (877) 464-4772
TTY: (877) 897-9910
E-mail: CallCenter@HRSA.GOV

VIII. Other Information

1. Internet Resources

Applicants are encouraged to refer to DoT's web site, <http://www.organdonor.gov> and to the Grant Application Reference Center <http://www.hrsa.gov/grants/apply/index.html> for information that may be helpful in the application process.

2. Pre-Application Technical Assistance

DoT provides technical assistance (TA) to individuals who may wish to submit an application for this grant program. Technical assistance is provided individually per request as well as through two pre-application telephone conference calls, a webinar, and a grantee showcase. There is no registration fee to participate in any of these opportunities. Please contact Rita Maldonado at rmaldonado@hrsa.gov for more information.

TA Conference Calls

TA telephone conference calls will be held on, Wednesday, September 4, 2013 and Tuesday, September 17, 2013 at 2:00 P.M. Eastern Time. (The call will be recorded, please email Rita Maldonado for access.)

Call-in Number: (888) 831-6083

Participant Passcode: 3570479

Leader: Rita Maldonado, MPH

TA Webinar

A TA webinar will be held on, Tuesday, August 13 at 2:00 P.M. Eastern Time. The webinar is intended for individuals new to the donation and transplantation field and will provide an overview of the field and an overview of this grant program. Newcomers to the field also are encouraged to participate in the TA conference calls noted above. More specific information about this FOA will be covered in those calls.

Webinar link: <https://hrsa.connectsolutions.com/divisiontransplantation>

Call-in Number: (888) 603-9213

Participant Passcode: 3570479

Grantee Showcase

A virtual grantee showcase will be held on Wednesday, August 21, 2013 from 4:30 p.m. to 7:00 p.m. It will provide participants the opportunity to hear from grantees who have completed projects funded by DoT. The grantees will provide an overview of their project activities and outcomes. The showcase will give viewers the opportunity to learn about the experiences of previous grantees and some of the types of projects that have been funded in the past. The showcase will be rebroadcast on Thursday, August 22, 2013 from 2:00 p.m. to 4:30 p.m. but opportunities to ask questions will be provided only during the initial broadcast.

Webcast link: <http://services.choruscall.com/links/hrsa130821.html>

3. Technical Assistance for Grantees

In order to maximize effectiveness and efficiency and promote creative exchange of ideas, all funded projects are required to participate in a total of three workshops during the two years of the project. There will be two (2) virtual Grantee Technical Assistance (TA) Workshops during the first project year, a pre-implementation meeting in early fall and an all-grantee meeting in the summer. An all-grantee workshop also will be held in the summer of the second project year. The researcher/evaluator and key donation or transplantation professional from each funded project are required to participate in all TA workshops, other project staff may participate as well, but are not required

During the Technical Assistance Workshop, HRSA will provide support and monitor grantee progress through a group forum. Specifically, the purpose is to discuss the critical components of each project, assess progress, identify problem areas and potential solutions, develop strategies for achieving maximum efficacy of each project, and promote networking among grantees with like interests. Workshop consultants will review grantee progress reports and other materials and provide suggestions to grantees on issues such as project intervention, design, approach, outcome measures, budget, and parameters. Suggested budget revisions commensurate with project

revisions must be submitted to the Federal government for review and approval. There is no registration fee to attend any of the required workshops.

A. Final Presentation

Grantees must make an oral presentation of their intervention and outcomes during the summer virtual TA meeting of the final project year. Grantees who obtain a no-cost extension shall make the final presentation in-person during the summer TA meeting of the no-cost extension year so final data can be reported. Information shall include: description of the intervention and approach, findings, conclusions, challenges and solutions experienced, and contributions of the project in terms of impact on donation.

B. Data Coordination and Management

Each grantee shall be responsible for the collection, entry, quality control, and analysis of all project data. Grantees shall provide interim data and plans for proposed analyses to their government project officers as requested. All data resulting from this grant shall be made available to the grantor and shall be dispersed at the grantor's discretion. Privacy and confidentiality must be protected in accordance with the Privacy Act, as amended (5 U.S.C. 522a).

C. Publication and Presentation of Project Findings

Publication of major findings is encouraged. All publications and oral presentations of work performed under, and data resulting from, this grant must contain appropriate acknowledgment of HRSA support and a disclaimer as follows:

“This publication/presentation was supported by Grant No. ____ from the Health Resources and Services Administration's Division of Transplantation (HRSA/DoT), U.S. Department of Health and Human Services. The contents of this publication/presentation are solely the responsibility of the author(s) and do not necessarily represent the views of HRSA/DoT.”

In addition, HRSA must be notified in advance of all publications and presentations to enable coordination of announcements about the oral or written presentation of information resulting from the project funded under this grant program.

IX. Tips for Writing a Strong Application

See section 4.7 of [HRSA's SF-424 R&R Application Guide](#).