Billing Code: 4165-16

Department of Health and Human Services

Indian Health Service

Injury Prevention Program

Announcement

New and Competing Continuation Cooperative Agreement

Funding Announcement Number: HHS-2015-IHS-IPP-0001

Catalog of Federal Domestic Assistance Number: 93.284

Key Dates

Application Deadline Date: June 15, 2015

Review Date: July 6-10, 2015

Earliest Anticipated Start Date: September 1, 2015

Signed Tribal Resolutions Due Date: July 6, 2015

Proof of Non-Profit Status Due Date: June 15, 2015

Modification: May 22, 2015, correction to "Requirements for Project and Budget Narratives," page 16, (See details on page 38).

I. Funding Opportunity Description

Statutory Authority

The Indian Health Service (IHS) is accepting competitive cooperative agreement (CA)

applications for the Injury Prevention Program (IPP) for American Indians and Alaska Natives (AI/AN). The program is authorized under 25 U.S.C. 13, Snyder Act, and 42 U.S.C., Section 301(a), Public Health Service Act, as amended. This program is described in the Catalog of Federal Domestic Assistance under 93.284.

Background

Injuries are the single leading cause of death for AI/AN between the ages of 1 and 44 years. (Trends in Indian Health 2002-2003 Edition, IHS, Division of Program Statistics). Depending on the type of injury, AI/AN experience injury mortality rates that are 2.5 to 8.7 times higher than the U. S. all races rates. This funding opportunity was developed by the IHS Injury Prevention Program to address the disparity in injury rates by encouraging tribes to implement injury prevention programs and projects based on evidence-based, effective strategies.

Injury prevention evidence-based, effective strategies are prevention methods that have been scientifically proven to prevent injuries. Injury prevention programs and projects are most effective when based on these model practices. Though not repeatedly scientifically proven to be effective, the use of promising and innovative injury prevention strategies is also recommended. For more information on evidence-based injury prevention resources see:
http://www.healthy.ohio.gov/vipp/evidence/ebresource.aspx.

Comprehensive injury prevention programs use a public health approach to employ strategies that address education, policy development with enforcement, and environmental modifications. Programs use various combinations of effective strategies to ensure they are effective and sustainable. A single focus with only education is not an effective strategy.

The IHS IPP priorities are prevention of (1) motor vehicle crash related injuries; and (2) unintentional fall injuries. For AI/AN, motor vehicle-related injuries and deaths are the leading cause of disability, years of potential life lost, and medical and societal costs. Unintentional elder fall-related injuries are a leading cause of hospitalizations in AI/AN communities. Among older adults, falls are the leading cause of both fatal and nonfatal injuries (http://www.cdc.gov/HomeandRecreationalSafety/Falls/adultfalls.html).

Purpose

The purpose of this IHS funding opportunity is to promote the capability of Tribes, Indian organizations and urban Indian organizations to build and maintain sustainable, effective injury prevention programs. Tribal ownership and management of injury prevention programs and projects:

a) increase the understanding of the injury problem by Tribes/Indian organizations/urban Indian organizations;
b) promote the implementation of effective strategies to prevent injuries in Tribal communities; and

c) improve injury prevention partnerships.

The IHS will accept IPP applications in either of the two categories:

A) Part I – Injury Prevention Programs applicants: These are new applicants who have not previously received IHS Tribal Injury Prevention CA Part I funding. Applicants must meet the IHS minimum user population of 2,500. The population limit is set by the IHS IPP. IHS user population is defined as AI/AN people who have utilized services funded by the IHS at least once during the last three-year period.

B) Part II - IPP Effective Strategy Projects applicants. This grant opportunity is available to any applicant regardless of whether or not they have previously received IHS Injury Prevention CA Part I or II funding. There is no IHS user population requirement.

Applicants will only be issued one award: Either for Part 1 – Injury Prevention Programs or Part II- IPP Effective Strategy Projects. Applications should be sure to respond to the appropriate "Criteria" under Section V- Application Review Information.

II. Award Information

Type of Award:

Cooperative Agreement

Estimated Funds Available

The total amount of funding identified for the current fiscal year (FY) 2015 is approximately $1,800,000. Individual award amounts are anticipated to be between $20,000 and $100,000. The amount of funding available for awards issued under this announcement is subject to the availability of appropriations and budgetary priorities of the Agency. The IHS is under no obligation to make awards that are selected for funding under this announcement.

Anticipated Number of Awards

Approximately thirty awards will be issued under this program announcement. Injury Prevention applicants may apply for more than one of the areas of funding but only one will be awarded. Part I - Five-Year Injury Prevention Programs: up to $100,000 will be awarded to each successful applicant the first year and up to $80,000 will be awarded each of the remaining four years (up to 15 awards). Part II - Five Effective Strategy Projects: up to $20,000, for each of the five years, will be awarded to successful applicants (up to 15 awards).

Project Period

The project period will be for five years and will run consecutively from September 1, 2015 to August 31, 2020 for both the Part I and Part II.

Cooperative Agreement

Cooperative agreements awarded by the Department of Health and Human Services (HHS) are administered under the same policies as a grant. The funding agency (IHS) is required to have substantial programmatic involvement in the project during the entire award segment. Below is a detailed description of the level of involvement required for both IHS and the grantee. IHS will be responsible for activities listed under Section A and the grantee will be responsible for activities listed under Section B as stated:

Substantial Involvement Description for Cooperative Agreement

A. IHS Programmatic Involvement

The IHS IPP substantial involvement includes providing technical assistance to the Tribal Injury Prevention Coordinators in program planning, implementation, and evaluation. Technical assistance includes the following which will be supported by an outside contractor:

1. Schedule bi-annual conference calls for technical assistance
2. Assist grantee in writing progress reports
3. Produce the quarterly Tribal Injury Prevention Cooperative Agreement (TIPCAP) newsletter for information sharing and collaboration
4. Conduct annual site visits for technical assistance
5. Disseminate injury prevention best practices guidance
6. Provide training to grantees
7. Coordinate an annual grantee workshop to build skills, share new information and innovative strategies, and to assist grantees in program implementation specific to

AI/AN communities

Part I – Injury Prevention Program Involvement

IHS will assign an IHS Injury Prevention Specialist (Area, District) or designee to serve as the Project Officer (technical advisor/monitor) for the Tribal Injury Prevention Program. Responsibilities of the IHS Project Officers are described below:

1) Assist the grantee in determining the Tribal Injury Prevention Coordinator position qualifications and job descriptions and assist in the selection of the Coordinator.
2) Assist the Tribal Injury Prevention Coordinator with decisions regarding implementation of program activities, including creation of injury data systems (collection, quality, analysis, and reporting), use of public information materials, and quality assurance (adherence to evidence-based practice methods).
3) Monitor the overall progress of the grantees' program sites and their adherence to the terms and conditions of the CA.
4) Review continuation applications and recommend approval or disapproval.
5) Provide guidance for meeting deadlines of required progress and financial reports.
6) Support contractor oversight by participating in site visits and conference calls when possible.
7) Provide guidance in preparing articles for publication and/or presentations of program successes, lessons learned, and new findings.
8) Recommend training and continuing education courses to develop the Tribal

Injury Prevention Coordinator's competencies.

Part II – Effective Strategy Projects

IHS will assign an IHS IPP Specialist or designee to serve as the local Project Officer. Responsibilities of the IHS local Project Officers are described below:

1) Provide guidance to the grantee involving strategy, injury data (collection, analysis, reporting, and interpretation of findings), use of public information materials, quality assurance, coordination of activities, training, reports, budget and evaluation.
2) Review continuation applications and recommend approval or disapproval.

Technical assistance will also include the following which will be supported by an outside contractor:

1) Schedule bi-annual conference calls for technical assistance.
2) Assist grantee in writing progress reports.
3) Disseminate injury prevention best practices guidance.
4) Provide training to grantees.

B. Grantee Cooperative Agreement Award Activities

Responsibilities of the grantee are described below:

Part I – Injury Prevention Program

The grantee will:

1) Hire a full time Tribal Injury Prevention Coordinator.
    a. Must be full-time (40 hours/week) and solely dedicated to the management, control or performance of the IPP.
    b. Cannot be part-time or split duties or other duties as assigned.
    c. May be located within an urban Indian health organization, Tribal health program (or Tribal Highway Safety) or community-based Tribal program.
2) Develop and maintain an ongoing injury data system. Data will be used for priority setting, program planning and evaluation of interventions.
3) Develop a five-year plan based on sound morbidity/mortality injury data and implement effective strategies. The five-year plan will:
    a. Contain a logic model approach to address the formative, process, impact and outcome evaluation with timeline; action steps and benchmarks.
    b. Describe how the tribe will maintain the IPP after the five-year funding cycle.
4) Incorporate injury prevention evidence-based effective strategies that align with the IHS Injury Prevention priorities (motor vehicle and unintentional fall injury prevention) and/or local Tribal injury priorities based on sound injury mortality and morbidity data.
5) Tailor the IPP program and other organizations' educational materials with culturally relevant information to promote and empower communities to take action in injury prevention.
6) Lead, develop, or participate in a multidisciplinary injury prevention coalition to share resources and expertise in injury prevention, and provide oversight in the

planning, implementation and evaluation of projects.

7) Attend the mandatory annual grantee workshop.
8) Participate in IHS/contractor site visits, conference calls and webinars.
9) Successfully complete the IHS Injury Prevention core training courses – IP Introduction, Intermediate, and IP Fellowship.
10) Successfully complete certification trainings necessary for the IP positions such as Child Passenger Safety Technician, Tai Chi Instructor, etc.

Part II – Effective Strategy Projects

The grantee will:

1) Work in partnership with the IHS in decisions involving strategy, injury data (collection, analysis, reporting), use of public information materials, quality assurance, coordination of activities, training, reports, budget and evaluation.
2) Provide a logic model plan for the Part II effective strategies project. The logic model will address the stages of the project development implementation and evaluation with proposed timeline.
3) Develop culturally-competent, project-related information to educate and empower communities to take action in injury prevention.
4) Develop a project evaluation plan with baseline data, timeline and outcome measures.
5) Participate in IHS/contractor conference calls and webinars.

III. Eligibility Information

1. Eligibility

To be eligible for this "New and Competing Continuation Announcement," an applicant must:

Be one of the following as defined by 25 U.S.C. 1603:

i. An Indian Tribe as defined by 25 U.S.C. 1603(14);

ii. A Tribal organization as defined by 25 U.S.C. 1603(26);

iii. An Urban Indian organization as defined by 25 U.S.C. 1603(29).

Applicants must provide proof of non-profit status with the application, e.g. 501(c)(3).

Note: Please refer to Section IV.2 (Application and Submission Information/Subsection 2, Content and Form of Application Submission) for additional proof of applicant status documents required such as Tribal resolutions, proof of non-profit status, etc.

2. Cost Sharing or Matching

The IHS does not require matching funds or cost sharing for grants or cooperative agreements.

3. Other Requirements

If application budgets exceed the highest dollar amount outlined under the **"Estimated Funds Available"** section within this funding announcement, the application will be considered ineligible and will not be reviewed for further consideration. If deemed ineligible, IHS will not return the application. The applicant will be notified by e-mail by the Division of Grants Management (DGM) of this decision.

Tribal Resolution

Signed Tribal Resolution - A signed Tribal resolution from each of the Indian Tribes served by the project must accompany the electronic application submission. An Indian Tribe that is proposing a project affecting another Indian Tribe must include resolutions from all affected Tribes to be served. Applications by Tribal organizations will not require a specific Tribal resolution if the current Tribal resolution(s) under which they operate would encompass the proposed grant activities.

Draft Tribal resolutions are acceptable in lieu of an official signed resolution and must be submitted along with the electronic application submission prior to the official application deadline date or prior to the start of the Objective Review Committee (ORC) date. However, an official signed Tribal resolution must be received by the DGM prior to the beginning of the Objective Review. If an official signed resolution is not received by the Review Date listed under the Key

Dates section on page one of this announcement, the application will be considered incomplete and ineligible.

Your official signed resolution can be mailed to the DGM, Attn: Pallop Chareonvootitam, 801 Thompson Avenue, TMP Suite 360, Rockville, MD 20852. Applicants submitting Tribal resolutions after or aside from the required online electronic application submission must ensure that the information is received by the IHS/DGM. It is highly recommended that the documentation be sent by a delivery method that includes delivery confirmation and tracking. Please contact Pallop Chareonvootitam by telephone at 301-443-2195 prior to the review date regarding submission questions.

Proof of Non-Profit Status

Organizations claiming non-profit status must submit proof. A copy of the 501(c)(3) Certificate must be received with the application submission by the Application Deadline Date listed under the Key Dates section on page one of this announcement.

An applicant submitting any of the above additional documentation after the initial application submission due date is required to ensure the information was received by the IHS by obtaining documentation confirming delivery (i.e. FedEx tracking, postal return receipt, etc.).

IV. Application and Submission Information

1. Obtaining Application Materials

The application package and detailed instructions for this announcement can be found at http://www.Grants.gov or https://www.ihs.gov/dgm/index.cfm?module=dsp_dgm_funding

Questions regarding the electronic application process may be directed to Mr. Paul Gettys at (301) 443-2114.

2. Content and Form Application Submission

The applicant must include the project narrative as an attachment to the application package. Mandatory documents for all applicants include:

- Table of contents.
- Abstract (one page) summarizing the project.
- Application forms:
  - SF-424, Application for Federal Assistance.
  - SF-424A, Budget Information – Non-Construction Programs.
  - SF-424B, Assurances – Non-Construction Programs.
- Budget Justification and Narrative (must be single spaced and not exceed five pages).
- Project Narrative (must be single spaced and not exceed 15 pages).

- Background information on the Tribe or organization.
- Proposed scope of work, objectives, and activities that provide a description of what will be accomplished, including a one-page Timeframe Chart.

- Tribal Resolution or Tribal Letter of Support (Tribe, Indian organization or urban Indian organization).
- Letter of Support from Organization's Board of Directors.
- 501(c)(3) Certificate (if applicable).
- Biographical sketches for all Key Personnel.
- Contractor/Consultant resumes or qualifications and scope of work.
- Disclosure of Lobbying Activities (SF-LLL).
- Certification Regarding Lobbying (GG-Lobbying Form).
- Copy of current Negotiated Indirect Cost rate (IDC) agreement (required) in order to receive IDC.
- Organizational Chart (optional).
- Documentation of current Office of Management and Budget (OMB) A-133 required Financial Audit (if applicable).

  Acceptable forms of documentation include:

  - E-mail confirmation from Federal Audit Clearinghouse (FAC) that audits were submitted; or
  - Face sheets from audit reports. These can be found on the FAC website:

http://harvester.census.gov/sac/dissem/accessoptions.html?submit=Go+To+Database

Public Policy Requirements:

All Federal-wide public policies apply to IHS grants and cooperative agreements with exception of the Discrimination policy.

Requirements for Project and Budget Narratives

A. Project Narrative: This narrative should be a separate Word document that is no longer than fifteen pages and must: be single-spaced, be type written, have consecutively numbered pages, use black type not smaller than 12 characters per one inch, and be printed on one side only of standard size 8-1/2" x 11" paper.

Be sure to succinctly address and answer all questions listed under the narrative and place them under the evaluation criteria (refer to Section V.1, Evaluation criteria in this announcement) and place all responses and required information in the correct section (noted below), or they shall not be considered or scored. These narratives will assist the ORC in becoming more familiar with the applicant's activities and accomplishments prior to this cooperative agreement award. If the narrative exceeds the page limit, only the first fifteen pages will be reviewed. The fifteen page limit for the narrative does not include the work plan, standard forms, Tribal resolutions, table of contents, budget, budget justifications, narratives, and/or other appendix items.

There are three parts to the narrative: Part A – Program Information; Part B – Program Planning and Evaluation; and Part C – Program Report. See below for additional details about what must be included in the narrative:

Part A: Program Information (page limitation - 2)

Section 1: Needs

User population for Part I applicants only

No population requirements for Part II applicants

Describe nature and extent of the injury problem of the Tribe, Indian organization or urban Indian organization. Describe the public health approach to address the injury problem.

Part B: Program Planning and Evaluation (page limitation - 8)

Section 1: Program Plans

Succinctly describe how the Tribe, Indian organization or urban Indian organization plans to address the injury problems utilizing effective strategies, best, or promising practices.

Section 2: Program Evaluation

Describe fully and clearly how the proposed interventions will impact in minimizing or reducing severe injuries in Tribal communities. Identify

anticipated or expected benefits for the Tribal constituency.

Part C: Program Report (page limitation - 5)

Section 1: Describe major accomplishments over the last 24 months. Identify and describe significant program achievements associated with injury prevention initiatives. Provide the accomplishments of the goals established for the time frame, or if applicable, provide justification for the lack of progress.

Section 2: Describe major activities over the last 24 months. Provide an overview of significant injury prevention program activities associated with in reduction of severe injuries over the past 24 months. This section should address significant program activities including those related to the accomplishments listed in the previous section.

B. Budget Narrative: This narrative must include a line item budget with a narrative justification for all expenditures identifying reasonable and allowable costs necessary to accomplish the goals and objectives as outlined in the project narrative. Budget should match the scope of work described in the project narrative. The budget narrative should not exceed five pages.

3. Submission Dates and Times

Applications must be submitted electronically through Grants.gov by 11:59 p.m. Eastern Daylight Time (EDT) on the Application Deadline Date listed in the Key Dates section on page one of this announcement. Any application received after the application deadline will not be accepted for processing, nor will it be given further consideration for funding. Grants.gov will notify the applicant via e-mail if the application is rejected.

If technical challenges arise and assistance is required with the electronic application process, contact Grants.gov Customer Support via e-mail to support@grants.gov or at (800) 518-4726. Customer Support is available to address questions 24 hours a day, 7 days a week (except on Federal holidays). If problems persist, contact Mr. Paul Gettys (Paul.Gettys@ihs.gov), DGM Grants Systems Coordinator, by telephone at (301) 443-2114. Please be sure to contact Mr. Gettys at least ten days prior to the application deadline. Please do not contact the DGM until you have received a Grants.gov tracking number. In the event you are not able to obtain a tracking number, call the DGM as soon as possible.

If the applicant needs to submit a paper application instead of submitting electronically through Grants.gov, a waiver must be requested. Prior approval must be requested and obtained from Ms. Tammy Bagley, Acting Director of DGM, (see Section IV.6 below for additional information). The waiver must: 1)

be documented in writing (e-mails are acceptable), **before** submitting a paper application, and 2) include clear justification for the need to deviate from the required electronic grants submission process. A written waiver request must be sent to GrantsPolicy@ihs.gov with a copy to Tammy.Bagley@ihs.gov. Once the waiver request has been approved, the applicant will receive a confirmation of approval email containing submission instructions and the mailing address to submit the application. A copy of the written approval ***must*** be submitted along with the hardcopy of the application that is mailed to DGM. Paper applications that are submitted without a copy of the signed waiver from the Acting Director of the DGM will not be reviewed or considered for funding. The applicant will be notified via e-mail of this decision by the Grants Management Officer of the DGM. Paper applications must be received by the DGM no later than 5:00 p.m., EDT, on the Application Deadline Date listed in the Key Dates section on page one of this announcement. Late applications will not be accepted for processing or considered for funding.

4. Intergovernmental Review

Executive Order 12372 requiring intergovernmental review is not applicable to this program.

5. Funding Restrictions

- Pre-award costs are not allowable.

- The available funds are inclusive of direct and appropriate indirect costs.
- Only one grant/cooperative agreement will be awarded per applicant.
- IHS will not acknowledge receipt of applications.

6. Electronic Submission Requirements

All applications must be submitted electronically. Please use the http://www.Grants.gov website to submit an application electronically and select the "Find Grant Opportunities" link on the homepage. Download a copy of the application package, complete it offline, and then upload and submit the completed application via the http://www.Grants.gov website. Electronic copies of the application may not be submitted as attachments to e-mail messages addressed to IHS employees or offices.

If the applicant receives a waiver to submit paper application documents, they must follow the rules and timelines that are noted below. The applicant must seek assistance at least ten days prior to the Application Deadline Date listed in the Key Dates section on page one of this announcement.

Applicants that do not adhere to the timelines for System for Award Management (SAM) and/or http://www.Grants.gov registration or that fail to request timely assistance with technical issues will not be considered for a waiver to submit a paper application.

Please be aware of the following:

- Please search for the application package in http://www.Grants.gov by entering the CFDA number or the Funding Opportunity Number. Both numbers are located in the header of this announcement.
- If you experience technical challenges while submitting your application electronically, please contact Grants.gov Support directly at: support@grants.gov or (800) 518-4726. Customer Support is available to address questions 24 hours a day, 7 days a week (except on Federal holidays).
- Upon contacting Grants.gov, obtain a tracking number as proof of contact. The tracking number is helpful if there are technical issues that cannot be resolved and a waiver from the agency must be obtained.
- If it is determined that a waiver is needed, the applicant must submit a request in writing (e-mails are acceptable) to GrantsPolicy@ihs.gov with a copy to Tammy.Bagley@ihs.gov. Please include a clear justification for the need to deviate from the standard electronic submission process.
- If the waiver is approved, the application should be sent directly to the DGM by the Application Deadline Date listed in the Key Dates section on page one of this announcement.
- Applicants are strongly encouraged not to wait until the deadline date to begin the application process through Grants.gov as the registration

process for SAM and Grants.gov could take up to fifteen working days.

- Please use the optional attachment feature in Grants.gov to attach additional documentation that may be requested by the DGM.
- All applicants must comply with any page limitation requirements described in this Funding Announcement.
- After electronically submitting the application, the applicant will receive an automatic acknowledgment from Grants.gov that contains a Grants.gov tracking number. The DGM will download the application from Grants.gov and provide necessary copies to the appropriate agency officials. Neither the DGM nor the IHS Injury Prevention Program will notify the applicant that the application has been received.
- E-mail applications will not be accepted under this announcement.

Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS)

All IHS applicants and grantee organizations are required to obtain a DUNS number and maintain an active registration in the SAM database. The DUNS number is a unique 9-digit identification number provided by D&B which uniquely identifies each entity. The DUNS number is site specific; therefore, each distinct performance site may be assigned a DUNS number. Obtaining a DUNS number is easy, and there is no charge. To obtain a DUNS number, please access it through http://fedgov.dnb.com/webform, or to expedite the process, call (866) 705-5711.

All HHS recipients are required by the Federal Funding Accountability and Transparency Act of 2006, as amended ("Transparency Act"), to report information on subawards. Accordingly, all IHS grantees must notify potential first-tier subrecipients that no entity may receive a first-tier subaward unless the entity has provided its DUNS number to the prime grantee organization. This requirement ensures the use of a universal identifier to enhance the quality of information available to the public pursuant to the Transparency Act.

System for Award Management (SAM)

Organizations that were not registered with Central Contractor Registration and have not registered with SAM will need to obtain a DUNS number first and then access the SAM online registration through the SAM home page at https://www.sam.gov (U.S. organizations will also need to provide an Employer Identification Number from the Internal Revenue Service that may take an additional 2-5 weeks to become active). Completing and submitting the registration takes approximately one hour to complete and SAM registration will take 3-5 business days to process. Registration with the SAM is free of charge. Applicants may register online at https://www.sam.gov.

Additional information on implementing the Transparency Act, including the specific requirements for DUNS and SAM, can be found on the IHS Grants

Management, Grants Policy website:

https://www.ihs.gov/dgm/index.cfm?module=dsp_dgm_policy_topics.

V. Application Review Information

The instructions for preparing the application narrative also constitute the evaluation criteria for reviewing and scoring the application. Weights assigned to each section are noted in parentheses. The fifteen page narrative should include only the first year of activities; information for multi-year projects should be included as an appendix. See "Multi-year Project Requirements" at the end of this section for more information. The narrative section should be written in a manner that is clear to outside reviewers unfamiliar with prior related activities of the applicant. It should be well organized, succinct, and contain all information necessary for reviewers to understand the project fully. Points will be assigned to each evaluation criteria adding up to a total of 100 points. A minimum score of 60 points is required for funding. Points are assigned as follows:

1. Criteria

PART I Injury Prevention Programs

A. Introduction and Need for Assistance (30 points)

Describe the need for funding and the injury problem using local IHS, state or national injury data in the community or target area. Describe the population to be served by the proposed program. Provide documentation that the target population is at least 2,500 people. (IHS User population is

the ONLY acceptable source).

B. Project Objective(s), Work plan and Approach (30 points)

Goals and objectives must be clear and concise. Each program objective must be measurable, feasible and attainable to accomplish during the 5 year project period (SMART – Specific, Measurable, Attainable, Realistic, Time specific). EXAMPLE: The Injury Prevention Tribal Team will increase adult safety belt use at Bob Cat Canyon community to 80% by April 2020.

The methods and staffing will be evaluated on the extent to which the applicant provides: A description of proposed year one work plan that describes how the injury prevention effective strategy will be implemented using the public health approach (multi-year work plan should be included in appendix with actions steps, timeline, responsible person, etc.).

C. Program Evaluation (20 points)

Describe how and when the program will be evaluated to show process, effectiveness, and impact. This includes, but is not limited to, what data will be collected to evaluate the success of the proposed program objectives.

D. Organizational Capabilities, Key Personnel and Qualifications (10 points)

A description of the roles of the Tribal involvement, organization, or agency and evidence of coordination, supervision, and degree of commitment (e.g., time in-kind, financial) of staff, organizations, and agencies involved in activities. Provide biographical sketches (resumes) for all key personnel. Include information for consultants or contractors to be hired during the proposed project and include information in their scope of work. Provide organizational structure (chart). Describe coalition or collaboration activities of the Tribe or urban Tribal program.

E. Categorical Budget and Budget Justification (10 points)

Provide a detailed and justification of budget for the first 12-month budget periods. A budget summary should be included for each subsequent year (Year 2 – Year 5).

If indirect costs are claimed, indicate and apply the current negotiated rate to the budget.

Include travel expenses for annual grantee workshop (mandatory participation) at a city location to be determined by IHS. Include airfare,

per diem, mileage, etc. Note: The first and last annual grantee workshops are held in the Washington, DC area.

PART II – Effective Strategy Projects

A. Introduction and Need for Assistance (30 points)

Describe the need for funding and the injury problem using local IHS, state, or national injury data in the community or target area.

Describe the Tribe's/Tribal organization's support for the proposed IP project.

Describe the population to be served by the proposed project (no minimum population requirement).

B. Project Objectives(s), Work Plan and Approach (30 points)

Goals and objectives must be clear and concise. Each objective must be measurable, feasible and attainable to accomplish during the 5 year project period (SMART – Specific, Measurable, Attainable, Realistic, Time specific). EXAMPLE: Child car seat use will be increased to 75% at Bobcat community by August 2020.

Effective strategies must be incorporated in each project and should be based on effectiveness, economic efficiency and feasibility of the project.

Provide a description of the extent to which proposed projects are an effective strategy based on a documented need in the target communities.

Coalition/Collaboration: Describe how the Tribe or urban community, the IHS and other organizations will collaborate on the project or conduct related activities. Provide a description of the roles of Tribal involvement, organization, or agency and evidence of coordination, supervision, and degree of commitment (e.g., time, in-kind, financial) of staff, organizations, and agencies involved in activities.

C. Program Evaluation (20 points)

Describe how and when the project will be evaluated for program process, effectiveness, and impact. This includes, but is not limited to, what data will be collected to evaluate the success of the proposed program objectives.

D. Organizational Capabilities, Key Personnel and Qualifications (10 points)

A description of the roles of the key personnel in activities during the 5 year project(s) (e.g., time in-kind, financial). Provide the organizational structure (chart). Describe coalition or collaboration activities of the Tribe or urban Tribal program.

E. Categorical Budget and Budget Justification (10 points)

Projects must include a project narrative, 5 year categorical budget, and budget justification for each year of funding requested. If indirect costs are claimed, indicate and apply the current negotiated rate to the budget.

Multi-Year Project Requirements (if applicable)

Projects requiring a second, third, fourth, and/or fifth year must include a brief project narrative and budget (one additional page per year) addressing the developmental plans for each additional year of the project.

Additional documents can be uploaded as Appendix Items in Grants.gov

- Work plan, logic model and/or time line for proposed objectives.
- Position descriptions for key staff.
- Resumes of key staff that reflect current duties.
- Consultant or contractor proposed scope of work and letter of commitment (if applicable).
- Current Indirect Cost Agreement.
- Organizational chart.
- Map of area identifying project location(s).
- Additional documents to support narrative (i.e. data tables, key news articles, etc.).

2. Review and Selection

Each application will be prescreened by the DGM staff for eligibility and completeness as outlined in the funding announcement. Applications that meet the eligibility criteria shall be reviewed for merit by the ORC based on evaluation criteria in this funding announcement. The ORC could be composed of both Tribal and Federal reviewers appointed by the IHS Program to review and make recommendations on these applications. The technical review process ensures selection of quality projects in a national competition for limited funding. Incomplete applications and applications that are non-responsive to the eligibility criteria will not be referred to the ORC. The applicant will be notified via e-mail of this decision by the Grants Management Officer of the DGM. Applicants will be notified by DGM, via e-mail, to outline minor missing components (i.e., budget narratives, audit documentation, key contact form) needed for an otherwise complete application. All missing documents must be sent to DGM on or before the due date listed in the e-mail of notification of missing documents required.

To obtain a minimum score for funding by the ORC, applicants must address all program requirements and provide all required documentation

VI. Award Administration Information

1. Award Notices

The Notice of Award (NoA) is a legally binding document signed by the Grants Management Officer and serves as the official notification of the grant award. The NoA will be initiated by the DGM in our grant system, GrantSolutions (https://www.grantsolutions.gov). Each entity that is approved for funding under this announcement will need to request or have a user account in GrantSolutions in order to retrieve their NoA. The NoA is the authorizing document for which funds are dispersed to the approved entities and reflects the amount of Federal funds awarded, the purpose of the grant, the terms and conditions of the award, the effective date of the award, and the budget/project period.

Disapproved Applicants

Applicants who received a score less than the recommended funding level for approval, 60, and were deemed to be disapproved by the ORC, will receive an Executive Summary Statement from the IHS program office within 30 days of the conclusion of the ORC outlining the strengths and weaknesses of their submitted application. The IHS program office will also provide additional contact information as needed to address questions and concerns as well as provide technical assistance if desired.

Approved But Unfunded Applicants

Approved but unfunded applicants that met the minimum scoring range and were deemed by the ORC to be “Approved”, but were not funded due to lack of

funding, will have their applications held by DGM for a period of one year. If additional funding becomes available during the course of FY 2015, the approved but unfunded application may be re-considered by the awarding program office for possible funding. The applicant will also receive an Executive Summary Statement from the IHS program office within 30 days of the conclusion of the ORC.

NOTE: Any correspondence other than the official NoA signed by an IHS Grants Management Official announcing to the Project Director that an award has been made to their organization is not an authorization to implement their program on behalf of IHS.

2. Administrative Requirements

Cooperative Agreements are administered in accordance with the following regulations, policies, and OMB cost principles:

A. The criteria as outlined in this Program Announcement.

B. Administrative Regulations for Grants:

- Uniform Administrative Requirements HHS Awards, located at 45 C.F.R. Part 75.

C. Grants Policy:

- HHS Grants Policy Statement, Revised 01/07.

D. Cost Principles:

- Uniform Administrative Requirements for HHS Awards, "Cost Principles," located at 45 C.F.R. Part 75, Subpart E.

E. Audit Requirements:

- Uniform Administrative Requirements for HHS Awards, "Audit Requirements," located at 45 C.F.R. Part 75, Subpart F.

3. Indirect Costs

This section applies to all grant recipients that request reimbursement of indirect costs (IDC) in their grant application. In accordance with HHS Grants Policy Statement, Part II-27, IHS requires applicants to obtain a current IDC rate agreement prior to award. The rate agreement must be prepared in accordance with the applicable cost principles and guidance as provided by the cognizant agency or office. A current rate covers the applicable grant activities under the current award's budget period. If the current rate is not on file with the DGM at the time of award, the IDC portion of the budget will be restricted. The restrictions remain in place until the current rate is provided to the DGM.

Generally, IDC rates for IHS grantees are negotiated with the Division of Cost Allocation (DCA) https://rates.psc.gov/ and the Department of Interior (Interior Business Center) http://www.doi.gov/ibc/services/Indirect_Cost_Services/index.cfm. For questions regarding the indirect cost policy, please call the Grants Management Specialist

listed under “Agency Contacts” or the main DGM office at (301) 443-5204.

4. Reporting Requirements

The grantee must submit required reports consistent with the applicable deadlines. Failure to submit required reports within the time allowed may result in suspension or termination of an active grant, withholding of additional awards for the project, or other enforcement actions such as withholding of payments or converting to the reimbursement method of payment. Continued failure to submit required reports may result in one or both of the following: 1) the imposition of special award provisions; and 2) the non-funding or non-award of other eligible projects or activities. This requirement applies whether the delinquency is attributable to the failure of the grantee organization or the individual responsible for preparation of the reports. Reports must be submitted electronically via GrantSolutions. Personnel responsible for submitting reports will be required to obtain a login and password for GrantSolutions. Please see the Agency Contacts list in section VII for the systems contact information.

The reporting requirements for this program are noted below.

A. Progress Reports

Program progress reports are required semi-annually, within 30 days after the budget period ends. These reports must include a brief comparison of actual

accomplishments to the goals established for the period, or, if applicable, provide sound justification for the lack of progress, and other pertinent information as required. A final report must be submitted within 90 days of expiration of the budget/project period.

B. Financial Reports

Federal Financial Report FFR (SF-425), Cash Transaction Reports are due 30 days after the close of every calendar quarter to the Payment Management Services, HHS at: http://www.dpm.psc.gov. It is recommended that the applicant also send a copy of the FFR (SF-425) report to the Grants Management Specialist. Failure to submit timely reports may cause a disruption in timely payments to the organization.

Grantees are responsible and accountable for accurate information being reported on all required reports: the Progress Reports and Federal Financial Report.

C. Federal Subaward Reporting System (FSRS)

This award may be subject to the Transparency Act subaward and executive compensation reporting requirements of 2 C.F.R. Part 170.

The Transparency Act requires the OMB to establish a single searchable

database, accessible to the public, with information on financial assistance awards made by Federal agencies. The Transparency Act also includes a requirement for recipients of Federal grants to report information about first-tier subawards and executive compensation under Federal assistance awards.

IHS has implemented a Term of Award into all IHS Standard Terms and Conditions, NoAs and funding announcements regarding the FSRS reporting requirement. This IHS Term of Award is applicable to all IHS grant and cooperative agreements issued on or after October 1, 2010, with a $25,000 subaward obligation dollar threshold met for any specific reporting period. Additionally, all new (discretionary) IHS awards (where the project period is made up of more than one budget period) and where: 1) the project period start date was October 1, 2010 or after and 2) the primary awardee will have a $25,000 subaward obligation dollar threshold during any specific reporting period will be required to address the FSRS reporting. For the full IHS award term implementing this requirement and additional award applicability information, visit the DGM Grants Policy Website at: https://www.ihs.gov/dgm/index.cfm?module=dsp_dgm_policy_topics.

Telecommunication for the hearing impaired is available at: TTY (301) 443-6394.

Modifications:

May 22, 2015, correction to "Requirements for Project and Budget Narratives," page 16, paragraph 2, last sentence, changed from:

> "The ten page limit for the narrative does not include the work plan, standard forms, Tribal resolutions, table of contents, budget, budget justifications, narratives, and/or other appendix items,"

to:

> "The fifteen page limit for the narrative does not include the work plan, standard forms, Tribal resolutions, table of contents, budget, budget justifications, narratives, and/or other appendix items."

VII. Agency Contacts

1. Questions on the programmatic issues may be directed to:

   Ms. Nancy Bill, Program Manager

   Injury Prevention Program, IHS

   801 Thompson Ave, TMP Suite 610

   Rockville, MD 20852

   Phone: (301) 443-0105

   Fax: (301) 443-7538

   E-Mail: Nancy.Bill@ihs.gov

2. Questions on grants management and fiscal matters may be directed to:

   Pallop Chareonvootitam, Senior Grant Management Specialist

   801 Thompson Avenue, TMP Suite 360-78

   Rockville, MD 20852

   Phone: (301) 443-2195; or the DGM main line (301) 443-5204

   Fax: (301) 443-9602

   E-Mail: Pallop.Chareonvootitam@ihs.gov

3. Questions on systems matters may be directed to:

   Paul Gettys, Grant Systems Coordinator

   801 Thompson Avenue, TMP Suite 360

   Rockville, MD 20852

   Phone: (301) 443-2114; or the DGM main line (301) 443-5204

   Fax: (301) 443-9602 E-Mail: Paul.Gettys@ihs.gov

VIII. Other Information

The Public Health Service strongly encourages all cooperative agreement and contract recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. In addition, Pub. L. 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of the facility) in which regular or routine education, library, day care, health care, or early childhood development services are provided to children. This is consistent with the HHS mission to protect and advance the physical and mental health of the American people.

Date: _____

/s/_____
Robert G. McSwain
Acting Director
Indian Health Service