

national coordinating center and fellow grantees funded by this initiative as a collaborative effort to collect and share information and to standardize SCD education and counseling activities, and implement a model program of SCD carrier follow-up to include notification, extended family testing, counseling and education of affected individuals and families.

### Eligibility

Under SPRANS project grant regulations at 42 CFR 51a.3, any public or private entity, including an Indian tribe or tribal organization (as defined at 25 U.S.C. 450b), is eligible to apply for grants and the cooperative agreement covered by this announcement. Under the President's initiative, community-based and faith-based organizations that are otherwise eligible and believe they can contribute to HRSA's program objectives are urged to consider this initiative.

### Project 1: National Coordinating Center Funding Level/Project Period

Up to \$750,000 in FY 2003 will be used to fund the national coordinating center through a cooperative agreement. The project period for the award will be for two years. Funding beyond the first year is dependent upon the availability of appropriated funds for the sickle cell newborn screening program in FY 2004 and grantee satisfactory performance.

### The Federal Role

The funding for the national SCD coordinating center will be in the form of a cooperative agreement, in which substantial participation on the project of MCHB staff is anticipated during the performance period. Under the terms of this cooperative agreement, in addition to the required monitoring and technical assistance, Federal responsibilities will include:

- (1) Participation in meetings conducted during the period of the cooperative agreement;
- (2) Ongoing review of activities and procedures to be established and implemented for accomplishing the scope of work;
- (3) Review of project information prior to dissemination;
- (4) Review of information presented on project activities;
- (5) Assistance with the establishment of contacts with Federal and State agencies, MCHB grant projects, including the NNSGRC, and other contacts that may be relevant to the project's mission, and referral, as necessary, to these entities.
- (6) Provision of information resources.

### Funding Priority and Preference

Funding priority for the cooperative agreement will be given to applicants meeting the following:

- The applicant is an established SCD organization with a national scope that clearly demonstrates expertise and national capacity for addressing issues relevant to SCD patients and their families and in which community-based programs play an integral role in its mission.

The applicant will be given a 5-point favorable adjustment to the ranking score assigned to that application if the funding priority is met (score is based on a 100 point scale with a maximum adjustment of 5 points).

Funding preference will be applied to FY 2002 funded grantees in the Sickle Cell Newborn Screening Program. Preference will only be given to those applicants who rank above the 20th percentile of applications recommended for approval by the Objective Review Group.

### Review Criteria

Applications that are complete and responsive to the guidance will be evaluated by an objective review panel specifically convened for this solicitation and in accordance with HRSA grants management policies and procedures.

Cooperative agreement applications will be reviewed using the following HRSA criteria:

1. The proposed activities, if well executed, are capable of attaining project objectives.
2. The project objectives are capable of achieving the specific program objectives defined in the program announcement and the proposed results are measurable.
3. The method for evaluating proposed results includes criteria for determining the extent to which the program has achieved its stated objectives and the extent to which the accomplishment of objectives can be attributed to the program.
4. In so far as practical, the proposed activities, when accomplished, are replicable, national in scope and include plans for broad dissemination.
5. The estimated costs to the government of the project are reasonable considering the level and complexity of activity and the anticipated results.
6. The project personnel are well qualified by training and/or experience for the support sought, and the applicant organization has adequate facilities and manpower.

Additional criteria may be used to review and rank applications for this

competition. Any such criteria will be identified in the program guidance included in the application kit. Applicants should pay strict attention to addressing these criteria, in addition to those referenced above. Also, to the extent that regulatory review criteria generally applicable to all Title V programs (at 42 CFR part 51a) are relevant to this specific project, such factors will be taken into account.

### Project 2: Community-based SCD Organizations

### Funding Level/Project Period

Up to \$ 2.96 million in FY 2003 will be used to fund up to 16 community-based grants within the program. Estimated amount for each community-based grant award is \$185,000. The project period for the awards will be for two years. Funding beyond the first year is dependent upon the availability of appropriated funds for the sickle cell newborn screening program in FY 2004 and grantee satisfactory performance. Grantees will be expected to work cooperatively with the national coordinating center described in this announcement.

### Funding Priorities and Preference

Funding priority for community-based grants will be given to applicants meeting the following:

- (1) A collaborative relationship with the State Title V and newborn screening program, a local comprehensive SCD treatment center, and a community-based SCD organization;
- (2) The applicant is a local, community-based SCD organization with no less than 10 cumulative years experience in providing outreach services to persons and families affected by SCD; and in addition, in providing education and counseling to parents of infants determined by the newborn screening program to have SCD or be carriers of sickle cell or other abnormal hemoglobins.
- (3) The applicant can document experience within the past year that:
  - a. Provides outreach services, education and counseling to parents of infants determined by the newborn screening program to have SCD or be carriers of sickle cell or other abnormal hemoglobins; and
  - b. Partners with the State Title V and newborn screening program(s), and a local comprehensive sickle cell treatment center or a local community-based SCD organization.

An applicant will be given a 5-point favorable adjustment to the ranking score assigned to that application for each funding priority that is met (score