

**U.S. Department of Health and Human Services
Office of the Assistant Secretary for Preparedness and Response
Office of Emergency Management
Division of National Healthcare Preparedness Programs**

**Funding Opportunity Announcement
and Grant Application Instructions**

Funding Opportunity Title:

**EBOLA HEALTHCARE PREPAREDNESS AND RESPONSE FOR SELECT CITIES WITH
ENHANCED AIRPORT ENTRANCE SCREENINGS FROM AFFECTED COUNTRIES IN
WEST AFRICA**

Funding Opportunity Number:

EP-U3R-15-001

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**U.S. Department of Health and Human Services (HHS)
Assistant Secretary for Preparedness and Response (ASPR)
Office of Emergency Management (OEM)
Division of National Healthcare Preparedness Programs (NHPP)**

Announcement Type: New Grant

Funding Opportunity Number: EP-U3R-15-001

Catalog of Federal Domestic Assistance (CFDA) Number:

93.801 – Ebola Healthcare Preparedness and Response for Select Hospitals in Cities with Enhanced Airport Entrance Screenings from Affected Countries in West Africa

Dates: All applications must be submitted by: February 3, 2015

I. FUNDING OPPORTUNITY DESCRIPTION

Statutory Authority

Public Health Service Act, Section 311 (42 U.S.C. 243)

BACKGROUND:

Government agency

The Office of the Assistant Secretary for Preparedness and Response (ASPR) is a staff division within the Office of the Secretary, U.S. Department of Health and Human Services (HHS). ASPR leads the nation's efforts to prevent, protect against, mitigate, respond to and recover from the adverse health effects of public health incidents. ASPR focuses on preparedness planning and response; federal emergency medical operational capabilities; countermeasures research, advance development, and procurement; and grants to strengthen the capabilities of hospitals and health care systems to prepare for, respond to, and recover from public health emergencies and medical disasters. ASPR also provides federal support, including medical professionals through its National Disaster Medical System, to augment state and local capabilities during an incident.

Within ASPR, the Hospital Preparedness Program (HPP) has provided all-hazard preparedness funding to 62 awardees since federal, fiscal year 2002 (FY02) to increase the capacities and capabilities of healthcare systems (e.g., hospitals and supporting healthcare facilities) that include outpatient facilities and centers (e.g., behavioral health, substance abuse, urgent care), inpatient facilities and centers (e.g., trauma, State and Federal veterans, long-term, children's, tribal), and other entities (poison control, emergency medical services, CHCs, nursing, etc.) to improve surge capacity and enhance community and hospital preparedness for public health emergencies and other events.

On September 30, 2014, the Centers for Disease Control and Prevention (CDC) confirmed the first laboratory-confirmed case of Ebola diagnosed in the United States in a patient who had traveled to Dallas, TX from West Africa.

CDC and the Department of Homeland Security's Customs and Border Protection announced on October 8, enhanced Ebola screening at five U.S. airports that receive over 94 percent of travelers from the Ebola-affected nations of Guinea, Liberia, and Sierra Leone. These five airports are New York's JFK International Airport, Washington-Dulles, Newark, Chicago-O'Hare, and Atlanta International. Updated CDC guidance, supported by ASPR, urges hospitals to limit the spread of the virus in order to protect and maintain their workforce, to prevent hospitals from being a disease amplifier, and to protect non-Ebola patients from infection. This grant will enable select public health departments serving the regions where enhanced airport screenings are occurring to procure equipment and supplies, train staff, retrofit facilities, and carry out other necessary Ebola-specific preparedness, response, and recovery activities.

PROJECT OVERVIEW:

1. Project Narrative:

The primary purpose of this funding is to improve the applicants' abilities to prepare for, respond to, and recover from an Ebola event by undertaking activities in any or all of the following priority areas:

Personal Protective Equipment (PPE) Procurement and Training. The CDC issues and updates [PPE recommendations](#) for health workers who will be caring for Ebola patients. These guidelines reflect lessons learned from the recent experience of U.S. hospitals caring for Ebola patients and emphasize the importance of training, practice, competence, and observation of healthcare workers in correct donning and doffing of PPE. Based on the most recent guidelines and the jurisdiction's identified needs in meeting these guidelines, public health departments should work with healthcare facilities to

- Purchase recommended Personal Protective Equipment (PPE)
- Conduct training on donning and doffing of PPE
- Conduct additional training for dedicated staffing, including but not limited to nurses, physicians, and laboratory staff (backfill costs are not allowable)
- Provide infection control surveillance to assure appropriate infection control practices, for instance, using trained observers to monitor for correct PPE use and adherence to protocols for donning and doffing PPE
- Conduct drills and exercises involving use of PPE
- Purchase PPE and conduct training for Emergency Medical Services (EMS) transport from triage facilities to higher level of care (for more information on CDC guidance in this area, see the CDC's "[Detailed Emergency Medical Services \(EMS\) Checklist for Ebola Preparedness](#)")

Laboratory. The CDC, in collaboration with the Association of Public Health Laboratories (APHL), has developed and issued guidance documents for state and local public health laboratories, preparing these labs to conduct Ebola testing and

respond to questions from their clinical laboratories. In accordance with the [Interim Guidance for Specimen Collection, Transport, Testing, and Submission for Persons Under Investigation for Ebola Virus Disease in the United States](#) and other updated CDC guidance for laboratory activities, public health departments should work with healthcare facilities to

- Purchase Point of Care (POC) laboratory equipment and associated supplies.

Retrofitting of facilities. Among other items, the most recent CDC guidance recommends that hospitals ensure that space and layout allow for clear separation between clean and potentially contaminated areas. This may require alteration and renovation (A&R) of facilities. Funding under these awards may only be used for minor A&R activities; construction and major A&R activities are not permitted.

Public health departments should work with healthcare facilities to

- Retrofit facilities to promote appropriate layout and assure good infection control including, for example, ante room, POC laboratory, and dedicated treatment rooms

A&R of real property generally is defined as work required to change the interior arrangements or installed equipment in an existing facility so that it may be more effectively utilized for its currently designated purpose or be adapted for an alternative use to meet a programmatic requirement. The work may be categorized as improvement, conversion, rearrangement, rehabilitation, remodeling, or modernization, but it does not include expansion, new construction, development, or repair of parking lots, or activities that would change the “footprint” of an existing facility (for example, relocation of existing exterior walls, roofs, or floors, attachment of fire escapes). Pre-approval must be obtained before the start of any minor A&R.

Minor A&R may include activities (and associated costs) that will result in:

- (a) Changes to physical characteristics (interior dimensions, surfaces, and finishes); internal environments (temperature, humidity, ventilation, and acoustics); or utility services (plumbing, electricity, gas, vacuum, and other laboratory fittings);
- (b) Installation of fixed equipment (including casework, fume hoods, large autoclaves, biological safety cabinets);
- (c) Replacement, removal, or reconfiguration of interior non-load bearing walls, doors, frames, or windows in order to place equipment in a permanent location;
- (d) Making unfinished shell space suitable for purposes other than human occupancy, such as storage of pharmaceuticals; or
- (e) Alterations to meet requirements for accessibility by physically disabled individuals.

Waste Management. A Category A Infectious substance is a material known or reasonably expected to contain a pathogen, such as Ebola, that is in a form capable of causing permanent disability or life threatening or fatal disease in otherwise healthy humans or animals when exposed to it. Category A infectious substances are regulated by the Department of Transportation’s Hazardous Materials Regulations (HMR, 49 Parts 171-180). The HMR apply to any material DOT determines is capable

of posing an unreasonable risk to health, safety, and property when transported in commerce.

An item contaminated with a Category A infectious substance transported for disposal must be packaged in accordance with the requirements in 49 C.F.R. §173.196. For example, the packaging of medical equipment, sharps, linens, and used health care products (such as soiled absorbent pads, emesis basins/vomit pans, portable toilet) contaminated with a Category A infectious substance would need to comply with the packaging requirements in 49 C.F.R. § 173.196. To meet [DOT guidance](#) on transporting Ebola-contaminated items (additional guidance found [here](#)) and [CDC guidance on waste management](#), public health departments should work with healthcare facilities to undertake preparedness activities that enable them to

- Conduct proper waste management and disposal
- Conduct environmental clean-up

Awardees are expected to undertake comprehensive multi-disciplinary planning with hospitals, other healthcare entities, public health, emergency management, special population organizations, other community groups, etc., when developing application work plans and budgets, to maximize available funding streams, and develop a comprehensive application with coordinated and targeted preparedness activities, in the event of a suspected or confirmed Ebola patient.

Additional Requirements

The Awardee application Project Narrative should include a comprehensive summary of the jurisdiction's current status and ongoing activities in the priority areas outlined above, regardless of the funding source. Based on the summary, the applicant shall identify needs, prioritize activities, develop goals and objectives, and justify additional funding for these priority areas.

II. AWARD INFORMATION

<i>Estimated Total Project Cost:</i>	1,000,000 USD
<i>Estimated Funding Amount:</i>	50,000 to 1,000,000 USD subject to availability of funds
<i>Anticipated Number of Awards:</i>	Up to Eight (8) Awards
<i>Project Period Length:</i>	February 24, 2015 through August 23, 2015
<i>Anticipated Start Date:</i>	February 24, 2015
<i>Expected Duration of Support:</i>	6 Months
<i>Type of Application Sought:</i>	Grant

ASPR may award all or part of the funds, up to \$1,000,000 USD subject to availability of funds.

III. ELIGIBILITY INFORMATION

Eligible Applicants

Eligible applicants are state or city departments of public health serving the five major airports wherein DHS is conducting enhanced airport entrance screenings for Ebola. Eligible applicants include departments of public health in the following jurisdictions:

- Chicago
- Georgia
- Maryland
- New Jersey
- New York
- New York City
- Virginia
- Washington, DC

Public Health Departments in the jurisdictions identified in this FOA should work directly with the appropriate hospitals to coordinate and plan appropriate activities described in this FOA and to distribute funds from this FOA to support those activities. Hospitals should conduct jurisdictional planning (e.g., EMS transport, purchase of PPE) based on identified needs.

Eligible jurisdictions can provide funding only to hospitals within 75 miles of the five airports conducting enhanced airport entrance screening for Ebola and whose capabilities to safely manage patients with Ebola have been jointly assessed by the department of public health and a HHS Rapid Ebola Preparedness (REP) team or a comparable team comprised of administrators and clinicians from facilities that have safely and successfully treated patients with Ebola in the United States.

Cost Sharing and Maintenance of Funding

There is no cost sharing or match requirement for this project.

Maintenance of Effort/Funding is not required for this program.

Application Screening Criteria

1. Applications should be submitted electronically via <http://www.grants.gov> by February 3, 2015.
2. The Project Narrative section of the Application must be **double-spaced**, on 8 ½" x 11" plain white paper with **1" margins** on both sides, and a **font size of not less than 11**.

The Project Narrative must not exceed 12 pages.

IV. APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package

Application materials can be obtained from <http://www.grants.gov>.

Contact person regarding this Funding Opportunity Announcement is:

Steve Tise
Senior Program Analyst, HPP
Telephone: 202-245-0740
E-mail: Stephen.Tise@hhs.gov

Required registrations:

Central Contractor Registration (CCR) and Data Universal Numbering System (DUNS) Requirements:

Except for those entities exempt from requirements listed at [2 CFR Part 25](#) (individuals), effective October 1, 2010, HHS requires all entities that plan to apply for and ultimately receive Federal grant funds from any HHS Operating/Staff Division (OPDIV) or receive subawards directly from recipients of those grant funds to:

- Be registered in the CCR prior to submitting an application of plan;
- Maintain an active CCR registration with current information at all times during which it has an active award or an application or plan under consideration by an OPDIV; and
- Provide its DUNS number in each application or plan it submits to the OPDIV.

An award cannot be made until an applicant has complied with these requirements. At the time an award is ready to be made, if the intended recipient has not complied with these requirements, the OPDIV:

- May determine that the applicant is no qualified to receive an award; and
- May use that determination as a basis for making an award to another applicant.

Additionally, all first-tier subaward recipients (e.g., direct subrecipient) must have a DUNS number at the time the subaward is made.

CCR registration may be made online at <http://www.sam.gov> or by phone at 1-877-252-2700.

Due to the possibility of heavy traffic at the SAM website, applicants are strongly encouraged to register at the CCR well in advance of the application due date. Applicants must assure that the CCR registration is current for the anticipated start date of the award. Applications will not be reviewed if applicant is not registered with CCR or CCR registration is no current.

Grants.gov registration – All entities must register and/or renew registration with grants.gov prior to submitting an application. Grantees previously registered must assure that the registration is still valid and up-to-date. Registration and re-registration take up to 10 working days to process. Failure to submit the application on time due to late registration will result in ASPR not accepting the application.

Content and Form of Application Submission (See section VIII. OTHER INFORMATION -Application Elements)

****Cover Letter****

Cover Letters should be to the following:

Brenda Cox
Chief Grants Management Officer (Acting)
Acquisition Management Contracts and Grants
Office of the Assistant Secretary for Preparedness and Response
U.S. Department of Health and Human Services
200 Independence Ave. S.W.
Washington, DC 20201
Telephone: (202) 809-4144
E-mail: asprgrants@hhs.gov

The following document and sections need to be submitted to ASPR in order to be considered for funding:

Application for Federal Assistance – Standard Form SF 424

Budget Information – Standard Form SF 242A

Assurances (Non-Construction Programs) - Standard Form SF 424B

****Project Narrative****

The Project Narrative must be double-spaced, on 8 ½” x 11” paper with 1” margins on both sides, and a font size of not less than 11. You may use smaller font sizes to fill in the Standard Forms and Sample Formats. Forms do not need to be double spaced. ASPR will not accept applications with a Project Narrative that exceeds 12 pages

The components of the Project Narrative counted as part of the 12 page limit include:

- Summary
- Needs Statement
- Program Outcome Objectives
- Work plan and Timetable
- Evaluation Plan

Any other relevant annexes that do not count toward the 12 page limit including:

- M&E Grid
- Key Curricula Vitae
- Letters of Commitment
- Budget Narrative
- Other documents, as needed

The Project Narrative is the most important part of the application, since it is the primary basis on which we determine whether or not your project meets the minimum requirements for grants under Public Health Service Act, Section 311, 42 U.S.C. Section 243. The Project Narrative should provide a clear and concise description of your project. ASPR recommends that your project narrative include the following components:

****Summary**** (*maximum of 2 pages*)

Applications should include a comprehensive summary of the jurisdiction's ongoing activities regarding Ebola planning for medical surge, regardless of the funding source as described on page 6, including priority areas specifics (e.g., equipment/supplies, training, environmental clean-up). Applicants should provide the name or names of the hospital or hospitals that will receive funding and describe the hospital Ebola preparedness and response initiatives they plan to undertake with the funding. This section should be succinct, self-explanatory and well organized so that reviewers can understand the proposed project.

****Needs Statement**** (*maximum of 3 pages*)

Provide a needs statement specific to the allowable work (e.g., equipment/supplies, training, environmental clean-up).

****Program Outcome Objectives**** (*maximum of 2 pages*)

Describe the overall goal of the project based on need, outline the objectives to be accomplished and the prioritized activities funded to advance the objectives and ultimately support attainment of the goal. The goal(s), objectives, and activities should describe the steps that will be taken to achieve the work to be addressed during this funding period. Describe the envisioned final product in terms of personnel, training, equipment or systems, organizational, or planning needs that will be addressed with this funding. Descriptions should be detailed enough to provide sufficient information to allow the reviewer to understand the depth and breadth of the activities.

Applicants are strongly encouraged to consider the following guidance when completing this section. When writing goals and objectives, goals should be expressed in terms of the desired long-term impact on the overall preparedness of the jurisdiction as well as reflect the program goals contained in the FOA. When writing the outcome objectives, they should be written as a statement that defines measurable results that the project expects to accomplish. All outcome objectives should be described in terms that are specific, measurable, achievable, realistic, and time-framed (SMART).

**Applications will be reviewed and assessed using these criteria for review.*

****Work plan and Timetable**** *(maximum of 2 pages)*

Develop a work plan that addresses the activities that will be funded to accomplish the goal. The work plan should be written in terms of who, what, when, where, why, and how much. Include a budget justification that specifically describes how each activity will support the achievement of the proposed objectives in a 6 month timeframe.

**** Evaluation Plan**** *(maximum of 3 pages)*

Develop an evaluation plan. The plan should track progress related to the objectives, outcomes, and activities that the project management is promising to deliver. The outcomes are more detailed than the objectives and the goal(s) and should be measured through the use of objective indicators. The plan should be able to describe how outcomes are achieved and linked to activities described in the work plan and program objectives.

Indicators provide the project team with a quantifiable basis on which to judge the project's success in reaching its objectives. The specification of indicators acts as a check on the viability of the outcomes and project objectives. Once the indicators are defined, they should be developed to provide details of quantity, quality, and time. For sample evaluation questions, see Attachment E.

****Budget Narrative/Justification****

The Budget Narrative/Justification should be provided using the format included in the example Attachment B of this Funding Opportunity Announcement. Applicants are encouraged to pay particular attention to Attachment B, which provides an example of the level of detail sought.

Submission Dates and Times

The deadline for the submission of applications under this Funding Opportunity Announcement is February 3, 2015. Applications must be submitted electronically by 11:59 p.m. Eastern Time on February 3, 2015

Intergovernmental Review

This funding opportunity announcement is not subject to the requirements of Executive Order 12372, "Intergovernmental Review of Federal Programs."

2. Funding Restrictions (add or subtract any other funding restrictions)

The following activities are not fundable:

- Basic research
- To carry out any program of distributing sterile needles or syringes for hypodermic injections of any illegal drug
- To advocate or promote gun control
- Salaries may not exceed the rate of \$181,500 USD/year
- Lobbying activities
- Fund raising
- Cost of Money even if part of the negotiated indirect cost rate agreement
- Vehicles
- Salaries for back filling of personnel
- Antibiotics for treatment of secondary infections

3. Other Submissions Requirements

Complete Applications should be submitted through grants.gov.

V. APPLICATION REVIEW INFORMATION

Criteria –

Applications will be reviewed based on the following criteria listed in descending order of priority:

- Clarity of the needs in terms of personnel, organizational leadership, equipment and systems, planning;
- Clarity of how well the goals, objectives, and activities outlined in the application address the needs;
- Extent to which goals, objectives, and activities are written in SMART (specific, measurable, achievable, realistic, and time-framed) format; and
- Clarity of which the budget justification reflects the costs associated with the activities to be completed.

VI. AWARD ADMINISTRATION INFORMATION

4. Award Notices

The Notice of Award is the authorizing document from the ASPR authorizing official, the Office of Grants Management, and the ASPR Office of Budget and Finance. The Notice of Award will be sent electronically upon successful review of the application. The Notice of Award sets forth the amount of funds granted, the terms and conditions of the award, the effective date of the award, the budget period for which initial support will be given, the non-federal share to be provided (if applicable), and the total project period for which support is contemplated.

Each applicant will receive written notification of the outcome of the objective review process, including a summary of the expert committee's assessment of the application's strengths and weaknesses, and whether the application was selected for funding. Applicants who are selected for funding may be required to respond in a satisfactory manner to Conditions placed on their application before funding can proceed. Letters of notification do not provide authorization to begin performance.

5. Administrative and National Policy Requirements

The award is subject to HHS Administrative Requirements, which can be found in 45 CFR Part 74 and 92 and the Standard Terms and Conditions implemented through the HHS Grants Policy Statement located at <http://www.hhs.gov/grantsnet/adminis/gpd/index.htm>.

6. Reporting

Applicants funded under this announcement will be required to electronically submit a semi-annual program progress report and Federal Financial Report (FFR) SF-425. In addition, applicants must submit an end-of-year program progress report and end-of-year Federal Financial Report, both due 90 days after the budget period ends. Awardees will receive instructions for both reports with their Notice of Award. Final performance and financial reports are due 90 days after the end of the project period. For more information see DHHS / ASPR Standard Terms and Conditions.

Progress Reporting: Applicants funded under this announcement will be required to electronically submit a final program progress report. As part of the progress report financial information will be reported both per major category of expense, and by objectives.

Subaward and Executive Compensation Reporting: Applicants must ensure that they have the necessary processes and systems in place to comply with the sub-award and executive total compensation reporting requirements established under OMB guidance at 2 CFR Part 170, unless they qualify for an exception from the requirements, should they be selected for funding

Cash Transaction Reporting Recipients must report cash transaction data using the Federal Financial Report (FFR), SF-425. Recipients will utilize the SF-425 lines 10.a through 10.c to report cash transaction data to the Division of Payment Management. The FFR SF-425 (lines 10.a through 10.c) is due to the Payment Management System 30 days after the end of each calendar quarter. The FFR SF-425 electronic submission and dates for the new quarters will be announced through the Payment Management/SmartLink Payment System's bulletin board. Funds will be frozen if the report is not filed on or before the due date.

Federal Disbursement Reporting: The SF-425 will also be used for reporting of expenditure data to meet ASPR's semi-annual and annual financial reporting requirement. All other lines except 10.a through 10.c should be completed.

Tangible Property Report: Awardees will be required to submit an annual Tangible Property Report (SF 428) at the time the annual SF 425 is submitted to ASPR. Final SF 428 reports are due 90 days after the end of the project period.

Other Reporting Requirements: Throughout the course of the project the awardee may be asked to submit additional reports as needed.

VII. AGENCY CONTACTS

Grants Management Officer:

U.S. Department of Health and Human Services
Office of the Assistant Secretary for Preparedness and Response
Washington, DC 20201
Attn: Brenda Cox
Telephone: (202) 809-4144
E-mail: asprgrants@hhs.gov

Project Officer:

U.S. Department of Health and Human Services
Office of the Assistant Secretary for Preparedness and Response
Washington, DC 20201
Attn: Steve Tise
Senior Program Analyst, HPP
Telephone: (202) 245-0740
E-mail: Stephen.Tise@hhs.gov

VIII. OTHER INFORMATION

7. Application Elements

- a) SF 424 – Application for Federal Assistance
- b) SF 424A – Budget Information.
- c) c.) Separate Budget Narrative/Justification (See Attachments B for a Budget Narrative/Justification Sample Format with Examples and a Sample Template).
- d) Copy of the applicant's most recent indirect cost agreement, if requesting indirect costs. Upon issuing a contract or sub-award copies of their indirect cost agreements must be forwarded to the Division of Grants.
- e) Vitae for Key Project Personnel.
- f) Letters of Commitment from Key Partners.

ATTACHMENTS

**Attachment A:
Instructions for Completing Required Forms
(SF 424, Budget (SF 424A), Budget Narrative/Justification)**

**Attachment B:
Budget Narrative/Justification Format - Sample Format with Examples**

**Attachment C:
Project Work Plan - Sample Template**

**Attachment D:
Instructions for Completing the Summary/Abstract**

**Attachment E:
Sample Questions for Evaluation Plan**

**Attachment A: Instructions for Completing Required Forms
(SF 424, Budget (SF 424A), Budget Narrative/Justification)**

This section provides step-by-step instructions for completing the four (4) standard federal forms required as part of your grant application, including special instructions for completing Standard Budget Forms 424 and 424A. Standard Forms 424 and 424A are used for a wide variety of federal grant programs, and federal agencies have the discretion to require some or all of the information on these forms. ASPR does not require all the information on these Standard Forms. Accordingly, please use the instructions below to complete these forms in lieu of the standard instructions attached to SF 424 and 424A.

a. Standard Form 424

1. **Type of Submission:** (Required): Select one type of submission in accordance with agency instructions.

- Application

2. **Type of Application:** (Required) Select one type of application in accordance with agency instructions.

- New

3. **Date Received:** Leave this field blank.

4. **Applicant Identifier:** Leave this field blank

5a **Federal Entity Identifier:** Leave this field blank

5b. **Federal Award Identifier:** For new applications leave blank.

6. **Date Received by State:** Leave this field blank.

7. **State Application Identifier:** Leave this field blank.

8. **Applicant Information:** Enter the following in accordance with agency instructions:

a. Legal Name (Required): Enter the name that the organization has registered with the Central Contractor Registry. Information on registering with CCR may be obtained by visiting the Grants.gov website (<http://www.grants.gov>).

b. Employer/Taxpayer Number (EIN/TIN)(Required): Enter the Employer or Taxpayer Identification Number (EIN or TIN) as assigned by the Internal Revenue Service.

c. Organizational DUNS (Required): Enter the organization's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained by visiting the Grants.gov website (<http://www.grants.gov>).

d. Address (Required): Enter the complete address including the county.

e. Organizational Unit: Enter the name of the primary organizational unit (and department or division, if applicable) that will undertake the project.

f. Name and contact information of person to be contacted on matters involving this application: Enter the name (first and last name required), organizational affiliation (if affiliated with an organization other than the applicant organization), telephone number (Required), fax number, and e-mail address (required) of the person to contact on matters related to this application.

9. Type of Applicant (Required): Select the applicant organization “type” from the drop down list.

10. Name of Federal Agency (Required): Enter U.S. Assistant Secretary for Preparedness and Response

11. Catalog of Federal Domestic Assistance Number/Title: The CFDA number can be found on page one of the Funding Opportunity Announcement.

12. Funding Opportunity Number/Title (Required): The Funding Opportunity Number and title of the opportunity can be found on page one of the Funding Opportunity Announcement.

13. Competition Identification Number/Title: Leave this field blank.

14. Areas Affected By Project: List the largest political entity affected (cities, counties, state etc.).

15. Descriptive Title of Applicant’s Project (Required): Enter a brief descriptive title of the project.

16. Congressional Districts Of (Required): **16a.** Enter the applicant’s Congressional District, and **16b.** Enter all district(s) affected by the program or project. Enter in the following format: 2 characters state abbreviation – 3 characters district number, CA-005 for California 5th district. If all congressional districts in a state are affected, enter “all” for the district number, (e.g. MD-all for all congressional districts in Maryland). If nationwide enter US-all.

17. Proposed Project Start and End Dates (Required): Enter the proposed start date and final end date of the project. Therefore, if you are applying for a multi-year grant, such as a 3 year grant project, the final project end date will be 3 years after the proposed start date. The Grants Office can alter the start and end date at their discretion.

18. Estimated Funding (Required): Enter the amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. **NOTE:**

Applicants should review cost sharing or matching principles contained in Subpart C of 45 CFR Part 74 or 45 CFR Part 92 before completing Item 18 and the Budget Information Sections A, B and C noted below.

19. Is Application Subject to Review by State Under Executive Order 12372 Process? Check appropriate box

20. Is the Applicant Delinquent on any Federal Debt? (Required): This question applies to the applicant organization, not the person who signs as the authorized representative. If yes, include an explanation on the continuation sheet.

21. Authorized Representative (Required): To be signed and dated by the authorized representative of the applicant organization. Enter the name (first and last name required) title (required), telephone number (required), fax number, and e-mail address (required) of the person authorized to sign for the applicant. A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain federal agencies may require that this authorization be submitted as part of the application.)

b. Standard Form 424A

NOTE: Standard Form 424A is designed to accommodate applications for multiple grant programs; thus, for purposes of this ASPR program, many of the budget item columns and rows are not applicable. You should only consider and respond to the budget items for which guidance is provided below. Unless otherwise indicated, the SF 424A should reflect a one year budget.

Section A - Budget Summary

Line 5: Leave columns (c) and (d) blank. Enter TOTAL federal costs in column (e) and total non-federal costs (including third party in-kind contributions and any program income to be used as part of the awardee match) in column (f). Enter the sum of columns (e) and (f) in column (g).

Section B - Budget Categories

Column 3: Enter the breakdown of how you plan to use the federal funds being requested by object class category (see instructions for each object class category below).

Column 4: Enter the breakdown of how you plan to use the non-federal share by object class category.

Column 5: Enter the total funds required for the project (sum of Columns 3 and 4) by object class category.

Separate Budget Narrative/Justification Requirement
Applicants requesting funding for multi-year grant programs are REQUIRED to provide a combined multi-year Budget Narrative/Justification, as well as a detailed Budget Narrative/Justification for each year of potential grant funding. A separate Budget Narrative/Justification is also REQUIRED for each potential year of grant funding requested.

For your use in developing and presenting your Budget Narrative/Justification, a sample format with examples and a blank sample template have been included in these Attachments. In your Budget Narrative/Justification, you should include a breakdown of the budgetary costs for all of the object class categories noted in Section B, across three columns: federal; non-federal cash; and non-federal in-kind. Cost breakdowns, or justifications, are required for any cost of \$1,000 or for the thresholds as established in the examples. The Budget Narratives/Justifications should fully explain and justify the costs in each of the major budget items for each of the object class categories, as described below. Non-federal cash as well as, sub-contractor or sub-Awardee (third party) in-kind contributions designated as match must be clearly identified and explained in the Budget Narrative/Justification. The full Budget Narrative/Justification should be included in the application immediately following the SF 424 forms.

Line 6a - **Personnel:** Enter total costs of salaries and wages of applicant/awardee staff. Do not include the costs of consultants, which should be included under 6h - Other.

In the Justification: Identify the project director, if known. Specify the key staff, their titles, and time commitments in the budget justification.

Line 6 - **Fringe Benefits:** Enter the total costs of fringe benefits unless treated as part of an approved indirect cost rate.

In the Justification: If the total fringe benefit rate exceeds 35% of personnel costs, provide a break-down of amounts and percentages that comprise fringe benefit costs, such as health insurance, FICA, retirement, etc. A percentage of 35% or less does not require a break down but you must show the percentage charged for each full/part time employee.

Line 6c - **Travel:** Enter total costs of all travel (local and non-local) for staff on the project. NEW: Local travel is considered under this cost item not under the "Other" cost category.

Local transportation (all travel which does not require per diem is considered local travel). Do not enter costs for consultant's travel - this should be included in line 6h.

In the Justification: Include the total number of trips, number of travelers, destinations, purpose (attend conference), length of stay, subsistence allowances (per diem), and transportation costs (including mileage rates).

Line 6d - **Equipment:** Enter the total costs of all equipment to be acquired by the project. For all awardees, “equipment” is non-expendable tangible personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more *per unit*. If the item does not meet the \$5,000 threshold, include it in your budget under Supplies, line 6e.

In the Justification: Equipment to be purchased with federal funds must be justified as necessary for the conduct of the project. The equipment must be used for project-related functions. Further, the purchase of specific items of equipment should not be included in the submitted budget if those items of equipment, or a reasonable facsimile, are otherwise available to the applicant or its sub-awardees.

Line 6e: **Supplies** - Enter the total costs of all tangible expendable personal property (supplies) other than those included on line 6d.

In the Justification: For any grant award that has supply costs in excess of 5% of total direct costs (federal or non-federal), you must provide a detailed breakdown of the supply items (6% of \$100,000 = \$6,000 – breakdown of supplies needed). If the 5% is applied against \$1 million total direct costs (5% x \$1,000,000 = \$50,000) a detailed breakdown of supplies is not needed. Please note: any supply costs of \$5,000 or less regardless of total direct costs does not require a detailed budget breakdown (5% x \$100,000 = \$5,000 – no breakdown needed).

Line 6f - **Contractual:** Regardless of the dollar value of any contract, you must follow your established policies and procedures for procurements and meet the minimum standards established in the Code of Federal Regulations (CFR’s) mentioned below. Enter the total costs of all contracts, including procurement contracts (except those which belong on other lines such as equipment, supplies, etc.). Note: The 33% provision has been removed and line item budget detail is not required as long as you meet the established procurement standards. Also include any contracts with organizations for the provision of technical assistance. Do not include payments to individuals on this line.

In the Justification: Provide the following three items – 1) a list of contractors indicating the name of the organization; 2) the purpose of the contract; and 3) the estimated dollar amount. If the name of the contractor and estimated costs are not available or have not been negotiated, indicate when this information will be available. The federal government reserves the right to request the final executed contracts at any time. If an individual contractual item is over the small purchase threshold, currently set at \$100K in the CFR, you must certify that your procurement standards are in accordance with the policies and procedures as stated in 45 CFR 74.44 for non-profits and 45 CFR 92.36 for states, in lieu of providing separate detailed budgets. This certification should be referenced in the justification and attached to the budget narrative.

Line 6g - **Construction:** Leave blank since construction is not an allowable costs for this program.

Line 6h - **Other**: Enter the total of all other costs. Such costs, where applicable, may include, but are not limited to: insurance, medical and dental costs (e.g. for project volunteers this is different from personnel fringe benefits), non-contractual fees and travel paid directly to *individual* consultants, postage, space and equipment rentals/lease, printing and publication, computer use, training and staff development costs (e.g. registration fees). If a cost does not clearly fit under another category, and it qualifies as an allowable cost, then it belongs in this section.

In the Justification: Provide a reasonable explanation for items in this category. For example, individual consultants explain the nature of services provided and the relation to activities in the Work Plan or indicate where it is described in the Work Plan. Describe the types of activities for staff development costs.

Line 6i - **Total Direct Charges**: Show the totals of Lines 6a through 6h.

Line 6j - **Indirect Charges**: Enter the total amount of indirect charges (costs), if any. If no indirect costs are requested, enter "none." Indirect charges may be requested if: (1) the applicant has a current indirect cost rate agreement approved by the HHS or another federal agency; or (2) the applicant is a state or local government agency.

State governments should enter the amount of indirect costs determined in accordance with HHS requirements. An applicant that will charge indirect costs to the grant must enclose a copy of the current rate agreement. Indirect Costs can only be claimed on Federal funds, more specifically, they are to only be claimed on the federal share of your direct costs. Any unused portion of the awardee's eligible Indirect Cost amount that are not claimed on the federal share of direct charges can be claimed as un-reimbursed indirect charges, and that portion can be used towards meeting the recipient match.

NOTE: If indirect costs are to be included in the application, a copy of the approved indirect cost agreement must be included with the application. Further, if any sub-contractors or sub-awardees are requesting indirect costs, copies of their indirect cost agreements must also be included with the application.

Line 6k - **Total**: Enter the total amounts of Lines 6i and 6j.

Line 7- **Program Income**: As appropriate, include the estimated amount of income, if any, you expect to be generated from this project that you wish to designate as match (equal to the amount shown for Item 15(f) on Form 424). **Note**: Any program income indicated at the bottom of Section B and for item 15(f) on the face sheet of Form 424 will be included as part of non-federal match and will be subject to the rules for documenting completion of this pledge. If program income is expected, but is not needed to achieve matching funds, **do not** include that portion here or on Item 15(f) of the Form 424 face sheet. Any anticipated program income that will not be applied as Awardee match should be described in the Level of Effort section of the Program Narrative.

Section C - Non-Federal Resources

Line 12: Enter the amounts of non-federal resources that will be used in carrying out the proposed project, by source (applicant; state; other) and enter the total amount in Column (e). Keep in mind that if the match requirement is not met, federal dollars may be reduced.

Section D - Forecasted Cash Needs - Not applicable.

Section E - Budget Estimate of Federal Funds Needed for Balance of the Project

Line 20: Section E is relevant for multi-year grant applications, where the project period is 24 months or longer. This section does not apply to grant awards where the project period is less than 17 months.

Section F - Other Budget Information

Line 22 - Indirect Charges: Enter the type of indirect rate (provisional, predetermined, final or fixed) to be in effect during the funding period, the base to which the rate is applied, and the total indirect costs. Include a copy of your current Indirect Cost Rate Agreement.

Line 23 - Remarks: Provide any other comments deemed necessary.

c. Standard Form 424B - Assurances

This form contains assurances required of applicants under the discretionary funds programs administered by the Assistant Secretary for Preparedness and Response. Please note that a duly authorized representative of the applicant organization must certify that the organization is in compliance with these assurances.

d. Certification Regarding Lobbying

This form contains certifications that are required of the applicant organization regarding lobbying. Please note that a duly authorized representative of the applicant organization must attest to the applicant's compliance with these certifications.

Proof of Non-Profit Status

Non-profit applicants must submit proof of non-profit status. Any of the following constitutes acceptable proof of such status:

- A copy of a currently valid IRS tax exemption certificate.
- A statement from a state taxing body, State Attorney General, or other appropriate State official certifying that the applicant organization has a non-profit status and that none of the net earnings accrue to any private shareholders or individuals.
- A certified copy of the organization's certificate of incorporation or similar document that clearly establishes non-profit status.

Indirect Cost Agreement

Applicants that have included indirect costs in their budgets must include a copy of the current indirect cost rate agreement approved by the HHS or another Federal

agency. This is optional for applicants that have not included indirect costs in their budgets.

Attachment B: Budget Narrative/Justification – Page 1 – Sample Format

The Budget Summary is used to determine reasonableness and allowability of costs for the project. All of the proposed costs listed, whether supported by federal funds or non-federal match, must be reasonable, necessary to accomplish project objectives, allowable in accordance with applicable federal cost principles, auditable, and incurred during the budget period.

Non-Federal Match:

Matching funds provide support for the purpose and goals of this proposal and enhance the federal budget request. Applicant is required to provide a detailed listing of all match used to meet the match requirement. In the narrative justification sections describe how the funds support the project and enhance the federal budget.

All funding used for match must be documented in the same manner as federal funds. All match funds must follow the same cost principles and regulations that are used for federal funds – to count as match you must be able to use federal funds to purchase the item.

An allowable project cost meets the following criteria:

- Necessary for the performance of the award.
- Allocable to the project.
- In conformance with any limitations or exclusions set forth in the federal cost principles applicable to the organization incurring the cost.
- Consistent with the recipient's regulations, policies, and procedures which are applied uniformly to both Federally-supported and other activities of the organization.
- Accorded consistent treatment as a direct or indirect cost.
- Determined in accordance with generally accepted accounting principles.
- Not included as a cost in any other Federally-supported award.

The following four tests are used in determining the allowability of costs:

- **Reasonableness (including necessity).** A cost is reasonable if it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost. The cost principles elaborate on this concept and address considerations such as whether the cost is of a type generally necessary for the organization's operations or the grant's performance, whether the recipient complied with its established organizational policies in incurring the cost or charge, and whether the individuals responsible for the expenditure acted with due prudence in carrying out their responsibilities to the federal government and the public at large, as well as to their organization.
- **Allocability.** A cost is allocable to a specific grant, function, department, or other component, known as a cost objective, if the goods or services involved are chargeable or assignable to that cost objective in accordance with the relative benefits received or other equitable

relationship. A cost is allocable if it is incurred solely to advance work under the grant; it benefits both the grant and other work of the organization, including other grant-supported projects or programs; or it is necessary to the overall operation of the organization and is deemed to be assignable, at least in part, to the grant.

- **Consistency.** Recipients must be consistent in assigning costs to cost objectives. Regulations regarding cost assignment must be consistent for all work of the organization under similar circumstances, regardless of the source of funding, to avoid duplicate charges.
- **Conformance.** Conformance with limitations and exclusions contained in the Terms and Conditions of award, including those in the cost principles, may vary by the type of activity, the type of recipient, and other characteristics of individual awards.

Budget Summary

(Only include section for Non-Federal Match if required by the application)

Section A – Personnel: An employee of the applying agency whose work is tied to the application. Proposed salaries must be reasonable. Compensation paid for employees must be reasonable and consistent with that paid for similar work within the applicant’s organization and similar positions in the industry.

Non-Federal Match: Separately list all personnel that will be working on the project and whose time and effort will be used to meet the non-federal match requirement. Personnel used as match must be documented through signed time cards and payroll documents. List the source of the match – e.g. state funds.

Table 1: Personnel

Position	Name	Annual Salary/Rate	Level of Effort	Federal Cost	Match
Project Director	Susan Jones	\$45,000/year	100%	\$45,000	
Project Coordinator	Brad Smith	\$42,000/year	50%	\$21,000	
			TOTAL	\$66,000	

NARRATIVE JUSTIFICATION: Enter a description of the personnel funds requested and how their use will support the purpose and goals of this proposal. Describe the role, responsibilities, and unique qualifications of each position.

B. Fringe Benefits - Fringe benefits may include contributions for items such as social security, employee insurance, and pension plans. Only those benefits not included in an organization's indirect cost pool may be shown as direct costs. If fringe benefits are not computed as a percentage of salary (e.g. 25%), list all components of the fringe benefits rate, for example:

Non-Federal Match: List for all personnel shown in table 1 under the match section. Match documentation includes payroll records and pay slips. List the source of the match – e.g. state funds.

Table 2: Fringe Benefits

Component	Rate	Wage	Federal Cost	Match
FICA	7.65%	66,000	\$5,049	
Insurance	5%	66,000	\$3,300	
		TOTAL	\$8,349	

NARRATIVE JUSTIFICATION: Enter a description of the fringe funds requested and how the rate was determined.

C. Travel - Federal funds requested for travel are for staff travel only (travel for consultants is listed in consultant category). Travel for other participants, committee members, etc. should be listed under the cost category “other”. Applicants are to use the lowest available commercial fares for coach or equivalent accommodations. Note that Applicants will be expected to follow federal travel policies found at <http://www.gsa.gov>.

Non-Federal Match: The travel costs must be documented through travel authorizations and paid vouchers. Local travel should be documented by miles traveled. List the source of the match – e.g. state funds.

Table 3: Travel

Purpose of Travel	Location	Item	Rate	Federal Cost	Match
Attend awardee meeting	Washington, DC	Air Fare	\$350 X 4 people	\$1,400	
		Per Diem	\$71/day X 4 days X 4 people	\$1,136	
		Airport Parking	\$10/day X 4 days	\$40	
		Airport Shuttle	\$28/RT X 4 people	\$112	
		Hotel	\$211/night X 3 nights X 4 people	\$2532	
		Subtotal			\$4,120
Local travel	Various	POV	.44/mile X 2,000 miles/year	\$880	
			TOTAL	\$5,000	

NARRATIVE JUSTIFICATION: Explain the purpose for all travel and how costs were determined. List any required travel, funds for local travel that are needed to attend local meetings, project activities, and training events. Local travel rate should be based on agency’s personally owned vehicle (POV) reimbursement rate, which should correspond with the GSA rate found at <http://www.gsa.gov>.

D. Equipment - Permanent equipment is defined as tangible nonexpendable personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more. If the applying agency defines “equipment” at a different rate, then follow the applying agency’s policy. In the case of vehicles, etc. applicant should justify purchase rather than rental. If equipment is used by several different projects, you may only charge a percentage of the costs for the purchase based on the amount of time, etc. that the equipment will be used for this grant program. Any purchased equipment must be inventoried according to the guidelines in the HHS Grants Policy Statement.

Non-Federal Match: Enter a description of the equipment match provided and how its use will support the purpose and goals of this proposal. Documentation of match should be in inventory and use records. List the source of the match – e.g. state funds.

Table 4: Equipment

Item(s)	Rate	Federal Cost	Match
Computer Work Station	\$5,500 X 2	\$11,000	
Computer	\$6,000 X .5FTE	\$3,000	
	TOTAL	\$ 14,000	

NARRATIVE JUSTIFICATION: Enter a description of the equipment and how its purchase will support the purpose and goals of this proposal.

E. Supplies - Materials costing less than \$5,000 per unit and often having one-time use, for example – general office supplies, postage, printers, etc.

Non-Federal Match: Please note that items such as computers, desks, and projection equipment may be counted as match only once throughout the life of the project. Documentation includes invoices and donation records. List the source of the match – e.g. state funds.

Table 5: Supplies

Item(s)	Rate	Federal Cost	Match
General Office Supplies	\$50/month X 4 FTE	\$200	
	TOTAL	\$200	

NARRATIVE JUSTIFICATION: Enter a description of the supplies requested and how their purchase will support the purpose and goals of this proposal. Rates for office supplies, etc. may be based on average monthly costs, FTE, etc.

F. Contracts and Consultants - An arrangement to carry out a portion of the programmatic effort by a third-party or for the acquisition of goods or services is allowed under the grant. Such arrangements

may be in the form of sub awards (grants) or contracts. A consultant is a non-employee retained to provide advice and expertise in a specific program area for a fee. List each contract, consultant or sub award separately and provide an itemization of the costs. If a contractor is to be determined, provide a best estimate as to costs for the goods or services to be purchased.

The awardee must establish written procurement policies and procedures that are consistently applied. All procurement transactions are required to be conducted in a manner to provide to the maximum extent practical, open and free competition. The awardee should be alert to organizational conflicts of interest as well as to noncompetitive practices among contractors that may restrict or eliminate competition or otherwise restrain trade.

Method of Selection: This will be sole source, competition, or grant.

Scope of Work: Provide a breakout of the goods and/or services being provided by the contractor. If personnel are being charged then should list name, position, hours and rate/hour. Goods will be listed at number of units and cost/unit. List method to be used for sub-recipient monitoring – site visit, semi-annual reports, etc. Documentation of monitoring should be kept with the contract/award file.

Non-Federal Match: Enter any contracts, etc. that are being used to meet this requirement. When making a contract, a portion may be “donated” to this project by the contracted organizations and should be so noted in the contractual agreement (e.g. media outlets may give one free ad for each purchased). If this arrangement has been reached, it should be noted in the justification section. Documentation includes copies of contractual agreements, payment and donation records.

Table 6: Contract/Sub award

Activity	Name	Method of Selection	Scope of Work	Federal Cost	Match
Public Information	WMTV	Sole source	Paid Ads 12/month X \$250/ad X 6 mo. Paid Ads 12/month X \$250/ad X 6 mo. Monitoring: semi-annual report	\$18,000	\$18,000
Mobil Medical Assets	To Be Determined	Competition	Medical supply inventory (\$1,600) Wheelchair bus conversions(6 X \$37,000) Monitoring: semi-annual report	\$223,600	
			TOTAL	\$ 241,600	\$18,000

NARRATIVE JUSTIFICATION: Provide information as to how the contracted services or goods will enhance the project goals and objectives. Provide sole source justification.

Table 7: Consultant

Organization	Name	Number of Days	Rates	Federal Cost	Match
Trepid	Jon Smith	20	\$150/day Travel 4 trips X 1,204 (travel @ \$475; lodging @ \$175/night X 3; Per Diem @ \$51 x4) = \$4,816	\$ 7,816	
			TOTAL	\$ 7,816	

NARRATIVE JUSTIFICATION: Provide information as to how the consultant services or goods will enhance the project goals and objectives.

G. Other - Expenses not covered in any of the previous budget categories. If rent is requested (direct or indirect), provide the name of the owner(s) of the space/facility. If anyone related to the project owns the building which is less than an arm’s length arrangement, provide cost of ownership/use allowance calculations.

Non-Federal Match: Break down costs into cost/unit (cost/square foot) and explain the use of each item requested. Documentation includes donation, usage, transaction and/or payment records. List the source of match funds – e.g. state funds.

Table 8: Other

Item	Rate	Federal Cost	Match
Postage	\$65/mo. X 4 FTE	\$3,120	
	TOTAL	\$3,120	

NARRATIVE JUSTIFICATION: Explain the need for each item and how it will support the purpose and goals of this proposal. Break down costs into cost/unit (cost/square foot or cost/month or cost/FTE).

H. Indirect Costs:

Also known as “facilities and administrative costs”, indirect costs are costs that cannot be specifically identified with a particular project, program, or activity, but are necessary to the operation of the organization (e.g., overhead). Facilities operation and maintenance costs, depreciation, and administrative expenses are examples of costs that are usually treated as indirect costs. The organization must not include costs associated with its indirect rate as direct costs. If indirect costs are

claimed, applicant is to submit a copy of a current negotiated indirect cost rate agreement. Indirect costs are only charged on the items cited in the indirect cost rate agreement (e.g. personnel and fringe, subawards over \$25,000).

Non-Federal Match: Unclaimed indirect costs for costs incurred by using the federal funds may be used to meet the match requirement. Indirect costs may be charged on the appropriate costs listed in the match categories that are provided by the applicant agency. Documentation should be included in the accounting records of the applicant agency.

Table 9: Indirect costs

Total Direct Cost applied to Indirect Cost	Indirect Cost Rate	Federal Cost	Match
\$450,000	22%	\$99,000	
	TOTAL	\$99,000	

Attachment C: Project Work Plan, Page 1 - Sample Template

Goal:
Measurable Outcome(s):

* **Time Frame** (Start/End Dates by Month in Project Cycle)

Major Objectives	Key Tasks	Lead Person	1*	2*	3*	4*	5*	6*	7*	8*	9*	10*	11*	12*
1.														

Add as many pages as needed

Attachment D: Instructions for Completing the Project Summary/Abstract

- All applications for grant funding must include a Summary/Abstract that concisely describes the proposed project. It should be written for the general public.
- To ensure uniformity, please limit the length to no more than 265 words on a single page with a font size of not less than 11, doubled-spaced.
- The abstract must include the project's goal(s), objectives, overall approach (including target population and significant partnerships), anticipated outcomes, products, and duration. The following are very simple descriptions of these terms, and a sample Compendium abstract.

Goal(s) – broad, overall purpose, usually in a mission statement, e.g. what you want to do, where you want to be

Objective(s) – narrow, more specific, identifiable or measurable steps toward a goal. Part of the planning process or sequence (the “how”). Specific performances that will result in the attainment of a goal.

Outcomes – measurable results of a project. The positive benefits or negative changes, or measurable characteristics that occur as a result of an organization's or program's activities. (outcomes are the end-point).

Products – materials, deliverables.

- A model abstract/summary is provided below:

The awardee, Okoboji University, supports this three year Dementia Disease demonstration (DD) project in collaboration with the local Alzheimer's Association and related Dementias groups. The **goal** of the project is to provide comprehensive, coordinated care to individuals with memory concerns and to their caregivers. The approach is to expand the services and to integrate the bio-psycho-social aspects of care. The **objectives** are: 1) to provide dementia specific care, e.g., care management fully integrated into the services provided; 2) to train staff, students and volunteers; 3) to establish a system infrastructure to support services to individuals with early stage dementia and to their caregivers; 4) to develop linkages with community agencies; 5) to expand the assessment and intervention services; 6) to evaluate the impact of the added services; 7) to disseminate project information. The expected **outcomes** of this project are: 1) patients will maintain as high a level of mental function and physical functions (thru Yoga) as possible; 2) caregivers will increase ability to cope with changes; and 3) pre and post – project patient evaluation will reflect positive results from expanded and integrated services. The **products** from this project are: 1) a final report, including evaluation results; 2) a website; articles for publication; 3) data on driver assessment and 4) in-home cognitive retraining; abstracts for national conferences.

Attachment E: Sample Questions for Evaluation Plan

Ebola Planning

1. Which priorities did the awardee fund to improve its healthcare systems? (select all that apply)
 - Purchase recommended Personal Protective Equipment (PPE)
 - Training on donning and doffing of PPE
 - Infection control surveillance to assure appropriate infection control practices
 - Purchase Point of Care (POC) laboratory equipment and supplies
 - Retrofit facilities to promote appropriate layout/infection control including ante room, POC laboratory, dedicated treatment rooms
 - Emergency Medical Services (EMS) transport from triage facilities to higher level of care
 - Provide dedicated staffing, including but not limited to nurses, physicians, laboratory staff, and dedicated PPE monitors
 - Conduct proper waste management and disposal
 - Conduct environmental clean-up
 - Acquire general medical supplies

2. Were Ebola preparedness plans developed or modified as a result of the priorities addressed using these funds? (Y/ N)

3. Were Ebola preparedness plans tested as a result of the priorities addressed using these funds? (Y/ N)

4. How will Ebola preparedness plans be tested as a result of the priorities addressed using these funds??
 - Tabletop Exercise <NUMBER>
 - Functional Exercise <NUMBER>
 - Full Scale Exercise: <NUMBER>
 - Drills <NUMBER>
 - Real Event Please describe _____ <NUMBER>

5. What actions have been taken to improve Ebola preparedness plans based on testing described above as a result of the priorities addressed using these funds??
<NARRATIVE>

Facility Impact

1. Were there improvements or modifications implemented within the hospital as a result of this funding for environmental enhancements (e.g. proper waste management and disposal, and clean-up)? (Y/N)
2. Please describe the improvements or modifications implemented within the hospital as a result of this funding for environmental enhancements (e.g. proper waste management and disposal, and clean-up). <NARRATIVE>

3. Were there improvements or modifications implemented within the hospital as a result of this funding for Infection control surveillance to assure appropriate infection control practices? (Y/N)
4. Please describe the improvements or modifications implemented within the hospital as a result of this funding for Infection control surveillance to assure appropriate infection control practices. <NARRATIVE>
5. Were there improvements or modifications implemented within the hospital as a result of this funding for Point of Care (POC) laboratory equipment and supplies to enhance laboratory testing procedures? (Y/N)
6. Please describe the improvements or modifications implemented within the hospital as a result of this funding for Point of Care (POC) laboratory equipment and supplies to enhance laboratory testing procedures. <NARRATIVE>
7. Has there been an increased ability in your hospital to evaluate and care for patients with infectious diseases like EVD as a result of the priorities addressed with this funding? (Y/N)
8. In what ways has your hospital's ability to evaluate and care for patients with infectious diseases like EVD increased as a result of the priorities addresses with this funding? <NARRATIVE>

Personnel Impact

1. Were there improvements or modifications implemented within the hospital as a result of this funding for Personal Protection Equipment (PPE) and systems to enhance the safety of healthcare personnel? (Y/N)
2. Please describe the improvements or modifications implemented within the hospital as a result of this funding for Personal Protection Equipment (PPE) and systems to enhance the safety of healthcare personnel. <NARRATIVE>
3. Were there PPE related trainings that were conducted for healthcare personnel as a result of this funding for Personal Protection Equipment (PPE) and systems to enhance the safety of healthcare personnel? (Y/N)
4. Please describe the PPE related trainings that were conducted for healthcare personnel as a result of this funding for Personal Protection Equipment (PPE) and systems to enhance the safety of healthcare personnel (including number of staff trained). <NARRATIVE>
5. Has there been an increased ability in the hospital personnel to manage and treat patients with infectious disease like EVD as a result of the priorities addressed in this funding? (Y/N)

6. In what ways has the ability of hospital personnel to manage and treat patients with infectious diseases like EVD increased as a result of priorities addressed in this funding? <NARRATIVE>

EMS

1. Were there improvements or modifications implemented within the Emergency Medical Services (EMS) transport system as a result of this funding? (Y/N)
2. Please describe the improvements or modifications implemented within the Emergency Medical Services (EMS) transport system as a result of the priorities addressed in this funding. <NARRATIVE>
3. Has there been an increased ability in the Emergency Medical Services (EMS) transport system to handle patients with infectious disease like EVD as a result of the priorities addressed in this funding? (Y/N)
4. In what ways has the ability of the Emergency Medical Services (EMS) transport system improved to handle patients with infectious diseases like EVD as a result of priorities addressed in this funding? <NARRATIVE>