Cooperative Agreement for Emergency Response:

Public Health Crisis Response

CDC-RFA-TP18-1802



AGENDA

Grant Overview

Grant Administration

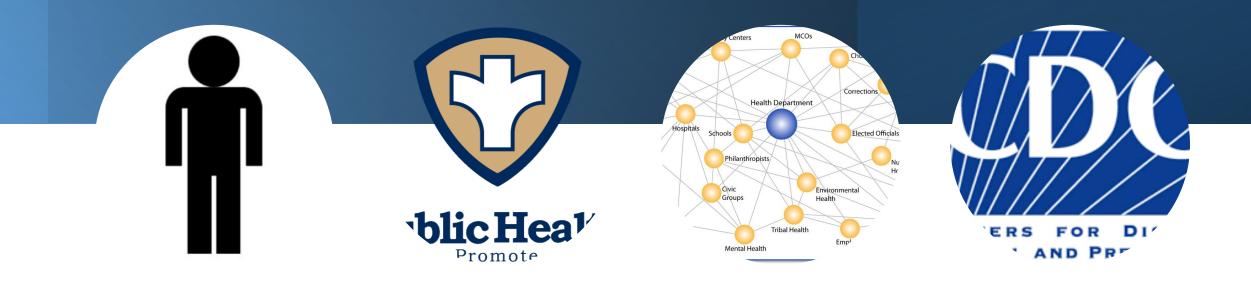
Open Discussion





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Nursing Grant Part I Grant Overview



MAJOR GOALS

- Expand Public Health Departments with Additional Staff to Support COVID-19
- Dedicated Funding to Hire School Nurses (school-based medical personnel)
- Development of Public Health Leaders
- Creation of Public Heath AmeriCorps (federal)
- Expand CDC Epidemic Intelligence Service (EIS)
- Expand, train and modernize future public health workforce through a new grant program



Amount

- Nationally \$7.4B/\$2B to STLT Texas (State) - \$157M Texas (City of Houston) - \$16M Distribution
- 25% School Nurse (\$39M)
- 75% Remaining
 - 40% to LHD/Community (\$47M)
 - 60% open (\$71M)

Grant Period

Two-year period: Jul 2021 – Jun 2023

(In notice: "Efforts are underway, subject to availability of funds to develop solutions that allow for a more sustained workforce. Details will be provided when available.)

Terms & Conditions

(General related to any grant associated with COVID from Feds)

- 1) Comply with existing and/or future directives and guidance from HHS Secretary
- 2) Provide individual COVID-19 patient care regardless of external constraints
- 3) Assist USG in implementation and enforcement of federal orders related to Q & I
- 4) Comply with COVID-19 test reporting
- 5) Provide CDC data or access to data collected through use of these funds
- 6) Distribute and administer vaccine as per fed guidelines
- 7) Concurrence among state health official, preparedness, lab and epi programs



Funding Focus

The <u>primary</u> funding focus is for LEAs to do the following:

- Recruit, hire, and train school nurses (school-based medical personnel/services/supports).
- Types of Personnel Allowed:
 - Permanent full-time and part-time staff (which may include converting part-time positions to full-time positions during the performance period)
 - Temporary or term-limited staff
 - Fellows
 - Interns
 - Contractors or contracted employees



Allowable Costs

The costs, including wages and benefits, related to recruiting, hiring, and training of individuals to serve as:

- <u>Professional or clinical staff</u>, including public health physicians and nurses (other than school-based staff); mental or behavioral health specialists to support workforce and community resilience; social service specialists; vaccinators; or laboratory scientists or technicians;
- <u>Disease investigation staff</u>, including epidemiologists; case investigators; contact tracers; or disease intervention specialists;
- School nurses and school-based health services personnel, including hiring school-based nurses, converting current nurses from part-time to full-time work, increasing hours, increasing nursing salaries or otherwise supporting retention efforts;
- Program staff, including program managers; communications and policy staff; logisticians; planning and exercise specialists; program evaluators; pandemic preparedness and response coordinators to support the current pandemic response and identify lessons learned to help prepare for possible future disease outbreaks; health equity officers or teams; data managers, including informaticians, data scientists, or data entry personnel; translation services; trainers or health educators; or other community health workers;
- Administrative staff, including human resources personnel; fiscal or grant managers; clerical staff; staff to track and report on hiring under this cooperative agreement; or others needed to ensure rapid hiring and procurement of goods and services and other administrative services associated with successfully managing multiple federal funding streams for the COVID-19 response; and
- <u>Any other positions as may be required to prevent, prepare for, and respond to COVID-19</u>



• <u>Equipment, supplies and administrative services to support public</u> <u>health workforce expansion</u>

Allowable Activities

 Forming partnerships with academic institutions, creating student internship or fellowship opportunities, and building graduation-to-workforce pipelines and establishing partnerships with schools of public health, technical and administrative schools, and social services and social science programs;

• Using funds to conduct a workforce analysis to determine whether health departments were organized to maximum benefit for the COVID-19 response and how they may want to be reconstituted to prepare for future emergencies.

• **Training and education for new and existing staff on** topics such as incident management training; health equity issues and working with underserved populations; cultural competency; disease investigations; informatics or data management; or other needs identified by the jurisdiction.

• **Developing, training, and equipping response-ready "strike force" teams capable** of deploying rapidly to meet emergent needs, including <u>through the Emergency Management Assistance</u> <u>Compact</u>.

 Ensuring a focus on diversity, health equity, and inclusion by delineating goals for hiring and training a diverse work force across all levels who are representative of, and have language competence for, the local communities they serve. <u>CDC's Social Vulnerability Index should be used</u> to inform jurisdictional activities, strategies, and hiring.

• Ensuring the systematic collection of information about the activities, characteristics, and outcomes of programs, including COVID-19 pandemic response efforts, to inform current program decisions, improve program effectiveness, and make decisions about future program development.

• Addressing community recovery and resilience needs to respond effectively to the COVID-19 pandemic **and other biologic threats** including vaccine-related education.



Measures and Metrics • Progress toward meeting hiring goals including types of staff hired and the general roles they hold. Recipients must report these data for all staff, including those hired by subrecipients.

 Recipients should develop approximate goals and metrics regarding <u>diversity of staff hired and equity and inclusion</u> <u>activities</u>, and report on their progress against those measures.

Metrics/Reporting Requirements: (Mid Sept)

- Financial expenditures (quarterly reporting) Mid-Sept
- Number and type of staff hired (bi-annually)
- Diversity metrics of staff hired (bi-annually)
- Equity and inclusion activities (bi-annually)
- Equipment purchased (bi-annually)
- Trainings conducted (bi-annually)



Recap/Next Steps

Step 1: Determine if your ESC Regions Wants to Express Interest (Completed)

- Send an email notification to Matt Simcock indicating your interest or non-interest in the Nursing Grant funds no later than <u>Monday, June 28 at 10:00 am.</u>
- 19 out of 20 ESC Regions expressed interest!!!

Step 2: ESC Recipients Allocation Letter Distribution (Completed)

 All ESC regions that indicate an interest will receive their official award notification by Wednesday, July 7.

Step 3: Nursing Grant Application Posted/Goes Live on TEA's Website

- ESC grant recipients are required to apply through TEA to receive their funding allocation. The following components will be included in the grant application:
 - Work plan
 - A detailed budget
 - Proposed metrics related to staff hired and equity and inclusion activities
- The application will be posted by the <u>beginning of August.</u> **
- The application window will remain open for 2-3 weeks.
- Prior to the application window opening and throughout the window, TEA will be available to provide support.**

Step 4: Ongoing Reporting Requirements throughout the Grant Period

- ESC grant recipients will be required to submit reports regularly to TEA during the grant period
 - Recipients will submit progress updates and fiscal reports quarterly & bi-annually
- Additional details regarding the reporting requirements will be included in the Grant Application. We will make it as simple and similar to previous grant application processes possible.
 - Pre-award*

Public Health

Next Steps

Immediate Next Steps for ESC Regions:

- Convene with your ESC Regional staff to determine:
 - General strategy/approach*
 - Allocation of Funds
 - Communication Strategy with LEAs



Summary



