Emergency Medical Services for Children State Partnership

Funding Opportunity Number: *HRSA-23-063*

Funding Opportunity Type(s): Competing Continuation, New

Assistance Listings Number: 93.127

Frequently Asked Questions (FAQ)

1. Will the EMSC State Partnership grant be funded at a total of $205,000 for successful applicants and going forward?

HRSA will award up to $205,000 per award subject to the availability of appropriated funds. HRSA estimates approximately $12,095,000 to be available annually to fund 59 recipients. The actual amount available will not be determined until enactment of the final FY 2023 federal appropriation. You may apply for a ceiling amount of up to $205,000 total cost (includes both direct and indirect, facilities and administrative costs) per year. This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and award funds appropriately.

2. There used to be specific entities that we were requested to obtain a letter from. Is that no longer the case?

No, the NOFO did not require Letters of Support from any specific entity. The NOFO does however recommend that EMSC SP Programs facilitate and convene an EMSC Advisory Committee with the required core members and encouraged the inclusion of an MCH Title V representative on the Advisory Committee. Letters of Support from these individuals would help to demonstrate coordination across the state. They would also help to demonstrate prioritization and advancement of family partnership and leadership in efforts to improve EMSC systems of care. Letters of support must be dated and specifically indicate a commitment to the project/program (in-kind services, dollars, staff, space, equipment, etc.).

3. Would the organizations that serve on our State EMSC Advisory Board be expected to provide a letter of support (i.e. ACEP, AAP, ENA reps)?

It would be helpful but the NOFO did not require.

4. **Do the grant application Letters of Support get addressed to a specific person in HRSA/ EMSC or to me as the SP Project Director?**

   They may be addressed to the applicant agreeing to support the activities proposed in the project or to the HRSA project officer listed on the Notice of Funding Opportunity, along with their commitment to support the project and or the activities proposed within the project.

5. **How often should I update my System for Award Management (SAM) record?**

   You must update your registration in the System of Award Management (SAM.gov) ***every year***. Your renewal can take ***five days or longer.***

6. **Should we be writing SMARTIE goals on the four "categories" of the NOFO or on the Performance Measures?**

   Applicants should be writing SMARTIE goals that address the 4 objective of the NOFO.

7. **Is target column 5 on page 3 in the NOFO refer to the end of the award period?**

   Yes, the target column 5 on page 3 in the NOFO refers to the end of the performance period.

8. **The new NOFO refers to pediatric skills-check in program objective 5. The former EMSC PM3 included direct observation in the field. Does the new measure focus on skills and scenarios?**

   The measure is still consistent with EMSC PM3.

9. **Does the Advisory Committee need to be assembled before the grant application is submitted?**

   No. New applicants will have a grace period to create a committee.

10. Is it allowable to have 2 people/positions = the one FT project manager?

It is intended to be one individual FTE per the NOFO.

11. Can the full time EMSC manager be funded by different sources or does this position need to be fully funded by EMSC?

The manager position can be funded by any number of ways. It does not have to be fully funded by EMSC.

12. Will advisory committee be required to meet in person at least once a year like previous cycles?

If applicants are able to meet in person once a year that is great, but it is not a requirement. They can meet virtually. The EMSC Advisory Committee with the required core members should convene at least four times each grant year.

13. What is the status of EMSC PM 09 - regulation/ codification? And will there be a new Implementation Manual coming with the new priorities?

EMSC is currently working on an updated Implementation Manual that will be released in the near future. Updated Details: The Discretionary Grant Information System and the forms for EMSC state partnership programs to report on performance measures, to include EMSC PM09 may be found in the NOFO which included this link to the full OMB-approved reporting package. The forms can be found here: https://mchb.hrsa.gov/data-research-epidemiology/discretionary-grant-data-collection. Scroll down to "Where can I access DGIS forms?" Then click on this link https://mchb.hrsa.gov/sites/default/files/mchb/data-research/dgis-dcafh-emsc-measures.pdf

14. Are the 4 budgets to be attached to the application, or are they to be submitted electronically through the SF-424a?

This will be an attachment to the SF-424a. Please review the entire SF424 Application Guide. You (the applicant organization/agency) are responsible for reading and complying with the instructions included in this NOFO and in **HRSA's SF-424 Application Guide**. Visit HRSA's How to Prepare Your Application page for more information.

15. Can you please share where we can find the OMB approved Abstract Summary form.

It is in the workspace. When you go to complete the application there is an abstract form there, it is not counted towards the page limit. Please review the workspace application package for HRSA-23-063.

16. In the past, there has been an established limit to indirect costs (26%), is there a way to get that verbiage reinstated into the NOFO? It is extraordinarily help at academic institutions where they can mandate up to 52.5% in indirect costs. That significantly impacts a budget, especially if full-time staff salaries and 10% PI efforts are required.

SF 424 guide explains what is considered an indirect cost. We have worked with applicants to explain to the academic institution that the university high indirect cost rate is not applicable to this grant type since it is a non-research program. Please contact the Grants Management Specialist for additional guidance regarding the indirect cost rate.

17. Will office hours be available? Will there be in person EDC workshops?

No, in lieu of office hours, we put together a toolkit that is on the EIIC website for assistance. However, if applicants would benefit from office hours, HRSA is open to doing that. Please contact Jocelyn Hulbert if interested.

18. Any chance you could give an example of what is considered, "Other Project Activities?"

Other activities are those that do not directly drive improvements related to the goals and objectives of the NOFO. However, as explained in the NOFO, they must be activities that expand and improvement emergency medical services for children.

19. Are FANs included in "key personnel" for Attachment 3?

No FANSs are not included as key personnel.

20. A unique letter of support from everyone on advisory committee would use a lot of pages - can we include collective letter vs. some, and state others available on request?

That would be acceptable. Please refer to Q.2 in this document.

21. With regard to the budget amount, for the initial submission, should we aim for the $205K and have a backup plan for a $130K award

Budget for the $205,000 ceiling. Should the Program not be able to fully fund the grant awards as requested, there will be time given to revise the budget and scope of work to the adjusted amount.

22. What percent is the university sponsored indirect cost rate?

That is negotiated by the university itself but it can go up to 52%. Those applying from an academic institution can get language from Grants Management that states the policy regarding indirect cost rate percentages. Please reach out to Jocelyn Hulbert to request this language.