MEMORANDUM

TO: Joint Fiscal Committee Members

FROM: Maria Belliveau, Associate Fiscal Officer

DATE: July 24, 2015

SUBJECT: JFO #2773 – Request from the Department of Health to approve a grant from the U.S. Department of Health and Human Services and to approve the authorization of one new limited service position

The Joint Fiscal Committee has been sent a request from the Department of Health to approve the acceptance of a grant from the U.S. Department of Health and Human Services, Assistant Secretary for Preparedness and Response, to develop a regional approach to caring for Ebola patients. The grant funds total $871,285 over a five year period. This request is to approve $340,024 of the federal funds in state fiscal year 2016 and the establishment of one new limited service position, Public Health Programs Administrator. The grant funds will be used in fiscal year 2016 to support the Administrator position and to establish sub-grant awards to hospitals in order to develop and implement the health care system concept of operations for Ebola care. The funds for subsequent years will be included in the department’s future budget requests.

The requested new position, Public Health Programs Administrator, will provide grant management to the new Health Care System Ebola Preparedness program. This is part of the State’s effort to develop and sustain systems for the management of emerging and re-emerging infectious diseases by building capacity among its public health and health care systems. The funding for the second year of the Administrator position, including travel and related supplies, will be supported by the federal Hospital preparedness Program grant.

Please review the enclosed materials and notify the Joint Fiscal Office (Maria Belliveau at (802) 828-5971; mbelliveau@leg.state.vt.us) if you have questions or would like this item held for legislative review. Unless you respond to the contrary by August 7, 2015 it will be assumed that you agree to consider as final the Governor’s acceptance of this request.

C.c. Harry Chen, Commissioner, Vermont Department of Health
Paul Daley, Business Manager, Vermont Department of Health
Molly Paulger, Director of Classification, Vermont Department of Human Resources
STATE OF VERMONT
FINANCE & MANAGEMENT GRANT REVIEW FORM

Grant Summary: Updating the Concept of Operations and provision of technical assistance, EMS readiness via training/exercises, Personal Protective Equipment maintained across Vermont, establishment of a system to achieve situational awareness, and participating in regional referral planning for placement of cases at designated Ebola Virus Disease Treatment Centers. Sub-grants to hospitals to develop and implement the health care system concept of operations for Ebola Care.

Date: July 14, 2015

Department: Department of Health

Legal Title of Grant: Health Care Systems EVD Preparedness & Response

Federal Catalog #: 93.817

Grant/Donor Name and Address: Department of Health and Human Services, ASPR/BARDA/AMS Office of Contracts and Grants, 295 E. Street, SW, Washington DC 20201

Grant Period: From: 05/18/2015 To: 05/17/2020

Grant/Donation

<table>
<thead>
<tr>
<th>SFY 1</th>
<th>SFY 2</th>
<th>SFY 3</th>
<th>Total</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>$340,024</td>
<td>$145,147</td>
<td>$128,705</td>
<td>$613,876</td>
<td>Grant will be expended in year 4 and 5.</td>
</tr>
</tbody>
</table>

# Positions | Explanation/Comments
1 | Position will manage grant and assist with the development of related all-hazard and specific-hazard plans, support the development and delivery of training and exercises and conducts assessment of Health Care Coalitions members.

Additional Comments:

Department of Finance & Management
Secretary of Administration
Sent To Joint Fiscal Office
MEMORANDUM

To:      Sarah Clark, AHS CFO
From:    Paul Daley, Financial Director
Re:      Grant Acceptance of the Hospital Preparedness Ebola Program grant
Date:    6/9/15

The Department of Health has received a grant from the United States Department of Health & Human Services, Assistant Secretary for Preparedness & Response, providing $871,285 for 5 years to enable the Department to develop a regional approach to caring for future Ebola patients.

We are requesting approval to receive these funds and are enclosing: the Grant Acceptance Request (AA1) and attached summary, a copy of the grant award document, a copy of the grant application, a Position Request Form for one Public Health Programs Administrator, and the RFR for the limited service position.

After review by your office, and approval by the Secretary of Human Services, this package should be forwarded in its entirety to Molly Paulger at DHR.

We appreciate your support in moving this request forward. Please let me know if you have questions or need additional information. Thank you.

CC: Aditeei Lagu, HR Manager
The Department of Health has received a grant from the Department of Health & Human Services, Assistant Secretary for Preparedness & Response, providing $871,285 for 5 years to enable the Department to develop a regional approach to caring for future Ebola patients.

This funding will support projects to achieve and sustain public health and health care system preparedness, planning, and operational readiness for responding to Ebola Virus Disease (EVD). The approach is to support and enhance ongoing maintenance of effort related to EVD on the part of the Health Care Coalition, inclusive of the acute care hospitals, and the State's single designated Assessment Hospital (the University of Vermont Medical Center) via technical assistance and multi-year sub-awardee funding.

Efforts will be directed towards: 1) development and subsequent updating of the Concept of Operations and provision of technical assistance; 2) ensuring emergency department and EMS readiness via training/exercises; 3) ensuring adequate Personal Protective Equipment (PPE) levels are maintained across responding sectors; 4) establish a system to achieve situational awareness on current EVD-related PPE availability statewide; and 5) participating in the regional referral planning for placement of cases at a designated EVD Treatment Center. Sub-awardee funding made to the Assessment Hospital and applicable members of the Health Care Coalition will blend goals, objectives, and performance-oriented deliverables for both EVD and the core Hospital Preparedness Program.

The funds will be used primarily to establish sub-grant awards to hospitals to develop and implement the health care system concept of operations for Ebola care. We anticipate issuing five-year awards to thirteen hospitals with a reimbursement schedule based on deliverables and reporting. A Public Health Programs Administrator will also be established to direct program initiatives. Funding for a second year of expenditures for the Administrator will be supported by the federal Hospital Preparedness Program grant. Travel & supply expenditures will also be funded.

The Health Department is hereby seeking approval to receive $340,024 in new Federal funds in State Fiscal Year 2016 and the establishment of one limited service position. The remainder of the Federal funding will be included in the Department's future budget requests. We have attached the grant award document and a copy of the grant application as well as the Position Request Form.
STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE  (Form AA-1)

BASIC GRANT INFORMATION

1. Agency: Agency of Human Services
2. Department: Health
3. Program: Emergency Preparedness
4. Legal Title of Grant: Health Care Systems EVD Preparedness & Response Activities
5. Federal Catalog #: 93.817

6. Grant/Donor Name and Address:
Department of Health & Human Services, Assistant Secretary for Preparedness & Response


8. Purpose of Grant:
See attached summary.

9. Impact on existing program if grant is not Accepted:
None

10. BUDGET INFORMATION

<table>
<thead>
<tr>
<th>Expenditures</th>
<th>SFY 1 FY 16</th>
<th>SFY 2 FY 17</th>
<th>SFY 3 FY 18</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Services</td>
<td>$79,214</td>
<td>$15,842</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>Operating Expenses</td>
<td>$3,400</td>
<td>$600</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>Grants</td>
<td>$257,410</td>
<td>$128,705</td>
<td>$128,705</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>$340,024</td>
<td>$145,147</td>
<td>$128,705</td>
<td></td>
</tr>
</tbody>
</table>

| Revenues:             |             |             |             |          |
| State Funds:          | $0          | $0          | $0          |          |
| Cash                  | $0          | $0          | $0          |          |
| In-Kind               | $0          | $0          | $0          |          |
| Federal Funds:        | $340,024    | $145,147    | $128,705    |          |
| (Direct Costs)        | $316,260    | $140,394    | $128,705    |          |
| (Statewide Indirect)  | $1,426      | $285        | $0          |          |
| (Departmental Indirect)| $22,338       | $4,468      | $0          |          |
| Other Funds:          | $0          | $0          | $0          |          |
| Grant (source)        | $0          | $0          | $0          |          |
| Total                 | $340,024    | $145,147    | $128,705    |          |

Appropriation No: 3420010000 Amount: $11,169
Appropriation No: 3420020000 Amount: $328,855
Appropriation No: Amount: $  
Appropriation No: Amount: $  
Appropriation No: Amount: $  
Total $340,024

Has current fiscal year budget detail been entered into Vantage? □ Yes □ No

Department of Finance & Management
Version 1.7_6/19/2013

JUL - 2 2015
STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE  (Form AA-1)

PERSONAL SERVICE INFORMATION

11. Will monies from this grant be used to fund one or more Personal Service Contracts? □ Yes □ No
If "Yes", appointing authority must initial here to indicate intent to follow current competitive bidding process/policy.

Appointing Authority Name: ________________________________
Agreed by: ______________________ (initial)

12. Limited Service Position Information: # Positions | Title
---|---
1 | Public Health Programs Administrator AC:General

Total Positions 1

12a. Equipment and space for these positions: □ Is presently available. □ Can be obtained with available funds.

13. AUTHORIZATION AGENCY/DEPARTMENT

I/we certify that no funds beyond basic application preparation and filing costs have been expended or committed in anticipation of Joint Fiscal Committee approval of this grant, unless previous notification was made on Form AA-1PN (if applicable):

Signature: ________________________________
Title: Commissioner Dept. of Health
Date: 6/10/2015

Signature: ________________________________
Title: Deputy Secretary
Date: 6/24/15

14. SECRETARY OF ADMINISTRATION

Approved: ________________________________
Secretary or designee (signature)
Date: 7/15/15

15. ACTION BY GOVERNOR

Check One Box:

☑ Accepted

☐ Rejected

(Governor's signature) 7/28/15

16. DOCUMENTATION REQUIRED

Required GRANT Documentation

☐ Request Memo
☐ Dept. project approval (if applicable)
☐ Notice of Award
☐ Grant Agreement
☐ Grant Budget

☐ Notice of Donation (if any)
☐ Grant (Project) Timeline (if applicable)
☐ Request for Extension (if applicable)
☐ Form AA-1PN attached (if applicable)

End Form AA-1

(*) The term "grant" refers to any grant, gift, loan, or any sum of money or thing of value to be accepted by any agency, department, commission, board, or other part of state government (see 32 V.S.A. §5).
STATE OF VERMONT
Joint Fiscal Committee Review
Limited Service - Grant Funded
Position Request Form

This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: AHS / Health
Date: 6/9/15

Name and Phone (of the person completing this request): Paul Daley, 802-863-7284

Request is for:
☑ Positions funded and attached to a new grant.
☐ Positions funded and attached to an existing grant approved by JFO #

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):
   Department of Health & Human Services, Assistant Secretary for Preparedness & Response; Health Care System EVD Preparedness & Response Activities in the State of Vermont; grant # U3REP150493-01.

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:

<table>
<thead>
<tr>
<th>Title* of Position(s) Requested</th>
<th># of Positions</th>
<th>Division/Program</th>
<th>Grant Funding Period/Anticipated End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Health Programs Admin- 1</td>
<td>1</td>
<td>Emergency Preparedness</td>
<td>5/18/2015 - 6/30/2017</td>
</tr>
<tr>
<td>istrator AC:General</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:
   This position will provide grant management to the new Health Care System Ebola Preparedness funding as described in the budget justification submitted as part of the federal application and approved by the granting Agency.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32 VSA Sec. 5(b)).

Signature of Agency or Department Head

Date

Approved/Denied by Department of Human Resources
Date

Approved/Denied by Finance and Management
Date

Approved/Denied by Secretary of Administration
Date

Comments:

JUL - 2 2015
Request for Classification Action
New or Vacant Positions
EXISTING Job Class/Title ONLY
Position Description Form C/Notice of Action
For Department of Personnel Use Only

<table>
<thead>
<tr>
<th>Notice of Action #</th>
<th>Date Received (Stamp)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action Taken:</td>
<td></td>
</tr>
<tr>
<td>New Job Title</td>
<td></td>
</tr>
<tr>
<td>Current Class Code</td>
<td>New Class Code</td>
</tr>
<tr>
<td>Current Pay Grade</td>
<td>New Pay Grade</td>
</tr>
<tr>
<td>Current Mgt Level</td>
<td>B/U OT Cat. EEO Cat.</td>
</tr>
<tr>
<td>New Mgt Level</td>
<td>B/U OT Cat. EEO Cat.</td>
</tr>
<tr>
<td>Classification Analyst</td>
<td>Date processed</td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
</tr>
<tr>
<td>Willis Rating/Components:</td>
<td>Knowledge &amp; Skills:</td>
</tr>
<tr>
<td></td>
<td>Working Conditions:</td>
</tr>
</tbody>
</table>

Position Information:

Incumbent: Vacant or New Position

Position Number:   Current Job/Class Title: Public Health Programs Administrator AC: General
Agency/Department/Unit: AHS/VDH/OPHP & EMS GUC: 74201
Pay Group: 24 Work Station: Burlington Zip Code: 05401
Position Type:  Permanent  Limited Service (end date) 6/30/17
Funding Source:  Core  Sponsored  Partnership. For Partnership positions provide the funding breakdown (% General Fund, % Federal, etc.) 100% Federal
Supervisor's Name, Title and Phone Number: Chris Bell, DEPRIP Division Director, 802-863-7230

Check the type of request (new or vacant position) and complete the appropriate section.

☒ New Position(s):
  
  a. REQUIRED: Allocation requested: Existing Class Code 444900 Existing Job/Class Title: Public Health Programs Administrator AC: General

  b. Position authorized by:
This form is to be used by management to request the allocation of a new position, or reallocation of a vacant position, to an EXISTING class title.

- Employee requests must be submitted on the separate "Position Description Form A."
- Requests for full classification, to determine the appropriate pay grade for any job class must be submitted on "Position Description Form A."
- This form was designed in Microsoft Word to download and complete on your computer. This is a form-protected document, so information can only be entered in the shaded areas of the form.
- To move from field to field use your mouse, the arrow keys or press Tab. Each form field has a limited number of characters. Use your mouse or the spacebar to mark and unmark a checkbox.
- Where additional space is needed to respond to a question, you will need to attach a separate page, and number the responses to correspond with the numbers of the questions on the form. Please contact your Personnel Officer if you have difficulty completing the form.
- All sections of this form are required to be completed unless otherwise stated.
- The form must be complete, including required attachments and signatures or it will be returned to the department's personnel office.
1. List the anticipated job duties and expectations; include all major job duties: Planning, administrative, grants management and policy development work at a professional level for the Department of Health (VDH) involving programs for emergency, hospital and general health care preparedness. Duties include administering federal grants; planning and implementation with internal and external partners; and participating in large scale emergency response scenarios. Extensive interaction is required with Federal officials, VDH leadership and program staff, community partners and other state agencies. Develops, writes, and administers Request for Classification Action Position Description Form C.

2. Provide a brief justification/explanation of this request: New funding from CDC and ASPR along with increased workload for emergency planning, training, and exercising departmental, agency, and community partners.

3. If the position will be supervisory, please list the names and titles of all classified employees reporting to this position (this information should be identified on the organizational chart as well). None

Personnel Administrator's Section:
4. If the requested class title is part of a job series or career ladder, will the position be recruited at different levels? Yes □ No □

5. The name and title of the person who completed this form: 

6. Who should be contacted if there are questions about this position (provide name and phone number): 

7. How many other positions are allocated to the requested class title in the department: 

8. Will this change (new position added/change to vacant position) affect other positions within the organization? (For example, will this have an impact on the supervisor's management level designation; will duties be shifted within the unit requiring review of other positions; or are there other issues relevant to the classification process.) 

Attachments:

☒ Organizational charts are required and must indicate where the position reports.
☐ Class specification (optional).
☒ For new positions, include copies of the language authorizing the position, or any other information that would help us better understand the program, the need for the position, etc.
☐ Other supporting documentation such as memos regarding department reorganization, or further explanation regarding the need to reallocate a vacancy (if appropriate).

[Signatures and dates]

Personnel Administrator's Signature (required)* 
[Signature] 
4/3/15 
Date

Supervisor's Signature (required)* 
[Signature] 
4/3/15 
Date

Appointing Authority or Authorized Representative Signature (required)* 
[Signature] 
APR 06 2015 
Date

* Note: Attach additional information or comments if appropriate.
NOTICE OF AWARD

DATE ISSUED: 05/19/2015

DEPARTMENT OF HEALTH AND HUMAN SERVICES
ASSISTANT SECRETARY FOR PREPAREDNESS & RESPONSE
ASPR/BARDA/AMS Office of Contracts and Grants
395 E Street, SW
Washington, DC 20201

AUTHORIZATION (Legislation/Regulations)

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)

1. DATE ISSUED: MM/DD/YYYY
   05/19/2015
2. CFDA NO.: 93.817
3. ASSISTANCE TYPE: Cooperative Agreement

4. GRANT NO.: 1 U3REP150493-01-00

5. ACTION TYPE: New

6. PROJECT PERIOD: MM/DD/YYYY
   From: 05/18/2015
   Through: 05/17/2020

7. BUDGET PERIOD: MM/DD/YYYY
   From: 05/18/2015
   Through: 05/17/2020

8. TITLE OF PROJECT (OR PROGRAM):
   Health Care System EVD Preparedness and Response Activities in the State of Vermont

9a. GRANTEE NAME AND ADDRESS:
   Vermont Agency of Human Services
   108 Cherry St
   Burlington, VT 05401-4295

9b. GRANTEE PROJECT DIRECTOR:
   Mr. Chris Bell
   108 Cherry Street
   Burlington, VT 05402-0070
   Phone: 802-863-7223

10a. GRANTEE AUTHORIZING OFFICIAL:
   Mr. Paul Daley
   108 Cherry Street
   PO Box 70
   Burlington, VT 05402-0070
   Phone: 802-862-7284

10b. FEDERAL PROJECT OFFICER:
   Ms. Patricia A Pettis
   200 Independence Ave., S.W.
   Room 638-G
   null
   Washington, DC 20201-null
   Phone: 617-599-2623

11. APPROVED BUDGET (Exclude Direct Assistance)
   I Financial Assistance from the Federal Awarding Agency Only
   II Total project costs including grant funds and all other financial participation
   a. Amount of Federal Financial Assistance (from Item Ia) 871,285.00
   b. Less Unobligated Balance From Prior Budget Periods 0.00
   c. Less Cumulative Prior Award(s) This Budget Period 0.00
   d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 871,285.00

12. AWARD COMPUTATION
   a. Total Federal Funds Awarded to Date for Project Period 871,285.00

13. RECOMMENDED FUTURE SUPPORT
   (Subject to the availability of funds and satisfactory progress of the project):
   YEAR TOTAL DIRECT COSTS
   a. 2
   b. 3
   c. 4
   d. 5
   e. 6
   f. 7
   g. 8
   h. 9
   i. 10
   j. 11
   k. 12

14. INDIRECT COSTS
   28,517.00

15. TOTAL APPROVED BUDGET
   871,285.00

16. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:
   a. DEDUCTION
   b. ADDITIONAL COSTS
   c. MATCHING
   d. RESEARCH (Subtract Option)
   e. OTHER RESEARCH (Add / Deduct Option)
   f. OTHER

17. GRANTS MANAGEMENT OFFICER:
   Brenda Cox, Grants Management Officer

18. VENDOR CODE:
   1036000274B8

19. EIN:
   036000264

DUNS:
   009376155

CONG. DIST.:
   00

FY-ACCOUNT NO. DOCUMENT NO. AMT ACTION FIN ASST APPROPRIATION
   21 a. 5-1990501
   b. U3REP0493A
   c. NOS07
   d. $871,285.00
   e. 75-1315-0140
   f. 842,768.00
   g. 28,517.00
   h. 871,285.00
   i. 871,285.00
   j. 871,285.00
   k. 871,285.00
   l. 871,285.00
   m. 871,285.00
   n. 0.00

REMARKS (Other Terms and Conditions Attached): Yes

GRANTS MANAGEMENT OFFICER: Brenda Cox, Grants Management Officer

19. DUNS:
   809376155

20. CONG. DIST.:
   00
Part A Work Plan
Hospital Preparedness Program (HPP) Ebola Preparedness and Response Activities (CFDA #93.817)

State and Federal partners, shall sustain and improve upon its existing configuration and infrastructure to ensure safe, efficient care is available to EVD cases.

End: BP5

Proposed Outputs Associated to Outcomes (250-character limit each; please add rows as needed)
1 Competency-based training materials are available to Assessment Hospital and HCC members.
2 AARs are submitted/tracked for annual exercises on specified EVD themes.
3 Inventory of PPE cache. This is coordinated between the State, Assessment Hospital and HCC members along with a system for shared visibility of resources.
4 Results of the Federal evaluation of the Assessment Hospital used to drive refinements of plans/policies procedures and state CONOPS.
5 Updated plan for all aspects of EVD case management at Assessment Hospital
   o Please indicate approximate year 1 grant expenditures on strategies under Recipient Activity B:
      o Strategy 1 Activities: $70,000.
      o Strategy 2 Activities: $30,000.

Ebola Treatment Center and/or Assessment Hospital Information:
List/describe by Ebola Treatment Center (see Ebola FOA Appendix 3) or Assessment, 1. Hospital Name, 2. Planned or Retroactive Work (short descriptive narrative), and 3. Estimated Funding Allocation amounts (add rows as needed).

<table>
<thead>
<tr>
<th>Ebola Treatment Center: Hospital Name/s</th>
<th>Planned or Retroactive Work (short descriptive narrative; include time period)</th>
<th>Est. Funding Allocation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td>$0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Assessment: Hospital Name/s</th>
<th>Planned or Retroactive Work (short descriptive narrative; include time period)</th>
<th>Est. Funding Allocation</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Vermont Medical Center</td>
<td>All funding will be applied to the additional work ahead (as described above): planning/training/exercising to sustain capabilities/capacities achieved during earlier phases, including ongoing refinement to systems/practices via above activities.</td>
<td>$100,000.</td>
</tr>
</tbody>
</table>

Recipient Activity C: Develop Capabilities of Health Care Coalitions to enable their members to care for Ebola patients. Describe activities stratified by and commensurate with details provided under the following 2 strategies:

"Strategy 1: Ensure all coalition partners have access to PPE, trainings, and exercises according to their respective role in the health care system."

"Strategy 2: Ensure that EMS and interfacility transport systems and 9-1-1/Public Safety Answering Points are included in Ebola coalition planning."
Part A Work Plan
Hospital Preparedness Program (HPP) Ebola Preparedness and Response Activities (CFDA #93.817)

“Strategy 3: Integrate health care system preparedness and infection control through health care coalition engagement with State Healthcare-Associated Infection (HAI)/Infection Control advisory groups, established with funding and guidance from CDC’s Epidemiology and Laboratory Capacity for Infection Control (ELS) program and to consider how a regional emergency preparedness structure could support improved infection control for coalition members.”

<table>
<thead>
<tr>
<th>Recipient Activity C Problem Statement (Please limit to 500 characters)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The State of Vermont is seeking to develop and sustain robust systems for the management of emerging/re-emerging infectious diseases, including Ebola Virus Disease (EVD), by building capacity among its public health and healthcare systems. As a largely rural state with a centralized, state-led public health system, and a proportionally small healthcare system, the Healthcare Coalition plays a large role ensuring interoperability and alignment with the state’s CONOPS. Challenges include funding and sustained motivation among stakeholders to achieve targeted levels of readiness.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Recipient Activity C Baseline Capacity (Please limit to 500 characters)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Based on work in the last quarter of 2014, the single HCC has been provided with EVD-specific guidance and a tabletop exercise template and have been instructed to practice their procedures for receiving a patient via walk-in and local EMS. In addition, all VT EMS ambulance agencies were provided with multiple sets of PPE consistent with CDC guidance as well as protocols, checklists, and all related documents. EMS agencies have been instructed that all ambulance services must be prepared to transport a patient with suspected Ebola to their local Emergency Department. The interfacility ambulance services affiliated with the two Assessment Hospital’s servicing VT will be performing the transport to either UVMMC or DHMC from home or other location for any person under active monitoring that develops indicators of EVD as well as any subsequent transfer to a regional ETC.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outcomes (Please limit to 500 characters)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The HCC members demonstrate their ability to provide no-notice care to patients while ensuring worker safety and health and in alignment with the State’s CONOPS. The EMS system is capable of safely transporting EVD and other potentially infectious patients according to the CONOPS. Policies/plans/procedures are evaluated annually based on exercise performance across all HCC members.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Planned Activities for Outcomes (250-character limit each; please add rows as needed)</th>
<th>Estimated Timeframe</th>
</tr>
</thead>
</table>
| Strategy 1 Activities: Develop and coordinate a mandatory system for the tracking/visibility of EVD-related PPE across all HCC member hospitals as a part of HPP sub-awardee grants. | Start: upon Award  
End: end of BP1 |
| Strategy 1 Activities: Develop and disseminate competency-based training materials related to worker health and safety in the context of EVD patient care and related protocols, specifically including the proper donning/doffing of PPE. | Start: upon Award  
End: annually through BP5 |
| Strategy 1 Activities: Coordinate/require annual EVD-focused exercising involving HCC members via HPP sub-awardee grant. (BP2-5 may involve alternate pathogens) | Start: upon Award  
End: by end of BP1 |
| Strategy 1 Activities: Develop and disseminate a just-in-time training package for use at the Assessment Hospital should there be a need for regional EVD surge. | Start: upon Award  
End: by end of BP1 |
| Strategy 2 Activities: Sustain EMS readiness via periodic replenishment of PPE stocks, annual exercising opportunities with HCC members and mandatory bi-annual PPE refresher training (now required as part of licensure renewal). | Start: upon award  
End: annually through BP5 |
| Strategy 3 Activities: Assure alignment between HCC and State HAI and ELC programming/strategies via annual HPP sub-awardee workplans. | Start: upon award  
End: annually through BP5 |
**Part A Work Plan**

**Hospital Preparedness Program (HPP) Ebola Preparedness and Response Activities (CFDA #93.817)**

**Funding Opportunity Announcement (FOA) Number: EP-U3R-15-002**

**Proposed Outputs Associated to Outcomes (250-character limit each; please add rows as needed)**

<table>
<thead>
<tr>
<th>Proposed Outputs</th>
<th>Limit Each</th>
<th>Please Add Rows As Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 PPE visibility/tracking system with statewide access by HCC members and State.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Competency-based training materials are available to Assessment Hospital and HCC members</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Exercises related to EVD readiness conducted annually by HCC members.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Just in time training materials for EVD surge/regional assistance available to Assessment Hospital.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Please indicate approximate year 1 grant expenditures on strategies under Recipient Activity C:
  - Strategy 1 Activities: $20,000.00
  - Strategy 2 Activities: $10,000.00
  - Strategy 3 Activities: $5,000.00

**Healthcare Coalition Information:**

List 1. Funded Healthcare Coalitions by name, and describe 2. Planned or Retroactive Work (descriptive narrative should include time period), and 3. Estimated Funding Allocation amounts.

<table>
<thead>
<tr>
<th>Healthcare Coalition Names</th>
<th>Planned or Retroactive Work (short descriptive narrative; include time period)</th>
<th>Est. Funding Allocation</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of VT Medical Center</td>
<td>Serve as State's designated Assessment Hospital and build/sustain all related capabilities. Conduct training, exercises, and participate in PPE reporting system.</td>
<td>$384,918</td>
</tr>
<tr>
<td>Brattleboro Memorial Hospital</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$28,195</td>
</tr>
<tr>
<td>Central VT Medical Center</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$62,326</td>
</tr>
<tr>
<td>Copley Hospital</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$15,582</td>
</tr>
<tr>
<td>Gifford Medical Center</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$6,678</td>
</tr>
<tr>
<td>Grace Cottage Hospital</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$5,194</td>
</tr>
<tr>
<td>Mt. Ascutney Hospital and Health Center</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$11,130</td>
</tr>
<tr>
<td>North Country Hospital</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$18,549</td>
</tr>
<tr>
<td>Northeastern VT Regional Hospital</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$17,065</td>
</tr>
<tr>
<td>Northwestern VT Medical Center</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$51,938</td>
</tr>
<tr>
<td>Porter Medical Center</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$18,549</td>
</tr>
<tr>
<td>Rutland Regional Medical Center</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$92,747</td>
</tr>
<tr>
<td>Southwestern VT Medical Center</td>
<td>Conduct training/exercises and participate in PPE reporting system.</td>
<td>$59,358</td>
</tr>
</tbody>
</table>
Part A Work Plan
Hospital Preparedness Program (HPP) Ebola Preparedness and Response Activities (CFDA #93.817)

Administrative Preparedness Plan Execution

Consistent with Vermont's current HPP-PHEP Administrative Preparedness Plan, VDH has expedited procedures for receiving emergency funds, expedited processes for contracting and procurement, and mechanisms in place for rapid hiring and/or reassignment of staff. VDH has term contracts for medical supplies and cooperative purchasing agreements for all available contracting vehicles. The State maintains procurement card programs which include a streamlined and simplified purchasing and payment process, the ability to set and control dollar limits, and the ability to control specific merchant categories and vendors. Finally, the governor has statutory authority to declare emergencies and issue emergency orders that suspend State and local regulatory and administrative requirements. VDH has other authority/authorities to implement expedited procedures without an official emergency declaration.

Technical Assistance Required

We would be interested in receiving the latest guidance/recommendations/training.resources related to PPE.

Performance Measurement & Evaluation Strategy

As with all Health Department programs (see below), Division of Emergency Preparedness, Response, and Injury Prevention staff will collect and monitor the HPP Ebola preparedness and response activities outlined above with the to-be-released ASPR-defined performance measures as well as any additional measures useful to program management and accountability. All sub-grants will include performance
measures aligned with statewide measures and outcomes and grantees will be required to report at a minimum annually. The PPE reporting system created as part of this work will be an additional important data source.

In 2010, the Health Department was awarded a National Public Health Improvement Initiative cooperative agreement from the Centers for Disease Control and Prevention. This grant accelerated a movement already underway to increase performance accountability in Vermont. As of 2015, the Health Department has become a leader within state government in the implementation of performance management. Currently, the Health Department performance management framework is integrated with the State Health Assessment, State Health Improvement Plan, outcomes-based legislation (Act 186), and core departmental operations. It functions at the program, organization, and system level to ensure the Health Department is using performance data to improve the public’s health. This work is overseen by the Performance Improvement Manager and the cross-divisional Performance Management Committee.

As part of a larger performance management framework, the Healthy Vermonters 2020 performance management system brings together population health data at statewide and local levels as well as program performance data. Vermont’s online performance management system was noted as an Area of Excellence by the PHAB Accreditation Committee. The novel Healthy Vermonters 2020 performance management system utilizes two web-based software solutions to support transparent, accessible, data-driven decision making. This publicly available system holds the Health Department accountable for its strategies to improve health outcomes (http://healthvermont.gov/hv2020/). The comprehensive system is built around Healthy People 2020 topic areas and creates a results-oriented frame for public health work. Composed of thematic Scorecards to track performance and geographically-focused Maps and Trends reports, the system utilizes Results Scorecard and InstantAtlas software. Each component displays 121
Part A Work Plan
Hospital Preparedness Program (HPP) Ebola Preparedness and Response Activities (CFDA #93.817)

Healthy Vermonters indicators – the measures of population health status that constitute State Health Assessment priorities. The Scorecard components also display program performance measures to help staff track how well their work contributes to those population indicators. To facilitate local-level decision making, the Maps & Trends pages disaggregate the indicators into three relevant regional geographies.

The Healthy Vermonters 2020 performance management system is used to promote accessible data display, consistent and responsive systems, accreditation readiness, transparency, and responsiveness to Community Health Needs Assessment (CHNA) requirements. The system supports accountability by directly linking population health status and ongoing health department work. Linking the outcomes to work, regardless of program title or funding, helps support transparency and understanding in stakeholders inside and outside of government. Using this, managers provide narrative context for population indicators and program performance measures that includes interpretation of the data, lists partners, cites evidence-based strategies, creates action plans, and links to additional resources. Key stakeholders and audiences for this system include division directors and Commissioners within the Health Department, sister departments within the Agency of Human Services, and state legislators. Providing this across priority health topics in a consistent, data-centric platform is a meaningful and comprehensive way to incorporate performance measurement and evaluation into all grant-related activities.
### A. Salaries and Wages $47,528

1 FTE Public Health Programs Administrator for grant management & coordination

<table>
<thead>
<tr>
<th>Position Title</th>
<th>Annual Time</th>
<th>Months</th>
<th>Amount Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Health Programs Administrator AC: General</td>
<td>$47,528 100%</td>
<td>12 months</td>
<td>$47,528</td>
</tr>
</tbody>
</table>

**Job Title:** Public Health Programs Administrator AC: General

**Personnel Justification:**
Disaster and all-hazards planning w/ Health Care Coalition (HCC) members with a focus on maintenance of readiness for EVD/other emerging and re-emerging infectious disease threats. Position also assists with the development of related all-hazard and specific-hazard plans, supports the development and delivery of training and exercises and conducts assessments of HCC members as part of furnishing technical assistance.

### B. Fringe Benefits $19,011

40% of Total salaries = Fringe Benefits

Calculated at 40% of the personnel line: $47,528 x .40 = $19,011

Fringe benefits include FICA, retirement, and employer portions of medical, dental and life insurance.

### C. Consultant Costs

### D. Equipment

### E. Supplies $2,000

Laptop, docking station and software supplies for PH Programs Administrator AC: General

**Supplies Justification**
Laptop, docking station and software supplies for PH Programs Administrator AC: General; Laptop (1@$1,500), PC/monitor setup (1@$500)
F. **Travel (in-State and out-of-State)**

   In-State Travel: PH Programs Administrator working with HCC and Hospitals

   \[
   \text{1 staff} \times 25 \text{ trips} \times 100 \text{ miles average r/t} \times 0.5 = \$1,250 \\
   \text{Lodging: } \$125/\text{day} \times 1 \text{ day/trip} \times 6 \text{ trips} = \$750 \\
   \text{Total} = \$2,000
   \]

   **In State Travel Justification:**

   Participation in planning meetings, trainings and exercises related to emerging/re-emerging infectious disease preparedness both in VT and within HHS Region I.

G. **Other**

   Health Care Coalition sub-grants

   - University of VT Medical Center $384,918
   - Brattleboro Memorial Hospital $28,195
   - Central VT Medical Center $62,326
   - Copley Hospital $15,592
   - Gifford Medical Center $6,678
   - Grace Cottage Hospital $5,194
   - Mt. Ascutney Hospital and Health Center $11,130
   - North Country Hospital $18,549
   - Northeastern VT Regional Hospital $17,065
   - Northwestern VT Medical Center $51,938
   - Porter medical Center $18,549
   - Rutland Regional Medical Center $92,747
   - Southwestern VT Medical Center $59,358

   **Other Justification:**

   Funds will be allocated via integrated performance-management contracting that blends/aligns with annual HPP allocations to participating hospitals, with an aim of ensuring all-hazards and EVD specific readiness according to HPP capabilities, formalized systems of care/point of entry plans and best practices.

H. **Contractual Costs**
I. Total Direct Costs

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>$47,528</td>
</tr>
<tr>
<td>Fringe</td>
<td>$19,011</td>
</tr>
<tr>
<td>Travel</td>
<td>$2,000</td>
</tr>
<tr>
<td>Equipment</td>
<td>$0</td>
</tr>
<tr>
<td>Other</td>
<td>$772,229</td>
</tr>
<tr>
<td>Contractual</td>
<td>$0</td>
</tr>
<tr>
<td>Supplies</td>
<td>$2,000</td>
</tr>
</tbody>
</table>

Total $842,768

J. Indirect Cost

$28,517

The rate is 60% and is computed on the following direct Personnel cost base of $47,528.

Total $47,528 \times 60\% = $28,517 Total Indirect Costs

The Vermont Department of Health uses a Cost Allocation Plan, not an indirect rate. The Vermont Department of Health is a department of the Vermont Agency of Human Services, a public assistance agency, which uses a Cost Allocation Plan in lieu of an indirect rate agreement as authorized by OMB Circular A-87, Attachment D. This Cost Allocation Plan was approved by the US Department of Health and Human Services effective October 1, 1987. A copy of the most recent approval letter is listed in the attachments. The Cost Allocation Plan summarizes actual, allowable costs incurred in the operation of the program. These costs include items which are often shown as direct costs, such as telephone and general office supply expenses, as well as items which are often included in an indirect rate, such as the cost of office space and administrative salaries. These costs are allocated to the program based on the salaries and wages paid in the program. Because these are actual costs, unlike an Indirect Cost Rate, the ratio of allocated costs to salary will vary from quarter to quarter and cannot be fixed as a rate. Based on costs allocated to similar programs during recent quarters, we would currently estimate these allocated costs at 60% of the direct salary line item.