



Rural Health Clinic Vaccine Confidence Program

Funding Opportunity Number: HRSA-21-142

June 2, 2021

Lindsey Nienstedt Public Health Analyst Federal Office of Rural Health Policy (FORHP) Nancy Gaines Lead Grants Management Specialist HRSA Office of Federal Assistance Management

Vision: Healthy Communities, Healthy People



Notice of Funding Opportunity available through <u>Grants.gov</u> Instructions included in HRSA's <u>SF-424 Application Guide</u>

- Zoom Webinar Link: <u>https://hrsa-gov.zoomgov.com/j/1604108840</u>
- Call-In Number: 833 568 8864
- Webinar/Participant ID: 160 410 8840
- Accessing recorded session:
 - ✓ Available on the <u>Rural Health Clinic Vaccine Confidence (RHCVC)</u>
 <u>Program</u> webpage and linked in the <u>NOFO</u>.
- Questions



✓ Use of Q&A feature



Agenda

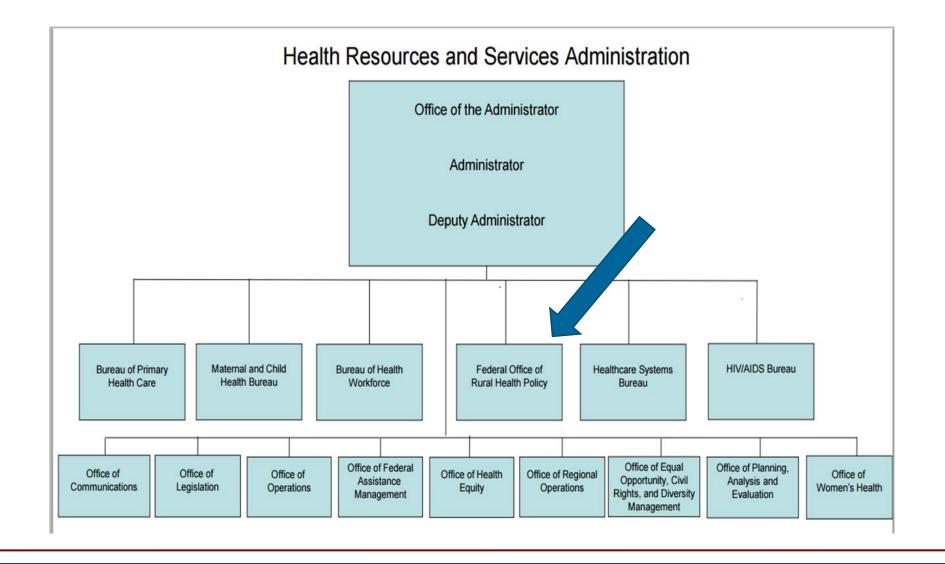
- Federal Office of Rural Health Policy (FORHP)
- Navigating Grants.gov
- <u>Notice of Funding Opportunity</u> (NOFO)
- Award Information
- Application & Submission Information
- Award Administration Information
- How to Apply
- Q&A







Federal Office of Rural Health Policy (FORHP)



U.S. Department of Health & Human Services HIRSA Federal Office of Rural Health Policy



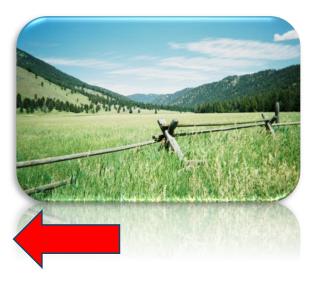
Policy Research Division

Community-Based Division

- Pilot Programs for Rural Communities
 - Expanding the Community Health Gateway
- Public Health Programs
 - Black Lung and Radiation Exposure

Policy Research Division

- Policy and Regulatory Analysis
- Research
- RHC COVID-19 Response
 Programs



Rural Strategic Initiatives Division

- Rural Communities Opioid Response
 Program
- Rural Tribal COVID-19 Response Program

Hospital-State Division

- Grants Focusing on Performance and Quality Improvement for Small Rural Hospitals
- State Offices of Rural Health

Office for the Advancement of Telehealth

- Telehealth Network Grants
- Telehealth Resource Centers
- Licensure and Portability





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Navigating Grants.gov Step 1

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Navigating Grants.gov Step 2

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Navigating Grants.gov Step 3

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Navigating Grants.gov

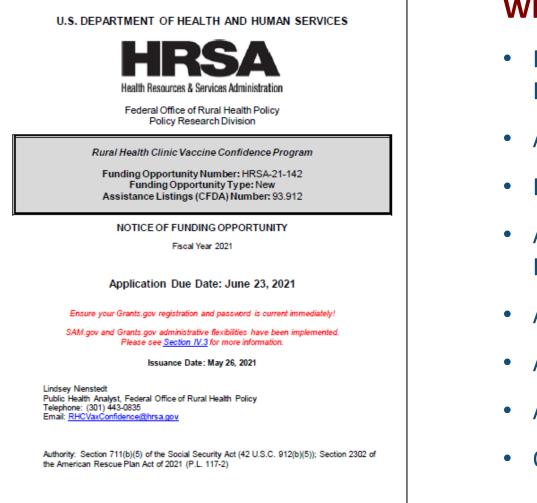
Step 4

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Notice of Funding Opportunity



What's Inside?

- Program Funding Opportunity
 Description
- Award Information
- Eligibility Information
- Application and Submission Information
- Application Review Information
- Award Administration Information
- Agency Contacts
- Other Information





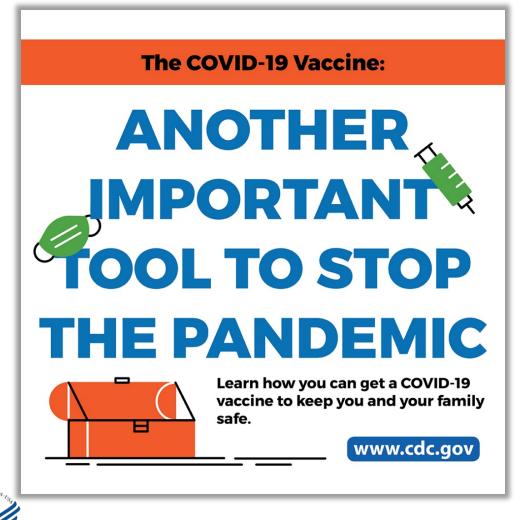
Notice of Funding Opportunity Summary

- Notice of Funding Opportunity available through <u>Grants.gov</u>
- SF-424 Application Guide
- Award Amount: Anticipated \$50,000 for one year per RHC.
- HRSA will award grants to all eligible RHCs that submit an acceptable and fundable application.
- Application Due: June 23, 2021
- Program Start Date: July 1, 2021
- Program End Date: June 30, 2022
- One Year
- Application Length Suggestion: 10-15 pages
 - The application must include the project abstract, project and budget narratives, and attachments.
 - You may submit applications fewer than 10 pages and greater than 15 pages so long as the requested information is included and is relevant to this funding opportunity.





Program Funding Opportunity Description Purpose



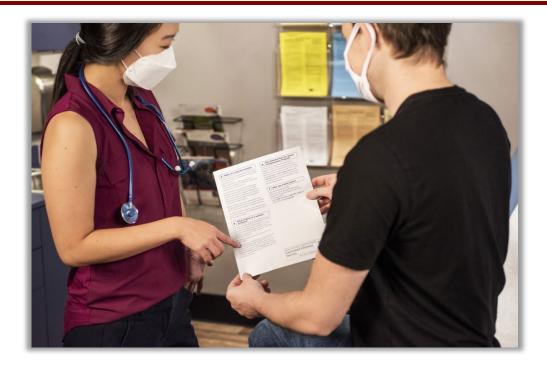
Purpose of the Funding Opportunity

- Fund ALL eligible RHC applicants to address gaps in the COVID-19 vaccination rate by offering support and resources.
- Improve vaccine confidence and counter vaccine hesitancy in rural communities.
- Fund a broad range of efforts to improve health care in rural areas that reinforce basic messages about prevention and treatment of COVID-19 and other infectious diseases.



Award Information Type of Application and Award

- Type of Applications Sought
- New
- Type of Award
- Grant



A grant is a way the government funds your ideas and projects to provide public services and stimulate the economy. Grants support critical recovery initiatives, innovative research, and many other programs listed in the Catalog of Federal Domestic Assistance (CFDA).





Award Information Summary of Funding

- Estimated \$50,000 per RHC
- Award amounts may be higher or lower than \$50,000 per RHC depending on the number of RHCs that apply for the RHCVC Program. This is not guaranteed.
- Organizations that own and operate multiple RHCs may apply for up to \$50,000 per RHC. The organization should submit ONE application for all RHCs owned and operated under the EIN/TIN.
 - For example: An organization that owns and operates three RHCs can apply for a total of up to \$150,000 on one application.
 - Organizations may choose to distribute funds equally to RHC sites or pool funds to achieve program goals. HRSA will confirm applicant Employer Identification Number (EIN) and CCN to verify eligibility.
 - HRSA will use the number of verified CCNs included in your application to calculate the number of RHCs and the total award amount for your application.





- ALL Medicare-certified RHCs and organizations that own and operate Medicare-certified RHCs.
- Eligible applicants include public, nonprofit, or for-profit Medicare-certified RHCs or organizations that own public, nonprofit, or for-profit Medicare-certified RHCs.
- Organizations should apply using their EIN/TIN and include all RHC CCNs.
- A CCN may only be included on one application. If HRSA receives multiple applications that include the same CCN, HRSA may disqualify one or more applications as duplicates.





Eligibility Information Additional Considerations

Cost Sharing/Matching

Not required for this program

HRSA will not consider:

- Applications that do not meet the deadline: June 23 at 11:59 PM.
- Multiple applications from the same organization

HRSA will only accept your last validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application.







Application and Submission Information Requirements

Application Section	NOFO Info
1. Project Abstract	Page 5
 2. Project Narrative Methodology Work Plan Organizational Information 	Pages 5-6
3. Budget	Page 6-7
4. Budget Narrative	Page 7
5. Attachment	Pages 7-8
6. Application Components	Page 8

 Suggested application length: 10-15 pages

- What is most important is that you provide the information requested in the notice.
- You may submit applications fewer than 10 pages and greater than 15 pages so long as the requested information is included and is relevant to this funding opportunity.
- Remember to also refer to the <u>HRSA-SF-424 Application Guide</u> as referenced throughout the <u>NOFO</u>





Application and Submission Information Project Abstract

Purpose: Brief, high-level summary of who you are and what you propose to do.

Use the Standard OMB-approved Project Abstract Summary Form 2.0 included in the Grants.gov workspace application package. **Do not upload the abstract as an attachment.**

Include the following information in the Project Abstract Summary Form:

- Funding Opportunity Number: HRSA-21-142
- CFDA: 93.912
- Applicant Name: The name of the organization submitting this grant
- Descriptive Title: [RHC or Organization Name] Vaccine Confidence Project
- Project Abstract (a bulleted list is acceptable):
 - Name or Names of RHCs included in this application
 - Applicant organization website, if applicable
 - Brief description of your planned activities
 - Brief description of your project goal





Application and Submission Information Project Abstract Example

View Burden Statement

OMB Number: 4040-0019 Expiration Date: 02/28/2022

Project Abstract Summary

This Project Abstract Summary form must be submitted or the application will be considered incomplete. Ensure the Project Abstract field succinctly describes the project in plain language that the public can understand and use without the full proposal. Use 4,000 characters or less. Do not include personally identifiable, sensitive or proprietary information. Refer to Agency instructions for any additional Project Abstract field requirements. If the application is funded, your project abstract information (as submitted) will be made available to public websites and/or databases including USAspending.gov.

HRSA-21-142		
CFDA(s)		
93.912	93.912	
Applicant Name	JJ . JL	
[RHC or Organization Name Submittin	ng the Grant]	
Descriptive Title of Applicant's Project		
[RHC or Organization Name] Vaccine	Confidence Project	

Project Abstract

o [Name or Names of RHCs included in this application]

o [Applicant organisation website, if applicable]

o [Brief description of your planned activities] Activities include: vidisemination to rural residents about how and where to get vaccinated sites and public health partners to identify isolated and/or vaccine her community and individual patient literacy on benefits of broad faccinatiquickly allow for continued re-openings of businesses and a mools.

o [Brief description of your project goal]Help our RHC service area/rur; about their health and COVID-19, improve health care in rural areas, and prevention and treatment of COVID-19 and other infectious diseases.

Descriptive Title of Applicant's Project

[RHC or Organization Name] Vaccine Confidence Project

Project Abstract

- o [Name or Names of RHCs included in this application]
- o [Applicant organization website, if applicable]

o [Brief description of your planned activities] Activities include: vaccine promotion, information dissemination to rural residents about how and where to get vaccinated, coordinating with existing vaccination sites and public health partners to identify isolated and/or vaccine hesitate populations, and increased rural community and individual patient literacy on benefits of broad vaccination and the safety of vaccines to more quickly allow for continued re-openings of businesses and schools.

o [Brief description of your project goal]Help our RHC service area/rural communities make informed decisions about their health and COVID-19, improve health care in rural areas, and reinforce basic messages about prevention and treatment of COVID-19 and other infectious diseases.



Application and Submission Information Project Narrative (pg. 6-7)

- 1. Methodology
 - Provide a description of how you propose to increase vaccine confidence and vaccine accessibility for your community, RHC service area, and/or patient population.
- 2. Work Plan
 - See <u>Appendix A</u> for required work plan format and examples. You can tailor the suggested activities and approaches to fit your community and/or patient population. You can include additional activities not listed in these examples and you are not required to include all of the example activities.
- 3. Organizational Information
 - Provide information about the person who will be responsible for managing this award (Project Director). The person you identify will be the main point of contact with HRSA staff upon award. You must also include information to verify the eligibility of the RHC or RHCs included in this application in <u>Attachment 1</u>.





Application and Submission Information

Project Narrative Section 1: Methodology & Interest in Increased Funding (pg. 6)

- You are encouraged to use the same description language in the methodology section as used in the project abstract.
- If you are willing and able to accept increased funding above the \$50,000 per-RHC anticipated funding amount, you MUST include a statement at the beginning of your methodology section.
 - "[Your Organization Name] is willing and able to accept increased funding for the Rural Health Clinic Vaccine Confidence Program."
- Applications which lack this statement of interest in increased funding will receive \$50,000 per RHC and will not be considered for increased funding.
- Applications with the statement of interest do not need to include an increased funding amount.
- You are not at a competitive advantage or disadvantage if you choose to include the increased funding statement.





Application and Submission Information Methodology & Interest in Increased Funding Example

HEADER: METHODOLOGY

- [Your Organization Name] is willing and able to accept increased funding for the Rural Health Clinic Vaccine Confidence Program.
- [Your Organization Name] Vaccine Confidence Project planned activities include: vaccine promotion, information dissemination to rural residents about how and where to get vaccinated, coordinating with existing vaccination sites and public health partners to identify isolated and/or vaccine hesitate populations, and increased rural community and individual patient literacy on benefits of broad vaccination and the safety of vaccines to more quickly allow for continued re-openings of businesses and schools.
- [Your Organization Name] Vaccine Confidence Project goal is to help our RHC service area/rural communities make informed decisions about their health and COVID-19, improve health care in rural areas, and reinforce basic messages about prevention and treatment of COVID-19 and other infectious diseases.





Application and Submission Information

Project Narrative Section 2: Work Plan Format and Example (pg. 6-7; Appendix A)

HEADER: WORK PLAN

 See additional suggested vaccine confidence activities to include in your RHCVC work plan in Appendix A of the <u>NOFO</u>.

ACTIVITY	DESCRIPTION	TIMELINE
EMPOWER HEALTHCARE PERSONNEL	Promote vaccine confidence to RHC staff with listening sessions and regular communication	Ongoing basis, July - September
EMAIL DISTRIBUTION	Email mailing list and fundraising partners with vaccine availability and confidence messaging.	Monthly, July - December
ENGAGE LOCAL PARTNERS	Make vaccine confidence presentations at least twice a month to local partners including school board, city hall, PTA, and VFW.	Monthly, July - December
TRANSPORTATION TO PATIENT VACCINE APPOINTMENT	Set up a ride scheduling service to transport people to vaccination appointments. Set up a home visiting resource car that clinic staff can use to visit and vaccinate homebound patients.	As needed, July - December





Application and Submission Information

Project Narrative Section 3: Organizational Information (pg. 7; Attachment 1)

HEADER: ORGANIZATIONAL INFORMATION

- Provide information about the person who will be responsible for managing this award (Project Director). The person you identify will be the main point of contact with HRSA staff upon award. You must also include information to verify the eligibility of the RHC or RHCs included in this application in <u>Attachment 1</u>.
- Note: If the Project Director or other staff members paid through this award are also paid through other federal awards, the full-time equivalent (FTE) for those staff members may not exceed 1.0 FTE across all awards.





Application and Submission Information Proof of Eligibility Example (Attachment 1)

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Application and Submission Information Data Sources and Resources for your Application (pg. 17)

- Program Planning Data Sources
 - <u>Disparities in COVID-19 Vaccination Coverage</u>
 <u>Between Urban and Rural Counties United States,</u>
 <u>December 14, 2020 April 10, 2021 (CDC/MMWR,</u>
 May 2021)
 - <u>Vaccine Hesitancy for COVID-19: State, County, and</u> <u>Local Estimates</u> (HHS/ASPE April 2021)
- Other HHS-Funded COVID-19 Vaccine Outreach
 - We Can Do This, COVID-19 Public Education Campaign
 - We Can Do This, Rural Community Toolkit
 - Vaccinate with Confidence
 - CDC Photo Gallery (today's webinar pictures)







Application and Submission Information Budget (pg. 7)

- Assume that HRSA will fund awards at \$50,000 per RHC
- Organizations that own or operate multiple RHCs should submit their budget for the TOTAL amount.
 - For example: An organization that owns and operates three RHCs can apply for a total of up to \$150,000 on one application and should submit a budget for \$150,000.
- Follow the instructions in Section 4.1. iv. and v. of <u>HRSA SF-424 Application</u> <u>Guide</u> (pg. 18-31) for the budget and budget narrative (may differ from Grants.gov)
- Reminder:
 - Total Project or Program Costs are the total allowable costs incurred by the recipient to carry out HRSA-supported project
- Salary Limitations
 - Funds and program income generated by HRSA awards may not be used to pay salaries in excess of the salary rate limitation (\$199,300 in 2021).





Application and Submission Information Budget Narrative (pg. 7-8)

- Purpose
 - How you will use the funding over the 1-year period of performance (from July 1, 2021 to June 30, 2022)
 - Aligns with the needs and activities you identified in the Project Narrative portion of your application
- You may request reimbursement of allowable costs incurred retroactive to March 15, 2021.
- If you have received any other CARES Act or Paycheck Protection Program and Health Care Enhancement Act funding for COVID-19 response from HRSA or other federal sources, including Provider Relief Fund Payments and RHC COVID-19 Testing Program Payments, briefly explain how the work you will do with the RHCVC Program funding will supplement and align with (but not duplicate) those funded activities.





Application and Submission Information Budget Narrative (pg. 7-8, Appendix B)

- Required budget categories (as applicable) include:
 - Personnel
 - Fringe Benefits
 - Travel
 - Equipment (Note: You should classify items with a unit cost of \$5,000 or more and a useful life of 1 or more years as Equipment.)
 - Supplies (Note: You should classify items with a unit cost of less than \$5,000 per item as Supplies.)
 - Contractual
 - Other Direct Charges
 - Indirect Charges
- Budget narrative example can be found in Appendix B of the <u>NOFO</u>





Application and Submission Information

COVID-19 Rewards/Incentives

FAQs–Application of OIG's Administrative Enforcement Authorities to Arrangements Directly Connected to the Coronavirus Disease 2019 (COVID-19) Public Health Emergency

In the limited context of the COVID-19 public health emergency, a health care provider offering or providing a reward or incentive in connection with the beneficiary receiving the COVID-19 vaccine (either one or both doses) would be sufficiently low risk under the Federal anti-kickback statute and Beneficiary Inducements CMP if the following safeguards were met:

- 1. the incentive or reward is furnished in connection with receiving a required dose of a COVID-19 vaccine (which could include either one or two doses, depending on vaccine type);
- 2. the vaccine is authorized or approved by the Food and Drug Administration as a COVID-19 vaccine and is administered in accordance with all other applicable Federal and State rules and regulations and the conditions for the provider or supplier receiving vaccine supply from the Federal government;
- 3. the incentive or reward is not tied to or contingent upon any other arrangement or agreement between the entity offering the incentive or reward and the Federal health care program beneficiary;
- 4. the incentive or reward is not conditioned on the recipient's past or anticipated future use of other items or services that are reimbursable, in whole or in part, by Federal health care programs;
- 5. the incentive or reward is offered without taking into account the insurance coverage of the patient (or lack of insurance coverage) unless the incentive or reward is being offered by a managed care organization and eligibility is limited to its enrollees;
- 6. the incentive or reward is provided during the COVID-19 public health emergency.

All HRSA awards are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements at <u>45 CFR part 75</u>.





Application and Submission Information Funding Restrictions (pg. 11-12)

- You may request funding for a period of performance of one year. HRSA anticipates that RHCVC awards will be approximately \$50,000 per RHC per year (inclusive of direct and indirect costs).
- You cannot use funds under this notice to build or acquire real property, construction or major renovation, or alteration of any space.
- All program income generated as a result of awarded funds must be used for approved project-related activities. The program income alternative applied to the award(s) under the program will be the addition/additive alternative. You can find post-award requirements for program income at 45 CFR § 75.307.
- You are required to have the necessary policies, procedures, and financial controls in place to ensure compliance with all legal requirements and restrictions applicable to the receipt of federal funding.
- HRSA's Standard Terms apply to this program. Please see Section 4.1 of <u>HRSA's SF-424</u> <u>Application Guide</u> for more information regarding funding restrictions.



Application and Submission Information Application Components (pg. 10)

Form Name	Instructions
Application for Federal Assistance (SF-424) [V3.0]	Complete form in Grants.gov
Attachments [V1.2]	Use form to attach Proof of Eligibility as Attachment 1
Project/Performance Site Location(s) [V3.0]	Complete form in Grants.gov
Project Narrative Attachment Form [V1.2]	Use form to upload your Project Narrative document
Grants.gov Lobbying Form [V1.1]	Complete form in Grants.gov
Budget Narrative Attachment Form [V1.2]	Use form to upload your Budget
	Narrative document
Budget Information for Non-Construction Programs	Complete form in Grants.gov
(SF-424A) [V1.0]	
Key Contacts [V2.0]	Complete form in Grants.gov
Project Abstract Summary [V2.0]	Complete form in Grants.gov





Award Administration Information Award Notice/Notice of Award (pg. 13)

- Notice of Award (NOA) issued mid-July, 2021.
- Period of Performance: July 1, 2021 to June 30, 2022.
- Oversight: HRSA staff will review program requirements and grants processes with RHCs within two weeks of the Notice of Award and conduct quarterly check-ins with recipients.
- See Section 5.4 of HRSA's <u>SF-424 Application Guide</u> for additional information.





Award Administration Information Reporting (pg. 14)

Reporting Award recipients must comply with <u>Section 6 of HRSA's SF-424 Application Guide</u> and the following reporting and review activities:

- **1.** Federal Financial Report. The Federal Financial Report (SF-425) will be required no later than October 30, 2022 for the one-year budget period ending June 30, 2022. The report is an accounting of expenditures under the project that year. The recipient must submit financial reports electronically through the Payment Management System. HRSA will provide more specific information in the NOA.
- **2.** Integrity and Performance Reporting. The NOA will contain a provision for integrity and performance reporting in FAPIIS, as required in 45 CFR part 75 Appendix XII.
- **3.** Final performance/closeout report(s). Organizations are required to submit performance data and information to HRSA at the end of the period of performance to enable HRSA to determine the impact of the activities and RHCVC Program more generally. Further instructions for this report will be provided during the period of performance.





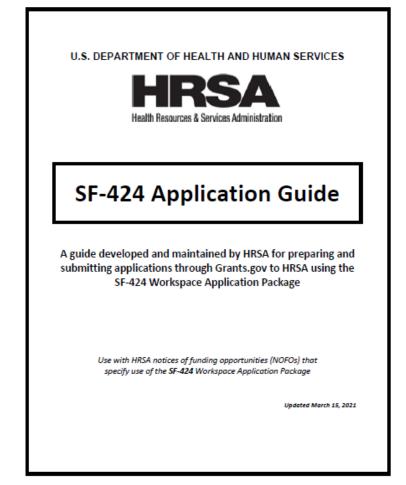
How to Apply Summary

Register in 3 different systems using EIN/TIN (one registration per EIN/TIN)

- <u>DUNS</u>
- <u>SAM</u>
- Grants.gov

Follow instructions in SF-424 Application Guide

Applications must be complete and validated by Grants.gov prior to the deadline to be considered.







How to Apply Registration

Must register in 3 different systems

System	Why is it important?	Website	Support
Data Universal Number System (DUNS)	DUNS numbers are required to identify organizations and it tracks how federal grant money is allocated.	<u>https://www.dnb.c</u> <u>om/duns-</u> <u>number/get-a-</u> <u>duns.html</u>	https://support.dnb.com/ 1-844-225-9892 customerlearning@dnb.com
System for Award Management (SAM)	Designating an e-business point of contact. Registering with SAM is required for organizations to use Grants.gov	https://sam.gov/SA M/pages/public/ind ex.jsf	Federal Service Desk https://www.fsd.gov/gsafsd_sp 1-866-606-8220 Monday-Friday, 8 AM to 8 PM ET.
Grants.gov	Submit grant applications	https://www.grants .gov/web/grants/re gister.html	https://gditshared.servicenowservices. com/hhs_grants 1-800-518-4726 support@grants.gov 24 hours a day 7 days a week.







The 3 step registration process can take up to 3 weeks



START NOW!

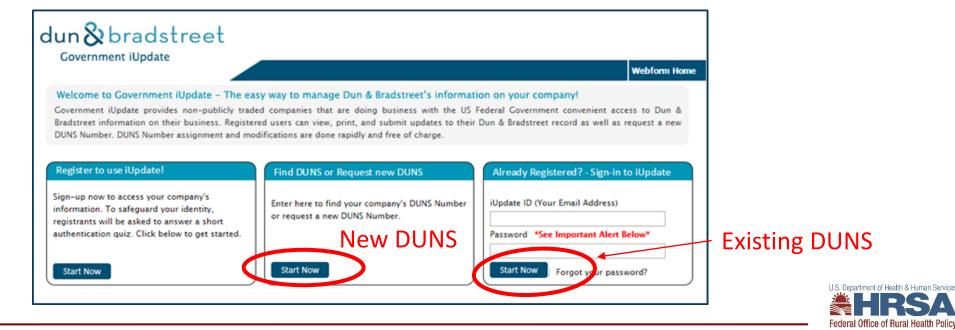
- <u>SF-424 Application Guide</u> Link found throughout <u>NOFO</u>
- Registration is FREE!





How to Apply Step 1: Dun & Bradstreet Number (DUNS)

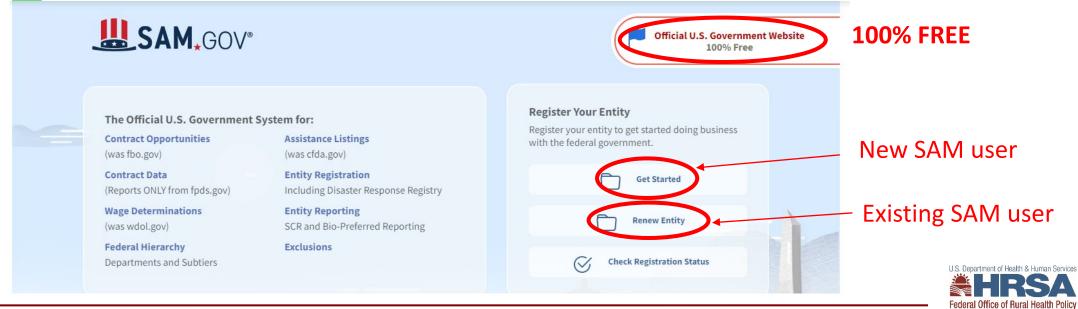
- Your organization must have a DUNS Number.
- Register with DNB at <u>http://fedgov.dnb.com/webform</u>
- Requires EIN/TIN from IRS and organization information
- You will be issued a DUNS Number
- ~1 2 business days





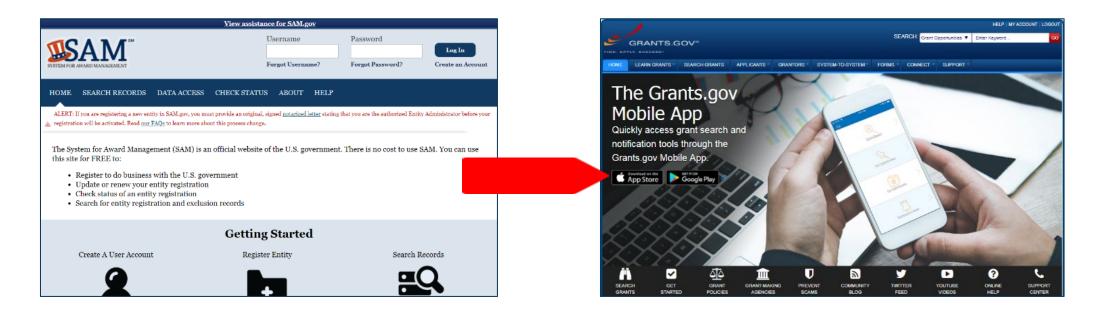
How to Apply Step 2: System for Award Management (SAM)

- Your organization must register with the System for Award Management (SAM).
- Use DUNS to register with SAM at <u>www.SAM.gov</u>
- Establish E-Business Point of Contact (EBiz POC): Individual who oversees all activities for organization within Grants.gov and approves the AOR
- ~7-10 business days after registering, including submitting notarized letter to SAM





How to Apply SAM and Grants.gov



- Organization data and EBiz POC information are transferred from SAM to Grants.gov
- People within the organization are able to register with Grants.gov and then add a profile to associate with organization





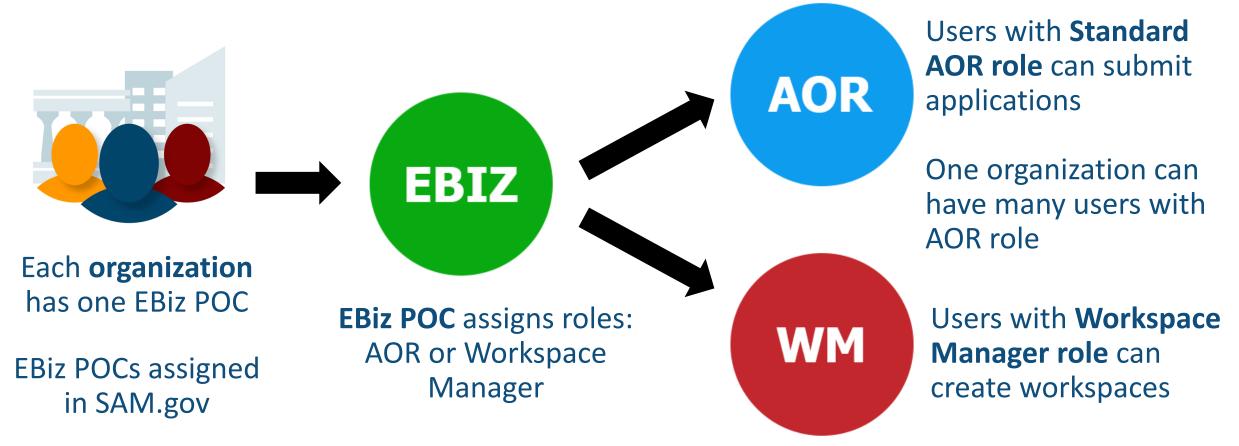
How to Apply

Step 3: Grants.gov

GRANTS.GOV [#]	SEARCH: C	Grant Opportunities 💌 Enter	Keyword GO			
	M-TO-SYSTEM FORMS CONNECT	T SUPPORT				
Account Details:	Last Name:		GRANTS.GOV > Register REGISTER			
	None Number:		 Username cannot resemble UEI. 12 character use 	stion marks, periods, dashes, ur mames must contain a special tain at least eight characters inc ust not contain dictionary words	cluding: at least one uppercase letter (A-Z); at least one lowercase s, names, or your Username.	
REGISTER	*Username:		Contact Information:	*First Name:		
				Middle Initial:		
Registering with Grants.gov				*Last Name: *Email Address:		
One account to manage all your profiles, applications, and subscriptions.	Intro to Grants.gov	- How to Register wit		*Primary Phone Number:		
Applicants	-		Mobile	Phone Number (US Only):		
 Complete the required form fields. Confirm your email address. Add an organization applicant profile or an individual applicant profile after registering. 			Conf	firm Mobile Phone Number:	(Can be used to reset forgotten password)	
arn more on the Applicant Registration page.			Account Details:			
	HOW TO REGIS	STER Sich GE				
antors 1. Complete the required form fields.				*Username:		
2. Confirm your email address.				*Password: *Confirm Password:		(Case Sensitive) (Case Sensitive)
3. Ask your agency point of contact to associate your email address with the agency.				commin rassword.		
am more on the Grantor Registration page . Get Registered Now »		GRANTS.GOV®	Communications:		GRANTS.GOV ALERTS Yes, I want to receive email messages containing time-sens potentially impact users. GRANTS.GOV NEWSLETTER Yes, I want to receive accessional emails highlightlightlightlightlightlightlightl	
H & HUMAN SERVICES: HHS.gov EEOC / No Fear Act Accessibility Privacy Disclaimers Site Map			GF		res, i waiti to receve occasional emails inginigring system relevant to the federal grant community. Continue > Cancel	and user topics
Get Registered Now > 2 ONNECT WITH US: So Blog Twitter > YouTube So Alerts So RSS So XML Extract So Get Adobe Re EALTH & HUMAN SERVICES: HHS.gov EEOC / No Fear Act Accessibility Privacy Disclaimers Site Map OMMUNITY: USA.gov WhiteHouse.gov USAspending.gov SBA.gov CFDA.gov SAM.gov DUNS Request	ader 군		GE		Yes, I want to receive email messages containing time-sens potentially impact users. GRANTS.GOV NEWSLETTER Yes, I want to receive occasional emails highlighting system relevant to the federal grant community.	

How to Apply Registration Grants.gov (Roles)

EBiz Point of Contact, AOR role, Workspace Manager role





Refer to Workspace Roles page for more detailed information



Read <u>NOFO</u> for all the details

- Register in DUNS, SAM and Grants.gov ASAP (or make sure your information is current)
- Review application to make sure you have included the required information

Submit application in Grants.gov by June 23, 2021 at 11:59 p.m. ET

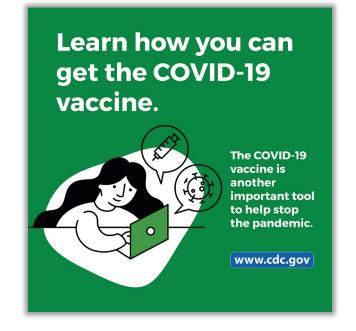
HRSA suggests submitting applications to Grants.gov at least <u>3 calendar</u> <u>days before the deadline (June 20, 2021).</u>





Application Review Information Application Scoring

- **1.** Proof of Eligibility, Attachment 1
- 2. Methodology
- 3. Work Plan
- 4. Organizational Information
- 5. Budget Narrative
- 6. Budget, SF-424A budget forms



- The RHCVC Program will use a review process that funds ALL ELIGIBLE ENTITIES that submit complete applications and have an acceptable assessment of risk.
- HRSA will review and assess each application for completeness and eligibility using the above review elements.





Application Completeness Checklist Appendix C

- Have I read this <u>NOFO</u> thoroughly and referred to the <u>SF-424 Application Guide</u> where indicated?
- Is my organization a Medicare-certified RHC or an organization that owns and operates Medicare-certified RHCs and therefore eligible to apply for this funding opportunity?
- Am I applying to the correct funding opportunity number for the RHCVC Program HRSA-21-142)?
- Does my proposed project increase vaccine confidence and accessibility for my community and/or patient population as specified in this <u>NOFO</u>?
- Does my application request a total of \$50,000 per RHC, understanding that the total award amount may be higher or lower depending on the number of applicants?
- Have I completed all forms and attachments as requested in Section IV of this <u>NOFO</u> and in the <u>SF-424 Application Guide</u>?
- Have I provided the information requested in this <u>NOFO</u> in 10-15 pages or less?
- Will I apply at least 3 calendar days before the deadline to accommodate any unforeseen circumstances?
- Have I received confirmation emails from Grants.gov noting validation of successful submission?





RHC Vaccine Confidence Program Communication

- Questions
 - ✓ <u>RHCVaxConfidence@hrsa.gov</u>
- HRSA RHC Vaccine Confidence Program Webpage
 - ✓ <u>https://www.hrsa.gov/coronavirus/rural-health-clinics/confidence</u>
- Subscribe to RHC Vaccine Confidence Program Listserv for HRSA updates.
 - ✓ <u>https://list.nih.gov/cgi-bin/wa.exe?SUBED1=RHC-VAX-CONFIDENCE-PROGRAM&A=1</u>

RHC-VAX-CONF	IDENCE-PROGRAM@LIST.NIH.GOV
	to subscribe or unsubscribe to the RHC-VAX-CONFIDENCE-PROGRAM list. To confirm your identity and prevent third parties from subscribing you to a list ag with a confirmation code will be sent to the address you specify. Simply wait for this message to arrive, then follow the instructions to confirm the operation.
· · ·	odate your subscription interactively by logging in with your LISTSERV password.
Name:	
Name: Email Address:	
	RHC-VAX-CONFIDENCE-PROGRAM RHC-VAX-CONFIDENCE-PROGRAM
Email Address: Select List:	
Email Address:	





Contact Information

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Questions FAQs and Open Q&A (Q&A icon at bottom of your screen)

Can we brand materials we develop with our logo?

Yes.* You may put your provider logo on materials you develop. HRSA requires grant recipients acknowledge HRSA when describing projects or programs funded in whole or in part with HRSA funds. Information and suggested language can be found <u>here</u>. Do I need to register for DUNS, SAM, and Grants.gov for each RHC owned by my organization?

> No. Organizations that own or operate multiple RHCs should register with DUNS, SAM, and Grants.gov using their EIN.

Does the RHCVC Program include other infectious diseases such as childhood immunizations, flu, and pneumococcal vaccines?

> Yes. You may use grant funds to promote other infectious disease vaccines and combat general vaccine hesitancy. .



*All HRSA awards are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements at 45 CFR part 75.



Questions FAQs and Open Q&A (Q&A icon at bottom of your screen)

Can we use RHCVC Program funds to record a PSA?

Yes.* RHCs may distribute/host/participate in a PSA to educate people about the importance of vaccination and basic prevent measures to prevent COVID-19. See Appendix A of the NOFO for more details. Can we use RHCVC Program funds to purchase equipment for vaccine appointments and community outreach activities?

> Yes.* As long as the expense is allowable, allocable, and reasonable. Equipment (e.g. van for transportation) are permitted expenses so long as the equipment need, type and cost is reasonably justified and the equipment will be used for the RHCVC Program for the duration.

Can we partner with a local organization for RHCVC Program outreach?

> Yes. Community partnerships are encouraged and an allowable use of RHC Vax Confidence Program funds. List the local organization in your budget narrative as a subrecipient. See the SF-424 Application Guide and Appendix A of the NOFO for more details.



*All HRSA awards are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements at 45 CFR part 75.



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