Frequently Asked Questions from the 3/2/2022 Informational Webinar

Request for Application (RFA): Building Workforce Capacity of Rural and Frontier Local Health Departments to Respond to COVID-19 Year 2

Recording:
https://naccho.zoom.us/webinar/register/rec/WN_C3CqpyJ0S_SGddTP2r1RgQ?meetingId=5cxTB3CLsy4IU88lv1W1BTsIDND_wJNnsh_rjVEBuHMFCc8NCviaJpUXDj2obyvG.NdwqXc9luNKGbu9G&playId=&action=play&_x_zm_rtaid=aHiYfvfiRiGxdzXvnaCn6g.1646325596220.44e88bddf9cf7a90e991c0539de9dba8&_x_zm_rhtaid=389

Slide Deck: https://www.naccho.org/uploads/downloadable-resources/RFA-Webinar-Slides-Yr2.pdf

Questions and Answers

Eligibility

1. There was mention of application lead vs. support agency in an application. Can you speak this in a little more detail?
   a. Most applicants will likely apply as individual agencies. However, if you have a support agency that will be helping you to accomplish grant deliverables, you may apply together.
2. Can we join with other counties in a regional approach - maybe around staffing departures, staff shortages, hiring difficulties with state job descriptions etc.?
   a. In the past, we have had local health departments (LHDs) work together across jurisdictions. However, each LHD applied independently, citing their intent to work together. If you wish to work in a regional approach, please ensure that each jurisdiction submits a separate application.
3. Are a city and county health department allowed to apply separately?
   a. If they are legally distinct health departments, yes.
4. If our County has a DUNS number do we have to obtain a separate one for health department? If we do not have a DUNS number, can we obtain one?
   a. If your governing entity is the County, you do not need a separate DUNS number for the contracting process. You will need to have a verification of active registration, which can be a screenshot of the Sam.gov page, as described in the RFA.
   b. If you do not have a DUNS number and need to apply for one, this link explains the process. Feel free to submit your application and all other materials during the processing time, alerting NACCHO to your progress by email.
   c. NACCHO is happy to work with any applicant who may need support in the contracting process or in gathering associated application materials. The contracting materials are necessary for the contracting process but should not be a barrier to application. NACCHO can help provide guidance on these documents and regulations.
5. How do we ensure that we are eligible according to the RUCA codes in our jurisdiction?
   a. NACCHO will ask that you submit ZIP Codes within your jurisdiction. We will verify that at least 50% of your jurisdiction is comprised of Rural/Frontier areas as designated by

RUCA Codes 4-10. This website has a downloadable resource that will allow you to check the RUCA Codes of each of the ZIP Codes in your jurisdiction. If you have any individual concerns regarding the RUCA Code eligibility or feel that your jurisdiction may be incorrectly seen as urban, Reach out to us at COVIDWorkforce@naccho.org.

6. When using the RUCA spreadsheet, it does not list exact ZIP Codes - can someone clarify how to check that?
   a. See the above response, the website's downloadable resource labeled 2010 Rural-Urban Commuting Area Codes, ZIP code file. A screenshot of this file on the website is visible below.

territory. Between 2000 and 2010, the data source for daily commuting patterns switched from the decennial census (measuring one point in time during 2000) to the American Community Survey (providing a 5-year average during 2006-10). See data source information within the individual data files for details.

Errata: On July 3, 2019, the Rural-Urban Commuting Area (RUCA) Codes data product was revised to correct a programming error affecting the 2010 secondary RUCA codes. The revision corrects the secondary codes of 10,909 of 74,002 census tracts. Secondary RUCA codes may be used to classify census tracts into rural and urban categories. The revised secondary codes result in an increase in the number of census tracts classified as rural. The 2010 primary RUCA codes were not affected by this revision.

On August 17, 2020, a ZIP code version of the 2010 RUCA codes was added to this data product. It replaces the ZIP RUCA 3.1 dataset maintained by the University of North Dakota's Center for Rural Health, and reflects the correction to the secondary codes described above.

Data Set	Last Updated	Next Update
2010 Rural-Urban Commuting Area Codes (revised 7/3/2019)	7/3/2019	
2010 Rural-Urban Commuting Area Codes, ZIP code file	8/17/2020	
2000 Rural-Urban Commuting Area Codes	3/11/2005	
1990 Rural-Urban Commuting Area Codes	1/20/2004	

7. What happens in the case of a ZIP Code bleeding over across jurisdictions despite not serving most of it? Will an Urban classified ZIP Code count against us in eligibility?
   a. Sites with multiple ZIP Codes will likely have a spread of RUCA Codes, and NACCHO will look for at least a majority of these ZIP Codes being considered Rural/Frontier (4-10). However, there is no perfect definition/designation of Rurality that NACCHO has decided on and we do not want to inadvertently exclude applicants who are in Rural jurisdictions but may have complex situations like this one. If you believe that your Rural/Frontier jurisdiction may inadvertently be considered Urban by these metrics, reach out to us and we can discuss the situation.

8. Can Year 1 participants apply for this funding?
   a. While Year 1 sites are not eligible to apply for this funding, NACCHO is developing a community of practice to provide Year 1 recipients with an opportunity for those who were recipients to participate. This will be a lighter touch but will enable continued engagement in training and peer exchange.

9. Is there a list of Cohort 1 recipients? Are the previously approved grants available as examples?
   a. Yes, the list of Year 1 recipients is posted below (end of document). Unfortunately, we will not be releasing previously approved budgets for this grant as the core objectives of this project have changes from Year 1 to Year 2 to address differing needs related to pandemic response and recovery. We are in the process of memorializing and sharing results from the first year of the grant, including stories from the field that profile

results, but we do not yet have them available to share. If you do have any questions about your thoughts on activities for this work, we can answer these questions.

Lessons Learned from Year 1

10. What lessons were learned from Year 1 that can apply to Year 2?
    a. The NACCHO team learned a great deal from Year 1 and from the evolving nature of the pandemic and its impact on our programming. We have learned to develop tools and resources that are relevant right now to account for short term and immediate needs while also supporting sites to orient around long-term sustainability. Additionally, our topics have shifted along with the nature of pandemic response. In Year 1, we focused more on contact tracing and workforce needs related to contact tracing, but the pandemic has changed. We have a broad repository of information from all of our work supporting local health departments (LHDs) through the pandemic and from communicating with our national partners that can be used to help participants find exactly what they need and tailor resources for their use. This helps us provide tailored technical assistance.
    b. We learned that there is a lot of competition with funding in terms of staff ability to engage in these efforts, so we learned to make sure that we engage with staff members who hold a role that may inform leadership in the health department to take what they are learning and embed that into practice.
    c. This funding is COVID-related but we also recognize that there will be a lot of public health emergencies that may or may not be infectious disease related. We aim to build effective public health emergency response systems beyond this health emergency.
11. Is there any accessible project description documentation or a project website from the first Year awardees that would apply to Year 2 applicants?
    a. No, there is not a project website or further documentation on the Year 1 project activities and awardees at the moment.

Acceptable Expenditures & Budget Questions

12. What are acceptable expenditures for the funds received?
    a. Most sites will likely use this funding to account for staff time engaging on the project or any supports needed to accomplish grant activities.
13. Can the dollars be used to develop a workplace wellness program?
    a. While the primary focus is supporting your engagement in the project, we would say yes, it may. As long as the funding is used in alignment with the goal of the RFA (to build the capacity of your workforce), it would be an acceptable use of funding. If you want to leverage your funding to support this goal, it is in the purview of this opportunity.
14. If budget permits, can we fund the purchase of IT software or Apps to improve future communications to the public?
    a. Yes, though we are unable to fund 'durable equipment' and we can help you to define your needs, pointing you to more language here as needed. Supplies is an allowable expense for this opportunity.

15. Do we still need to do a budget is that right?
    a. Yes, you will need to submit a budget and a budget narrative. These are included in the RFA.
    b. As a note, there are two budget periods in our templates. This is due to our project periods with the Centers for Disease Control and Prevention (CDC) and our anticipation of a no cost extension. We want to know what your costs will be and why in these two periods (April-July 31st and August-December). This means we will initially execute a contract to July 31st and then will execute a second contract for the remainder of the project period.
16. Are the current grant applications posted for public access?
    a. The RFA is public facing and anyone who is eligible may apply.
17. What are some examples of how Year 1 recipients used funds awarded?
    a. We are funding you for your time and anything you need to engage in the project activities successfully. This may include funding for your time and resources for your staff, your community partner's staff, or consultants that will support this work. What we saw in Year 1 was that our sites funded items in their larger COVID response efforts. We caution you to pay attention to the unallowable costs (what cannot be funded) listed. For example, you will not be able to use this funding for vaccination supplies.
18. Does being recipient of this funding conflict with any other funding that has been put forth or received by the States and then to LHD regarding workforce capacity?
    a. It does not conflict with any other funding mechanism. However, this is a different funding stream so it cannot be used to fund efforts for other CDC-funded projects. This funding should complement these other funding streams but you cannot pay for the same activity across multiple CDC funding streams. If you have a staff member paid by multiple funding streams, so long as you are not paying for the same efforts or percentage FTE of that person's time, that is acceptable. It is not uncommon to support budget revisions after the application, so feel free to reach out if you have any questions about this.

General Questions

19. How many applications will be funded?
    a. We will fund up to 35 sites.
20. I am having difficulty understanding what this funding is intended for. Could you repeat that?
    a. This opportunity to provide funding and technical assistance based on your workforce needs. If you have internal needs around skill development and systems, this project will support you with tailored technical assistance and training on the topics outlined in the RFA. We recognize that the $35,000 can be meaningful for sites, but you will have a support team of faculty who can give you group and one-on-one technical assistance to be able to advance COVID response and longer term administrative preparedness needs. One of the main products will be a meaningfully updated section of your administrative preparedness plans so that we can operationalize what you have learned about emergency response in your jurisdictions, facilitating future responses.

Year 1 Grant Recipients:

- Audrain County Health Department, MO
- Cavalier County Health Department, ND
- Cerro Gordo County Department of Public Health, IA
- Clear Creek County Department of Public and Environmental Health, CO
- Cook County Public Health and Human Services, MN
- Decatur County Health Department, IN
- Duplin County Health Department, NC
- Florida Department of Health in Okeechobee County, FL
- Genesee County Health Department, NY
- Gunnison County Health and Human Services, CO
- Harney County Health Department, OR
- Health Department of Northwest Michigan, MI
- Kent County Health Department, MD
- Langlade County Health Department, WI
- Lewis County Health Department, KY
- Mendocino County Health and Human Services Agency, CA
- Moffat County Public Health, CO
- Montezuma County Public Health Department, CO
- Oneida County Health Department, WI
- Perry County Health Department, MO
- Pierce County Public Health Department, WI
- San Juan Basin Public Health, CO
- Scotland County Health Department, MO
- Three Rivers District Health Department, KY
- Towner County Public Health District, ND
- Virginia Department of Health, Three Rivers Health District, VA
- Whitley County Health Department, KY