

National Organization of State Offices of Rural Health



NOSORH promotes the capacity of State Offices of Rural Health to improve health care in rural America through leadership development, advocacy, education and partnerships.





- There is a SORH in each state
- Focus on different needs
- Funded by FORHP for 3 core functions
 - Information Dissemination
 - Rural Health Coordination
 - Technical Assistance

Find your SORH at Nosorh.org

Provide Vital Assistance to:

- 2,168 Communities
- 1,992 Hospitals
- 3,632 Clinics
- 1,215 Emergency Medical Services
- 5,142 Health Care Providers

63,160
Total Technical Assistance
Transactions to
22,618 Clients





NATIONAL RURAL HEALTH DAY

Promotional Toolkit

To help support NRHD and join the celebration of the Power of Rural, we have created an easy-to-use online toolkit. These tools are designed especially for community stakeholders, including hospitals, clinics, first responders, public health and elected officials, non-profits, civic organizations, and others who serve and support the health needs of rural communities.

NRHD tools enhance your outreach efforts to schools, churches, local media outlets, and community businesses, and you will find some creative ways to engage employees and your community in NRHD special events and activities.



<u>Promotional Toolkit - Power of Rural</u>



November 18, 2021

Tell the story of your good work to improve the health of your community!

Join us on twitter and on eevents across the country!

National Organization of State Offices of Rural Health

Today's Presenter









Teryl Eisinger, MA, Chief Executive Officer "lessons learned"

NOSORH: rhcvaxconfidenceinfo@nosorh.org



Teryl Eisinger CEO, NOSORH



Tammy Norville RHCVC Program Oversight Technical Assistance Director, NOSORH



Lynette Dickson, MS, LSD RHCVC Grant Program Coordinator Connections for Community Care, NOSORH

NARHC: vaxconfidence@narhc.org



Bill Finerfrock Executive Director, NARHC



Nathan Baugh RHCVC Program Coordinator Director of Government Affairs, NARHC



Sarah Hohman RHCVC Program Coordinator Deputy Director of Government Affairs, NARHC



Sarah Scott, MSPH **Project Coordinator** Federal Office of Rural Health Policy



Karis Nolen, DNP, RN Project Officer Federal Office of Rural Health Policy



Lindsey Nienstedt, MPH, MSW Former Project Coordinator Federal Office of Rural Health Policy



Nancy Gaines Grants Management Specialist Office of Federal Assistance Management

National Orga State Offices of Rural Health

Assumptions

You may be new to the federal grant "world".

You are committed to improving the health of your community and it's a VERY big job.

Your community may be vax hesitant.

You submitted a work plan and a budget to improve vax confidence in your community – and you may need to make some adjustments – right away!

You have listened to and understand the information from the FORHP webinars.

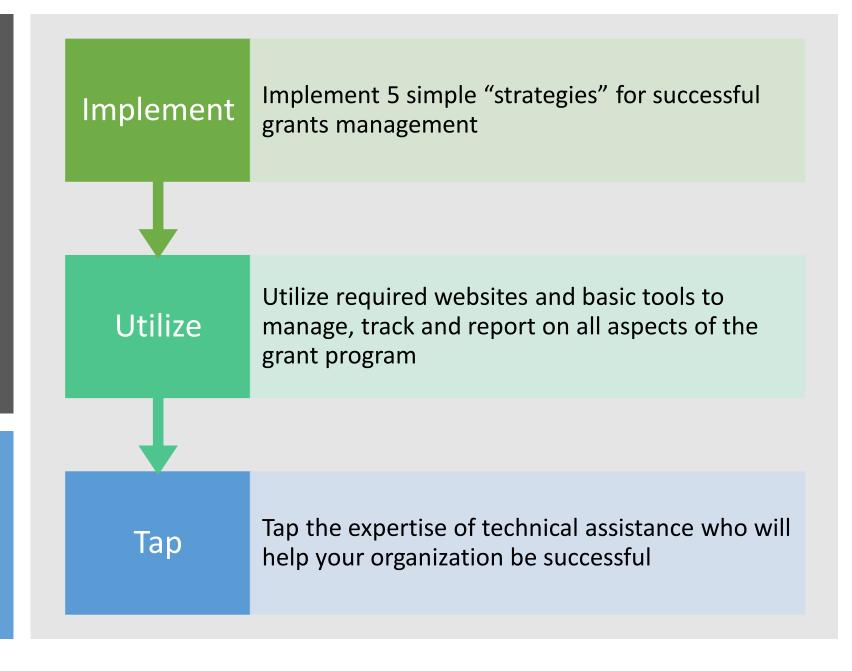


Assumptions: You've done the first things!

- 1. Read the award letter and grant agreement.
- 2. Provide any additional information.
- 3. Share the news.
- 4. Log into financial management and grants management system and know how funds are received.
- 5. Gather the team and partners to review all due dates/milestones and operating procedures.

What we plan you will be able to do by the end of the webinar today:

If time allows and you want to stay up till 3:30 we will answer SPECIFIC questions & do some follow up to help grantees who need to do budget or plan revisions.



5 "strategies" for effective grants management





Communication







What is grants management?

"Manage the day-to-day operations of your award-supported activities, the project's performance, and the payment of award funds."

HRSA "How to Manage Your Grant"

"Grants management relates to all of the administrative tasks required to handle the money, reporting, and program implementation in a way that meets generally accepted standards as well as the requirements of the funding source."

The Grantsmanship Center

Planning, organizing and controlling all aspects of your grant program to ensure accountability, communication, effectiveness and efficiency.

Teryl Eisinger



Adaptability



Definition of adaptable:

able to change or be changed in order to fit or work better in some situation or for some purpose

Listen

 Read, read & read some more!

Pivot



National Organization of State Offices of Rural Health

Technical Assistance

HRSA Rural Health Clinic Vaccine Confidence Kick-Off Webinar

RHCVC Program Kick Off Webinar Recording &

HRSA Rural Health Clinic Vaccine Confidence Technical Assistance Webinar

RHCVC Program Technical Assistance Webinar Recording

RHCVC Program Technical Assistance Webinar Slides (PDF - 1.4 MB)

Please contact RHCVaxConfidence@hrsa.gov for additional information.

Grants.gov Applicant Overview Technical Assistance Webinar

RHCVC Program Grants.gov Applicant Overview Webinar Recording

RHCVC Program Grants.gov Applicant Overview Webinar Slides (PDF - 5 MB)*

Please contact support@grants.gov or 1-800-518-4726 for additional Grants.gov questions.

More Information

<u>Disparities in COVID-19 Vaccination Coverage Between Urban and Rural Counties – United States, December 14, 2020 – April 10, 2021</u> (CDC/MMWR, May 2021)

Vaccine Hesitancy for COVID-19: State, County, and Local Estimates (HHS/ASPE March 2021)

Rural Health Clinic Vaccine Confidence (RHCVC) Program | Official web site of the U.S. Health Resources & Services Administration (hrsa.gov)

What is a Notice of Award (NOA)?

E





Official document that states the terms, conditions, and amount of the award.

Page 1: Basic Award Information

Subsequent Pages:
Additional Award
Information

- Signed by Grant Management Official (GMO) authorized to obligate HRSA funds
- Example: http://www.hrsa.gov/grants/manage/awardmanagement/notice/notice/ofaward.pdf
- Date issued
- Award/grant number
- Project/budget period
- Grantee/Project Director name and contact information;
- Grant Management Specialist & Program Officer contact information;
- Budget (current/future support) and;
- Special remarks
- Grant policy information
- EHB access instructions
- Terms and conditions
- Reporting requirements with due dates and;
- Contact information for PO and GMS



Understanding the Grant Management Process

HRSA Manage Your Grant (HRSA Website)

- HRSA & HHS Grant Policy and Management
- http://www.hrsa.gov/grants/manage/index.html

HRSA Electronic Handbook (EHB)

- Must register in EHB to access your grant in the system
- Electronic System for Grant Management & Submitting Reporting Requirements

Division of Payment Management (the "bank")

- Must register in PMS to access your grant funds
- PMS Help Desk 1-877-614-5533 or https://pms.psc.gov
- Online training is available

The System for Award Management

(SAM)

- Registration system for entities in order to do business with the federal government
- Keep your SAM registration active- Renew at least once annually
- https://www.sam.gov/portal/public/SAM/













Grant managers are adaptable conductors!

- Clinical and Support staff
- Accountant
- Project Officers
- Community including media
- Partners
- Contractors
- Technical Assistance Providers

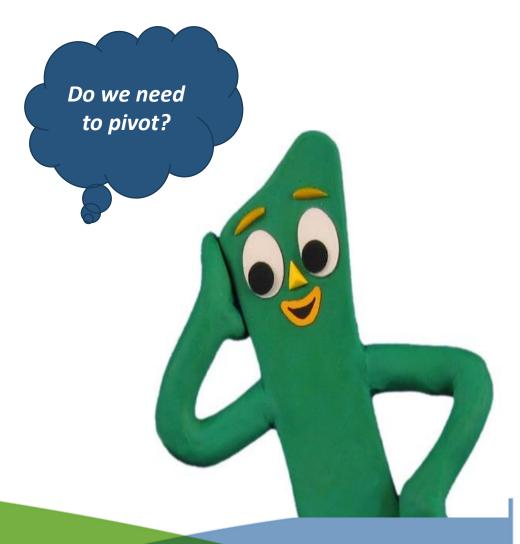


Ensuring Adaptability from the start



GATHER THE TEAM & PARTNERS

- Walk through purpose, funding, requirements
- Share the concept, budget and work plan goals
- Answer the hard questions
 - ✓ Who leads the staff?
 - ✓ Who speaks for the program?
 - ✓ How will funds be used?
 - ✓ What will we measure?
 - ✓ When and what reports are due?



National Organization of State Offices of Rural Health

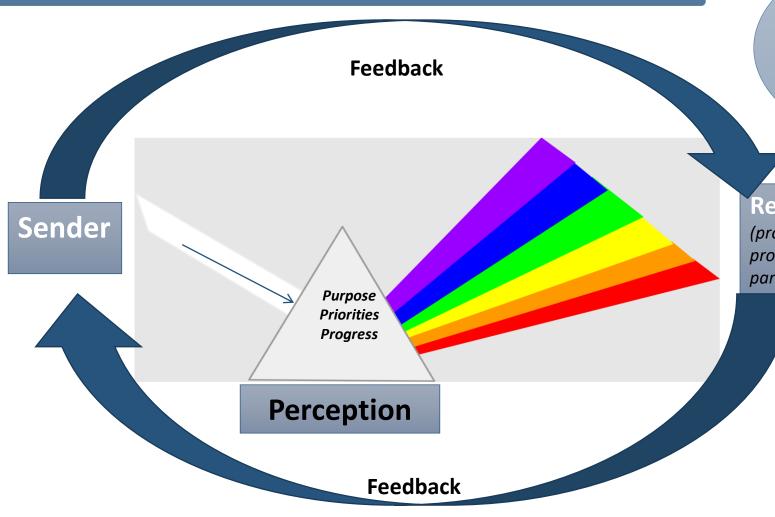


He who has the gold rules!

National Organization of **State Offices of Rural Health**

What is communication?

Creating shared meaning! About your RHC Vaccine Confidence Efforts



What's your communication goal?

Receiver

(project officers, technical assistance providers team members, community, partners and others)

Check your language and use of terms and acronyms!

- The Payment Management System (PMS) cash report is due quarterly. PMS calls it an FFR. (Federal Financial Report).
- Health Resources Services Administration (HRSA) where Federal Office of Rural Health Policy (FORHP) is located) generally calls the quarterly cash report a FCTR – Federal Cash Transaction Report.
- HRSA also generally calls the annual report the FFR.
- PMS calls both the annual and quarterly report the FFR.

Watch your language!

What you say matters

Consider the receivers: FORHP and TA providers

RHCVC Program

Program (Communication) Terms

RHCVC Program Team & PO

• Include your grant number in all email communications to RHCVaxConfidence@hrsa.gov

HRSA RHCVC Listserv

- Required HRSA RHCVC listserv registration to receive important program updates and reminders
- Manage your subscription http://list.nih.gov/cgi-bin/wa.exe?SUBED1=RHC-VAX-CONFIDENCE-PROGRAM&A=1

Quarterly Reviews

- Participate in quarterly reviews with HRSA staff and RHCVC TA team to review program requirements and grant processes
- Respond to requests for information from HRSA staff and RHCVC TA team within 5 business days

NOSORH RHCVC TA

- Engage with RHCVC TA team throughout the period of performance to discuss challenges, successes, progress, and TA needs
- rhcvaxconfidenceinfo@nosorh.org





Consider the receiver: team and the program partners



- How will you communicate?
 - Who: Point Person
 - **How**: Phone, email, text, shared drive, software
 - When: Schedule it! With project benchmarks?
 - Ask: "DOES THIS WORK FOR EVERYONE?"
- Communication when things don't go as planned or assignments are missed?



Grants management communication ... top 5

- 1. Keeping everyone informed
- 2. Ensuring clear expectations of who is what is responsible for what
- 3. Meeting timelines and deadlines
- 4. Maintaining shared value and appreciation
- 5. Being upfront and honest with feedback and reporting and conflict check your terms!





General questions on communication or adaptability?





Accountability

"....the quality or state of being <u>accountable</u>; especially:

an obligation or willingness to accept responsibility...answerable, explainable"

Documentation

- Processes
- Tracking
- Transparency

Accountability starts at the time of the application! Top 10 questions to ask yourself



- Who is my "key customer" for this work? Project officers, community (your neighbors), your partners
- 2. What is the project period? **7/1/2021-6/30/2022**
- 3. What are grantee major financial reporting requirements? Quarterly cash transaction reports 30 days after calendar quarter end (10/30/21, 1/30/22, 4/30/22, 7/30/22) and a final report 10/30/22).
- 4. What is the approved budget for personnel, contractors, equipment, supplies, travel, indirect and other categories of expenditures? Check your Notice of Award!
- 5. What are the deliverables for sub-contractors or consultants who will be paid from the grant funds? What do your work plan and budgets say?
- 6. Will program income be earned? **Know the rules for program income!**
- 7. Does the work plan identify the responsible party and timeline? If not add those to make it a working tool.
- 8. What are the requirements for evaluation including data reporting and analysis? No evaluation required and simple data reporting for the end of project period to be determined.
- 9. Who are the project staff and are they in place? If not, who will do the work in the interim?
- 10. What are the guiding "rules" federal circular etc....?

National Organization of **State Offices of Rural Health**

Guiding Rules

START WHERE YOU ARE. **USE WHAT YOU HAVE.** DO WHAT YOU CAN.

-ARTHUR ASHE

Manage Your Grant | Official web site of the U.S. Health Resources & Services Administration (hrsa.gov)

> National Organization of **State Offices of Rural Health**

Manage Your Grant



Log in to the Electronic Handbooks (EHBs)



Training

- Conference Calls
- · Guide: How to Manage Your Grant
- · Grants Management Workshops



Administrative Management

- Uniform Administrative Requirements
- Payment Management System (PMS) Training



\$ Financial Management

- Unallowable Costs
- Financial Health: Best Practices
- Audit Confirmations



Policies, Regulations, & Guidance

- COVID-19 FAOs.
- Standard Terms for HRSA awards
- Program Integrity
- · Federal Awardee Performance and Integrity Information System (FAPIIS)
- Civil Rights



Reporting Requirements

- · Federal Funding and Transparency Act (FFATA)
- · Federal Financial Report (FFR)
- · Noncompeting Continuation (NCC) Progress Reports
- · Property Reports

Accountability: Who's job is it?



Role	Recommended Responsibility	
Board (depends on the organization)	Works with the staff to support the effort, ensures policies for accountability are in place, oversight and support and serve as "ambassadors" with the community and partners.	
Financial staff	As defined by the organization – prepares budget and financial reports, pays all vendors, contractors and personnel, ensures receipt of grant funds.	
Program Staff	Project Director oversight of all aspects of program and administrative functions, carries out and oversees the accomplishment of the work plan and the work of all project staff, contractors and partners.	
Contractors/Partners	May include subject matter experts, provide evaluation, education, program or clinical services. Partners in a consortium may provide oversight of the project.	

National Organization of **State Offices of Rural Health**

Accountability: Personnel



- Project director
- Follow the approved work plan and budget
- Tracking mechanisms are in place payroll system can work
- Notify FORHP if there is a change in project director (EHB)



Accountability: Contractors

- Is a bidding process required by your organization?
- Complete agreements for contractors, consultants or partners including schedule of deliverables and payments.
- Recommendation: If partners or contractors have an indirect cost rate it should not exceed your own.



Accountability: Budget Monitoring

- 1. Accounting staff should have a budget narrative, code it with your chart of accounts
- 2. If budget changes by more than 25% of the total award approval is required.
- 3. Monthly (recommended)
 - Compare percent of YTD expenses with budget.
 - Compare with prior month
 - Is it allowable, reasonable and on track with what you expect?
 - Take corrective action according to your policies.
 - Inform partners and project officer as needed



RHCVC Program

Select Program Terms

Unallowable Costs Examples of unallowable costs include, but are not limited to: costs paid by other federal or state programs; purchase, dissemination, or administration of vaccines; construction of facilities; support of lobbying/advocacy efforts; and facility or land purchases

• For the RHCVC Program funded under this award, unallowable costs include, but are not limited to, vaccine storage and handling, vaccine inventory management, vaccine preparation, and equipment such as: refrigerators and freezers; temperature monitoring devices used to maintain the cold chain, and other items related to vaccine administration.

Vaccine Confidence Activities

Vehicle/ Mobile Unit

- Must only use RHCVC Program funds for vaccine confidence activities
- Expenses necessary to support RHCVC Program activities not included in the NOFO will be allowable as long as they are consistent with 45 CFR part 75
- Vaccine confidence activities, methodology, and/or work plan may change as the public health emergency evolves
- Used exclusively for your grant-supported vaccine confidence project
- Permitted use for non-vaccine confidence project activities if the vehicle/mobile unit was purchased with NON-RHCVC Program funds





















General questions on accountability



Effectiveness

Definition of **effective-** producing a decided, decisive, or desired outcome –Work the work plan!

Activity	Description	Timeline
Staff education	Using free CDC protocols and resources, educate clinic team during four (4) inperson sessions on importance of appropriate vaccinations including but not limited to COVID-19 and other infectious diseases as well as encouraging patients, neighbors, and community members to participate in vaccination schedules appropriate to their medical histories.	July 2021 – December 2021
Engage local partners and community organizations (business and faith based)	Engage community influencers in the business and faith-based community to create a community culture of sustainable, equitable and inclusive vaccine confidence communication and strengthen the capacity of fact-based community conversations. Educate partners on importance of vaccinations for infectious diseases found in the local community and how comorbidities may make community members more vulnerable without appropriate vaccination interventions. Three (3) gatherings during the project period.	July 2021 – June 2022
Community outreach plan and individual decision for vaccination	Develop and implement a community outreach plan building on the work with the engagement of local partners and community organizations. Include a decision aid that guides individuals through the vaccination decision-making process – based on free CDC templates and other resources as well as a confidence building text/patient portal messaging campaign	July 2021 – December 2021
Posters, brochures, and flyers	Use graphic designer to develop and create for distribution and posting culturally tailored, community-centric plain language materials to support clinic and partners' outreach to communities encouraging vaccine uptake (using free We Can Do This campaign and CDC templates and using graphic design to create individualized fact-based messaging)	July 2021 – June 2022

POLL QUESTION

Does the work plan submitted with your application include any "measures of effectiveness"?

- a) Yes
- b) No
- c) Unsure



Considerations to identify program effectiveness

WHAT do you or your team want to know about the program?

- Did those who received incentives have a higher vaccination rate?
- What types of vaccinations were the rates increased?
- Did the number of vaccinations your clinic or partners give increase?

WHO has the information?

• Information can be gathered internally from your organization (e.g., program staff) and/or externally (e.g., stakeholders).

WHEN will the information be collected?

• At the beginning, during the program or upon completion of the funding cycle, quarterly, semi-annually, annually, other?





Effectiveness: can be data driven



NO
EVALUATION
PLAN IS
REQUIRED

FOR THE RURAL HEALTH
CLINIC VACCINE
CONFIDENCE GRANT
PROGRAM!

Some simple ways to ensure data driven effectiveness using the work plan or other data:

- Quarterly: track if you're doing what you said would do in the work plan?
- Ongoing, after activities: Obtain feedback from the people served and other members of the community: what difference did your activities make?
- At program onset and at end: Compare local data on vaccination rates from the beginning of the period to the rates at the end of the program period (for pneumonia, childhood immunization, flu, Covid-19 vaccination).

National Organization of State Offices of Rural Health

Intentionally collect your "proud moments"!

A qualitative look at accomplishmentswhat the SORHs and partners say			
Roadmap for Working with Vulnerable Hospitals and Communities	Promising Practices		
"This is an exceptionally good resource and reference document. Thanks to your editor and writers. I cannot imagine the dozens if not hundreds of hours it took to piece together this intricate puzzle of tools and resources. I'll	"It's so useful to see what is working in peer programs!"		
be spending a lot of time with it." John Supplitt American Hospital Association	SORH Member Survey		
Report on Lessons Learned from Rural Opioid Overdose Reversal Grant Recipients	How to Write a Successful Rural Health Opioid Program Application		
"I'm a technical assistance consultant with the Georgia Health Policy Center and handle many SA/BH grants. I thought this presentation was EXCELLENT and I'm so	"I want to thank you for putting together the Webinar on the RHOP grant. I thought it was excellent. I learned a few things and the resources and sample documents you shared are so valuable."		
glad I was privy!" Lynne Kernaghan Georgia Health Policy Center	Mary Winar Connecticut Office of Rural Health		
Data Institute	NOSORH Annual Meeting 2016		
"I was not expecting the level of support for data visualizationI think the data institute was well designed."	"Thank you for a wonderful NOSORH conference I came away with so much information that I can apply to my job and for our SORH."		
Data Institute Participant	Annual Meeting Attendee		

General questions on effectiveness?





Efficiency

Definition of efficient

- achieving maximum productivity with minimum wasted effort or expense
- able to accomplish something with the least waste of time and effort; competency in performance.
- accomplishment of or ability to accomplish a job with a minimum expenditure of time and effort

Did you get it done without detriment to your organization, other programs or team?

Keep it simple!



Efficiency tips

- You're not making the world's best pizza!
- Work with what you have.
- Keep your eye on the goal!

You do NOT have to worry about this! Reports are read and used!

THIS SETUP WILL MAKE THE PROCESS OF PRINTING REPORTS FOR MANAGEMENT MORE TIME-FFFICIENT.



Efficiency: Work with what you have!



Assets:

Simple accounting processes

Existing financial reports

Time keeping

Filing system – passwords, reports etc....

Your team!

Might feel like a challenge:

HRSA approved budget & work plan
Payment Management System

Electronic Handbook



Understanding the Grant Management Process

Accessing Your Award Funds

WHO

Financial Reporting Authority (as listed in HRSA Electronic Handbook) should submit an quarterly electronic Cash Transaction Report via the Payment Management System (PMS).

WHAT

The Cash Transaction Report identifies cash expenditures against the authorized funds for the grant.

WHEN

Must be filed for each quarter. Failure to submit the report may result in the inability to access award funds. For due dates, visit: https://pms.psc.gov/pms-user-guide/federal-cash-transaction-report.html

MORE INFO

Go to https://pms.psc.gov or PMS Help Desk: 1-877-614-5533





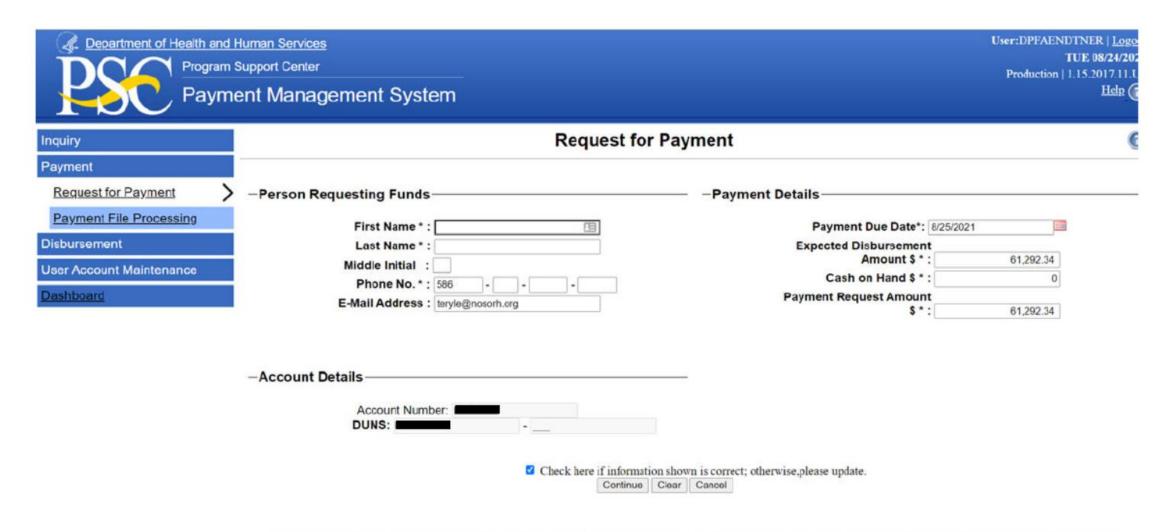
Challenge: Payment Management System

- Set up authorizers
- Draw funds recommendation do the draw when you get your monthly financials with documented expenses for the grant
- Save copies of each draw receipt and accompanying financial statement.
- Quarterly cash reports save copies Quarterly cash transaction reports due 30 days after calendar quarter end (10/30/21, 1/30/22, 4/30/22, 7/30/22)

HRSA authorizes allowable pre-award costs incurred on or after 3/15/21!

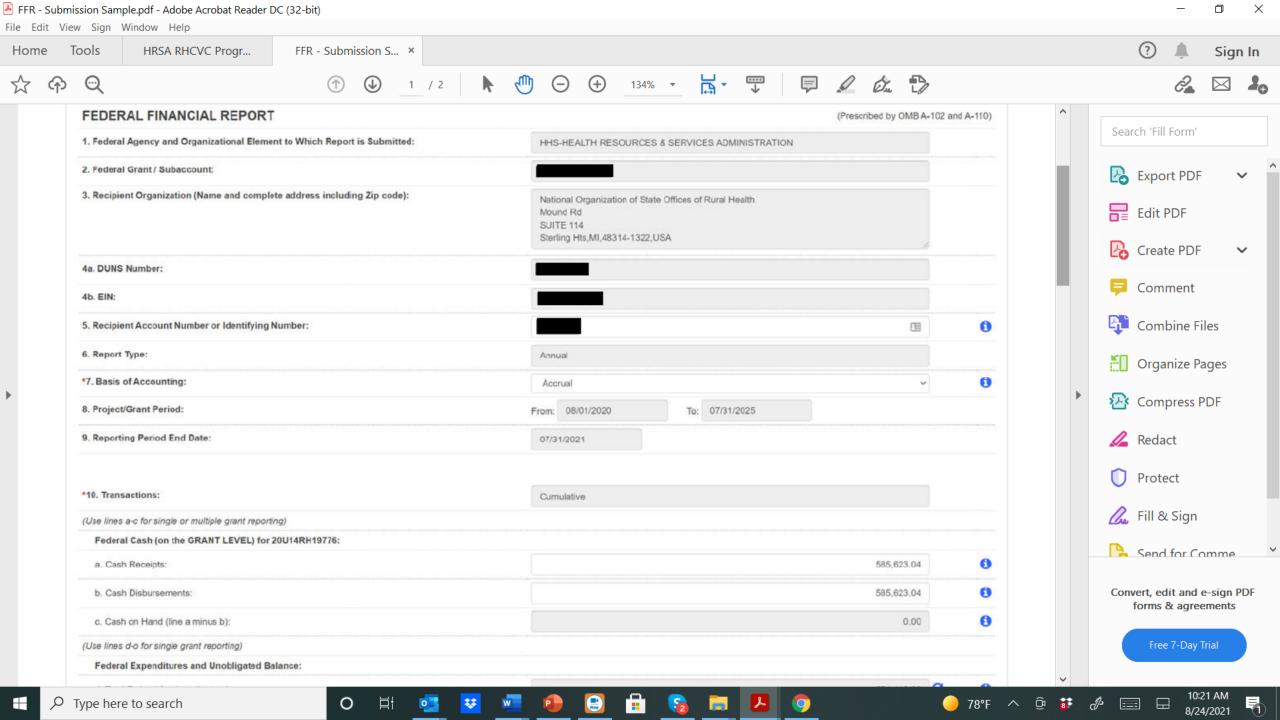
Get and track the money!





^{*} If your drawdown request exceeds the unexpired funds amount, DPM must obtain awarding agency approval which may delay the processing of your request.

^{*} Requests for payment submitted after 5:00 p.m. ET will be processed as if received on the next business day.



Payment Management System



DHHS, Payment Management System (PMS)

https://pms.psc.gov/

PMS Help Desk 1-877-614-5533

Contact the <u>ONE DHHS Help Desk</u> for issues regarding your draw-down requests, password resets, and the FFR. Always have your PMS PIN, payment account number (PAN), or EIN handy.

PMS Grant Recipient Online Training (2 hr.)

https://pms.psc.gov/training/grant-recipient-training.html

Learn how to: Access PMS, Complete a payment request, Complete Federal Financial Report (FFR)

National Organization of State Offices of Rural Health

Electronic Handbooks (EHB)

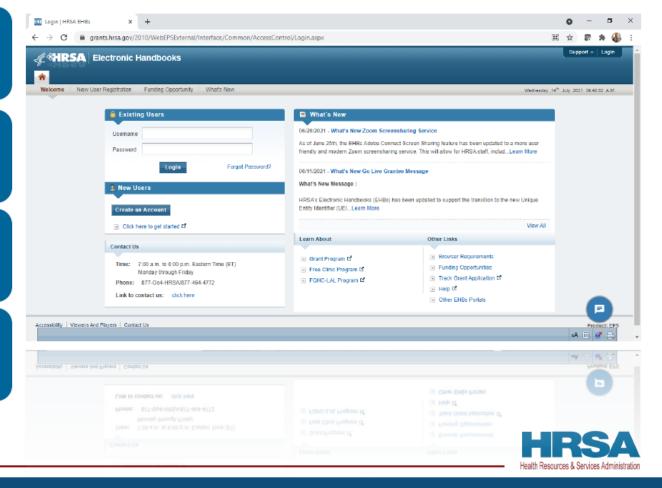
The Document of Record for Your Grant

HRSA's program support and management application

Allows users to perform functions spanning grants operations, program planning, monitoring, and management

What must go through EHB? EVERYTHING!

https://grants.hrsa.gov/ (Grantee)





Understanding the Grant Management Process

Accessing Your Award Funds

REMEMBER

• Add RHCVC grant to your EHB portfolio

HRSA EHB Roles for Your Grant

- Project Director/Authorizing Official
 - Add/delete staff positions in EHB
- Financial Reporting Administrator (FRA)
 - Only has access to financial reporting
- Other

Grant Access & Registration FAQs

https://help.hrsa.gov/display/public/EHBSKBFG/Grants+Access+and+Registration+FAQs

Need help with EHB?

• Call 1-877-464-4772





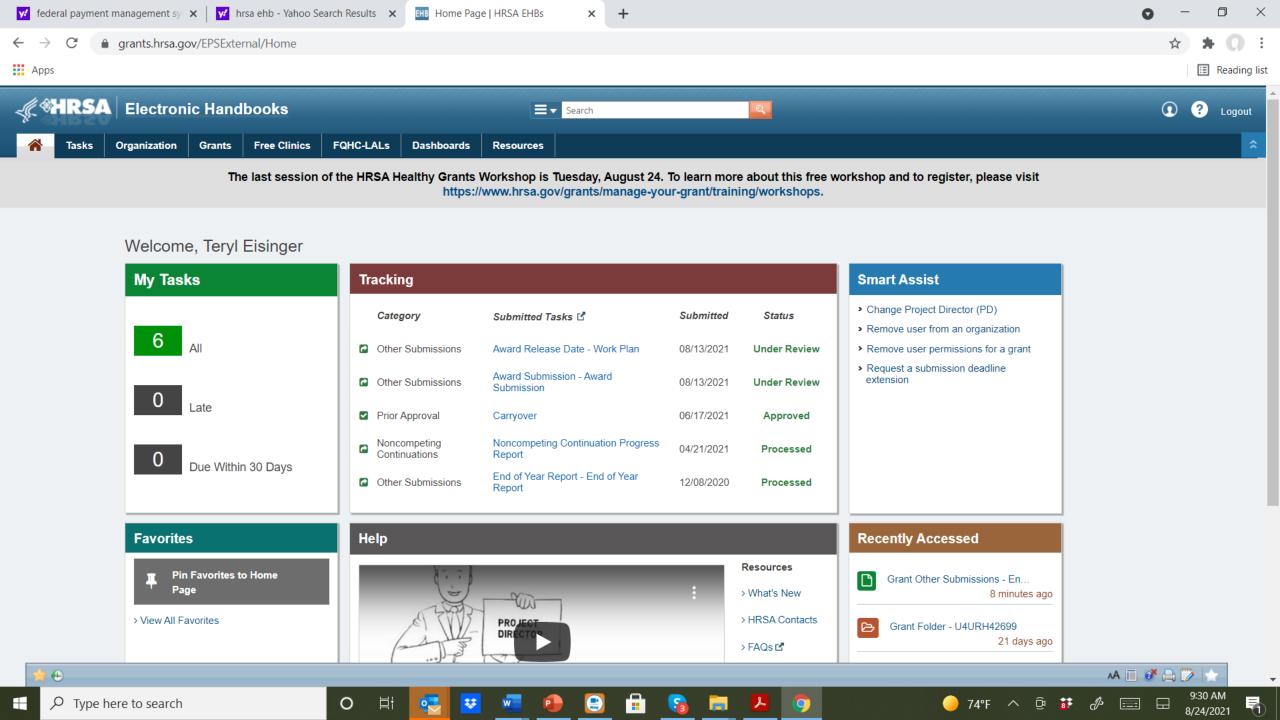
EHB Grant Actions

Common Requests & Submissions

- "Prior Approval" Authorization Requests
 - Project director change
 - Budget revisions / Re-budgeting
 - No-cost extensions
 - Change in Scope
- Submission of Final Reports
- Submission of Federal Financial Reports







EDM Submission

▼ 00297491 : National Organization of State Offices of Rural Health, STERLING HEIGHTS, MI

Reporting Period: 08/01/2021 - 07/31/2022

Submission Type: Other Submissions

Available Date: 7/21/2021

Last Updated By: Teryl Eisinger

Reporting Cycle: One Time Submission

Due Date: 10/29/2022 | Submission Status: In Progress

Online Submission: Yes (Required)

▼ Resources 🗹

Submitted By: N/A

View

Related NoA Action History

GrantNumber: U14RH19776

Submission Name: End of Year Report

Related Condition/Reporting Requirement

Name	End of Year Report
Туре	Reporting Requirements
Recurring	No
Due Date	Within Time Span of 90 Days of Budget End Date
Added in NoA	5 U14RH19776-12-00 🗹
Condition	Grantee must submit an end of year Progress Report within 90 days after end of each budget period. Report must be submitted via Electronic Handbook

▼ ★ Electronic Deliverable Attachment (Minimum 1) (Maximum 20)

Attach File

No documents attached

HRSA – Electronic Handbook (EHB)





Contact Center

For navigation and system related issues

Time 8:00 a.m. to 8:00 p.m. Eastern Time (ET), Monday through Friday Phone 877-Go4-HRSA/877-464-4772

Electronic Handbook (EHB)

https://grants.hrsa.gov/2010/WebEPSExternal/Interface/Common /AccessControl/Login.aspx

EHB Customer Support Center

Phone:877-464-4772 7:00 a.m. to 8:00 p.m. Eastern Time (ET) Monday through Friday https://www.hrsa.gov/about/contact/ehbhelp.aspx

HRSA YouTube Videos

Getting Started in EHB – YouTube video
https://www.youtube.com/watch?v=pBRhSkATjhQ

EHBs Resources for Grantees – YouTube video https://www.youtube.com/watch?v=AmPk3VVqiWE

EHBs Help and Knowledge base for Grantees

https://www.youtube.com/watch?v=z2FgYkTwGd8

National Organization of State Offices of Rural Health

Efficiency: Work with what you have!

Assets:

- Simple accounting processes assign codes for the grant funds
- Existing financial reports can set grant program up as a separate "center"; if yours is simpler code the grant income line with VC and the expense lines with VC for all payments including payroll.
- Time keeping use what you have now for "payroll" and have a VC "code"
- Filing system passwords, reports etc....agree to file names and places & who has responsibility to "file"
- Shared calendar add due dates for program activities, including contractor deliverable due dates, draws dates, quarterly and end of year reports, with names as needed
- Your team *keep the momentum going*

"CHECKLIST"

- ✓ Systems/processes organized
- ✓ Delegate to contractors and staff
- ✓ Prioritize be brutal, stop and think about when & who before you say "yes"
- ✓ CALENDAR due dates!



National Organization of State Offices of Rural Health

Reporting Requirements

All Awardees

Sept 2022





Final Performance/ Closeout Report

 Additional guidance from HRSA will be provided during the period of performance

SF-428 (Tangible Personal Property Report)

- Must be completed using EHB.
- Must report federally-owned property, acquired equipment with an acquisition cost of \$5K or more and residual unused supplies with total aggregate fair market value exceeding \$5K.

Annual Financial Report (FFR)

 Report should reflect cumulative reporting within the project period of the document number









- Program Purpose
- Implement the approved work plan & budget
- Efficiently deploy the grant resources to meet the needs of the community
- Ensure program and fiscal integrity

"The purpose of the program is to address COVID-19 related health equity gaps & improve health care in rural areas by engaging RHCs to improve vaccine confidence & counter vaccine hesitancy in rural communities"

Say "no", "not today" "no thank you" "how does that relate to our work to build vaccine confidence?"

Efficiency: Your team as an asset!



Did you get it done without detriment to your organization, other programs or team?

Keep it simple!

Acknowledge & appreciate

- FORHP staff (requests and responses and recognition as)
- Your staff (regular meetings? and appreciation)
- Contractors & Partners (publicly recognize their contribution if appropriate)
- Community (your neighbors, you can't do it without them)

General questions about staying efficient?



Meet Your RHC Vax Confidence Team TA Team

NOSORH: rhcvaxconfidenceinfo@nosorh.org



Teryl Eisinger CEO, NOSORH



Tammy NorvilleRHCVC Program Oversight
Technical Assistance Director, NOSORH



Lynette Dickson, MS, LSD

RHCVC Grant Program Coordinator

Connections for Community Care, NOSORH

NARHC: vaxconfidence@narhc.org



Bill Finerfrock
Executive Director, NARHC



Nathan Baugh RHCVC Program Coordinator Director of Government Affairs, NARHC



Sarah Hohman RHCVC Program Coordinator Deputy Director of Government Affairs, NARHC



How to make the most of *FREE*Technical Assistance

- Please read, share and use email information and resource
- Participate in Small Educational Exchange Development groups (SEEDs)
- Tune in to webinars offered to support your work
- Utilize 1:1 TA effectively
 - When you email us, please include your grant number
 - TA team will come alongside you to help you solve the problem, you can ask us anything, that helps implement your program.
 - Utilize the experts and the resources we share: EHB, PMS, SAM.
 - Be as clear as you can about what you are trying to accomplish and what you've done to try to solve the issue.
 - Be patient sometimes we have to wait for an answer.



Any general questions about how to get technical assistance?



Improving health through grant program integrity!

- Sometimes you start with scraps
- Piece things together
- It gets crazy
- Takes tenacity and attention to details and lining things up straight.

<u>Grants Management 101 for RHC Vaccine</u> <u>Confidence Program Survey (surveymonkey.com)</u>

NARHC CEU CODE: Y2MX9





Let's take some time to get to some specific questions...as time allows...



PLEASE ENTER QUESTIONS IN THE CHAT

Or email...

Rhcvaxconfidence@nosorh.org



National Organization of State Offices of Rural Health

Reporting Requirements

Applicable for Select Awardees Only – See Your NOA



8/31/ 2021



Submit Revised Budget

- SF-424A form, budget, & budget narrative must align
- Consult with RHCVC TA

Submit Revised Work Plan

- Review NOA terms (e.g. unallowable expenses, equipment, etc.) & revise work plan
- Consult with RHCVC TA

Submit CMS CCN

 Accredited/certified RHCs awaiting CMS CCN







Common fixes:

- Vaccine confidence funds cannot be used for administering the shot! No coolers, generators, syringes etc...
- Language in the budget justification and work plan must clearly reflect vaccine confidence activities.
- All the forms and attachments must have the same numbers and reflect the activities in the work plan.
- You must be set up in EHB in order to accomplish the required revision.

Best of luck – we're here for you!





Email us:

- rhcvaxconfidenceinfo@nosorh.org
- vaxconfidence@narhc.org