Preventive Health and Health Services Block Grant

New Coordinators Orientation
Agenda

Preventive Health & Health Services Block Grant

• Background
• The Coordinator’s Roles & Responsibilities
• The Application
• Reporting & Reviews
• Role of the CDC Project Officer
• Block Grant Management
• Question & Answer Panel
The Preventive Health and Health Services Block Grant

BACKGROUND

Amy Holmes-Chavez
The Preventive Health and Health Services Block Grant

Flexible funding to address the state, territory or tribe’s most critical priorities.

- Filling the gaps in funding.
- Responding to new / emerging threats.
- Responding to the unique needs of each state.

WHAT DO YOUR COMMUNITIES NEED THE MOST?
Who benefits from PHHS Block Grant funds?

States, U.S. Territories, Tribes, and Communities

- 50 States
- District of Columbia
- 2 Tribes
- U.S. Territories (Puerto Rico, Virgin Islands, 6 Pacific Islands)

40% of state funds go directly to prevention in local communities
Healthier, Safer and More Prepared

COMMUNITIES
Healthier, Safer and More Prepared

- Improved care for stroke victims
- Distributed bike helmets to kids in need
- Infectious disease screening
- Improved access to clinical services
- Decreased alcohol sales to minors
- Stable systems for emergency response
- Increased activity for school children
- Systems to track and monitor injuries
What will your impact be?
The PHHS Block Grant

History & Legislative Background

Jerry Jackson
The History of the PHHS Block Grant

1981

- State control spending
- Categorical grants combined
- Flexibility for states to address their priorities
- Limited restrictions / requirements

1992

- Tied to Healthy People 2000
- Tied funding to outcomes and to target health disparities
- Developed Advisory Committee Role
- Introduced application process and annual report

Now

- Continue to work under the legislation
- Tied to Healthy People 2020
- Two years to expend funding
- CDC funds 61 grants
The Coordinator

Roles & Responsibilities
WHAT ARE THE COORDINATOR’S PRIMARY ROLES?

Enter your answer in the box that appears on screen.
☐ Coordinate all Grant Activities
☐ Communicate with the CDC
☐ Use funds in accordance with legislation
☐ Submit Application / Plan – by July 1st
☐ Submit Annual Report w/ success stories – by Feb 1st
☐ Assist funded programs with application and reporting – Use BGMIS
☐ Form and meet with Advisory Committee
☐ Hold statewide public hearing
☐ Educate administrators / decision makers
☐ Understand fiscal process at fed and state
☐ Access fiscal and legal personnel
The Application

Requirements & Logistics

Larry Gilbertson
Welcome: BGMIS Test QA ncdd_bgmis

The Block Grant Management Information System is a web-based system that enables grantees to create and submit Work Plans, Annual Reports, Success Stories to CDC and to view Compliance Review information.

GUIDANCE
Latest Guidance Documents

NAVIGATION
Using the BGMIS system

ALLOCATIONS
Healthy People Funding

CONTACTS
Current list of Regional CDC Contacts

BULLETINS
- BGMIS Changes and Improvements 12/18/2012 (534 k)
- BGMIS FAQs (85 k)
- Success Story ToolKit FY 2012 (368 k)
- CDC Mini-Style Guide FY 2012 (51 k)

WORK PLAN
The Work Plan defines the Programs, Objectives and Activities that will be carried out using PHHS Block Grant funds. Work Plans are due no later than July 1st.

ANNUAL REPORTS
The Annual Report captures progress towards reaching objectives and completing activities that were identified in the prior year's Work Plan. Reports are due no later than February 1st.

SUCCESS STORIES
Highlighted accomplishments of the PHHS Block Grant Programs.

COMPLIANCE REVIEW
Compliance Reviews are completed in accordance with the PHHS Block Grant legislative mandate.

Enable screen reader compatibility mode

How do you view PDF files on this site?
BGMIS: Block Grant Management Information System

Use BGMIS to Submit:

• Application with Work Plans October 1st - July 1st
• Annual Reports: February 1st
• Success Stories: February 1st
• Compliance Reviews

Get ID and Password - email: BGMIS@cdc.gov
Work Plan
+ State Certifications & Assurances
+ Advisory Committee Minutes
+ Public Hearing Minutes

= APPLICATION

• CDC reviews applications in the BGMIS system
• Funds are expended quarterly

Apply bet. Oct 1 and July 1
+ Work Plan Requirements

• Developed in consultation with the Advisory Committee

• Specifies the Impact Objectives and Annual Activities to be carried out

• Specifies target and disparate populations

• Funds to be expended for the activities identified and for the populations specified

PHSA Section 1905(b) = USC 300-4(b)
SMART impact Objectives

Specific: someone can conclude if objective was achieved - not vague or ambiguous

Measurable: someone can assess how much of objective was achieved - rate, number

Achievable: it should be realistic to achieve objective in the allotted time

Relevant: objective should contribute directly to the program and Healthy People 2020 objective

Timely: have a deadline or timeframe for completion of objective - one year maximum
SMART Objective?

Staff within the Office of Planning and Policy will provide the necessary tools (templates, training, relevant public health data) to local public health agencies in order to prepare for accreditation.

Name one thing that would improve this objective. (Enter your answer into the box that appears)
Between 10/2013 and 09/2014, staff within Office of Planning and Policy will provide the appropriate tools (templates, training, relevant public health data) to 55 local public health agencies in order to prepare for the Public Health Accreditation process.
• State Certification Form signed by State Health Officer **assures** drug and tobacco-free work place, no fraud, lobbying, etc.

• State Certification and Assurances Form signed by the Governor **assures** functioning PHHS Advisory Committee, chaired by State Health Officer or designee, a PHHS work plan, and what State Health Officer signed above

PHSA Section 1905(c) = USC 300w-4(c)
Advisory Committee

Representatives from:

- Non profit organizations
- Local health departments
- Schools of public health/academia
- Minority health organizations

Chairperson: State Health Officer

Submit Minutes in BGMIS with application
Budget Reminders

- Grantees have two years to expend the funds in any given year.
- The Annual Basic and Sex Offense amounts must match the current allocation table amounts (in BGMIS).
- Administrative costs cannot exceed 10% of the budget amount.
- The Transfer amount must not exceed 7% of the Annual Basic amount.
Reporting & Reviews

REPORTS, SUCCESS STORIES AND
COMPLIANCE REVIEW

Jerry Jackson
Annual Reports & Success Stories

✓ The Annual Report captures progress towards reaching objectives and completing activities identified in the prior year's Work Plan.

✓ Federal Financial Report (FFR) Due December 30

✓ Success Stories showcase highlighted accomplishments of your PHHS Block Grant Programs.

PHSA Section 1906(b)(1-2) = USC (b)(1-2)
QUESTIONS:

1. The Success Stories are a great way to...

2. Each story will describe what pieces of the program?

3. Using _____ in your success stories is a powerful way to illustrate your state’s hard work.

Enter your answer in the boxes that appear on screen.
What will your story be?

Issue - Intervention - Impact

Preventive Health and Health Services Block Grant

Hawaii

Easy Access Project Eases Immigrants into a New Life

"Without the volunteer physicians who offer medical services to new immigrants, they would have no place to turn to until they find employment. The delay of proper health care increases the risk for the spread of infectious diseases to the general population."

—Arnold W. Watkins, Program Director
Hawaii State Department of Health, Easy Access Project

Public Health Problem

In 2003, the Catholic Archdiocese of Hawaii launched a program to work with patients who have Hansen's disease. In previous studies, infectious diseases such as Hansen's disease may become a greater threat to a larger segment of the U.S. population. They are already in Hawaii. Each year, more than 4,000 new cases are reported in Hawaii from countries with high rates of infectious diseases. This puts more than one million Hawaiian residents at risk for contagious diseases such as tuberculosis (TB), polio, meningitis, typhoid, whooping cough, and HIV/AIDS.

Hawaii has the nation's highest rate of TB—almost three times the overall U.S. rate—and of Hansen's disease. Health officials in Hawaii also must watch for infectious diseases that are uncommon in the rest of the country (such as leprosy), a rare disease that is widespread in the tropical and subtropical areas of Asia and the Pacific, where many immigrants originate.

According to the CDC, vaccines are one of the most effective weapons against infectious diseases. However, for many of the diseases affecting Hawaiians, no vaccines exist. Health workers at the Hawaii State Department of Health (DOH) always feel the sense of urgency about preventing the spread of these diseases to the local population.

Talking Action

Since 1995, the Hawaii DOH has worked to protect residents and visitors from serious, preventable infectious diseases with funding from CDC's Preventive Health and Health Services (PHHS) Block Grant. Today, the Easy Access Project raises the profile of PHHS funding, which provides language-appropriate and culturally sensitive health services to newly arriving immigrants.

Federal law mandates that all immigrants from countries with high rates of infectious diseases must report to the Hawaii DOH for TB testing. In partnership with U.S. Citizenship and Immigration Services and the Louisiana Health Care in Honolulu, the Easy Access Project offers free or low-cost medical visits for other infectious diseases in the United States. They are also available for screenings.

In 2018, PHHS Block Grant funds helped the Easy Access Project to continue the following efforts:

- Project staff visited newly arrived immigrants to determine their health needs and referred them for appropriate treatment.

Taking Action (continued)

- Outreach and education services were offered to clients, along with referrals for health services including vaccinations, primary preventive care, and counseling on health behaviors related to nutrition, physical activity, and tobacco use.
- The Easy Access Project built and maintained relationships with key community partners, volunteer physicians, and dentists to provide free or low-cost services.

Impact

Each year, many grateful clients write letters thanking the Easy Access Project for making their transition to Hawaii easier. They say that they now know about important health issues and where to go to get help. Thank you,” says one, “for being a Filipino mother of two.

Thanks to PHHS Block Grant funding, the Easy Access Project has reduced the risk of preventable illnesses to Hawaiians by providing necessary screenings for infectious diseases and basic health services to immigrants. In 2015, the Hawaii DOH reported the following accomplishments for the Easy Access Project:

- Of the 4,295 new immigrants who came to live in Hawaii, 4% received initial health assessments, received vaccinations, received education, and referrals to health and social service programs.
- Easy Access Project staff worked directly with communities to provide educational materials about the importance of regular health checks and development of community partnerships.
- In 2010, the Easy Access Project leveraged PHHS Block Grant funding to provide an estimated $1,000,000 in medical services through community partners such as Bayview Clinic, Hawaii Women's Network, and other health care providers.
Compliance Review

“The Secretary shall conduct in several States in each fiscal year investigations of the use of funds received by the States under this in order to evaluate compliance with the requirements of this part and certifications provided under section 300w-4 of this title”

United States Code – Title 42
The Compliance Review

Preparing

• Project Officer
  – Notifies Grantee
  – Assists in Planning or review

• BGMIS
  – Provides documents and tools to help prepare

At the Review

• Project Officer
  – Participates in programmatic presentations

• Procurement and Grants Office (PGO) Reviews:
  – Financial Management System
  – Existing State documents
  – All funding documentation
The PHHS Block Grant

Your CDC Project Officers
Your Project Officer’s Role

Support!

• Provides program updates as necessary
• Reviews application / work plan & provides feedback
• Reviews and approves Annual Report
• Programming and Funding Questions
• Collaborate with Regional Representatives
The PHHS Block Grant

GRANTS MANAGEMENT

Michelle Ranger
Purpose of Grants Management

- To coordinate the business, administration and financial aspects of the federal award
**CDC Procurement and Grants Office**

- **Business conduit for all program requirements**
  - Ensure compliance with applicable statutes, regulations and policies
  - Serve as the official receipt point for ALL official communications and contacts with awardees
  - Negotiates, awards, administers and closes out all grants and cooperative agreements
  - Reviews and approves all financial requests
CDC Roles and Responsibilities

- **Grants Management Officer (GMO):**
  - ONLY official authorized to 1) require the OPDIV to spend federal funds or 2) change the funding, duration, or other terms and conditions of an award

- **Grants Management Specialist (GMS):**
  - Point of contact for requests of changes to Notice of Award
  - Receives financial reports
  - Provides business management advice and guidance

- **Project Officer (PO):**
  - For PHHS block grant, serves as focal point for advice and guidance
  - Official responsible for the programmatic, scientific, and/or technical aspects of assigned grants
Signed by Grants Management Officer

Project Director /Principal Investigator identified

Addressed to recipients business official

Includes Award Number

Defines budget and project period
CDC Contact Information

- Project Officer
- Grants Management Specialist
- Grants Management Officer
Compliance Visit
Financial Review Components

- Review of fiscal/accounting control policies and procedures
- Review use of allotments
- Review of independent audit reports
- Review maintenance of effort
- Review administrative costs
Compliance Visit
Financial Review Components

- **Time Period Covered:** Previous two federal fiscal years
- **For compliance visits in FY 2014:**
  - Financial information for FY 2013 and FY 2012 will be reviewed

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Compliance Visit
Grantee Responsibilities for Financial Review

- Provide meeting room space
- Provide overview of fiscal control process
- Provide organization flow charts as needed
- Ensure access to documents at site:
  - Chart of accounts
  - Trial balance
  - Organization fiscal policies and procedures
  - Organization definitions of costs
- Ensure access to appropriate personnel for questions throughout financial review
Consult legislation for unallowable expenditures including:
- Inpatient services
- Major medical equipment
- Purchase or improve land

Ensure allowable per applicable cost principles (A-87)

Contact Project Officer for guidance

Project Officer will forward to Grants Specialist as necessary
Federal Financial Reports (FFRs)

- Also known as SF-425 or SF-425 A
- Include only those funds authorized and disbursed during the budget period covered by the report
- Indicate the exact balance of unobligated funds
- Any FFR requested to be revised must be submitted within 15 months from the original due date
- Electronic versions of the form can be downloaded at:
- Instructions for the form can be downloaded at:
Federal Financial Reports (FFRs)

- Blocks 1-9: Descriptive information
- Blocks 10-11: Financial information
- Block 12: Explanatory remarks
- Block 13: Completed by the AOR/SO
Federal Financial Reports (FFRs)

- eRA Commons (http://era.nih.gov/)
  - System that all FFRs must be submitted through effective October 1, 2012
  - Grantees not yet registered can go to the following web address for instructions
    - [https://commons.era.nih.gov/commons/registration/registrationInstructions.jsp](https://commons.era.nih.gov/commons/registration/registrationInstructions.jsp)
  - User guide and on-line demonstration can be found at the eRA Commons Support page
    - Web: [http://www.cdc.gov/od/pgo/funding/grants/eramain.shtm](http://www.cdc.gov/od/pgo/funding/grants/eramain.shtm)
  - General questions about eRA Commons should be directed to the Helpdesk
    - Web: [http://ithelpdesk.nih.gov/eRA/](http://ithelpdesk.nih.gov/eRA/)
Useful Resources

- **HHS General Grants Information**
  - Web: [http://dhhs.gov/asfr/ogapa/aboutog/grantsnet.html](http://dhhs.gov/asfr/ogapa/aboutog/grantsnet.html)

- **HHS Grants Policy Statement**

- **2 Code of Federal Regulations, Grants and Agreements**
  - Web: [http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=8&SID=3f491b37dfd37091d28b8d5ebb8cecee&ty=HTML&h=L&n=2y1.1.2.10.2&r=PART](http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=8&SID=3f491b37dfd37091d28b8d5ebb8cecee&ty=HTML&h=L&n=2y1.1.2.10.2&r=PART)

- **45 Code of Federal Regulations Part 92 (State, Local and Tribal Governments)**
  - Web: [http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=20&SID=3f491b37dfd37091d28b8d5ebb8cece&ty=HTML&h=L&n=45y1.0.1.1.49&r=PART](http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=20&SID=3f491b37dfd37091d28b8d5ebb8cece&ty=HTML&h=L&n=45y1.0.1.1.49&r=PART)
Useful Resources

- **OMB Circulars**
  - Web: [http://www.whitehouse.gov/omb/circulars_default](http://www.whitehouse.gov/omb/circulars_default)
  - A-21: Cost Principles for Educational Institutions
  - A-87: Cost Principles for State, Local and Indian Tribal Governments
  - A-102: Grants and Cooperative Agreements with State and Local Governments
  - A-122: Cost Principles for Non-Profit Organizations
  - A-133: Audits of States, Local Governments and Non-Profit Organizations

- **Budget Guidelines**
  - Web: [http://www.cdc.gov/od/pgo/funding/grants/foamain.shtm](http://www.cdc.gov/od/pgo/funding/grants/foamain.shtm)

- **Various Forms (including SF-425, etc.)**
  - Web: [http://www.whitehouse.gov/omb/grants/grants_forms.html](http://www.whitehouse.gov/omb/grants/grants_forms.html)
ENTER ONE THING YOU LEARNED TODAY INTO THE BOX!
Thank you!