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Grants Management 101 for RHC Vaccine Confidence Program

Nathan Baugh:

0:05

Hello, everyone, Welcome to our webinar today. My name's Nathan Baugh with the National Association of Rural Health Clinics.

0:12

Today's webinar is Grants Management 101, for folks that received the RHC Vaccine Confidence Grant.

0:22

I'm gonna go over a few logistics and then turn it over to our speaker here momentarily for folks that have connection issues. Please just try to reset goto Webinar that usually fixes the issue. But obviously we can't guarantee that bandwidth is going to hold up for all parties.

0:42

The, the other thing I wanna mention is that if you are really struggling, we will have this recorded and posted after the fact, so you will be able to view this online, probably a day or two. So don't fret too much.

1:02

We will have a question and answer section at the end largely done through the text and we will open up that question box when we get to the Q&A period and get to those questions. So in the interest of getting to the Heart of the content as fast as possible.

1:23

I'm just going to introduce Teryl Eisenger who is the CEO of no sore and our speaker and our expert for today's topic Teryl.

Teryl Eisenger:

1:34

Thank you Nathan and hi everybody. I'm just gonna say on high, on camera really quick and to let you know that I'm going to fly through these slides today. We'll welcome your general questions. And we're also, if there's time, allowed, me catch a few extra minutes at the end to get into some specifics. So let me get going here. I'm going to get myself off camera, and let's talk about, just like to say, it's my great privilege of life to lead the National Organization of State Offices of Rural Health. And we're dedicated to promoting the capacity of state offices of rural health and rural stakeholders across the country. And certainly, the rural health clinics are a key stakeholder for us.

2:18

And we're so proud to be able to do and be the designated technical assistance provider selected by the Federal Office of Rural Health Policy. I hope that you know us for the good work of the State Offices of Rural Health around the country. They are different and unique in every single

state. They are funded by the same folks who are funded by the Federal Office of Rural Health Policy. to do three things, disseminate information, co-ordinate for rural health, and provide technical assistance.

2:49

They do a lot of work on a lot of different things, and that's by Design. State Offices match every federal dollar that they get with three state dollars. So they're very focused on the state, Mean, they're all different. And I would recommend that you connect with your state Office of Rural Health. They don't have a specific assignment for technical assistance for RHC, that's confidence. But they do have an interest in learning about your needs. And you can find your state Office of Rural Health on our website. I've given you the link.

3:18

I also hope that you know us, or will get to know us this year, with our work on National Rural Health Day, every year. We take time out this year, on November 18, to tell a good story of what's happening in rural health.

3:34

We have all kinds of free resources there to be a great way for you to shout out about your good work on backs competence. I'm now the other work you're doing to improve health and rural communities. Everything on there is free, and giving you a link to promotional toolkit. Last year, it's really become a Social Media Campaign, which we all know it's so critical. Last year, we had 68 million impressions on Twitter for National Rural Health Day, so I want you to be a part of that. And you didn't know it's free, and they are key stakeholder that I've also been asked to share another resource within. this will be the end of my commercial announcements, is that the Center for Disease Control is hosting a webinar and information for back to school and cause at 19.

4:19

You can be a hero in your community, and link to your educational stakeholders, in your own community by sharing 50 BC.

4:29

Session that's designed specifically for rural educators and administrators, have given you the link there, and I hope that you're always keeping an eye out for resources from the Center.

4:40

OK, all that said, let me tell you a little bit about our team. No, sir, is the lead for Technical Assistance for Rural Health Clinic Vaccine Confidence, but we partner in that work with the National Association of Rural Health Clinics, Want to give a special shout-out to Nathan and to Kate, who really helped us put together today's Webinar, and are conducting that. For us. The National Association of Rural Health Clinics is a membership association of rural health clinics across the country. I also want to give a special shout-out to our friends at the Federal Office of Rural Health Policy. And I'll talk more as we're going through today, but to let you know. And I've worked around rural health for about 28 years now, Melissa. That time on and off with the Federal Office of Rural Health Policy.

5:31

And I do have to say that especially with this effort related to the pandemic, they are the most understanding, flexible advocates for small, rural places where their clinics or hospitals or their

communities, they have an eye to your needs. They have a dedication to get you what you need. And an unprecedented year, you've gotten funding due in no small part, to the hard work of those spaces that you see on that slide. So we very much appreciate that. Those project officers, there aren't very many of them, there are about 800 of you who've gotten these grants, They're working very diligently, and we're proud to know soar Technical Assistance Team, led by Tammy Norval and boots on the ground. Lynette Dixon, and I are very proud to come alongside with all of these folks in this work. So, that's us. You'll, you'll not be a more informed, or a friendly group of folks who are dedicated to your work.

6:35

So, I do want to tell you that my approach to today's session is going to be different than what you would hear from the Federal Office of Rural Health Policy, or other, even consultants, Because I have to tell you, I've done everything that you can do, that it's not good when it comes to grants management. I've also, so it's the school of Hard Knocks and Lessons Learned. I've also had some very proud moments over the course of my career in rural health, that related to my efforts around grants management, and program management, and that can be a, share that with you, with just a little bit of bread.

7:12

But mostly to let you know, that I've been in your place, this is cumbersome. It sometimes feels like a big task, but I know that you have the capacity to do the right thing, with your grant and with managing your grants. So, you're going to hear the good, the bad, and the ugly for me a little bit today, and I hope to encourage you.

7:33

It's hard, as you can well imagine, to plan a webinar, for people who are all different levels, in your work and in your experience with Federal grants and working in small towns, and working in rural health clinics. I've never worked in a rural health clinic, but I have to make some assumptions as we begin today's webinar. And I'm going to assume, and this may not be true, for all of you, that you might be new to the Federal grant world. And it is a different world, It's a different language spoken sometimes. But it's an exciting place to get a foothold in and to learn to about resources that are dedicated to rural communities. We know that you're committed to improving the health of your community, and we know it's a huge job.

8:17

If you're not worried about what magnetic goes on the refrigerator and who needs to be vaccinated, and how you can really help keep somebody out of the ambulance every week, you're probably not doing your job. So we know that you're committed, and we want to be alongside you, and all that you do.

8:36

We also know that vaccine hesitancy is prevalent throughout rural America. And that makes your work very, very challenging. And we empathize with you. We want to support you. And we want you to feel confident to carry out the work that you have to do, which might not be so easy in a place where some folks are vaccine hesitant.

8:59

We assume, also, that you submitted a Work Plan and a budget to improve facts competence in your community, and that you might need to make some adjustments to that sooner rather than later, right away. I'm going to get to some more details about that. Towards the end, I hope to speak in generalities for anything that we talk about should help those of you who have to make some corrections early on. But we will try to help you guide and set your compass to true north to get this work done. Most of going to assume, and I say this with a little bit of trepidation that you've listened to, and that you'll understand two different things there. The information from the Kickoff webinars that were conducted by the federal Office of Rural Health Policy, they did a great job with that webinar. And I'll be referencing what they've already shared with you throughout trying not to be too redundant.

9:55

I'm also going to take another little bit of a reach and hope that you've done some of the first things, First things that they had mentioned on their webinar, and as you got your Notice of Award.

10:06

So, we want you, I'm going to assume that you have received your award letter, about 30 of you may have not yet received your award letter, but I'm going to assume you've got it. And you read it. And you understand that. that is your grant agreement.

10:23

I hope that you've been able to provide any additional information that was requested, that you're working on getting that back, certainly here to help you do that. I hope that you've taken some time to do a shout-out in your community, that you've been tapped for that expertise to share the news, that you're working to help people understand the importance of protecting the health of rural communities through vaccine, Not just from covert 19, but from childhood disease, from pneumonia, from sexually transmitted diseases. All those kinds of vaccination that are so important to maintain the health of the community. So, hope you share the news and are very proud of the work that you've done to get the grant.

11:04

You know that, or I hope, you know, maybe I'm assuming not, but you need to walk into the Financial Management and Grants Management system, and you know how funds are received. I say that, I'm assuming you know that, but I'm going to talk more about that today. And I hope, also, that you know that one of the first things you should do is to gather your team and your partners to review all the due dates and the milestones and those things. So, maybe you've gotten those things done and maybe I shouldn't assume nap, and I'll be talking about them, Here's what we have planned for you today and do a little bit around with my screen here for a minute. Get myself off camera.

11:43

I mean, these are objective. This is what we hope that you will be able to do by the end of the webinar, To implement five simple strategies for grants management. To utilize web sites and basic tools to manage and track all aspects of your grant program, and to tap into the expertise that we have to offer you. As I said, at the end of the hour, I'm going to try to offer you some time to hang on and answer some specific questions to your project. Let's get going with that.

12:18

I don't know why that happened. Hang on just a minute.

12:25

Just sharing my screen and my slides, I keep coming on camera, so that's just so lovely. Superego, Just one minute, I'm sorry.

12:38

There we go. I want to talk about these five strategies. That's my first objective: There: adaptability, communication, accountability, effectiveness, and efficiency. These are all things that you're familiar with, if you're already running clinic, but there's some special aspects to doing grants management that I want you to think about. So, let's talk about what is Grants Management.

13:01

HRSA says that grants management is managing the day-to-day operations of your awards, the supported activities, the project performance, and the payment of awards. The ... Center, which does great job for grant training, and charges a lot of money. Says, and I like their definition, grants management relates to all of the administrative tasks to handle the reporting and implementation. And we, in a way, that meets generally accepted standard.

13:28

But you have a different standard. You have a standard to meet the requirements to be accountable. If you think about it this way, you're getting public money. You're accountable in some ways, to the tax payer pairs of the United States of America. So I like a little bit of that definition. That's more specific. Management is about planning, organizing, and controlling all aspects of your grant program to ensure accountability, your communication, your effectiveness, and your efficiency. It's about doing all the right step that you really need to do in order to be successful with this grant program. And I think one of the first strategies is really about adaptability. And, you know, that's our ability to change or to be change, to fit in somewhere where some situation, for some purpose, that is really requiring you to be, like gumbi, right, to be flexible. In order to be adaptable.

14:27

They have to listen a lot. I love the old saying, God gave you 2, 2 ears, and one mouth, so that you listen more and talk less.

14:35

It's also your responsibility, and your ability to adapt.

14:39

Depends on your willingness, in finding the time to read, and read and read more, and also to pivot.

14:47

Pivot with the trends in your community, pivot with changing requirements, pivot with the needs as you understand them for your grant.

14:56

Um, one of the best foundations for this, where you're going to find the most work, if you've not done any of those things, I've assumed you do, You do nothing else. Go to that HRSA website which I've linked at the bottom and that little pill pair, pale green box and start reading and listening.

15:16

Reading and listening to the webinar recording that they've provided, Leading to listening and reading to the overview of it, and looking for more information there. They've done a great job with all of that work. The website is really shaped up well. There's a lot of information there for you, and you will get what you need there.

15:39

Also, read the Notice of Award on the Kickoff webinar. The Federal Office of Rural Health Policy, and the Grants Management Specialist for the project went into detail about what to look at at your notice of award. This is just one of their slides.

15:57

It was, it's very clear if the official document, you need numbers off of it. It lays out all the terms and conditions. Some of them, I'll be honest with you. When you read them, you're going to go to, what does that mean? Well, find out, read it, and then ask questions as necessary. Got the basic award information.

16:18

Your director is who your specialist is.

16:21

Any special remark, the date that the issue of your grant number you're going to need those numbers. You're going to want to keep an eye to all of those. And then, there's lots of other information in there that is going to help you manage your grant. You gotta read that thing. That's a starting point.

16:36

Then also, read again, the information provided by the Federal Office of Rural Health Policy and these links. This is how your federal funder and their understands, and articulates and gives you the direction about how to manage grant, manage the grant, it's their piece of what your requirements are laid that out very nicely for you. Some of you have had challenged with some of that. Some of you haven't tried yet, and some of you are already up and running, and trying to get your money, which I apply.

17:10

But make sure that you read and understand to the best of your ability, as you're getting started, that grants management process, and not just a little. So reminders about the federal information that's been provided. And then a few little bit of words about what it is to be a grant manager, I loved. I listen to NPR story about this Conductor Marin Alsop, who conducts the Baltimore Symphony Orchestra.

17:38

And the interviewer said to her, What the heck are you doing up there? Just see you weigh on around this little baton. And she's like, oh, my gosh.

17:50

And then she started to explain that. It wasn't her musical expertise.

17:56

It wasn't her understanding or our love of the piece of music that was her best skills, that it was her ability to use her face.

18:09

And you can see it here. And I love that she said, her best tool was her non-verbal communication. Because, honestly, all kinds of communication are important in this work. But what you can see on the face of her, one, is that one picture isn't actually hurts. A conductor getting everyone to sing off the same sheet of music. That's your job as a grant manager. You can see in the top right there, she's looking at bread has got the first violin and she's thinking, bread are you coming in or not, or it's your time. And then the second one where she's bringing people along and saying, Look, we're doing that it's working. You know, it's fabulous, good job. And then that one we're Harris all crazy, that's how you I guarantee, are going to appeal someday, when it's either going to be joy or complete exasperated Like, where the heck are Fred and Betty today?

19:01

So, you, you are going to need that patient, so you're going to need that. the mass, as you're getting a lot of people. Just seeing off the same sheet of music, You might be working with clinic staff and support staff. It might be talking to accounting or finance person, who speaks to all different language than you. You're gonna know your project officers, they speak a little bit different language, or you. Hopefully, you're making linkages and you're getting the community and the media to understand what you're trying to accomplish in your town. You're working with partners and contractors who have specific deliverables, and you're working with us. and you're gonna like that. So just keep that in mind, but that's kind of your job, to remain calm. Use your pace to get it done.

19:47

And one of the best ways to ensure that you're adaptable from the beginning, is just start talking to people, you know, be like gummy.

19:56

Yeah, They're up the team.

19:58

If the partners together and walk them through, exactly what the heck are you trying to accomplish with your grant? You share the concept, share the budgets, share, the work plan, and listened to their questions. Walk them through that. What's, who's the lead staff? Who's going to speak for this program? How are we going to use this money? We've got all kinds of money, Are we going to use this money? Why can't we buy a refrigerator, all those kinds of questions? What are you gonna measure? You don't have to measure a lot with this grant. And when are the reports to then listen? Puts your ears on there, and see if there's something that you wrote into your plan, that maybe you need to plan a little bit differently. Because your team and your staff are gonna give you the kind of feedback do you want? They might look at you and say, are you crazy? But then start to make some small and minor tweaks to what you need to do.

20:47

And here's a little bit of a crass rule. It's not The Golden Rule you learned in Sunday School. That's the golden rule of being adaptable and communicating with grant project. Here's the bottom line, folks, here, who has the grant? has the Gold Rules? And in this case, it's your, It's your federal grant, or sometimes the Foundation.

21:06

Sometimes, it's a donor, and sometimes we get, we don't always feel like we've understood a clear direction.

21:17

Sometimes, even in my experience, I once had a project officer who had notes understanding our budget, and told me to categorize some funds in a way that I didn't want to categorize them, but he was the project officer, and I did what they said.

21:35

I also do my best, and I'm not perfect at it, that if a project officer or a grant funder has a question, or has the request, and wants to know what's working and what's not, I try to answer that question. I'd try to make it a priority, and I would encourage you to be adaptable to know that the folks who are running these programs, that the Federal Office of Rural Health Policy are accountable to Congress, that the rules are shifting that. Some things are unclear that this money rolled out fast, but to make sure that you understand. To the best of your ability, how you can meet the needs and follow the rules of the program.

22:15

And part of that, really, is about communication. And that's an important strategy for you as well. And this is pretty basic. I'm not here to teach your communication class, But what I want you to think about, when you think about communication is what is that?

22:31

So many times, when we have problems with running a grant, or conducting any kind of effort, any kind of program, things can go sideways.

22:41

My experience is, that usually, people want to blame that on. That's poor communication. Not just the facts.

22:49

Sometimes your systems, sorry. suck. Sometimes you don't have the people that you need, but you can control your communication, and I ask you to think about it.

23:00

This way is the old-school diagram kind of stole from bits and pieces of my understanding and communication.

23:07

There's a center, and there's the receiver of communication.

23:11

And then, there's this thing in the middle, you think you've sent out this laser light beam of what, what it's all about, somebody else has this perception, think of it like a prison, it comes out the other end to the receiver. Maybe your Project officer, maybe your clinical providers, maybe your contractors, maybe your team, and if you're white, and they've got red, orange, yellow, blue green and to go or violet. So, really vary.

23:36

Conscious of the fact that what you communicate really means something different for other people.

23:43

And that little man up in the corner that says, you know, Really? Consider?

23:48

What your communication goal really think, What is it that you most want, from that communication? You want to know, how the heck you're gonna get past this?

23:59

Finally, now, if you're new budget, well, what is it that's wrong? So, you know, ask, ask that specific question. Don't get yourself all jammed up. And, you know, you really made me mad, I did it this way, and then I did it again. And then I did, again, that's not going to happen to you, but be very clear. Just stop to think or to, you know, pay the price for not crafting your question correctly.

24:23

So be very clear about what it is that you want to know, and what you want, that receiver of your communication to know back. Now, you can put that in your pipe and smoke that ticket home. And tell your husband or whatever you need to do with that. But I would just tell you to be very careful with your communication in order to avoid misunderstandings and conflict. I had a great example of this come up today.

24:47

I was trying to check my slides and to make sure that I had things, right, So, so lesson learned and checking your language and your use of terms and acronyms.

24:57

And Sarah Young, who is the Division leader in the Federal Office of Rural Health Policy was very gently and kindly helped me understand acronym that I've been using for years called the FFR.

25:12

I didn't realize until Sarah laid it out for me that the payment management system PMS cash report is it is due quarterly. I was checking on deadlines for you guys.

25:24

and PMS calls that cash report an FFR of federal financial report, but HRSA, a separate division that works with Department of Health and Human Service Programs where the federal Office of Rural Health Policy Live generally calls the quarterly cash report, an STTR.

25:43

So, that's a little bit different. Then, on the flip side, per-se also generally cost the annual report, the FFR.

25:51

And the Payment Management System called both the annual and quarterly report, the FFR. So, watch what you're saying, use your language. Be clear about what you're asking. I thought was a classic example. Now, you probably want to hang up the phone and not listen to any more, but you will, you will see the terms as you go through, You're always wanting to be checking them.

26:11

So, when you think about receivers up your communication, think first about communicating with your federal project officers and with the TA providers. And during their webinar, the Federal Office of Rural Health Policy gave you this slide very clear about the the team and the project officers, that using the HRSA listserv to ask questions participating in the quarterly reviews and using the notes or an RHC, ... Confidence e-mail addresses. So, always put your grant number on there so they told you how to communicate with them.

26:53

And so, listen when people tell you how to communicate with them.

26:58

And then another couple, just a few little thoughts for you about communication, which is an important strategy as you're writing a grant. Consider the receiver. Consider the team that you're working with, and the program partners, when you get them together, and you're starting this, and getting going.

27:13

Ask them. Figure out, and know that everybody understands who was the point person. How are you going to communicate? Is it OK if I check shoe on Saturday afternoon? It's a great question to ask, Are we going to share a drive for sharing of documents? Is there some kind of software we're going to use to communicate? Ask them, how often, we're going to communicate. When every day, we're going to have five minute huddles in the morning. And schedule it, and, you know, maybe you schedule it at a time when you're about to turn in your quarterly cash report. Something like that.

27:45

So it can be deliberate and intentional about the communication, and then get their buy in, Just ask them, this is gonna work for everybody, you prefer text, rather than an e-mail, or you want everything by e-mail, how's this gonna work, Then, be really clear.

28:01

If things don't go as planned, or assignments are missed, be clear about what your plan is going to be. The whole team is going to dig in and get it done. I'm gonna call you pointedly, and I'm going to come alongside you, and we're gonna get it done. Or there's going to be a stick, and the carrot or a stick and lay that out for people. So again, you know, top five things.

28:22

Taken our little hints from the conjecture is, you know, your, your job in communication. Keep everybody informed. What's going on? That's an all day job. Ensuring clear expectations,

meaning, tilings, making sure that you are really sharing and the value of that work, and that appreciation and being upfront and honest.

28:42

And direct with your feedback, Reporting? Dealing with conflict, check in your language. Honestly, Sometimes, for me?

28:52

I'm sure it will for you. It just feel like herding cats. But that's OK, that's your job. And and your projects are relatively simple, that I think that, with a few thoughts in mind about accountability and effectiveness and efficiency, This is doable for you.

29:12

Let's switch now to the third strategy and that's about being accountable. Accountable.

29:19

Accountability is about an obligation or willingness to accept responsibility, mean Answerable and Explainable. It's about documenting things about, it's about making sure processes are in place and tracking and transparency. I gotta tell you the lead of our technical assistance team as Tammy normal.

29:40

She's Wicket brilliant, has worked with rural health clinics for years, and she came to work for us several years ago, and she said, What's the process for that? I'm like, What's the process for that? She's always ask me, What's the process? What's the process? And finally, she's got misshaped up a little bit, that I'm sure she would like more processes. So, it really is important that we lay out a path for people, And that's all that's about, is making sure that there's the path to be accountable for that grant funding, that you have.

30:11

Got some questions for If I do it as a quiz. But we don't have that much time for you. So one of the things I like people to think about as they're doing grants management to think about who's your key customer for the work.

30:25

Certainly, I think, it's your project officers. It's your community. Your neighbors, the people who your consultants, your partners, they are all important key customers. Because, at some point in time, you're going to be able to push the shop from somebody and you want to know, who are you really working for? And thinking about them and putting them first. So, it's not it's a good question for you to ponder and think about, maybe it's your board, maybe it's the doc in your clinic. So, think about, you know, where, where that needs to be. There's too many answers to that, and it's dependent on you and for you, that helps you prioritize, which is key to another one of our strategies that proficiency. What's the project period?

31:07

Believe that your project period is July one to June 30th. Some of you got your awards after July one, but ... made allowances for that. Including reimbursement of expenses if you need it.

31:21

What are the major reporting requirements?

31:24

And I've laid them out here 30 days after the end of every calendar quarter, so they're listed there. And then there's the final report due 30 days out on October the 30th.

31:37

Know, those gaped, I can tell you that we won't let you miss a deadline if you're paying attention to e-mail and other notices. You should ask yourself, what's the approved budget for personnel or contractors, equipment, supplies?

31:54

And, notice, I said, Approved, and I've said, for you to check your Notice of Award, because what's so cool about understanding your Notice of award is it gives you the curves to your project. If you have an approved notice of award with no terms and conditions to correct it, you're golden, you know your budget, your set off, you're going to go, and you can use that.

32:17

Literally, take it to the back.

32:20

What are the deliverables or subcontractors or who are consultants who will be paid from the funds? In a perfect world, it's not a perfect world, you probably said something about that in your budget or your work plan.

32:33

And if you didn't, then be answering, what is it that I need from those partners or subcontractors or consultants?

32:41

Will program income B or it's allowed. But I will tell you that it has to be plowed back into the purpose of the project, There are a couple of ways to handle that for a short-term project, like you have. Personally, my recommendation is, I would let that way and just, but if you're not going to, if you're going to try to earn some program income, make sure that you know those rules. That's a whole other subject, and can be very complex. So, But, you've got a short-term project to implement and less than a year.

33:10

And my advice to you would be this personal advice, My advice to you would be, get the get the grant funds used for their specific purpose leverage later.

33:21

Another question is, does the work plan identify the responsible party and timeline?

33:26

If not, tweak your work plan a little bit? It's a simple tool, Add those to your work plan and make it a tool for yourself to know who's in charge of what, and when they're in charge of it and what's got to be delivered.

33:39

Another question is, what are the requirements for evaluation, including data reporting and analysis? I'm going to tell you guys, this is fantastic news, You don't have a complex evaluation requirement.

33:53

Real point, the Congress and the Federal Office of Rural Health Policy wants to accomplish is to increase vaccine confidence among the public. They're going to be some simple data reporting to do for the end of the project period. I can tell you, I have confidence that the federal Office of Rural Health Policy will look to us, the National Association of Rural Health Clinics, and others, to determine what are some simple measures that we can ask you, and what kind of data can you report? So, I would not worry about that, and that's a great accolade to, you know, the benefits of this program. Who are the project staff and are they in place is another question? If they're not in place, I would urge you to figure it out.

34:41

Who's going to do that work? Until they are, hopefully you've been able to checkout person premier clinic or a community and appoint them to this project for this period, and that's the easiest way to put project staff in place for vaccine confidence.

34:58

If not, if you're doing hiring or something else, you really do need to make a plan about who's going to do this work, in order to keep up with how fast this is gonna fly by. And then next, you know, kind of what are the guiding rules?

35:13

There's a great website, part of the personal website, that Sarah Young actually pointed me today, with a list of all those rules.

35:23

There's a lot.

35:24

I can assure you, they are reflected in your Notice of Award. I can assure you, if there's a deadline associated to them, You're going to know about that if you're paying attention. And I also would just try to encourage you just a little bit. Don't look at that list and all of those links and be overwhelmed and give up left the Arthur Ashe Grote. Start where you are.

35:48

Use what you have your Notice of Award and do what you can. That's a great, you know, little nice little thing about taking things one piece at a time. And you will learn them as you go. And you will know, and if you pay attention, you won't miss things. Some things will surprise you, and then you'll remember that golden rule and you'll get it done.

36:11

But this is a good resource for you. If you have the time, I would urge you to read through them and educate yourself and read through and understand where you're going with all of that. Some won't be directly applicable. Some will not, because you're running a unique program. But they're here, they're a nice little package. Think almost all of them or they're not 100% sure didn't

check your Notice of Award. You can do that and let us know if we can help you with any of that.

36:42

Let's talk about this accountability in whose job it is.

36:46

You might have a board and that's going to depend on your RHC and really, the role of the board. I'd encourage you to communicate with your board that you're doing this.

36:58

Then their job is to support your effort, like any board has fiscal and oversight responsibility for the organization, and put their job is also to support you.

37:08

And more importantly, if you're able Chimp and every board is different, they're not all, it's great, it's like word.

37:15

But they can serve as ambassadors within the community, promote vaccine confidence to encourage the partners, and to encourage your work.

37:25

So, the best practices that your board is aware and they're out there working in the community to bring attention to your good work and to support what you need to get, John. Financial staff. It's really going to be varied, depending on what kind of organization you are, if you're independent fellow RHC. Or if you're running a project for more than one RHC, it's going to be different. You need some kind of financial staff who's already doing your budget, your financial report, who's paying your vendors, your contractors, and ensuring that the drugs are getting done.

37:59

The program staff, you should have a project director, Might be somebody he used to have the title administrative co-ordinator, or does on your organizational chart, but they still have responsibility for all aspects of the program.

38:13

And you want to make sure that you've dedicated staff to that. I'm sure you put that in your budget. If you haven't, then you need to really wrap your head and be clear about that, but those are pretty much the functions of the program, staff and contractors and partners. Those might be subject matter experts. They might be partners in some kind of collaborative consortium that you put together. that can help you keep your eye on the trends, can help you reach a population that it's hard for your clinic to reach. Those contractors might have specific deliverables for kind of certification or training, or outreach in the community, so just understand that the rules should be clear. And that's the only reason why walk that through for you, because you're going to improve your accountability, if everybody's nodes, whose job it is to get this done.

39:06

You also need to make sure we've talked about the accountability of personnel. But really, the responsibility and the accountability and personnel is to follow the work plan and the budget

once that's approved. That tracking mechanisms are in place you can use for personnel cost and tracking personnel time and effort.

39:25

Hopefully, you can use the way that you pay people now coded ... confident that make sure that you're tracking things in that way. That might not work for all of you and there's some of you are very small organization.

39:37

But try to use the mechanism that you have now, and then just a quick note, that if there's a change and who's overseeing the project, you need to notify ..., and there's a place for that in the electronic handbook. I believe that's where ... shared with you on the kickoff webinar contractors. Maybe you already have a contractor that's working with you, Maybe you have none at all.

40:00

But if you do and you have to do a bidding process, gotta go and get it, John.

40:06

If you don't make sure that you have agreements on paper, what are they going to do? What's that deliverable, and when are you expecting, and when do you think you're going to pay them. A simple little, three column chart.

40:17

Make sure that you understand what those deliverables are, what the timing of it is, and how you're going to pay. And then just a quick little nuance. I would recommend that if you have a partner or contract or maybe, sometimes they have a higher indirect cost rate than you might have. I'd recommend when you're doing those agreements, not to allow, and it might be completely just allowable to give them a higher indirect cost rate than you get from the grant if you're going to pay that out of the grant, so be cautious about that. As you're contracting, hopefully that's not an issue for you, if it is, we can come alongside you and help you think about that as well.

40:58

Budget monitoring is a big piece of your accountability. Make sure that your Accounting Staff, whoever's doing this work, has that budget narrative that's been approved with your grant, and so they can understand encode your chart of accounts. You've got a chart of Accounts.

41:14

I think you said that you're coding that every time you pay a bill, what accounts of this, it charged too. So, you make the new when they see next to it, backs competence for personnel or consulting fees, the vax confidence, so that accounting staff, if they are often kind of not thought of in this grants management process to make sure that they know how to pay people with the grant money worn on. A reminder that budget changes are made for more than 25% of the total award, you need to get approval, and that, also, I believe, goes through prior Approval and AHP. We can help you with that if you're needing it.

41:58

And then, I'd really, this is where the real accountability comes in. I recommend you take a look at your finding, everybody. Take a look at their financials monthly, do I always find all the time I want to review my financials? Absolutely not. But you're doing the simple things price, jump, you're already doing. Take a look at the line is, does it, you know if you're 112nd of the way of the year, have you spent more than 112nd, what does that make sense? Yeah, it just makes sense, because I filed to get some of my prior expenses there. So, in the first month, I might be a little further along in my senses. How does it compare to the prior month? That's the best way to catch those glitches stuff. Getting quoted wrong or things not getting charged to the grant, it should happen. Is that allowable? Is it reasonable? And it's an on track with what you expect. You guys should not have very complicated budget.

42:48

So, hopefully, when you get used to doing that regular monitoring of the grant funds, you can see it, and then act on it. If you see something that needs to be fixed or charge, that's not hitting there, Sometimes that's in a larger organization. Whoever's doing the coding doesn't catch it. And then, if there are things that you need to take action on that, you know, are really big, more than 25%, let folks know that your partner, so especially if you're doing some changes. And, again, your project officer needs to know if you're moving more than 25% of your total award.

43:24

Or HP was very clear or maybe it was the grants specialist misgivings about what are allowable funds?

43:32

We'll talk more about that specific questions Certainly with this that's so important that you understand that anything related to the vaccine confidence funds cannot be used for putting a shot in the body.

43:49

That means that, and we'll talk a little bit more about that, but that's the you know, you may get that funding from somewhere else. You may need to leverage your funds elsewhere but be very clear that there are no unallowable costs hitting your budget, those kinds of things. There's some nice examples there. Make sure that your vaccine confidence activities are clearly reflected in your budget, and that you're spending that money.

44:18

Um, and you see the note there, about the vehicle and the mobile unit, that it's you, that it's permitted that you can use that for non vaccine confidence, if the unit was purchased with non backs competence. So, that's pretty clear, and black and white. So, again, we will get into specifics if we need to, but just a reminder of the allowable expenses, and that it is your job to do monthly monitoring of your budget.

44:49

I'm going to talk about two more strategies. And this one is, so, that's accountability. We're gonna move on to effectiveness. And effectiveness is just about producing a decided or desired outcome. That means getting done what you said you were gonna do, not going to do that poll question on the side there today, because there's a lot of content to go through here.

45:17

But this is a sample of a work plan.

45:20

And, honestly, effectiveness can mostly be done if you work that work plan. You already did it. It's a simple tool. Yeah. Maybe you need to clean it up a little bit and add whose responsibility it is for each activity or maybe if they're going to collect a number or something. But, I encourage you to use this simple tool work, the work plan, and you will be effective, so, you want to take a look, and, you know, like I said before, when I asked giving you those questions to ask yourself, if your work plan the stink eye, do you need to clear? Clear up a few things as you're communicating with your team? If you do that team, review and the beginning, they'll let you know something's missing.

46:04

So, there are some things that we learned from running other grant programs. When an evaluation is required, You might want to even think about, you know, when you're thinking about your own effectiveness, certainly, you want to have something to be proud of.

46:19

So, I'd encourage you to think about, you know, what is it that you define as effective for your program. Figure out what your team wants to know, what will help them, do their job better. Maybe they can figure out a way to see, you know, did any incentives, and I don't mean big incentives. I mean, apples and roots and maybe a little sticker for the refrigerator to people who got an incentive day.

46:50

Have a higher vaccination rate, what types of vaccination rates were increased? Did the number of vaccinations in your clinic, or in your partner's facilities, increase your public health partners? So, you know, think about what you want to know, and then you can help identify your program effectiveness. Think about who's got that information, and where you might get it, and how often you want to pick it up. So, it's really about, you know, what's so great about working with ...

47:16

and working on this project is, it's pretty, it's, it's not complicated. You do not have a requirement for an evaluation of scientific evaluation when you do have some responsibility to know if you're being active, So, you know, some things that you might think about. You might take a look at data, kind of optional sorta recommendations. You can track just on your work Plan, just do what you said you would do in the Work Plan.

47:46

Do you have any idea about from your activities? Are people showing up, if you're doing a special activity? What are they saying about what difference did they make? Do not assume that if you do a health fair or you do a webinar, and you do a staff training, to complete a little survey, you know something. And then if you look to, you wanted to, at the beginning, now look at your vaccination rates, and then look at the end and see if they change.

48:13

And again, those are lucky for you, optional. Sometimes, when we look at data, doesn't always give us the results that we expect, but sometimes it can, if you do it on an ongoing basis,

quarterly, If you're looking at some pieces, it can help you make your program better and be more effective.

48:31

one of the things that I do to show whether or not we're effective and I'll use the word data.

48:37

one of the things that we collect and we put in our end of year report and we also find it very encouraging as a team is we ask our team, our staff on a pretty regular basis to collect their proud moments. And by golly if you give me an accolade or compliment, I'm probably gonna put it in my end of year report to the Federal Office of Rural Health Policy. This is an old one, but you can see I called it a qualitative look at our accomplishments.

49:05

What's fun about it is, it reminds you of your good work, and that when the people recognized her, your work. and, you know, you can document, you know, a TA provider from a really big Georgia Health policy center, said, we did a good job. You know, somebody in our data institute said they didn't think was going to be so great. The American Hospital Association, like stop the, collect those proud moments for yourself. The school districts said we got more parents interested in vaccines than they had before after we did our program with the school. The local churches said how much they're older people appreciated the education of their young people in their church to give back to need it. They didn't have to tell, you guys told them. So, you know, kind of collect the data to, so do it for yourself, for your own team, But also as a measure of your effectiveness. So kinda, Now, it's just a little different idea for collecting ideas about your effectiveness.

50:09

Last strategy, I'm going to talk about my watch and the time. I'm getting close. is efficiency.

50:16

The definition of efficiency is being effective Beam. I'm sorry. Achieving your maximum productivity with a minimum wasted effort. Able to accomplish something with the least a waste of time and effort and competency and performance accomplishment, our ability to accomplish a job. My thing is, this is about keeping it simple. And if you could do it without detriment to your organization, or your team, or into your partners, in other words, you're efficient. If you didn't kill people in the process of managing your grant and carrying that on. So it's pretty, you know, when you are. And I have to tell you, I feel a little bit unauthentic because sometimes I can kill people asking them to collect ... full disclosure. That's me.

51:04

The one thing I can tell you, I love this little cartoon where this woman in this manner setting up, you know, how they're going to produce reports for management. They're just putting them right into the shredder because they believe nobody will read them anyway. You don't have to worry about that for HP, will read your reports. They'll make lessons learned from them.

51:24

They'll learn more about how to work with rural health clinics, So, and you'll learn from them, as well, and say, here's some general efficiency chips. And this is a little broad.

51:35

In order to be efficient, you need to keep in mind, think, you are not making the world's best pizza.

51:42

And I say this, because if you stop and think about the world that's pizza you ever had, maybe it was the layer, Mo, and the crust was, you know, it rose four times. And it was so good, and the cheese made by a farmer. And oh, you'd love to have that pizza pizza again.

52:00

What does your family need, when at supper time? Who are they going to call them a call Domino's?

52:07

Does that the world's Best Pizza? know? Is that the United States best-selling thing that you betcha? Do they get more pizza into the mouths of people to do what they need to do feed their people? Yes. So that's your job.

52:19

You could be very creative with your reports, with your budgets, with the marketing, everything that you have to market, but do it to get the job done, which is to get people to have confidence in vaccines. It's about, you know, understanding What does that their core to understand vaccine confidence? So, you're not making the sexiest Vaccine Confidence program There is You're going to use what you got. You got them, pepperoni, got some cheese. You're going to put it together and you're gonna get it out to as many people as you can possibly, you can do it. That's, that will keep you from killing yourself.

52:55

Work with what you have. You got a work plan. You got a budget. You probably got a great team.

53:00

Work with what you have and don't try to like blow it up and make it more difficult and always keep your eye on the goals. So let's talk about these a little bit. We love it when you're creative. Don't re-invent that wheel. That's a very funny look, a little bicycle wheel, but you don't have to re-invent the wheel. You've got assets to work with. You know hopefully you have simple accounting processes, you have existing financial profits, you have timekeeping you know where to find things into keeping then you've got your team but you also have challenges some of this is new to you. You might not quite yet have your HRSA approved budget and work plan.

53:40

You might not have gotten the payment management system to do what you wanted to do and you might not be in an electronic handbook yet, so those are the things that feel like a challenge.

53:50

But I want to tell you, they can turn around, they can be simple tools for you. So, this is the HRSA for HP Slide. On the grants management process, it talks about getting yourself, set up an HP and using PMS. So make sure that you're understanding and getting those links.

54:10

The challenge might feel like the Payment Management System that might feel really John changing you. But just keep this in mind.

54:19

Your job is gap and track the money. You set up the authorizers, you draw the funds. You save copies of those draw receipts, and you make sure your quarterly reports are in.

54:32

What's cool about this is they don't let the HRSA will allow you to go back and get some of the costs that you spent on true vaccine confidence funds and charge them to the grant, because they want, they recognize that you might have already been doing this work. And they want to keep it going quickly. And they want to be responsive to the needs of your community. Yes, It can be difficult to get in and get set up and the payment management System, if you don't know how to do it. But once you do, it's a powerful tool. Look how easy this is.

55:07

This is a screenshot of doing a draw, So my recommendation to you is when you get your monthly budget and your finance report, you've got your expenses documented, take that day, that hour, and go do your draw, you've got all your expenses documented. All you do is put it in your purse, your last name, the right phone number, the right e-mail.

55:28

When you want the money to come, how much you want, data being baraboo, you click here, you're done.

55:35

So that seems that it's really easy. It's not much more difficult than going to the ATM. If you do it right.

55:43

The easy end, if you do it easy and efficient, you do it after you know your expenses. If you have the cash on hand to do that, do the drop.

55:51

Here's another screenshot, this is the PMS, Yes, this is the PMS Screenshot, the Payment Management System, Federal Financial Report. We blocked out some of our numbers and strip or our own confidentiality. But look at this, it's already got your name preloaded in it. It's got your federal account number when you login, it's got your duns, it's got all that preloaded, it's even got how much cash receipt you can, how much cash they distributed. And then you fill in the cash on hand. Then you just build that any new junior report.

56:26

And I'm, I am making it sound simple, but honestly, it's a pretty easy to fill out report.

56:34

So that's what this screenshot looks like on your quarterly report report, I just am trying to show you to not be intimidated by that payment management system.

56:44

Once again, Lynette gathered up these links. I really find that people at the payment management system, to be very helpful. Sometimes, I've certainly noticed since coven, they've been a little bit slower to respond.

56:59

I had a very complex problem with PMS and our operations director, John, that was really able to work with them really well. But, I think also, we, I would encourage you to get that online training. Get that done first. And see before you start calling and ask them to help. Like they do. In this day and age, they still have a phone line. You can still talk to a person and they know their PMS. Now they're not gonna know things about your award.

57:29

They're not going to know how much money you spend That they know how to make PMS do what it's supposed to do. So, I'd encourage you just don't be intimidated by that work with what you have.

57:40

The other important website system is certainly the Electronic handbook. It's how you manage everything. Again, you have to get registered on it. You have to get, I had to be reminded to do that. Same thing for our technical assistance award. I had to accept and get myself locked in and get my grant up under the

58:00

So, add here, grant to the ... portfolio, once again, for each K And this gains did a really nice job of telling you how to do this. So listen and read about that webinar. These are the kinds of things And for HP explain to you that you need to do in the electronic handbook. You're going to submit reports you're gonna put in your prior approvals. It's called Prior Approval. That's not an intuitive term but it really is. You're getting into a project officer so they can look at it ahead of time and approve it. So think of it that way.

58:36

This is what the screen looks like. It's an efficient tool, this is my hello Terrell. Here's your electronic handbook. You've got six tasks. Here's what we're tracking. You got two things under review. You got three things. one thing approve, it got something that's been process that really didn't need an approval, and then I can click on each one of those. It'll show me, it'll just leave me to it. So maybe, I'm sure it's just right there. The trouble with it is for me, personally, I don't have to log into it that much, so, every time I have to go, Oh, no, What's my went with, no password with my password, what does the test, that's do. I kinda feel like when I get into it, I wake up on a new day every time I login again.

59:21

It's simple, though, Looky here, this is, I think, this is the end of year report, it's preloaded on this particular one, all I have to do as they attach an a document submitted, confirm it and make sure that it's done.

59:35

And, I have to say, I love their video, but just recently taken a look at them again. Their videos are so cute.

59:43

They're informative, they're animated, and again, they have a toll free number, when that's again gathered up all the links where you have for HP. Did that too, along with Ms. Gains?

59:56

So, check that out and, you know, becomes this just Jewett thing and then Make sure you have ... went into great detail about what numbers you have and they are there to help.

1:00:07

Um, so, again, just Joe left, if you get stuck, call for help to their helpline as best you can, and then if you get really stuck, we can come alongside you.

1:00:20

Work with what you have. Most of this I've pretty much already covered in terms of filing. A one thing I'll hit on there is sharing your calendar. Make sure that you have due dates under people's noses, so that nobody misses things, draw dates, orderly and end of year report, those kinds of things. Make sure that your systems are ready, that you've done the right job of putting our expectations for your staff and your contractors, prioritize. Just be absolutely brutal when it comes to this, Think twice before you say.

1:00:54

Yeah, so really focus there.

1:00:57

These are some reporting requirements that all awardees have, or HP reminded you, of East, you can see there, burn off, unless you've gotta do some immediate adjustments. And then efficiency, just one more reminder, is really about keeping your eye on the goal.

1:01:14

What is our purpose? How can we additionally deploy these resources? How can we ensure our integrity for our program?

1:01:23

So I want you to get comfortable with saying, no, not today, no, thank you.

1:01:28

How does that relate to our work? Because when you're running a program, sometimes you do have to say no to the other fighters in your world, I'm not good at that. And I love to help people imagine the possibilities, but I would tell you to guard your time to keep your efficiency and also guard your team.

1:01:47

Uh, hopefully, you didn't kill them, Hopefully, you can keep it simple for them. Always to acknowledge and appreciate the ...

1:01:55

staff, their request and their responses, your staff, your world, and their world is gonna change. That's about it being adaptable. Your contractors and your partners publicly recognize them for your contribution. And certainly, your neighbors or who you're doing this score. And

they've got to do something to help you be successful. They've got to have confidence in the acting, so, on and knowledge them as well.

1:02:19

This is your TA team with the e-mail addresses we're all here for you.

1:02:26

And, honestly, I mean, what I say, the National Association of Rural Health Clinics notes about RHC on the no Saran or expertise about grants, An RHC, I'm trying to meet you right exactly where you're at. So, we hope that you'll reach out for us. I'd encourage you, though.

1:02:44

Don't let us don't We want you to learn yourself. A little quote at the bottom of this slide is about giving a man a fish and you feed him for a day. We could do things for you. But we want to teach you how to do this. So, we want you to read and share and use the e-mail information and resources we give you.

1:03:03

No, sir, it's going to do small educational exchange development groups seeds to help you learn from each other.

1:03:10

There are going to be webinars offered to support your work, but by an RHC and for HP, and then we can help you 1 to 1 with TA. If you e-mail us, we want your grant number.

1:03:22

We'll come alongside you to help you solve the problem, and you can ask us anything.

1:03:27

That's about what would help you implement your program. Utilize the experts that we refer you to. If we say that ...

1:03:36

helpline, that's the best we can do, then be clear about what it is that you're trying to accomplish. And be patient. Because just like you, sometimes we have to wait for an answer, and some of this is: one of the ... staff use the expression. We are building the plane and trying to fly it all at the same time. We know you are, too. So be patient, that takes a little bit of time, sometimes for an answer.

1:04:03

And then just know that improving rural health through good program manager is really, like, a lot of times, you're starting with the scrap your piece, things together. It gets crazy, like a crazy quilt, but it takes tenacity to wind things up, attention to detail. Keeping things straight. And we want you to have confidence that leave the 50 state offices and others and ... behind you. So a couple of things here, this is my last slide.

1:04:36

They're going to put into Chat. The Survey Monkey would like to hear from you about how this went for you. And Eric ... has a CEO, a CEU code for you that's on that slide for you.

1:04:47

So now, I'm going to quit running my mouth the thing I'm a little over time, and see if we can get some quite to the questions in the chat. Nathan, I'll let you kind of prioritize where we're at and see what kind of questions. So you have, I know I flew through a lot of information, and I hope that you all know that you can do that, so make them, I'll ask you for your help there with the chat.

Nathan Baugh:

1:05:13

Sure, I have just opened the chat, or it's the actually a question box for folks to ask their questions, or Carol. So please go ahead and get those in now.

1:05:26

Usually, once they get started, we we tend to not be able to get to the ones at the end.

1:05:32

But I just wanted to also thank Terral for presenting as well. And look at that. Here we go.

1:05:41

First question has come in from Jeff Jetties.

1:05:46

He asks, do we need to use the HRSA logo on publications?

1:05:51

There is there should.

1:05:53

Go ahead, sorry, that's not, now I was done.

Teryl Eisenger:

1:05:57

OK, so, I'm gonna rely heavily on the TA Team and the Federal Office of Rural Health Policy staff. There should be a condition and a term on your notice of award that gives you the language for that. My experience, time it looked at your Notice of award. But my understanding is that that is on your Notice of Award.

Nathan Baugh:

1:06:18

OK, perfect. next question is from Steve Haynes.

1:06:22

He says when you say 25% for a budget amendment, is that by category or line item, I have a change, but categories will not change by more than 25%?

Teryl Eisenger:

1:06:33

No. If the change that, if your award, I'm going to use I know you're wardens and \$200,000. No, not that easy. If you had an award for \$100,000, and you're making a change of \$25,000 overall than you would require prior approval, it's not by category. It's my total.

Nathan Baugh:

1:06:54

Leslie asks, if we can post the CEU and chat, so I'll ask Kate to do that. That's the code that was shared at the end.

1:07:04

Where can we get the slides? ... dot org is one place. Terra are you planning on posting these slides?

1:07:12

And I know soar website, Tammy, I believe that's true is that right?

1:07:20

Think, though, Tammy will have to unmute, but basically ... dot org, ...

1:07:25

dot org, you should be able to find it.

1:07:30

John Duke asks, is there a maximum amount? you can withdraw through PMS at one time?

Teryl Eisenger:

1:07:36

So that's a good question, John. This is how it rolled.

1:07:41

I believe, in my recommendation is that you drop when you have the expense, if you have a lot of expense related to vaccine confidence, go ahead and do your draw. Otherwise, you have a short window of time for which to document the events. So you're not to use this to borrow money to that, the intent of the rule, kind of overall. And I believe it's like three days, Then I would have to verify the details. And then there have been 1 or 2 folks have reported a couple glitches, like, they went to do the John P and Madison, they drew more than 112, but their ward and you know what they were in the first month. And that was the problem.

1:08:20

That should not be my advice to you is draw the expense that you have or can spend very quickly.

Nathan Baugh:

1:08:29

Hmm? hmm, hmm, hmm.

1:08:29

Our next I am skipping over some folks because I think some of these questions are redundant. So.

1:08:40

If I skip over your question, I apologize but I think we've already answered it.

1:08:45

Next question from Matt Tollefsen as or says are NOA had all funding listed under other why why was this again and how does this affect how we spend money?

Teryl Eisenger:

1:09:00

So I haven't read your NOA and that's a little bit unusual unless you submitted a budget for that or if you had maybe you had some expense, do you have to submit a budget revision.

Nathan Baugh:

1:09:14

So Teryl

1:09:15

I, if, I recall correctly, it was, that was a technicality and how HRSA, how to get the money out. Because everyone budgeted for 50,000, right? That was what we asked. And because HRSA has a maximum amount that they could spend, and it was just under 50,000 per RHC. It was something in the way that they had to do it, that they had to give it all out and others. I believe, everyone in, their NOA got the money on other. that was, That was my understanding.

Teryl Eisenger:

1:09:49

I didn't see that. Thanks, It takes a village.

Nathan Baugh:

Yeah, Sure. Alright, next question. Oh, sorry.

1:09:55

That next question from Stacy is, I haven't really been able to find a list of things. The grant can be spent on.

1:10:05

Can you speak specifically to this, if you talked about it, I missed it. I got onto the call late.

Teryl Eisenger:

1:10:13

OK, I'm, I'm not going to crack that. I'll ask you, or Lynette. There is a list of in the first webinar kickoff and in these slides it talked about allowable expenses and not therapy and made more than that. And if anybody wants to opine, if you want to start with that, Nathan, I don't know where that list is an iPad. Yeah, yeah, Yeah.

1:10:39

It's hard to make a list of everything, right? Because these programs are geared to your community, go ahead and make them if you want to take a shot.

Nathan Baugh:

Not, I don't really want to add to that too much.

1:10:49

I mean, it's vaccine hesitancy work.

1:10:55

So, Yeah, sorry, There's a little echo.

1:11:00

All of a sudden.

1:11:03

Yeah. So, I don't want to, you know, give you a list. We will have, I'm sure we will be putting out more content about ideas, about how to spend the money. Throughout the course of the year, that's fair to say. Right. Terrill, this is mostly about managing the grant. In, terms of ideas of how to spend spend that. I think we'll have more TA to come.

1:11:27

Alright, next question is from ... he says, I have signed up in PMS when I go and for payment a cat a cat.

1:11:35

Excuse me, it asks for account number and is not taking pack. So what's what's your advice to Terry terrill?

Teryl Eisenger:

1:11:43

Oh, why, Joe, No. I haven't watched you do it. On my advice.

1:11:49

call PMS are going on with PMS. And I think that Lynette, our Tammy, or anybody else has been doing that direct TA, even our friends at ..., that he has seen a common mistake. The people are making that way. I mean, if they may be used, there you are, you know, their duns instead of their fans, or they're not their grant number, I don't know the details without seeing what you're doing.

1:12:13

I haven't experienced any but he got a thought about that.

Nathan Baugh:

1:12:20

Aye.

1:12:22

I don't know. If you're asking Tammy to weight in and Tammy feel free to take yourself off mute and weigh in whenever you want during these questions.

1:12:30

We'll go on to the next question, which I think is a relatively easy one from Janet. Is the drawdown of funds, and advance or as reimbursement?

Teryl Eisenger:

1:12:42

My recommendation to you is that you do it as reimbursement. You can do it as an advance if it's been a very quick turnaround time.

Nathan Baugh:

1:12:52

A pretty technical question here from Tammy who says, I submit a revised budget on the 18th and I indicates under review, when will I get a notice of approval?

1:13:04

I'm, I wonder if she already got one notice of approval and, and that asked her to submit a revised budget, and she's looking for a second aye.

1:13:14

Dina, do you have any sincere?

Teryl Eisenger:

1:13:16

I don't I mean, I assume that, Tammy, you've got an MLA, and you're asked to submit a revision. And you're watching it in your ... and waiting and I've seen under review and I know that F or HP is still working very diligently to get about 30 more awards out from people had trouble with Sam. So don't want to speak for them.

1:13:40

But it's not unusual for to take a little bit of time and this is an unprecedented glut of awards to notice them if there are a few months to chime in about that. Certainly feel free to unmute yourself.

Nathan Baugh:

Yeah.

1:13:53

I just for clarification, I don't think any of the FR HP staff. We gave them presenter links so I don't think they'll be able to voice that.

1:14:07

Next question from Kelly is, Is there a place online to access our Notice of Award or is it possible to get a copy of it?

Teryl Eisenger:

1:14:17

HB Um, and you should have an e-mail that says something like Transmission, if you were not the project director who submitted, that would be a problem. And I just do want to make a quick,

general note. We are recording this and making note of your questions, and we'll try to reply to you directly, if I'm not giving you a straight answer right now.

Nathan Baugh:

1:14:46

Yeah, and just just to be clear, Teryl, you're good to go, maybe right up to 3 30, but then that's hard. stop there.

1:14:53

That sounds good, 30, OK. All right. So maybe a few minutes before 330 just for folks for expectations here.

Teryl Eisenger:

1:15:03

I'll save that, and then there's a survey monkey link that you've been given that the place for you to put questions well, will help us collect them easily.

Nathan Baugh:

1:15:13

Perfect. Next question from Virginia, by grant number on Include grant number on e-mail. Do you mean our own number or the HRSA grant number?

Teryl Eisenger:

1:15:21

You're a number.

Nathan Baugh:

1:15:24

OK.

1:15:26

Next question is from.

1:15:27

Johanna, or gianna he says when we had filled out our narrative, we had put down four equipment, a refrigerator for storage, but this doesn't seem to be allowed.

1:15:39

They approved everything, and didn't say, it could be, couldn't be purchased.

Teryl Eisenger:

1:15:45

So China or Joanna, not chairman, theme your name. Very pretty mean. My thought is, we'll verify this, in that in your Notice of award, you've been asked to maybe submit a revised budget.

1:15:59

Because my understanding that cooler refrigerator would not be allowed, but what they've done in order to be flexible and to support you are getting the money, is they've gone ahead and issue the award, you probably want the term or condition in there for you to revise your budget.

Nathan Baugh:

1:16:19

Right, definitely refrigerator for storage, not allowed.

1:16:25

Next question from Kim Clots: can funds be used for cash incentives?

Teryl Eisenger:

1:16:30

Incentives are dicey, cash is even dicier. And if there are some rules, and there's some written rules about incentive and, But there's a lot of, I find it hard to interpret. But, I know for HP is working on Clarification. They have to go to the Office of Inspector General in order to get some more black and white definition for you.

1:17:00

Um, my yeah, my put opine about up and they don't want to get in trouble. You know, sometimes you can give a gift card for a taxi or Uber. I don't I'm not going to opine about cash.

1:17:15

I think you're safe with things like snacks, maybe, or other things, but cash I mean, I should stay.

1:17:23

Yeah, I would say that's simply a personal opinion.

Nathan Baugh:

1:17:26

Yeah, totally.

1:17:28

My opinion is that it is allowed, but there is, as Teryl mentioned, OIG report is where you want to go on this, to make sure you're not violating any anti-kickback statute. That's what you'll see on the OIG

1:17:44

And I think we have posted links to that all through our online references to that OIG language on providers offering incentives in exchange for getting vaccinated.

1:17:59

So, and, and, I do want to be clear that that is the OIG opining On, this is just for the covid

1:18:07

vaccine, not for any other vaccine.

1:18:13

So, that's, it's, it's just on that one, uh, vaccine where they have weighed in.

1:18:22

Um, alright. Next question is from Megan Epperson, my notice of award is approved. This is another question.

1:18:31

Sorry, We've I think we've already addressed that.

1:18:33

Sorry, Magan next question is from Misti, when I login to see my FFR that is due on 8 31.

1:18:42

I try to search for my payee number, but nothing comes up.

1:18:46

Any advice?

Teryl Eisenger:

1:18:49

I had a two things. I meant to say this when I was chair and through those slides.

1:18:56

Going to be a little bit cagey about this. I don't know about a number I'd have to see it with you to see what the issue is there. And I'd ask PMS for how it would be my first thing. I can, I can say this.

1:19:10

There is not a lightning bolt that is going to hit you in the back of the head on August 30th.

1:19:16

Um, there is some, you can usually, as I said, I've done the good, the bad, and the ugly. We want you to respond to your Project Officer request immediately, to do your due diligence, to get the answer, and the requirements done.

1:19:34

My experience is that if you're one of the 200 plus who are working with some of these challenges, keep working on it. Do not give up. Document the answers that you've been given that a lightning bolt is not going to strike you down and shut you down on August 30th.

Nathan Baugh:

1:19:55

Perfect,

Teryl Eisenger:

and yeah, please, if you need more help with that, please start with PMS to see what the issue is. They really are good.

1:20:05

Coming alongside of things to help you.

Nathan Baugh:

1:20:07

I'm going to skip a few questions here and get to Lanette Texans question.

1:20:13

Who asks, can we brand the materials? We develop with our logo?

1:20:18

You may, and maybe she's answering questions.

1:20:22

Yeah, never mind.

1:20:22

I thought I had a question that she wanted you to address terrill, but it looks like she was answering a question there.

Teryl Eisenger:

Because that's my go to limited term here, My go to that made me very nervous,

Nathan Baugh:

so I don't, I don't think people can read this, so, this is, Lynn, that's answer on the brand of materials. You may put your provider logo on material as you develop HRSA requires grant recipients.

1:20:47

Uh, acknowledge HRSA, when describing projects, or programs funded in whole, or in part with HRSA funds, information and suggested language are available on the HRSA communicating.

1:21:00

And acknowledging Federal funding website.

1:21:02

All HRSA awards are subject to the Uniform Administrative requirements, cost principles, and audit requirements, so that was her answer there, too. That feeds off. But, yeah.

1:21:14

All right. So, we will go to a few more questions. Kansas is noting that she's had a difficult time getting help from the HP Helpdesk.

1:21:25

That's not necessarily been my experience. So, I don't, I can't comment too much.

1:21:32

How do you have anything to add, I mean?

1:21:35

Perhaps, you know, is this one of the ones where perhaps we could?

1:21:39

You know, set up a time and screen share and see exactly what's going on here.

Teryl Eisenger:

1:21:45

We can do that with you. It's not been my experience either, and yet, that doesn't mean that it's not yours. So, please, know, I am not saying, oh, something wrong there.

1:21:54

Just, uh, no. I don't know how you're trying. If you're trying with the phone line, I have experienced some slowdown there during the pandemic.

1:22:06

And then, let's see, I wonder if we could help you kind of look around in the help center to find the answer as well, if you've not done that. And I'd encourage you to do that.

1:22:17

And then certainly, our team can know if you want to share it online and get on with your week.

1:22:24

That's right, Nathan, thank you.

Nathan Baugh:

1:22:26

I'm, I'm, I'm willing to bet that it's something to do with roles.

Teryl Eisenger:

The assigned roles are our authorizing authority, You set that up and E H B. Again, that's a little confusing putting your AOR in, those different roles that are ..., that might be why, you're not getting the Good call, me.

Nathan Baugh:

Yeah, OK. Next, question from

1:22:51

Does every personnel helping us, IE, the drivers or community liaison, have to be on payroll there, they're asking for a 1099.

Teryl Eisenger:

1:23:03

I don't understand how you're paying them. If they're not on your payroll, or are you paying cash, you know how we're changing

Nathan Baugh:

Our independent contractors that are going to be mine and my tax advisor.

1:23:15

But, but you could, would you agree that you could use the funding to pay contractors, are

Teryl Eisenger:

contractors are an allowed category?

1:23:28

As far as I know, there hasn't been an issue about drivers, but I I don't think I'm clear exactly what he's trying to pay for.

Nathan Baugh:

1:23:37

I think they would just want to like contract with a guy to maybe drive patients to the Clinic, four vaccines, or something like that.

Teryl Eisenger:

But I can tell you, I can be paranoid about driving. I can be paranoid about insurance. I can be paranoid about what's an independent contractor, and what's an employee? That's probably why my auditor says that. We've got the best started that you've ever done. So without knowing details, I'd be nervous about answering. Yeah, there's lots of things there about insurance, and all of those things that you should consider more than how do you pay a driver.

Nathan Baugh:

1:24:19

Sure.

1:24:20

OK, well, we'll do one more question, and then we'll go ahead and wrap it up, and this is from Ray Cummings.

1:24:30

He asks, Do you need to do your draws by line item if I have two invoices? Can I lump them together?

Teryl Eisenger:

1:24:39

You have documentation of extensive that showed you this screenshot, pop them number in there.

Nathan Baugh:

1:24:44

Perfect.

1:24:45

Well, as Teryl mentioned, we do have a record of the questions, and you can provide feedback, also through the Survey Monkey, that is linked in, the chat, but I think we know soar is planning to e-mail that out to all the attendees as well.

1:25:04

So, I just want to thank Terrel on all of you for joining us.

Teryl Eisenger:

1:25:10

When do you use? Yeah, there's the response in the chat clarifying about that other, and I apologize for my ignorance about that, about the analyzed, all reflect other, but you should use the categories that you submitted with the budget.

1:25:25

So yeah, OK, alright? And you said that, but that was another way to say that, I just wanted to be really clear. Yup?

Nathan Baugh:

1:25:34

OK, all right, Well, perfect. Thank you so much, Teryl. You have any last things to join us a close it out?

Teryl Eisenger:

Just when we teach people about grant writing, We say, if you're out seeking grant funds, that one of the best things that you should do is to think, think global. Because you're working on a global problem in a very local way, and I just so admire you all for your good work. So hang in there. We can give you specific assistance as we go. So thank you for all that you do, and good luck with your good work.

Nathan Baugh:

1:26:13

All right. Thank you, guys! Take care.