



## **Recovery Act: Healthcare-Associated Infections Frequently Asked Questions**

### **How do I access the application for the Emerging Infections Program (EIP) or Epidemiology and Laboratory Capacity (ELC) Funding Opportunity Announcement (FOA)?**

To access the announcements:

1. [www.grants.gov](http://www.grants.gov) <<http://www.grants.gov/>>
2. Click on "Apply for Grants" on the left-hand navigation menu
3. Click on "Step 1 - Download Application and Instructions"
4. In the funding opportunity announcement box, type "CI09-90701ARRA09" (for EIP) or "CI07-70402ARRA09" (for ELC)
5. At bottom of the page, click "Download"

### **Are large cities such as New York City, Los Angeles, and Chicago eligible to apply for these grants?**

The language in the Recovery Act relating to healthcare-associated infection (HAI) specifies that funding must go directly to the states (with the explicit exceptions of D.C. and Puerto Rico). For example, New York City may participate, but will need to work through the State of New York.

### **When are the State Action Plans to Prevent Healthcare-Associated Infections due and how does this relate to the block grant funding?**

The Recovery Act bill includes language that each state must submit a State Action Plan to Prevent HAIs by January 1, 2010 to the Secretary of Health and Human Services to be eligible for the full allotment under the Preventive Health and Health Services Block Grant, regardless of whether a state applies for HAI funding under the EIP or ELC mechanisms. State Action Plans shall be consistent with the Department of Health and Human Services (HHS) Action Plan to Prevent HAIs. Guidance and a template for the states to use in writing their State Action Plans are being developed and will be provided.

For more information about the HHS Action Plan to Prevent Healthcare-Associated Infections:  
<http://www.hhs.gov/ophis/initiatives/hai/infection.html>



### **When will the template for the State Action Plan be available?**

The draft template is being reviewed by Council of State and Territorial Epidemiologists (CSTE) and the Association of State and Territorial Health Officials (ASTHO) and will be available in mid-June.

### **What else is included in the Recovery Act bill in relation to healthcare-associated infections?**

The bill also includes additional funding to provide states increased support for a wide range of public and preventive health activities. States are strongly encouraged to use these increased resources to invest in strategies to reduce HAIs through collaborations with public health departments and healthcare facilities and to begin to develop statewide plans.

### **How can states demonstrate sustainability of the activities after the two year funding?**

States should be creative in discussing how activities will be sustained. A few examples of potential activities demonstrating sustainability include the following:

- Continued state program or staff expertise in HAI prevention
- Continued steering or advisory committees on HAI prevention
- State health department participation in prevention collaboratives led by hospital associations or quality improvement organizations (QIOs)
- Continued state health department involvement in reporting or NHSN

### **Can funds be used for hiring?**

Yes, applicants can use funds for hiring new staff to support activities in this funding opportunity.

### **Can applicants apply and receive more than \$1.1 million?**

Yes, grantees can apply and potentially receive more than \$1.1 million, but the budget must be justified in the application.

### **Under Activity C, for each new collaborative developed in the State, are two targets required per collaborative?**

States are required to identify at least 2 prevention targets. After further discussions, we have determined that this can be done through multiple collaboratives (e.g. 2 different collaboratives can each have 1 distinct target).



## **Questions specific to ELC funding:**

### **Can states apply for more than one Activity under the ELC funding?**

States may choose to apply for Recovery Act funding to complete up to three of the activities focused on prevention of HAIs. States must justify in their application their ability to fully complete all requirements described in Activity A in a timely manner so that funds within Category B and C will be fully implemented within the allotted timeframes.

### **Can applications be made for Activities B or C that address healthcare-associated infections in a non-hospital setting (e.g., long-term care, outpatient dialysis, ambulatory surgical centers)?**

Yes. States may apply for Enhancement of HAI Surveillance (Activity B) or Establishment of a Prevention Collaborative (Activity C) to reduce HAIs in non-hospital healthcare settings. However, expansion to or inclusion of ambulatory care settings or long-term care should be considered only after infrastructure for HAI reporting within acute-care has been established or demonstrated. Applicants without established acute-care surveillance networks should focus on acute-care facilities initially.

### **Can ELC funding be used for building laboratory capacity?**

Laboratory infrastructure proposals that are tied to surveillance activities or prevention collaborations as described in the FOA (Activities B and C) will be considered. Stand alone laboratory infrastructure proposals would not fit into the scope of this funding opportunity.