



**Transcript: Webinar/Conference Call (1)  
Funding Opportunity Announcement, ELC  
Question and Answer Session  
May 18, 2009**

**Q1a. What states say about sustaining continuity after discontinuation of funds?**

A1a. States should talk about training, forming new advisory groups, networking with partners that you haven't before, building new relationships with hospitals and the tracking and reporting of metrics.

**Q2. Specifically on the formation of advisory groups (Activity C), are there expectations for the group to stay in existence and not necessarily that the group would have to document how they would continue to sustain operation of the group?**

A2. States are encouraged to look at how prevention collaboratives are currently being funded with out these funds and imagine how the influx of these funds could promote the continuation with current funding.

**Q3. Related to Prevention Collaboratives (Activity C), is the expectation to see one large statewide collaborative or is it possible to propose regional collaboratives, given those regional collaboratives may or may not choose the same HHS prevention reduction goals?**

A3. It has not been specified but there is an opportunity to be creative, keeping in mind the HHS Plan, the focus areas and the best approach for your state to achieve the greatest reduction.

**Q4. Related to Activity B, if NHSN participation is not supported, are states likely to get funding for another surveillance strategy?**

A4. It will depend on what is in your application. There is specific language to add what your state is getting out of its existing network.



**Q5. Related to NHSN, can CDC see all of the NHSN data and did CDC have to form a group?**

A5. Yes, CDC does have a group and can see all NHSN data.

**Q6. Do states have to form a group within NHSN, and if so, why if CDC has all the data?**

A6. CDC/DHQP is the steward of the NHSN system and responds to the needs of the users, modifying the software as needed. Current data exist on the servers at CDC. The states have access to the data through CDC and receive rights by your specific state assigning rights through their organizational structure.

**Q7. Will there be templates provided to assist with putting together this proposal and when will they be released?**

A7. No templates will be provided for the proposal. However, a template for Activity A regarding the HAI Plan will be forthcoming. There will also be templates for the reporting requirements after the award.

**Q8. Explain how the July 1 deadline for states to certify they will submit a plan meshes with the application and everything else?**

A8. The certification is referring to the Block Grant, where 25 % of state funding for this year is contingent upon certification that the state will submit an HAI Plan.

**Q9. Are the required quarterly reports largely fiscal in nature?**

A9. The quarterly reports will be both fiscal and programmatic.

**Q10. Can funding be used to support a position to help move the money and provide the information required for the quarterly reports? Will we also need to meet the position requirements and is there guidance on what the breakdown should be in terms of new, saved, and existing positions?**

A10. Yes funding can be used to support positions, which is included in the FOA budget instructions. The positions being saved or created for which funding is requested should be noted. There is no specific guidance regarding the position breakdown.



**Q11. Do activities A, B & C need to be tracked separately, or is it the overall project you are funded for?**

A11. The award will be made jointly and the funding can be one figure, addressing each activity separately.

**Q12. Are states required to provide a breakdown of funding by activity for the quarterly reports?**

A12. There is flexibility until final OMB requirement are released.

**Q13. Can funding extend to activities in settings other than acute care hospitals?**

A13. Yes, funding can be used for non acute facilities.

**Q14. If incomplete information is submitted with the application, is there an opportunity for states to go back and submit complete information?**

A14. Yes. States can submit complete information the following quarter.

**Q15. Has electronic reporting of lab data to NHSN been done in any states?**

A15. The hope is that funding encourages states to build up an infrastructure that will be sustainable beyond the 30 months.

**Q16. How will the FOA performance measures be used and should states be talking specifically about these measures in the narrative and should the CLIP module be used?**

A16. The collaborative checklist with important attributes will be forthcoming, but not available right now. There is some flexibility regarding some of the measures after the award.