For the Infrastructure Grant, can we use funds to continue our workforce training, for example, college courses to further our staff education?

Yes, this would be an allowable expense. Please make this equitable throughout your LPHA for all staff and provide justification for how this related to the NOFO by sustaining, retaining, training your staff.

Can you please expanded on the timing of the distribution of funds?

Once we receive a budget and it is reviewed and approved. It will be sent to procurement for the contract to be executed. Once that is complete your LPHA can start invoicing.

We have software for EPHS, can we pay the renewal with this?

Those investments can be made with A1 funding. However, there would need to be strong justification and alignment with the NOFO. There may also need to be internal conversations regarding enterprise wide DMI planning that may be taking place to see if these LPHA investments also align with the state's DMI vision as a whole as well.

Can cost for electronic health records software be paid with this grant?

Those investments can be made with A1 funding. However, there would need to be strong justification and alignment with the NOFO. There may also need to be internal conversations regarding enterprise wide DMI planning that may be taking place to see if these LPHA investments also align with the state's DMI vision as a whole as well.

Could this grant be used to increase our LAGERS (retirement) program?

For LAGERS retirement, the CDC did deny retirement benefits on their allowability guide. We do ask that when submitting your budget, you provide a justification for how those LAGERS retain/sustain your staff in a separate memo. We will get this reviewed by the CDC.

Can we get more details on how the funds will be dispersed? Is there a specific date all the funds will be dispersed in the first year? Is any part of this reimbursement?

The amount listed on the document is what you have for your LPHA for the next 5 years. We are unable to send out a lump sum to everyone so this contract will be cost reimbursement based similar to the Workforce Contract. Your direct funds can cover any costs related to A1-A3 activities listed in the Appendix of Activities PDF that was released by the CDC.

Would YMCA or gym membership for staff be an allowable expense?

Please provide justification in a memo for how this gym membership/YMCA would help the public health staff at your agency be sustained and retained. This request would need to be reviewed further by the CDC.

Am I understanding this correctly, whatever the total amount listed on the email you sent out for our county we are getting in one lump sum and does that mean the whole amount or is some of that amount actually for A2 and A3?

The amount listed on the document is what you have for your LPHA for the next 5 years. We are unable to send out a lump sum to everyone, so this contract will be cost reimbursement based similar to the Workforce Contract. Your direct funds can cover any costs related to A1-A3 activities listed in the Appendix of Activities PDF that was released by the CDC.

Just to make sure that I understand, you said that A1 funds would be disbursed all at one time. Do we need then to make sure that the funds carry us through the entire term of the contract, or can they be used sooner, then fulfilling our commitment under the contract?

You have the full 5 years to spend the money. You can spend it in the first year or spread it out over the full 5 years. Funds cannot be sent in one lump sum--the PHIG is a cost reimbursement contract.

I am very confused on the funding distribution...there has been talk about lump sum and then through monthly invoicing. Also, can you please explain more about how much the A1, A2, A3 funding is?

Per the NOFO, we have to have funds available within the first year of the grant. As an LPHA, you will have 100% access to all of your funds once your budget is approved and your contract is signed and finalized. You will invoice monthly via a DH-38. You can choose to invoice for funds based on your individual needs/activities within your LPHA. You can spend all funds within the first 6 months or you can spread out the funds over the next 5 years.

Will you have to get accreditation to receive this grant?

No, you do not have to be accredited to receive this grant.

You mentioned the ability for the LPHAs to acquire LinkedIn license for training, is that something that will be provided by the state or do I need to include that cost in the budget I submit (it is pretty expensive)?

The LinkedIn Learning Licenses is being funded by the DHSS. You do not need to include this on your budget. The Infrastructure Summary document that is on the below website talks about what DHSS has budgeted for with PHIG funds. These items are covered by the DHSS and LPHAs can benefit from these activities.

On the budget sheet, the last space says capital expenditures such as additions and renovations. What are the guidelines for this?

Per page 9 of the NOFO, investments can be made to assist with retention and improve health outcomes of the workforce. Working environments impact well-being of workforce. Minor renovations will need justification. Only minor renovations or alterations that do not increase the square footage are allowed by this NOFO. This may include flooring or roofing. Office space can be leased, but justification will be needed. Please provide justification for how your funding request relates back to the funding/NOFO.

You mentioned funds distributed for invoicing? Are we doing monthly DH-38s or is this a lump sum in first year?

Monthly DH-38s will be how you invoice.

Budgets are due soon to DHSS. Many large expense items will require internal approval and will take several months to complete. Will there be a way to amend PHIG budgets later? What if internal it is not approved? Is money to be returned to DHSS if not used?

Yes, budgets can be amended if an item previously listed is not approved. If the revision to the budget is less than 10% of the total contract amount, then only a revised budget will need to be submitted. If the revision is more than 10% then a full contract amendment will need to be completed.

How about you expand on the pieces the state will be using and what services you will be expanding to LPHAS, for example the EPHS piece and linked in learning piece?

We are working on getting a response from the CDC on if EPHS pieces will be covered by PHIG funding. As for the LinkedIn Learning Licenses, the DHSS is acquiring and paying for those licenses for employees at every LPHA across the state. The licenses will be available in September pending contracts and conversations go as planned.

Can the funds be used for training incentives for staff?

Yes, the direct funds can be used for training incentives for staff. Please provide as much information as possible and proper justification for how the incentives will sustain and retain staff.

Since A2 is covering accreditation efforts, will that include staff time working on this or should we go ahead and start working toward accreditation even before the technical assistance outlined in A2 kicks in and bill that staff time to A1 funds? We've been holding off on doing much towards accreditation since you all have technical assistance planned for us and we don't want to be doing things more than once.

Staff time working on accreditation would count as an allowable expense as long as you can provide further justification on how it relates to the funding and NOFO. We are currently waiting to see if we can back bill for items within the grant with Shalonda and her team so I think we hold on including this question and answer until we hear from them.

What is the date of our first expenditure that we can apply to the grant?

After checking with our CDC project officer each LPHA will be able to bill back to 12/1/22-11/30/27 which is the beginning of the period of performance for this grant. As long as the expenses being charged to the grant are within the period of performance noted above.

When will we know about the accreditation piece and when it will be available?

Initial planning sessions are set for early next week, with final guidance and communication to follow as soon as possible. The proposed funding distribution model will be reviewed by DHSS leadership and potentially the Office of General Counsel to ensure equity considerations and distribution channels are in place.

I am very confused on the funding distribution...there has been talk about lump sum and then through monthly invoicing. Also, can you please explain more about how much the A1, A2, A3 funding is?

Per the NOFO, we have to have funds available within the first year of the grant. As an LPHA, you will have 100% access to all of your funds once your budget is approved and your contract is signed and finalized. You will invoice monthly via a DH-38 because PHIG is a cost reimbursement contract like the Workforce Contract. You can choose to invoice for funds based on your individual needs/activities within your LPHA. You can spend all funds within the first 6 months or you can spread out the funds over the next 5 years.

Did I read that childcare can be paid for LPHA employees to help hire/retain staff? Do other LPHAs have this as a benefit that would be willing to share the policy/amounts if this is allowable?

Childcare incentive does align with Key Activity 1 and Key Activity 2 of Strategy A1 (page 11 of NOFO). This grant can be used to improve hiring incentives for the public health workforce (i.e., tuition reimbursement, scholarships, salary increases) and to create new hiring mechanisms (key activity 1). This grant may also be used to retain public health staff (key activity 2). Clarification regarding what the incentive is (hiring mechanism or retention incentive) and who will be impacted by the incentive (ensure equitability). How will this help strengthen workforce? An SOP should be developed for administering incentives, bonuses, etc. if one has not been established already. CLPHS has a request into the Technical Assistance system known as PHIVE to ask our Component B partners about shared policy/amounts that other states may have.

How many licenses on LinkedIn Learning will be available?

LinkedIn Licenses will be for all LPHA employees for the next 5 years of the grant. Further information will be sent out once we get the contract finalized for how employees and LPHAs can access their accounts.

Would a worksite wellness staff positon be allowed?

Yes, a worksite wellness staff position would be allowed. Please provide in your budget a justification for this position such as what this position will be doing and also how it relates to the NOFO.

Can you be clearer about what you are helping with on accreditation and what you aren't? How are we to know what to allow for in our budget when we don't know about what you are already providing? Plus how do we know what to allow for costs when we have never done accreditation before?

DHSS is aware of the budgeting and timing constraints for LPHAs pursuing accreditation and will prioritize the development of a funding distribution plan with specific guidance for LPHAs.

Our Community Health Assessment will be due next year, so this is an allowable expense?

Yes, in the PHIG budget, CHAs are specifically listed as potential uses of the LPHA accreditation cost reimbursement funding.

What is the best way to receive follow up information on if the procurement of a new electronic health records system is allowable?

Those investments can be made with A1 funding. However, there would need to be strong justification and alignment with the NOFO. There may also need to be internal conversations regarding enterprise wide DMI planning that may be taking place to see if these LPHA investments also align with the state's DMI vision as a whole as well.

So the amount listed in the email is simply A1 funds? A2 and A3 funds will come out later?

The DHSS applied for the Public Health Infrastructure Grant which consists of 3 separate pies of money (A1, A2 and A3). A1 has direct funds for the LPHAs and other activities that the DHSS is fulfilling which LPHAs will be able to benefit from, but not pay for (example: LinkedIn Learning Licenses for all LPHA employees). You can use the A1 funds to cover activities within A1, A2, and A3 activities and a guide for those activities and some examples are in the Appendix of Activities PDF. A2 funds is a separate pie of money and is only for the DHSS to focus on activities but again, LPHAs will benefit from these activities (example: funds to assist with accreditation assessments, communications materials developed, etc.) A3 funds are again a separate pie of money and the DHSS is currently submitting budgets and work plans due to recent supplemental funding.

Will A2 pay for us to contract with another entity for a Community Health Assessment?

Yes, in the PHIG budget, CHAs are specifically listed as potential uses of the LPHA accreditation cost reimbursement funding.

So will we have an amount we CAN spend towards A1, A2 and A3? So like if we need 75% for A1 but are only allotted 60% for this area?

Thoughts on how to respond to this? I feel like I have answered this above—if so, we can just remove it? Each LPHA can expend funds as what best fits their needs. Funds can be expended on any activity listed in the activities guide under A.1, A.2 or A.3 but does not have to spend a certain amount in any piece. For example all of you funds can be expended on A.1 activities if that is what is best for you LPHA.

What is the cap for that?

Cap on the community health assessment. Details on this is still being ironed out

Can you send the website again where this call and all docs can be found?

All PHIG updates will be on the following site: <https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus-lpha/>

NOTES - For Clarification: The Electronic Inspection Licenses for the Survey 123 platform will be issued to those interested in using the state system starting next year. The platform for doing Childcare Sanitation Inspections will be ready then for use. The platforms for the other environmental programs of Lodging, Retail Food, Onsite Wastewater, and Emergency Response will be released as soon as they are ready. As we are making these in-house it takes roughly 4 to 5 months to develop a platform and have it ready for use. We hope to have all of the environmental program platforms up and available for the LPHAs in 2026.