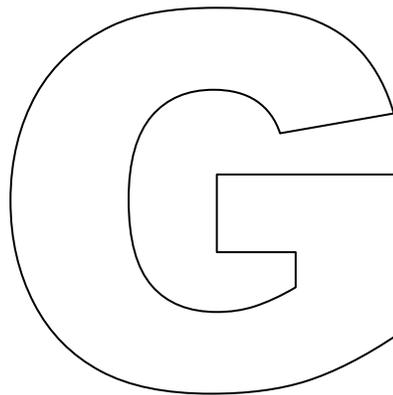




Emergency Medical and
Trauma Services Branch



Fiscal Year

2016 Funding Guide

July 2015 - June 2016

Education Grants (CREATE)
Emergency Grants
System Improvement Funds
Provider Grants

Funding Program Overview

For state fiscal year 2016, approximately \$6.7 million in funding is available for improving and expanding Colorado's emergency medical and trauma services system. Funds are available on a reimbursement basis to organizations that have the provision of EMS and trauma services as their primary purpose. This includes EMS agencies, facilities, clinics, fire agencies, training centers, community colleges and other public and private providers of emergency medical and trauma services in Colorado.

There are four types of funding. All applications that are submitted become a matter of public record and may be released in the event of a Colorado Open Records Act request.

1. **CREATE grants:** EMS and trauma education grants are requested through the Colorado Resource for EMS and Trauma Education (CREATE) program, which provides funds for student tuition, books, fees and appropriate travel. Apply through the Colorado Rural Health Center at coruralhealth.org/create. Allow 45 days for review and approval, prior to the class start date. A 50% match is required, but there is a financial waiver process for organizations that cannot meet the match. Reviews occur once a month, and awards are generally issued within two weeks of the review. \$500,000 is set aside each year for education grants. More information is on page 5.
2. **Emergency grants:** emergency grants are open year-round to providers experiencing an unexpected emergency that seriously degrades the provision of emergency medical and trauma services. Apply at www.cemsis.com. There are no match requirements for emergency grants; however, a 10-50% match is typical. Applications are reviewed by the Colorado Department of Public Health and Environment, and notice usually occurs within two days of receipt. \$150,000 is set aside each year for emergency grants. More information is on page 6.
3. **System improvement funding:** system improvement funding requests open on Dec. 15, 2014 and are due Feb. 16, 2015 by 5 p.m. These requests are for projects that impact the state regionally or as a whole. Categories include regional medical direction, system improvement, technical assistance, conference/forum support and RETAC operations. Apply at www.cemsis.com. There are no match requirements for system improvement funding. Applications will be reviewed by the Public Policy and Finance Committee of the State Emergency Medical and Trauma Services Advisory Council. Public notice of awards will occur by June 30, and purchase orders and contracts for awards will be issued following July 1, 2015. Up to 10% of the total grant funds available can be awarded as system improvement funding, which could be anywhere between \$0 and approximately \$670,000. Within the system improvement funding pot, \$363,000 will be set aside for RETACs to apply for regional medical direction leaving approximately \$307,000 for other system improvement awards. More information is on page 7.
4. **Provider grants:** EMS and trauma provider grant applications open on Dec. 15, 2014 and are due Feb. 16, 2015, by 5 p.m. Application categories include ambulances/vehicles, communications, data collection, EMS and trauma equipment, injury prevention, personnel/services, recruitment/retention and other. Apply at www.cemsis.com. A 50% match is required, and there is a financial waiver process for organizations that cannot meet the match. Financial waiver applications will be reviewed on Feb. 26, 2015. Regional hearings will take place in March and April, and state hearings will be held May 14-15, 2015. Public notice of awards will occur by June 30, and purchase orders and contracts for awards will be issued following July 1, 2015. There are no set dollar amounts or percentages for the provider grant awards. More information is on page 12.

Not Eligible for Funding

These programs may not be used to fund any of the following.

- land acquisition and buildings
- construction, renovation or building maintenance
- fire apparatus
- uniforms and clothing (i.e. sweats, t-shirts, fire bunker gear)
- disposable supplies (<\$100 per unit)
- promotional items
- personal care services, travel or recreation (i.e. gift cards, ski passes, spa visits)
- catering costs
- any items or projects related to a mobile integrated healthcare/community paramedicine program
- any costs related to the writing of the grant
- any purchases made prior to the issuance of a fully executed contract or purchase order
- any purchases made after a contract or purchase order expiration date

Local Cash Match

In cases where local cash match is required, funds used to provide the applicant's required cash match may not be state funds appropriated from the EMS/HUTF account through other mechanisms supported by the Emergency Medical and Trauma Services Branch. Monies used to provide the cash match must be documented as to their source and as compliant with this requirement. The value of existing infrastructure or other forms of "in-kind" services are not considered appropriate funds for EMTS grant match purposes.

In the event that the programs are undersubscribed, the Colorado Department of Public Health and Environment reserves the right to decrease the 50% match requirement if needed to award available funds during the fiscal year.

Deadlines

Please adhere to all specified deadlines, as extensions will not be granted. Once an application is submitted, no changes to the application will be allowed. However, additional information to items requested or updates to budgets and financials may be added to the application packet as an attachment if they will be useful during grant hearings. In no instance can the dollar amount requested in the originally submitted application be raised.

Mobile platforms do not work well with the online grant application. Please manage deadlines appropriately to ensure successful submission by the stated deadline without relying on mobile platforms.

Review

The system improvement funding requests and provider grant applications are scored competitively using 50-point scoring tools. Access these tools at www.coems.info so you understand how applications are scored.

Awards

Public notice of awards will occur prior to July 1, 2015, at www.coems.info. This is not authorization to begin any projects, as no billable work can be done until a fully-executed purchase order or contract is in place. All awards are reimbursement based.

Awards of less than \$100,000 will receive a purchase order, which are typically issued in July or early August. Awards of more than \$100,000 will receive a contract, which take considerably longer to execute. Contracts may not be issued until or after August. Please plan accordingly.

Changes of scope are reviewed on a case-by-case basis throughout the grant cycle. If a funded entity experiences any changes to vendors or items during the grant cycle, changes in scope can be requested by email to eric.schmidt@state.co.us. Any changes of scope that are approved may require the resubmission of a signed Statement of Work. In all cases, the dollar amount of the award cannot be raised. If any cost increases occur due to a change in scope, the awarded entity will be responsible for any over-and-above.

A new statewide accounting/purchasing/procurement system became effective July 1, 2015. This has affected timeliness related to the issuance of purchase orders and contracts. If you are awarded any funds, please note your purchase order or contract start date carefully as no billable work can be done until a fully-executed purchase order or contract is in place.

Ownership

The state retains partial ownership of all vehicles and equipment purchased through the grants program. If a grant-funded asset is to be transferred, the Colorado Department of Public Health and Environment must pre-approve the transfer or sale of grant-funded assets.

Technical Assistance Contacts

Portal technical help line, usernames and passwords: 303-692-2990 or www.cemsis.com

Eric Schmidt: 303-692-6491, eric.schmidt@state.co.us

Michael Gerber: 303-692-2991, michael.gerber@state.co.us

RETAC Coordinators: www.coems.info

Education Grants (CREATE)

Purpose

The Colorado Resource for EMS and Trauma Education (CREATE) grant program provides funds on a reimbursement basis for student tuition, books, fees and appropriate travel for EMS and trauma-related education.

The CREATE program does not provide funding for supporting or producing conferences. Such requests should be applied for in the Conference/Forum Support category of the System Improvement Funding Program.

Match

A 50% local cash match is required. There is a financial waiver process for organizations that cannot meet the match.

How to apply

Applications are accepted through the Colorado Rural Health Center at coruralhealth.org/create. The CREATE grant guide and FAQs are available at this site.

Deadline

CREATE funding is open year round; however, applications must be submitted within defined timeframes related to course start dates and the review dates. Refer to the Colorado Rural Health Center's website to find specific submission deadlines.

Review

Applications are reviewed by the Expert Review Committee once a month. All review dates are posted to the center's website.

Notification and Awards

Notification of awards occurs within 45 days of a complete application being received. Awards are reimbursement-based.

Emergency Grants

Purpose

The emergency grant program assists Colorado's EMS and trauma agencies that experience emergencies that seriously jeopardize the level of emergency medical and trauma services within their service area. In addition to meeting the standard eligibility requirements of the provider grants program, the emergency fund applicant must be able to demonstrate that the request for funds is a true emergency and, if grant funds are not awarded, will degrade the quality of, or eliminate access to, local EMS and trauma care.

Match

There are no match requirements for this program; however, a 10-50% match is standard.

How to apply

Emergency grant applications are completed using the CEMSIS web portal located at www.cemsis.com. You must have a username and password to enter the portal. If you applied for a grant last year or are submitting data to the statewide data collection program, you can use that username and password. If you need a new username and password, follow the link on the portal website.

Profile: all organizations applying for an emergency grant must complete a profile. The profile is located within the CEMSIS web portal at www.cemsis.com and is a pre-requisite to accessing the grant application.

Review

The Colorado Department of Public Health and Environment's Emergency Medical and Trauma Services Branch reviews emergency grant applications as they are received.

Notification

Notification of outcome generally occurs within one to two days of receipt.

Awards

Awards are issued following approval. Typically, awards of less than \$100,000 will receive a purchase order, and awards of more than \$100,000 will receive a contract. Purchase orders are generally issued within two weeks, but the contracting process takes longer. All awards are reimbursement-based, and payments are requested using the Reimbursement Invoice Form found at www.coems.info. Please allow at least two weeks for payment processing. For more information on managing a grant award, read the Manage Guide located at www.coems.info.

System Improvement Funding

Purpose

Statewide EMTS system improvement funding is for the direct and indirect costs of planning, developing, implementing, maintaining and improving the statewide EMS and trauma system. Applicants will need to demonstrate their project is intended to maintain or improve the quality of emergency medical and trauma services on a regional or statewide basis.

Up to 10% of the total grant funds available can be awarded as system improvement funding, which could be anywhere between \$0 and approximately \$670,000. Within the system improvement funding pot, \$363,000 will be set aside for a RETAC (or its designee) to apply for regional medical direction. This leaves approximately \$307,000 for other system improvement awards.

System improvement funding: \$307,000. All regular system improvement requests are scored competitively with the provider grants, using 50-point scoring tools. The scoring tools are available at www.coems.info. For these requests, there are five available categories: regional medical direction (separate from the RETAC projects described in the following paragraph), system improvement, technical assistance, conference/forum support and RETAC operations.

Set-aside for RETAC regional medical direction: \$363,000. A RETAC (or its designee) will be able to apply for up to \$33,000 annually for three years for the purposes of maintaining or expanding regional medical direction in its area. These requests will not be scored with other system improvement funding requests or provider grant applications. They will be reviewed by the Public Policy and Finance Committee at its April meeting to determine acceptability. These requests are due on Monday, March 16, 2015 by 5 p.m.

System improvement funding is not intended to replace funding available through the provider grants program. If you have a project that fits into a category in the provider grant program, please apply there. Examples of this may include regional equipment requests and personnel/salary support requests.

Match

There are no match requirements for this program; however, matching funds are allowable up to 90% of the project cost.

How to apply

System improvement funding requests are completed using the CEMSYS web portal located at www.cemsis.com. You must have a username and password to enter the portal. If you applied for a provider grant last year or are submitting data to the statewide data collection program, you can use that username and password. If you need a new username and password, follow the link at the portal website.

Profile: all organizations applying for funding must complete a profile. The profile is located within the CEMSYS web portal at www.cemsis.com and is a pre-requisite to accessing the application.

Contact information: this information is critical for communication regarding your funding request, as notices go out through email. Please ensure the contact person's name and email address are correct.

Categories: the online application will ask you to choose your categories, of which you may select any number. The available categories are:

1. **Regional medical direction:** there are two different ways to apply for funds for regional medical direction. One is specific to RETACs and the other is open.
 - a. **Set-aside for RETAC regional medical direction. Due by 5 p.m. on March 16, 2015.** RETACs will use this category to request an annual installment of up to \$33,000. These requests will not be scored competitively with other system improvement funding requests and provider grant applications but reviewed for acceptance at the April 8, 2015 Public Policy and Finance Committee meeting as a separate agenda item.

As this is the second year for the set-aside, please address status of outcomes, if any, of the current projects.

When applying for an annual installment, RETACs can request funds to initiate a regional medical direction project or to support an established regional medical direction project. RETACs can reference the "Colorado EMS Regional Medical Direction: Program Positions, Roles, Responsibilities and Deliverables" guideline when applying. This guide is available at www.coems.info.

Allowable line items within this request could include personal services such as salaries and wages for an employee or contracted staff, supplies and operating expenses, travel, and other costs. Administration and indirect costs shall not exceed 10% of the total request. Catering costs are not an allowable request; however, appropriate travel and per diem costs would be supported. Mileage is reimbursed at current rates.

- b. **Any regional medical direction project not associated with the RETAC annual installment. Due by 5 p.m. on Feb. 16, 2015.** Any entity wanting to apply for funds not associated with the RETAC annual installment must apply through the System Improvement track in the online grant application, selecting the category of "regional medical direction." These projects will be scored competitively with all other provider grant and system improvement requests.

Allowable line items within this request could include personal services such as salaries and wages for an employee or contracted staff, supplies and operating expenses, travel, and other costs. Administration and indirect costs shall not exceed 10% of the total request. Catering costs are not an allowable request; however, appropriate travel and per diem costs would be supported. Mileage is reimbursed at current rates.

2. **System improvement:** use this category to request funds to help support planning, developing, implementing, maintaining and improving the statewide emergency medical and trauma services system. Examples may include requests for system development projects that have statewide or regional impact, EMS and trauma data program development, department-initiated projects or curricula development. Allowable line items within this request could include personal services such as salaries and wages for an employee or contracted staff, supplies and operating expenses, travel, and other costs. Administration and indirect costs shall not exceed 10% of the total request. Catering costs are not an allowable request; however, appropriate travel and per diem costs would be supported. Mileage is reimbursed at current rates.

3. **Technical assistance:** use this category to request funds for technical assistance and support to local governments, local emergency medical and trauma service providers and RETACs. Examples may include requests for consultative visit projects or other technical assistance to local governments or regions. Allowable line items within this request could include salary and fringe costs for an employee, costs for contracted staff, administration and indirect expenses, operating expenses, and capital and non-operational expenses. Administration and indirect costs shall not exceed 10% of the total request. Catering costs are not an allowable request; however, appropriate travel and per diem costs would be supported. Mileage is reimbursed at current rates.
4. **Conference and forum support:** use this category to request funds to help support regional or statewide conferences and forums that have a positive benefit to Colorado's EMS and trauma system. Funds can be requested for the development and implementation of first-time conferences that are new or unique, and funds can be requested for support of established and on-going conferences if there is justification of a demonstrated track record of success and financial need. Conferences supported by these funds shall utilize the department's logo in conference materials.

It is expected that conferences become self-sustaining over a period of years and that system improvement funding will not be requested beyond three years. Please explain in your funding request if this is the first, second or third year of applying for these funds; how you anticipate your conference will become self-sustaining in future years; and how many more years you anticipate requesting these funds. If your conference cannot become self-sustaining, be sure to specifically explain why and if you've researched other funding sources or opportunities.

These funds cannot support food or catering costs, but could help support the cost of faculty, facility fees, AV equipment rental fees, etc. Allowable line items within this request could include personal services such as salaries and wages for an employee or contracted staff, supplies and operating expenses, travel, and other costs. Administration and indirect costs shall not exceed 10% of the total request, including wages/salaries for employees. Catering costs are not an allowable request; however, appropriate travel and per diem costs would be supported. Mileage is reimbursed at current rates.

5. **RETAC operations:** use this category to request funds to help support RETAC operations for the planning and coordination of emergency medical and trauma services in the county and between counties when such coordination would provide for better service geographically. Allowable line items within this request could include personal services such as salaries and wages for an employee or contracted staff, supplies and operating expenses, travel, and other costs. Administration and indirect costs shall not exceed 10% of the total request. Catering costs are not an allowable request; however, appropriate travel and per diem costs would be supported. Mileage is reimbursed at current rates.

System improvement categories allow for indirect rates of up to 10% of the total project amount request. Indirect amounts must be entered into the electronic grant application as a separate line item and are subject to review, evaluation and approval in conjunction with the entire grant request.

Narratives

Narratives are required in the profile and the system improvement funding application. Please take time to complete them; recognizing that spell check is not available in the online application and that copy/paste does not work well if tables, tabs, bullets or special characters such as "#" are pasted.

Submitting your Application

When you complete your online funding request and click the SUBMIT button, we receive your profile, application and any PDF attachments you uploaded. There is no need to print or mail a hard copy.

Please ensure that you have uploaded only PDF documents, that they are not secured with a password, and that the name of the PDF document does not contain any special characters (such as "#"). Otherwise, they will not upload properly.

Deadline

All system improvement funding requests must be electronically submitted by 5 p.m. on Feb. 16, 2015.

All RETAC submissions for the annual installment for regional medical direction must be electronically submitted by 5 p.m. on March 16, 2015.

Review

All regular system improvement funding requests will be evaluated by the State Emergency Medical and Trauma Services Advisory Council's Public Policy and Finance Committee in April. It is strongly recommended that a representative knowledgeable about the funding request attend the review session so that any questions the evaluators may have can be answered.

System improvement requests are scored competitively using a 50-point scoring tool. Access the tool at www.coems.info so you are familiar with the tool and its rating points, and so that you are aware of how your funding request will be reviewed and scored.

The annual installment for regional medical direction to RETACs will be reviewed for acceptance at the April Public Policy and Finance Committee meeting, and will not be scored competitively using the 50-point tool.

Notification

Public notice of awards will occur prior to July 1, 2015, at www.coems.info. This is not authorization to begin your project.

Awards and Timeline

Awards will be issued following July 1, 2015. Funding will run until June 30, 2016. All projects must be completed and all items purchased and delivered by June 30, 2016.

Typically, awards of less than \$100,000 will receive a purchase order, and awards of more than \$100,000 will receive a contract. Purchase orders are generally issued in late July or early August, but the contracting process takes longer, and contracts may not be issued until or after late August. Please plan accordingly, as no billable work can be done until a fully-executed purchase order or contract is in place.

All awards are reimbursement-based, and payments are requested using the Reimbursement Invoice Form found at www.coems.info. Please allow at least two weeks for payment processing once a complete reimbursement packet is accepted by the department. For more information on managing an award, read the Manage Guide located at www.coems.info.

Provider Grants

Purpose

The provider grants program awards funds to emergency medical and trauma service providers. Awards are reimbursement-based.

There are eight categories: ambulance/vehicles, communications, data collection, equipment, injury prevention, personnel/services, recruitment/retention and other.

Provider grant applications are scored competitively with system improvement funding requests using 50-point scoring tools that are available at www.coems.info.

Match

A 50% local cash match is required. Funds used to provide the applicant's required cash match may not be state funds appropriated from the EMS/HUTF account through other mechanisms supported by the Emergency Medical and Trauma Services Branch. Monies used to provide the cash match must be documented as to their source and as compliant with this requirement. The value of existing infrastructure or other forms of "in-kind" services are not considered appropriate funds for EMTS grant match purposes.

There is a financial waiver process for organizations that cannot meet the required 50% match. An organization that can demonstrate financial hardship may request a match of 10%, 20%, 30% or 40%. The organization requesting a waiver of the match is responsible for clearly demonstrating why the required 50% match cannot be met and must be able to provide three financial statements that support the waiver request: the income statement, balance sheet and budget. These three financial documents are REQUIRED. Unaudited financial statements are acceptable.

Failure to submit these three financial documents will result in your grant application being disqualified for incompleteness.

Review of the financial waiver requests will be held Feb. 26, 2015. Attendance at the waiver review in person or by telephone is highly recommended so that an organization representative knowledgeable about the request is available to answer any questions the reviewers may have.

The financial waiver review committee will evaluate and score the requests using a 10-point rating scale based on the following:

1. Cash flow projections
2. Financial information
3. The justification of need listed in the narrative portion of the application

The evaluators have three evaluation criteria:

1. Does the waiver narrative justify the waiver of a 50% cash match? (5 pts)
2. Is the applicant's current financial status or explanation consistent with the application, and is the inability to provide the 50% cash match demonstrated? (4 pts)
3. Has the applicant provided information that indicates good faith effort has been put forth to obtain cash from other sources? (1 pt)

A passing score is 6 or higher. If a financial waiver request is not approved, that grant application will not continue through the review process.

For a multi-agency financial waiver request, each participating organization must submit the three required financial statements. Each participating organization must be able to clearly demonstrate why the required 50% match cannot be met. If all of the participating organizations cannot demonstrate financial hardship to the requested reduced match, the entire multi-agency request will not be approved.

How to apply

Provider grant applications are completed using the CEMSIS web portal located at www.cemsis.com. You must have a username and password to enter the portal. If you applied for a grant last year or are submitting data to the statewide data collection program, you can use that username and password. If you need a new username and password, follow the link on the portal website.

Profile: all organizations applying for a provider grant must complete a profile. The profile is a pre-requisite to accessing the grant application and is located within the CEMSIS web portal at www.cemsis.com.

Grant contact information: this information is critical for communication regarding your grant application as notices go out through email. Please ensure the contact person's name and email address are correct.

Categories: the grant application will ask you to choose your categories, of which you may select any number. The available categories are:

1. **Ambulance/other vehicle.** Use this category to request an ambulance or a rescue vehicle. An ambulance data recorder, the "black box," is required for all new ambulances purchased through the grant program. More information on this category is on page 17.
2. **Communications.** Use this category to request radios, pagers and other communication system components. For technical help in this category, please contact Bill Voges at bill.voges@state.co.us. More information on this category is on page 19.
3. **Data collection.** Use this category to request laptops, desktops, servers, hardware and software for use in the statewide data collection program. You can also use this category to request data linking projects. More information on this category is on page 24.
4. **Equipment.** Use this category to request general EMS and trauma equipment, extrication equipment, defibrillators and cardiac monitors, training and education equipment, safety equipment and pediatric equipment. This grant program does not fund disposables or fire-related equipment. More information on this category is on page 25.
 - **Pediatric equipment incentive.** Use this category for requesting pediatric equipment specific to an automatically reduced match of 25%. More information on this category is on page 26.
 - **Statewide consolidated equipment.** Applicants interested in coordinating or participating in a consolidated grant for physical goods, use this category. More information on this category is on page 28.
5. **Injury prevention.** Use this category to request injury prevention projects. More information on this category is on page 29.

6. **Personnel and Services.** Use this category to request funds for personnel, salary and services. All grant funding ends June 30, 2016, so it is important to describe long-range sustainability in your narratives. More information on this category is on page 30.
7. **Recruitment/retention.** Use this category to request recruitment/retention projects. More information on this category is on page 32.
8. **Other.** Use this category if none of the above specific categories fit your request. More information on this category is on page 33.

Certain provider grant categories allow for indirect rates of up to 10% of the total project amount request. These categories are injury prevention, personnel/services, recruitment/retention and other. Indirect amounts must be entered into the electronic grant application as a separate line item and are subject to review, evaluation and approval in conjunction with the entire grant request. Indirect rates are not allowable in the ambulance/other vehicle, communications, data collection or equipment categories.

Narratives

Narratives are required in the profile and the funding application. Please take time to complete them; recognizing that spell check is not available in the online application and that copy/paste does not work well if tables, tabs, bullets or special characters such as “#” are pasted.

Submitting your Application

When you complete your online grant application and click the SUBMIT button, we receive your profile, application and the PDF attachments you uploaded. There is no need to print and mail us a hard copy.

Be sure you uploaded only PDF documents, that they are not secured with a password, and that the name of the PDF document does not contain any special characters (such as “#”). Uploaded documents that are not PDF, have a password or have a special character in the name will not transmit properly and will not be included in your grant application.

Deadline

All provider grant applications must be electronically submitted by 5 p.m. on Feb. 16, 2015.

Review

Provider grant applications go through a review process at both the regional and state level. Regional hearings are conducted in each of Colorado’s 11 Regional Emergency Medical and Trauma Advisory Councils (RETACs), and the state hearings are conducted by the State Emergency Medical and Trauma Services Advisory Council (SEMTAC).

It is strongly recommended that a representative knowledgeable about the grant application attend both review sessions so that any questions the reviewers may have can be answered.

The RETAC hearing counts toward 50% of the final score, and the SEMTAC hearing counts toward the remaining 50% of the final score. (Grant applications that have a conflict at the RETAC level, such as a RETAC applying for funds or consolidated equipment requests, will be reviewed only at the SEMTAC level.)

RETAC hearings will be held in March and April, and SEMTAC hearings will be held on May 14-15, 2015.

Provider grant applications are scored competitively using a 50-point scoring tool. Access the tool at www.coems.info to become familiar with the tool and its rating points, so that you are aware of how your grant application will be reviewed and scored.

Notification

Public notice of awards will occur prior to July 1, 2015, at www.coems.info. This is not authorization to begin your project.

Awards and Timeline

Awards will be issued following July 1, 2015. Funding will run until June 30, 2016. All projects must be completed and all items purchased and delivered by June 30, 2016.

Typically, awards of less than \$100,000 will receive a purchase order, and awards of more than \$100,000 will receive a contract. Purchase orders are generally issued in late July or early August, but the contracting process takes longer, and contracts may not be issued until or after late August. Please plan accordingly, as no billable work can be done until a fully-executed purchase order or contract is in place.

All awards are reimbursement-based, and payments are requested using the Reimbursement Invoice Form found at www.coems.info. Please allow at least two weeks for payment processing once a complete packet is accepted by the department. For more information on managing a grant award, read the Manage Guide located at www.coems.info.

Provider Grant Category Guidelines

**EMTS Provider Grants Program
Guidelines for the "Ambulance/Other Vehicle" Category**

Use this category to request ambulance and vehicles.

Eligible vehicle types are:

- Ground ambulances, as noted in the chart below
- Specialized vehicles, including watercraft, primarily used to transport patients to the nearest point accessible by a ground ambulance
- Vehicles primarily used to render EMS care before the arrival of an ambulance
- Other vehicles used primarily to support the provision of EMS

Ineligible types of vehicles are:

- Aircraft
- Fire suppression vehicles
- Hazardous materials response vehicles
- Police vehicles
- Vehicles used primarily for supervisory or administrative purposes

This category has maximum funding amounts for ground ambulances and will pay no more than 50% of the following amounts (state percentage will change proportionately in cases of a waiver of match). All new ambulances purchased through the grants program must be equipped with an ambulance data recorder.

Maximum amounts the grants program will pay towards the base price of a vehicle and an ambulance data recorder (black box)

Ambulance	Vehicle base price	Black box hardware & install	Black box base station (if needed)	Total	State share (50% match)
Type I - 2 wd	\$153,000	\$6,000	\$3,000	\$162,000	\$81,000
Type I - 4 wd	\$164,220	\$6,000	\$3,000	\$173,220	\$86,610
Type II - 2 wd	\$96,186	\$6,000	\$3,000	\$105,186	\$52,593
Type III - 2 wd	\$151,878	\$6,000	\$3,000	\$160,878	\$80,439
Other vehicle	\$63,240	---	---	\$63,240	\$31,620

All costs for the base price of the ambulance over and above these amounts must be paid by the grantee. In the event the actual cost of the vehicle is less than the "not to exceed" figure, list the actual cost in your grant application and attach the vendor cover letter or quote showing the actual amount. The entire spec sheet for the vehicle is not a necessary attachment. (Please ensure that the vehicle vendor you select is appropriately licensed to do business in the state of Colorado.)

The vehicle base price shall be inclusive of all items attached to the vehicle. Attached items may include, but are not limited to: chassis, patient care module, lighting package, siren, running board, mud flaps, grill guards, paint and graphics and towing devices. The grant program encourages the use of appropriate retro-reflective vehicle graphics packages.

The ambulance prices include an additional allowance for vehicle data monitoring hardware, base station items and hardware/software support. Minimum capability list for the ambulance data recorder system includes monitor and record vehicle operating parameters, audible feedback to the driver, database reporting, event reporting, second by second data and driver identification. The grants

program will pay up to \$6,000 for the hardware and up to \$3,000 for the base station items. Base station items may include software, software hosted services, driver identification tags and driver identification tag programmer. Base station items will only be allowed if the agency has not previously purchased the applicable items associated with the monitoring system. Hardware costs may include data transmission equipment (cables, radio transmitters, wifi, etc.). Agencies may choose their preferred type of data transmission. Transmission via 900 MHz, wifi or cellular are strongly encouraged. More information on ambulance data recorders specifically for ambulances can be obtained through your ambulance vendor. You must attach a vendor cover letter with your grant application that indicates the ambulance data recorder is included.

Additional safety features may be included in your vehicle application. All additional safety equipment is subject to the 50/50 match requirement, and would be funded over and above the "base price" maximums. Safety features qualifying for this include:

1. Dual attendant control panels
2. Child safety restraint systems
3. Radio headsets
4. Forward or rear facing seats in the patient compartment
5. Mechanical lifting systems
6. Monitor/equipment brackets
7. Traffic signal preemption devices
8. Padding and rounded edges on interior surfaces
9. Recessed or padded grab rails
10. Hydraulic oxygen bottle lift
11. Safety restraint netting
12. Back-up cameras

Requests for non-ambulance vehicles require appropriate justification. If requesting a non-ambulance vehicle, the narrative must sufficiently describe how the requested vehicle will be used within, or in direct support of, the local EMS system.

Other important items:

- Radios, medical equipment, cots and mobile computers should not be requested in this category.
 - Radios should be requested in the communications category.
 - Medical equipment and cots should be requested in the equipment category.
 - Mobile computers should be requested in the data collection category.
- If you wish to retrofit a vehicle monitoring system to existing vehicle(s), that equipment and/or software should be requested in the equipment category.
- All vehicles must be purchased and delivered prior to June 30, 2016. Failure to meet this deadline will jeopardize your grant funding.
- Indirect charges may not be requested be in this category.

EMTS Provider Grants Program
Guidelines for the "Communication Equipment" Category

Use this category to request communications equipment, such as radios, pagers and/or other communication system components.

All two-way radios or pagers that are purchased with state EMS funds must meet the following criteria:

1. Any new non-800 MHz radio system/s must include the UHF Med system channels. UHF systems must use the state standard continuous tone-coded squelch system (CTCSS) codes of Tone A = 88.5 Hz, B = 94.8 Hz, C = 136.5 Hz, D = 141.3 Hz and E = 151.4 Hz.
2. Expansion of present systems will be evaluated on a case-by-case basis in the context of activity of local, regional and state migration towards the Digital Trunked Radio System (DTRS).
3. Any new communications system in the 800 MHz frequency band must meet The Association of Public-Safety Communications Officials (APCO) Project 25 standards to ensure compatibility with the statewide Digital Trunked Radio System (DTRS). All 800 MHz radios purchased must be capable of both Project 25 trunking and analog transmissions in both the 800 MHz and 700 MHz bands.
4. No award will be made for radios that cost more than radios priced on state bid or the Western States Contracting Alliance (WSCA) for the high tier model. If you purchase a radio that is not on the state bid or WSCA and costs more, you will have to pay the difference in price.
5. Any radios purchased must be narrow band capable (12.5 KHz channel spacing) and have the designated statewide disaster frequency programmed as outlined below:

VHF - The designated VHF mutual assistance simplex frequency is 155.340 MHz. This frequency is required in all base stations, mobiles and portables. Mobile and portable radios are also required to have the five narrowband interoperability and mutual aid channels. The National Public Safety Telecommunications Council (NPSTC) has developed a common channel naming protocol. The new channel names are shown with the previous designation.

FREQUENCY	PREVIOUS NAME	NPSTC NAME
155.3400 MHz	HEAR	VMED 28
151.1375 MHz	VHF MAC 1	VTAC 11
154.4525 MHz	VHF MAC 2	VTAC 12
155.7525 MHz	VHF MAC 3	VCALL10
158.7375 MHz	VHF MAC 4	VTAC 13
159.4725 MHz	VHF MAC 5	VTAC 14

These channels are to be programmed for simplex operation with 156.7 Hz transmit encode and receive carrier squelch. CTCSS tone of 156.7 Hz may be used for receive decode if interference is present.

UHF - The UHF disaster frequency is 462.975 MHz (Med 10) simplex operation, carrier squelch (without CTCSS). This frequency is required in all base stations, mobiles and portables. Mobiles and portables are to have all the frequencies programmed into them from table 1 and the narrow band frequencies from table 2 below:

TABLE 1

DESIGNATION	FREQUENCY	OFFSET
MED 1	463.000 MHz	+5 MHz
MED 2	463.025 MHz	+5 MHz
MED 3	463.050 MHz	+5 MHz
MED 4	463.075 MHz	+5 MHz
MED 5	463.100 MHz	+5 MHz
MED 6	463.125 MHz	+5 MHz
MED 7	463.150 MHz	+5 MHz
MED 8	463.175 MHz	+5 MHz
MED 9	462.950 MHz	+5 MHz
MED 10	462.975 MHz	+5 MHz

TABLE 2

DESIGNATION	FREQUENCY	OFFSET
MED 12	463.0125 MHz	+5 MHz
MED 22	463.0375 MHz	+5 MHz
MED 32	463.0625 MHz	+5 MHz
MED 42	463.0875 MHz	+5 MHz
MED 52	463.1125 MHz	+5 MHz
MED 62	463.1375 MHz	+5 MHz
MED 72	463.1625 MHz	+5 MHz
MED 82	463.1875 MHz	+5 MHz
-	-	-
-	-	-

UHF CTCSS TONES: A = 88.5 Hz B= 94.8 Hz C = 136.5 Hz D = 141.3 Hz E = 151.4 Hz

800 MHz DTR - The following DTRS talkgroups must be programmed into each radio purchased with grant funds.

REGIONAL EMERGENCY MEDICAL AND TRAUMA ADVISORY COUNCIL			
RETAC MUTUAL AID TALK GROUPS			
CENTRAL MTN		EMS CM	(Base station radios shall be programmed with their regional RETAC, statewide EMS, and ER talk groups.)
FOOTHILLS		EMS FH	
MILE HIGH		EMS MH	
NORTH EAST		EMS NE	
NORTH WEST		EMS NW	
PLAINS TO PEAK		EMS PP	
SAN LUIS VALLEY		EMS SLV	
SOUTH EAST		EMS SE	
SOUTHERN		EMS S	
SOUTH WEST		EMS SW	
STATEWIDE ED		ER MAC	
STATEWIDE EMS		EMS MAC	
WEST		EMS W	

REGIONAL MUTUAL AID CHANNELS	
CCNC MAC AREAS	
MAC1 MET METRO MUTUAL AID STATEWIDE	(Base station radios shall be programmed with their Region's mutual aid and Statewide mutual aid talk groups.)
MAC2 MET METRO MUTUAL AID CH2	
MAC3 MET METRO MUTUAL AID CH3	
MAC4 MET METRO MUTUAL AID CH4	
MAC5 NE NORTH EAST MUTUAL AID STATEWIDE	
MAC6 NE NE MUTUAL AID CH2	
MAC7 NE NE MUTUAL AID CH3	
MAC8 NE NE MUTUAL AID CH4	
MAC9 SE SOUTH EAST MUTUAL AID STATEWIDE	
MAC10 SE SE MUTUAL AID CH2	
MAC11 SE SE MUTUAL AID CH3	
MAC12 SE SE MUTUAL AID CH4	
MAC13 SW SOUTH WEST MUTUAL AID STATEWIDE	
MAC14 SW SW MUTUAL AID CH2	
MAC15 SW SW MUTUAL AID CH3	
MAC16 SW SW MUTUAL AID CH4	
MAC17 NW NORTH WEST MUTUAL AID STATEWIDE	
MAC18 NW NW MUTUAL AID CH2	
MAC19 NW NW MUTUAL AID CH3	
MAC20 NW NW MUTUAL AID CH4	
MAC21 STATEWIDE MUTUAL AID CHANNEL	

International Tactical Channels

These analog channels are required to be programmed both repeater and simplex modes. Simplex mode indicated by "D" suffix, i.e. 8CALL90D, both transmit and receive frequency of 851.0125 MHz, CTCSS156.7 Hz. Note: These are the re-banded frequencies.

NPSTC NAME	PREVIOUS DESIGNATION	FREQUENCY	CTCSS	OFFSET	PURPOSE
8CALL90	ICALL	851.0125 MHz	156.7	-45 MHz	CALLING
8TAC91	ITAC-1	851.5125 MHz	156.7	-45 MHz	MUTUAL AID #1
8TAC92	ITAC-2	852.0125 MHz	156.7	-45 MHz	MUTUAL AID #2
8TAC93	ITAC-3	852.5125 MHz	156.7	-45 MHz	MUTUAL AID #3
8TAC94	ITAC-4	853.0125 MHz	156.7	-45 MHz	MUTUAL AID #4
STAC	STAC-5	853.7875 MHz	156.7	-45 MHz	PORTABLE/MOBILE

Statewide Simplex Channels The five statewide simplex channels must use P25 Common Air Interface (CAI) digital signaling, be programmed with Network ID 293, and operate with transmit (TX) output power of 3 watts or less. Note: These are the re-banded frequencies.

- 851.1000 MHz SMPX 1
- 851.7500 MHz SMPX 2
- 852.3000 MHz SMPX 3
- 852.5500 MHz SMPX 4
- 853.6875 MHz SMPX 5

Some DTRS manufactures have a maximum programmable channel capacity of 48 channels per radio. You are required to program 43 interoperable channels/ talk groups into each radio. This leaves only 5 additional channels/ talk groups per radio for future use. Due to the limited channel capacity, the 48 channel radios are not recommended. All DTRS radios purchased must be capable of both P25 trunking and conventional analog/ digital transmissions in both 700/ 800 MHz bands.

North Central All Hazards Region (Denver Metropolitan Area)

North Central Region Interoperability Channels. The following DTRS talkgroups have been set aside specifically for use by agencies that are part of the North Central All Hazards Region. This region is comprised of Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Denver, Douglas, Elbert, Gilpin, and Jefferson Counties. These talkgroups interconnect users from various systems (i.e. VHF, UHF, 800 MHz, etc.) for interoperability. The interoperable talkgroups are governed by CCNC’s Policies and Procedures.

NORTH CENTRAL ALL HAZARDS REGION			
REGIONAL INTEROPERABILITY CHANNELS			
GOLD 1	GOLD 2	-	-
RED NW	RED NE	RED SW	RED SE
BLUE NW	BLUE NE	BLUE SW	BLUE SE
GREEN 1	GREEN 2	GRAY	-

Southwest All Hazards Region

Southwest All Hazards Region Interoperability Channels. The following DTRS talkgroups have been set aside specifically for use by agencies that are part of the Southwest All Hazards Region. This region is comprised of the Southern Ute, Ute Mountain Reservations, Archuleta, Dolores, La Plata, Montezuma, and San Juan Counties.

SOUTH WEST ALL HAZARDS REGION			
REGIONAL INTEROPERABILITY CHANNELS			
SW RIC A	SW RIC B	SW RIC C	SW RIC D

HEALTH FACILITY WITH AN ASSIGNED TALK GROUP

ANSHUTZ INPATIENT PAVILION (UCHSC) (AURORA)	*	LINCOLN COMMUNITY HOSPITAL	*
ARKANSAS VALLEY REGIONAL MEDICAL CENTER	*	LONGMONT UNITED HOSPITAL	*
ASPEN VALLEY HOSPITAL	*	MCKEE MEDICAL CENTER	*
BOULDER COMMUNITY FOOTHILLS HOSPITAL	*	MEDICAL CENTER OF AURORA	*
BOULDER COMMUNITY HOSPITAL	*	MEDICAL CENTER OF THE ROCKIES	*
BRECKENRIDGE MEDICAL CENTER	*	MELISSA MEMORIAL HOSPITAL	*
CASTLE ROCK ADVENTIST HEALTH CAMPUS	*	MEMORIAL HEALTH SYSTEM (CO SPRINGS)	*
CEDAR SPRINGS BEHAVIORAL HEALTH SYSTEM	*	MEMORIAL HOSPITAL (CRAIG)	*
CENTENNIAL MEDICAL PLAZA	*	MERCY MEDICAL CENTER	*
CENTENNIAL PEAKS HOSPITAL	*	MONTROSE MEMORIAL HOSPITAL	*
CENTURA HEALTH - AVISTA ADVENTIST HOSP (LOUISVILLE)	*	MOUNT SAN RAFAEL HOSPITAL	*
CENTURA HEALTH - LITTLETON ADVENTIST HOSPITAL	*	NATIONAL JEWISH MEDICAL AND RESEARCH CENTER	*
CENTURA HEALTH - PARKER ADVENTIST	*	NORTH COLORADO MEDICAL CENTER	*
CENTURA HEALTH - PENROSE ST. FRANCIS HOSP (CO SPRINGS)	*	NORTH EAST SUBURBAN MEDICAL CENTER NE ED	*
CENTURA HEALTH - PORTER ADVENTIST HOSPITAL (DENVER)	*	NORTH PARK HOSPITAL DISTRICT	*
CENTURA HEALTH - ST. ANTHONY CENTRAL HOSPITAL (DENVER)	*	NORTH SUBURBAN MEDICAL CENTER	*
CENTURA HEALTH - ST. ANTHONY NORTH HOSP (WESTMINSTER)	*	NORTH VALLEY REHABILITATION HOSPITAL - REHAB	*
CENTURA HEALTH - ST. MARY CORWIN MED CENTER (PUEBLO)	*	NORTH VALLEY REHABILITATION HOSPITAL - PSYCH	*
CENTURA HEALTH - ST. THOMAS MORE HOSP (CANON CITY)	*	ORTHO - COLORADO HOSPITAL	*
CENTURA HEALTH - SUMMIT BIRTH PLACE	*	PAGOSA MOUNTAIN HOSPITAL (UPPER SAN JUAN HSD)	*
CHILDRENS HOSPITAL ANSCHTZ MC	*	PARKVIEW MEDICAL CENTER	*
CHILDREN'S HOSPITAL ASSOCIATION	*	PIKES PEAK REGIONAL HOSPITAL	*
CHILDRENS HOSPITAL BRIARGATE (COLORADO SPRINGS)	*	PIONEERS HOSPITAL OF RIO BLANCO COUNTY	*
CHILDRENS HOSPITAL NORTH	*	PLATTE VALLEY MEDICAL CENTER	*
CHILDRENS HOSPITAL PARKER	*	POUDRE VALLEY HOSPITAL	*
CHILDRENS HOSPITAL ST. JOSEPH	*	PRESBYTERIAN ST. LUKE'S (PSL) MEDICAL CENTER	*
CHILDRENS HOSPITAL SOUTH	*	PROWERS MEDICAL CENTER	*
COLORADO COMMUNITY HEALTH NETWORK (DENVER)	*	RANGELY DISTRICT HOSPITAL	*
COLORADO MENTAL HEALTH INSTITUTE (FT. LOGAN)	*	RIO GRANDE HOSPITAL	*
COLORADO MENTAL HEALTH INSTITUTE (PUEBLO)	*	ROSE MEDICAL CENTER	*
COLORADO MENTAL HEALTH INSTITUTE (PUEBLO) FORENSIC	*	SADDLE ROCK ED	*
COLORADO PLAINS MEDICAL CENTER	*	SAN LUIS VALLEY REGIONAL MEDICAL CENTER	**
COMMUNITY HOSPITAL (GRAND JUNCTION)	*	SEDGWICK COUNTY MEMORIAL HOSPITAL	*
CONEJOS COUNTY HOSPITAL ASSOCIATION	*	SELECT SPECIALTY HOSPITAL (DENVER)	*
CRAIG HOSPITAL	*	SELECT SPECIALTY HOSPITAL (DENVER) SOUTH CAMPUS	*
DELTA COUNTY MEMORIAL HOSPITAL	*	SEMPERCARE HOSPITAL OF COLORADO SPRINGS	*
DENVER HEALTH EAST CLINIC (WINTER PARK)	*	SKY RIDGE MEDICAL CENTER	*
DENVER HEALTH MEDICAL CENTER	*	SOUTHEAST COLORADO HOSPITAL	*
DEVEREUX CLEO WALLACE	*	SOUTHLANDS ER	*
EAST MORGAN COUNTY HOSPITAL	*	SOUTHWEST HEALTH SYSTEM INC	*
ESTES PARK MEDICAL CENTER	*	SPALDING REHAB HOSPITAL AT PSL MED CENTER	*
EXEMPLA - GOOD SAMARITAN	*	SPALDING REHABILITATION HOSPITAL AT ROSE MED CENTER	*
EXEMPLA - ST. JOSEPH HOSPITAL	*	SPALDING REHABILITATION HOSPITAL	*
EXEMPLA - LUTHERAN MEDICAL CENTER	*	SPANISH PEAKS REGIONAL HEALTH CENTER	*
FAMILY HEALTH WEST HOSPITAL - CAH	*	ST. MARY'S HOSPITAL AND MEDICAL CENTER	*
GRANBY MEDICAL CENTER - ST ANTHONY'S	*	ST. VINCENT GENERAL HOSPITAL DISTRICT	*
GRAND RIVER MEDICAL CENTER	*	STERLING REGIONAL MEDICAL CENTER	*
GUNNISON VALLEY HOSPITAL	*	SUMMIT MEDICAL CENTER - ST. ANTHONY CENTURA (FRISCO)	*
HAXTUN HOSPITAL DISTRICT	*	SWEDISH MEDICAL CENTER	*
HEALTH SOUTH REHABILITATION HOSPITAL OF CO SPRINGS	*	SWEDISH MEDICAL CENTER SOUTH WEST	*
HEART OF THE ROCKIES MEDICAL CENTER	*	TRIUMPH HOSPITAL (WAS SCCI HOSPITAL) (AURORA)	*
HIGHLANDS BEHAVIORAL HEALTH SYSTEM	*	UCH EMERGENCY CARE CENTER (ECC) (GREELEY)	*
KAISER PERMANENTE COLORADO REGION (AURORA)	*	UNIVERSITY OF COLORADO HOSPITAL AUTHORITY	*
KEEFE MEMORIAL HOSPITAL	*	VA (DENVER)	*
KEYSTONE MEDICAL CLINIC ST. ANTHONY	*	VA (GRAND JUNCTION)	*
KINDRED HOSPITAL (DENVER)	*	VAIL VALLEY MEDICAL CENTER	*
KIT CARSON COUNTY MEMORIAL HOSPITAL	*	VALLEY VIEW HOSPITAL ASSOCIATION	*
KREMMLING MEMORIAL HOSPITAL DISTRICT	*	WEISBROD MEMORIAL COUNTY HOSPITAL	*
LA PLATA COUNTY ANIMAS SURGICAL HOSPITAL	*	WRAY COMMUNITY DISTRICT HOSPITAL	*
LAKE CITY AREA MEDICAL CENTER MED1	*	YAMPA VALLEY MEDICAL CENTER	*
LIFECARE HOSPITALS OF DENVER	*	YUMA DISTRICT HOSPITAL	*

AS OF NOVEMBER 2014
QTY 122

Other important items:

- All communications equipment must be purchased and delivered prior to June 30, 2016. Failure to meet this deadline will jeopardize your grant funding.
- Indirect charges may not be requested be in this category.

EMTS Provider Grants Program
Criteria for the "Data Collection" Category

Use this category to request hardware and software for collection of patient care information to meet state requirements. The grant program will pay no more than 50% of the listed amounts (state percentage will change proportionately in cases of an approved waiver of match).

Desktop computer: any desktop computer and monitor set up. Total cost maximum: \$1,750. State share (at 50% match): \$875.

Rugged tablet/laptop: any rugged tablet/laptop. Total cost maximum: \$4,500. State share (at 50% match): \$2,250.

Non-rugged tablet/laptop: any non-rugged tablet/laptop. Total cost maximum: \$1,750. State share (at 50% match): \$875.

Server: used to serve applications and/or files in a multi-user environment when reliability, speed and redundancy are factors. Total cost maximum: \$10,000. State share (at 50% match): \$5,000.

Other important items:

- There are no specific funding guidelines for software, additional cables, external hard drives or other related items. Please list appropriate costs in the grant application and attach a vendor quote.
- Do not use this category if you are requesting a computer and projector for use in training. Use the equipment category for training equipment requests.
- All items must be purchased and delivered prior to June 30, 2016. Failure to meet this deadline will jeopardize your grant funding.
- Indirect charges may not be requested be in this category.

EMTS Provider Grants Program
Criteria for the “Equipment” Category

Use this category to request general EMS and trauma care equipment, which includes:

- Medical equipment necessary to provide EMS and trauma care such as:
 - Durable (not disposable) emergency medical and trauma equipment
 - Durable emergency department resuscitation equipment
 - Durable trauma care equipment
 - Stretchers, cots and patient moving equipment for emergency use
 - Power cots, power lift systems and load bearing stair chairs
 - Spinal immobilization equipment
 - Video laryngoscopy equipment
 - Temporary traffic control cones/signs
 - Bariatric emergency care equipment
 - Non-disposable pediatric equipment
 - Helmets for EMS personnel
 - Personal protective equipment compliant with NFPA 1999, ANSI/ISEA 107 or 29 CFR 1910.143
- Extrication equipment
- Monitoring equipment, defibrillators and cardiac monitors. One year warranties can be included; however, this grants program does not support extended warranties.
- Training and education equipment such as high fidelity manikins, training computers and projectors

Equipment in this category should have an expected service life of greater than 5 years. Extended warranties are not eligible for funding. Single or limited use medical equipment must have a per unit value of greater than \$100. Disposable supplies and pharmaceuticals are not eligible for funding through this program.

Defibrillators/cardiac monitors: there are maximum funding amounts for defibrillators and cardiac monitors, and the grants program will pay no more than 50% of the following amounts (state percentage will change proportionately in cases of an approved waiver of match).

Defibrillator/Cardiac Monitor	Total cost	State share (at 50% match)
Defibrillator with 3-lead, non-invasive pacing, SPO2, ETCO2	\$17,600	\$8,800
Defibrillator with 12-lead, non-invasive pacing, SPO2, ETCO2	\$35,500	\$17,750

All costs over and above these amounts will be paid by the grantee. These are “not to exceed” figures to be used on your grant application. If the actual cost of the equipment is less than the “not to exceed” figure, list the actual cost in the application. Attach your vendor quote to the grant application.

Other important items:

- There are no maximum funding amounts for AEDs. If you are requesting an AED, please obtain appropriate bids/quotes, use those numbers on your grant application and upload the vendor quote.
- Do not use this category for radios, pagers or other communications equipment - use the communications category for those types of items.

- All items must be purchased and delivered prior to June 30, 2016. Failure to meet this deadline will jeopardize your grant funding.
- Indirect charges may not be requested be in this category.

EMTS Provider Grants Program
Criteria for the “Pediatric Equipment Incentive” Category

This category will be available for a limited time and offers a reduced applicant match of 25% to encourage eligible entities to have nationally recommended pediatric care equipment available. A complete list of those items can be found here:

- [2014 Recommended Ambulance Equipment List](#)
- [Recommendations for Emergency Departments](#)

Eligible items in this category are restricted to items contained on the pick list and include:

Item	Total Cost (Per Unit)	Maximum State Share (at 75% match)
Complete Kits - Hospital		
Pediatric Care Cart - Complete (Cart & Contents)	\$3,400	\$2,550
Pediatric Care Cart - Fill Kit Only	\$1,950	\$1,463
Pediatric Care Cart - Cart Only	\$1,810	\$1,358
Hospital Equipment		
Infant Warmer	\$4,500	\$3,375
Kilogram Scale	\$2,000	\$1,500
Urinary Cath Tray 6F - 22F	\$500	\$375
Central Line Tray (4.0F - 7.0F)	\$500	\$375
Lumbar Puncture Tray (18 -22ga)	\$500	\$375
Tube Thoracostomy Chest Tube Tray 10F-40F	\$500	\$375
Intubation / Difficult Airway Tray	\$1,000	\$750
Complete Kits -EMS		
Pediatric EMS Kit - Complete	\$1,950	\$1,463
Pediatric EMS Kit - Fill Kit Only	\$920	\$690
Pediatric EMS Kit - Bag Only	\$700	\$525
Diagnostic Equipment		
Infant/Child BP cuff kit	\$175	\$131
Automatic BP Cuff w child cuffs	\$2,800	\$2,100
Doppler	\$900	\$675
Electronic Thermometer	\$500	\$375
Pediatric Pulse Ox Probes	\$1,000	\$750
Glucometer	\$95	\$71
Reference Tools		
Length Based Tapes	\$30	\$23
Reference Guides (Books / Posters / Electronic)	\$210	\$158

Pediatric Care Equipment		
Pediatric Transport Restraint	\$1,000	\$750
Pediatric Traction Splint	\$500	\$375
Pediatric Vacuum Splints	\$500	\$375
Pediatric Immobilization Equipment	\$400	\$300
Interosseous Needle Kit / Drill	\$600	\$450
Newborn Delivery Kit	\$30	\$23
Ventilation Bags / Masks Kit	\$350	\$263
Nasal Airway Kit (12F - 34F)	\$55	\$41
Oral Airway Kit (Size 0 - 5)	\$25	\$19
Supraglottic Airway Kit (King, LMA etc.)	\$350	\$263
Endotracheal Intubation Kit (2.5 - 8.0mm)	\$350	\$263
Infant Transport Mattress (Warming)	\$70	\$53

Costs listed above reflect the maximum amount allowed for these items under this category. All costs over and above these amounts will be paid by the grantee. All requests will be evaluated for cost effectiveness. These are "not to exceed" figures to be used on your grant application. If the actual cost of the equipment is less than the "not to exceed" figure, list the actual cost in the application.

Attach vendor quotes to the grant application. Extended warranties are ineligible for funding. For items labeled as "kits" the items contained in those kits must be listed as a single line item on the grant application and any subsequent reimbursement requests. The Colorado EMS for Children Program is working with a number of medical supply vendors to provide a list of quotes and customized part numbers for the kits described that may be used as vendor quotes. For more information, visit www.emscolorado.org under "Resources", then select "Grant Resources."

Other important items:

- Do not use this category for any equipment other than the items listed above - use the equipment category for any other items which will require a standard match.
- All items must be purchased and delivered prior to June 30, 2016. Failure to meet this deadline will jeopardize your grant funding.
- Indirect charges may not be requested be in this category.

EMTS Provider Grants Program

Criteria for the "Statewide Consolidated Equipment" Category

There is an option in the grants program to coordinate or participate in a statewide consolidated provider grant. These large grants typically offer significant cost reductions for certain types of physical and durable goods. For more information, contact the department or your RETAC coordinator. As of December 2014, the RETACs looking into coordinating a statewide consolidated grant are:

San Luis Valley RETAC	Cots, stair chairs, power load	Jon Montano	emsgrant@amigo.net
Plains to Peaks RETAC	Vacuum mattresses, SKEDS, scoop stretchers	Kim Schallenberger	kschally@plainstopeaks.org
Western RETAC	Laryngoscopes	Terri Foechterle	terri.foechterle@wretac.org
Southern Colorado RETAC	Physio Control monitors, Tru CPR, Lucas II	Brandon Chambers	scretac@comcast.net

- Statewide consolidated provider grants are applicable only to durable and physical goods.
- Any entity eligible for a provider grant can coordinate or participate in a consolidated provider grant request.
- Participating in a consolidated grant will not preclude an entity from being able to submit an individual provider grant or system improvement funding request.
- A coordinating entity is the entity managing the grant.
 - The coordinating entity has the final determination on quantity and dollar amount of items requested, as well as the number and geographic location of participating agencies, taking any financial or logistical constraints into consideration.
 - The coordinating entity will be responsible for ensuring all required documents are uploaded into the online grant application and that it is submitted by the stated deadline.
- A participating entity is an entity that is applying under the coordinating entity's application.
 - The participating entity must: 1) be current with any data submission requirements, 2) work with the coordinating entity to answer questions regarding financial need and service need, and 3) attest that match funds are available.
 - Participating entities are responsible for understanding whether or not shipping charges are included in any vendor quotes.
- More than one coordinating entity can submit for the same or similar physical goods as another coordinating entity.
- All items must be purchased and delivered prior to June 30, 2016. Failure to meet this deadline will jeopardize your grant funding.

EMTS Provider Grants Program
Guidelines for the "Injury Prevention" Category

Use this category to request funds that address injury prevention needs where projects use evidence-based information for a community injury prevention or health/wellness initiative.

Requests in this category are strongly encouraged to include:

- verbiage showing the project was chosen based on data indicating there is a problem and this program will address the problem
- an evaluation component with evaluation results that will be a part of a final report, especially if the project is to be considered for future funding in subsequent years
- stated goals and desired outcomes, where outcomes are more than just numbers of items purchased
- evidence of collaboration with community partners in addressing the problem (such as EMS, CSP, CPS team, fire, service clubs, public health agencies, schools and other local partners)
- evidence based practice, if data is available, and information about best practice research

Other important items:

- If you have an injury prevention project that is not a part of a community coalition or does not seem to fit into this category, you can use the "Other" category to apply. Please reference the scoring tool for both the "Injury Prevention" and "Other" categories so you understand the rating scales for each to make the most appropriate determination of request category. Your project will be evaluated using the scoring tool criteria for the category you select.
- Do not use this category to request power cots or other equipment designed for provider safety. All equipment must be requested in the "Equipment" category.
- All projects must be completed by June 30, 2016. Failure to meet this deadline will jeopardize your grant funding.
- Indirect charges may be requested for projects in this category.

EMTS Provider Grants Program
Guidelines for the "Personnel/Services" Category

Use this category to request salary and personnel expenses to be provided by an independent contractor or an employee(s) of your organization.

Independent contractors:

Eligible expenses

- Consulting fees as indicated in the grant award
- Supplies directly related to services provided
- Travel costs directly related to services provided including mileage, airfare, railfare or rental vehicles if justified and approved in the grant award.
 - Documented daily expenses for lodging and meal expenses up to \$200/person per day
 - Mileage is payable at the current Colorado state mileage reimbursement rate

Ineligible expenses

- Employee benefits or payroll taxes
- Alcoholic beverages
- Entertainment expenses
- Mileage expenses above and beyond the shortest route, provided travel costs were approved in the grant award

Reporting requirements

- Invoice indicating services provided including a general description of work provided by category
- Receipts for all supplies, airfare, railfare, rental vehicles, lodging and meals
- Documentation of mileage through indication of point of origin and destination

Employees:

Eligible expenses

- Wages or salary at or above the Colorado minimum wage
- Retirement benefits up to 5 % (or up to 12% of the wage or salary amount if the employer does not participate in Social Security)
- Social Security or equivalent payments up to 6.2% of the wage or salary amount
- Health insurance benefits up to \$1500 per month
- Documented unemployment insurance premiums
- Medicare payroll taxes at 1.45%
- Travel expenses or supplies as indicated in the grant award

Ineligible expenses

- Payroll taxes and deductions withheld by the employer on behalf of the employee
- Paid time off (vacation time, sick time, etc.)
- Bonus payments
- Alcoholic beverages
- Entertainment expenses

Reporting requirements

- Invoice indicating number of hourly wages or salary provided over the period invoiced
- Reports indicating eligible benefits and/or payroll taxes paid
- Receipts for all airfare, railfare, rental vehicles, lodging and meals for employee related travel as indicated in the grant award
- Documentation of mileage through indication of point of origin and destination for employee related travel as indicated in the grant award

Other important items:

- All grant funding ends on June 30, 2016. Be sure to explain sustainability and longevity in your narratives. Detail how you will continue supporting your personnel after the grant funding ends.
- All projects must be completed by June 30, 2016. Failure to meet this deadline will jeopardize your grant funding.
- Indirect charges may be requested in this category.

EMTS Provider Grants Program
Guidelines for the “Recruitment and Retention” Category

Use this category to request projects that address recruitment and retention needs. This category encourages requests that are:

- reflective of an overall organizational strategy or plan to effectively recruit and retain members
- based on established organizational recruiting and retention needs
- integrated with requests in other categories such as Personnel and Services or the “CREATE” education program

Requests in this category are strongly encouraged to include an evaluation component that allows the organization and the Colorado Department of Public Health and Environment to evaluate the effectiveness and impact of the grant award. Organizations may wish to consider reviewing these resources for assistance in their project:

- EMS Agency Research Network - www.emsarn.org
- National Association of Emergency Medical Technicians - http://www.naemt.org/about_ems/workforceresources.aspx
- EMS Workforce Retention Toolkit, Virginia Department of Health - <http://www.vdh.state.va.us/OEMS/Agency/Recruitment/ToolKit.htm>

Eligible expenses may include employee salary and travel costs subject to the “Guidelines for the Personnel/Services Category” provided they are justified and approved in the grant award.

Ineligible requests in this category include:

- Personal travel or entertainment expenses
- Out-of-state travel
- Banquets or other meals
- Promotional items (give-a-ways, pens, coffee cups, etc.)
- Recreational items (i.e. ski passes, gym memberships)
- Employee or volunteer benefits earned before the grant award
- Uniform items that do not qualify as safety equipment, as defined in the equipment guidelines as personal protective equipment compliant with NFPA 1999, ANSI/ISEA 107 or 29 CFR 1910.143

Attachments can include agency Recruitment and Retention Plan (if available), vendor quotes and letters of support from collaborating partners or agencies.

Other important items:

- All projects must be completed by June 30, 2016. Failure to meet this deadline will jeopardize your grant funding.
- Indirect charges may be requested in this category.

EMTS Provider Grants Program
Guidelines for the "Other" Category

Use this category to request anything that is not covered in the specifically-named categories within the grant application. Examples include, but are not limited to: conversion of an ambulance box into a training simulator, a project that is not exclusive to any of the specific categories, a wellness or injury prevention project that does not fit the scoring tool criteria for the "Injury Prevention" category, etc.

All projects must be completed prior to June 30, 2016. Failure to meet this deadline will jeopardize your grant funding.

Narratives are extremely important in this category. Please put specific detail into the narratives, including how the idea was developed, all partners or participating agencies in the project, project timelines and parameters, detailed budgets, expected outcomes and benefits, etc.

Attach anything useful yet concise that helps explain your project to the grant evaluators. These can include vendor quotes and letters of support from collaborating partners or agencies.

Do not request general EMS and trauma equipment, defibrillators, monitors, extrication equipment or training equipment in this category - use the "Equipment" category for those items.

EMTS Provider Grants Program

Note on Purchasing Utilizing Colorado State Bid System

Local government and non-profit organizations may be eligible to purchase equipment with significant savings through the state purchasing office (state bid). Items that are routinely available through state purchasing include but are not limited to:

- Computer hardware
- Communications equipment
- General use vehicles

A listing of current state price agreements can be found at:

<https://www.colorado.gov/pacific/dfp/price-agreements>

Information on local government and non-profit use of the state purchasing system can be found at:

www.colorado.gov/pacific/dfp/spo.