



Zika Virus Disease Grant Guidance Document for LPHAs:

Background

As of April 11, 2016, local vector-borne transmission of Zika virus was identified in more than 40 countries and U.S. territories in the Americas, including Puerto Rico, U.S. Virgin Islands, Marshall Islands, and American Samoa. To date, Zika has not spread by mosquitoes in the continental United States, but travel-associated cases are being reported.

On July 1, 2016, CDPHE-OEPR was awarded \$253,357 in grant funding from CDC for Zika activities that strengthen public health incident management and operations, information sharing, and community recovery and resilience. This funding will be allocated throughout Colorado to Local Public Health Agencies, Rural Health Clinics and Federally Qualified Health Centers.

Purpose

This funding is targeted to address public health preparedness capabilities including but not limited to:

1. Strengthen Public Health Incident Management and Emergency Operations Coordination
2. Strengthen Information Management and Sharing
3. Strengthen Community Recovery and Resilience

The primary focus of this grant will be information management & sharing, and community recovery & resilience via the creation of a community outreach campaign. Colorado anticipates an extremely low probability of a vector-borne Zika virus outbreak in our state; therefore, community outreach campaigns targeted to people traveling to Zika-affected areas and health care providers will be our focus.

GRANT & FUNDING PERIOD	
Project Period Begins	7/1/2016
Project Period Ends	6/30/2017

Project Period

Funding Strategy

- All LPHA's and Tribes would be provided the opportunity to be reimbursed for **approximately** \$3,000 for community outreach activities (staff time, print materials, etc.).
- A few locations designated by the CDC will receive additional funding of \$2,000. These locations are currently Weld and Baca Counties.

SPENDING FUNDS—STRENGTHEN INFORMATION MANAGEMENT AND SHARING

- LPHA funding will be delivered via straight pay. In order to save time and efforts, contracts will not need to be amended. **We will provide guidance on how to submit invoices after the grant has been awarded.**
- A small portion of funding (\$25,000) would be provided to the state lab, to enhance testing capacity.
- The remaining funding will be set aside for outreach to Federally Qualified Health Centers and Rural Health Clinics.

Funding Strategy—Pre-award Reimbursements

Reimbursement of pre-award costs as of May 18, 2016, is allowed under this announcement. These pre-award costs cannot exceed 20% of the total budget, \$600 if you have received \$3,000 or \$1,000 if you received \$5,000.

CDC Approved ways to use Zika funds

- Zika Grant Funds can only be used on Zika-related activities.
- Funding cannot be used for activities already covered by other federal grants or cooperative agreements (such as the regular PHEP grant).
- Ways to Spend Zika Funds:

SPENDING FUNDS- SUGGESTIONS

Attend Zika-Related Conferences & Workshops

Printing materials (flyers, posters, banners, etc.) that contain information on Zika Virus (templates provided on toolkit)

Rapidly identify and investigate a possible outbreak of Zika virus in the jurisdiction.

Write a Zika Emergency Operations Plan

Write a Zika Risk Communication Plans

Identify and connect families affected by Zika to community services.

Purchase preparedness resources like repellent, screens and supplies for Zika prevention kits.

Support blood centers in developing reporting protocols and investigating Zika virus infections suspected to be associated with blood products.

Support public health laboratory testing and surge capacity plan updates.

SPENDING FUNDS--STRENGTHEN COMMUNITY RECOVERY AND RESILIENCY

Applicants should collaborate with community partners to plan and advocate for the jurisdiction's at-risk population related to Zika virus (e.g., women of reproductive age; women desiring contraceptive services; pregnant women; and newborns with adverse birth outcomes such as microcephaly or other major birth defects and related developmental disabilities that might be associated with Zika virus infection). This includes evaluating available services and developing long-term plans to address potential needs for these children and their families, including follow-up medical care and behavioral health care services.

COMMUNITY OUTREACH/PUBLIC INFORMATION

Assess existing messaging and communications activities related to prevention of mosquito-borne diseases, such as Zika, chikungunya, and dengue, to identify gaps in communication and understanding. This will inform the development of a risk communications work plan.

Initiate a communications campaign to raise awareness of Zika virus. Primary messaging should focus on awareness, personal protection against mosquitoes, and residential source reduction. Work with key partners and stakeholders to coordinate communication messages, products, and programs.

Educate the public on the risks of sexual transmission of the Zika virus so that the public, especially pregnant women and their male partners, follow guidelines to prevent transmission and further spread of the virus.

Monitor local news stories and social media postings to determine if information is accurate, identify messaging gaps, and make adjustments to communications as needed.

Identify local vendors for translation (as necessary), printing, signage, audiovisual/public service announcement development and determine what is required to use these resources for message and product dissemination.

Ensure a process is in place to disseminate information about jurisdictions with widespread transmission if such transmission occurs.

TRAVELERS

Disseminating travel notices designed to inform travelers and clinicians about the risks for contracting Zika infection related to specific destinations and provide prevention recommendations.

Deploying messages encouraging travelers returning from areas with Zika transmission to take precautions upon return to reduce the risk of spread to local mosquito populations. Risk-reduction steps include actions to prevent mosquito bites for at least three weeks.

CLINICIAN OUTREACH

Inform healthcare providers on the risks, recognition, diagnosis, reporting, clinical management, outcomes, and prevention of Zika virus infections.

Provide educational materials and up-to-date messaging to physicians, specifically healthcare providers of women of reproductive age, regarding the Zika virus infection to:

- Advise patients, especially pregnant women, women trying to become pregnant, and their male partners, on how to reduce mosquito exposure.
- Ensure obstetric providers increase screening for symptoms of Zika and adhere to the CDC guidelines for monitoring pregnant women in regions with local transmission.
- Counsel patients on how to reduce their risk of sexual transmission of the Zika virus and reduce unintended pregnancies through provision of effective contraception if desired.

Support jurisdictional healthcare partners, including pediatric providers, to ensure infants with possible congenital Zika virus infection are evaluated according to CDC guidelines.

Ensure hospitals are trained on appropriate specimen collection and pathology recommended for infants or fetal deaths with possible congenital Zika virus infection.

Funding Restrictions

- Activities not associated with Zika Virus Disease
- Awardees may not use funds to cover regular PHEP activities or deliverables
- Awardees may not use funds for research.
- Awardees may not use funds for clinical care except as allowed by law.
- Awardees may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- Generally, awardees may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Recipients may not use funds for construction or major renovations.
- Recipients may supplement but not supplant existing state or federal funds for activities described in the budget.
- Payment or reimbursement of backfilling costs for staff is not allowed.
- None of the funds awarded to these programs may be used to pay the salary of an individual at a rate in excess of Executive Level II or \$185,100 per year.
- Recipients cannot use funds to acquire real property such as land, land improvements, structures, and appurtenances thereto. In addition, activities under individual grants that constitute major renovation of real property or purchase of a trailer or modular unit that will be used as real property may be charged to HHS grants only with specific statutory authority and GMO approval.
- Recipients awardees cannot use funds to purchase vehicles to be used as means of transportation for carrying people or goods, such as passenger cars or trucks and electrical or gas-driven motorized carts. Recipients can (with prior approval) use funds to lease vehicles to be used as means of transportation for carrying people or goods, e.g., passenger cars or trucks and electrical or gas-driven motorized carts.

Zika Funding Frequently Asked Questions

1. Are there required-deliverables associated with this grant?

No. There will be no deliverables required with this grant.

2. When do I have to spend this money by?

The funds must be spent by June 30, 2017. OEPR will assess funding expenditures on April 15, 2017 to then provide an extra funding opportunity on May 1, 2017 for the funds not expended. In order to keep within fiscal rules and using the straight pay method of disbursement, total amounts cannot exceed \$5,000. Example; If you received \$3,000 and have expended that amount, you will be able to request up to \$2,000 during the extra funding opportunity and if funds are available. Further fiscal guidance will be provided.

3. When can I start asking for reimbursement?

August 1, 2016

4. Who will be the contact for this grant?

Vivian Schemper—Ebola & Zika Grant Coordinator (Vivian.schemper@state.co.us)

Lyle Moore—Resiliency Officer (lyle.moore@state.co.us)

Darcie Bentz—Zika Outreach information (darcie.bentz@state.co.us)

5. Can we pay staff time with Zika funds?

Yes. As long as the staff member is working on specific Zika activities.

6. Can I use Ebola funds on Zika Virus Activities?

Yes. The CDC encouraged states and locals to use Ebola funds on Zika virus activities. Once Zika funding is received, LPHAs are encouraged to use Zika funds for Zika related activities and use Ebola funds for Zika if all Zika funds are spent. As a reminder, all deliverables in your Ebola contracts are still required and are a priority. Colorado LPHAs are encouraged to first complete required deliverables, and then determine what to do with leftover/monitoring funds.

7. Can Zika funds be used to attend PIO trainings?

Yes. Since most of the Zika response will focus on communication strategies, you may use Zika funds to attend a PIO training.

8. Can Zika funds be used to pay Regional staff time if they work on Ebola?

The regular PHEP Grant has already budgeted for Regional Staff salaries. Even if regional staff is working on Ebola activities, they will still be paid out of this funding stream. This should be reflected in your budget for your regional staff and other LPHA staff. There is some leniency in billing for other staff whose salaries are sometimes paid through PHEP.