

## HRSA-11-012 FY 2011 Health Center Planning Grant Funding Opportunity Frequently Asked Questions

Below are common questions and answers for the FY 2011 Health Center Planning Grant (HCPG) funding opportunity. The FAQs are available on the Health Center Planning Grants Technical Assistance website at <http://www.hrsa.gov/grants/apply/assistance/planning>. The FAQs are organized under the following topics:

<b>ISSUE: Background Information</b> .....	1
<b>ISSUE: Eligibility</b> .....	1
<b>ISSUE: Funding Restrictions</b> .....	4
<b>ISSUE: Application Development</b> .....	4
<b>ISSUE: Tribal Entities</b> .....	7
<b>ISSUE: Budget</b> .....	7
<b>ISSUE: Project Work Plan</b> .....	8
<b>ISSUE: Application Submission</b> .....	10
<b>ISSUE: Award Information</b> .....	12
<b>ISSUE: Forms and Attachments</b> .....	12
<b>ISSUE: Technical Assistance and Contact Information</b> .....	14

### ISSUE: Background Information

#### 1. What is the cap for federal funds that can be requested?

HRSA has established an **annual cap of \$80,000** in section 330 grant support for HCPGs.

#### 2. What is the project period?

HRSA has established a one-year project period. The project period is August 1, 2011 to July 31, 2012.

### ISSUE: Eligibility

#### 1. Who can apply for Planning Grant funding (HRSA-11-021)?

Public or private non-profit organizations are eligible to apply for a planning grant to assist them with planning for the development of a comprehensive primary health care center under the Health Center Program authorized under section 330 of the Public Health Service Act, as amended (42 U.S.C. 254b). Applicants eligible to compete include tribal, faith-based and community organizations. Current recipients of section 330(e), (g), (h), (i), or (l) funding are not eligible to apply.

**2. Is an organization required to have a non-profit certification at the time of application for the Planning Grant opportunity?**

An organization is not required to have a non-profit certification in place at the time of application. However, the organization will be required to demonstrate evidence of application for a non-profit certification. The applicant organization will be required to indicate in the *Response* section of the Program Narrative their intention to obtain non-profit certification and submit the application for 501(c) (3) non-profit status as an attachment if available. All applicants are required to obtain 501(c) (3) non-profit status prior to receiving a Health Center Planning Grant (HCPG) award.

**3. Can an organization apply for New Access Point funding and for Planning Grant funding?**

Yes. Organizations may apply for both New Access Point funds and Planning Grant funding. The awarding of New Access Point funding will supersede a Planning Grant award if both applications are approved for funding. Organizations that are awarded a NAP grant will no longer be eligible to receive HCPG funds.

**4. Is an organization eligible to apply for the FY 2011 Planning Grant if the organization was previously awarded a Planning Grant from HRSA?**

Yes. Previously awarded organizations are eligible to apply for a Planning Grant for FY 2011. Prior receipt of Planning Grant funding will not impact eligibility for the FY 2011 Planning Grants. However, the applicant may NOT be a current section 330 funded health center, and the proposed planning activities may NOT be for the same targeted service area the organization was awarded funding for under the Planning Grant opportunity.

**5. Does my nonprofit organization have to be currently in operation to apply for the Planning Grant funding opportunity?**

Nonprofit organizations are not required to be currently in operation to apply for the planning grant funds. Applicants may use an inactive nonprofit entity to apply for the Planning Grants. The entity is expected to become active to complete the proposed planning activities for the establishment of a future the health center that is in compliance with the section 330 Health Center Program requirements.

**6. Can I establish a nonprofit entity for the purposes of applying for the Planning Grant funding opportunity?**

Yes. Applicants who establish nonprofit organizations for the purposes of applying for the Planning Grant funding opportunity are eligible to apply.

**7. Does my organization have to be a health center or currently providing health services to be eligible to apply for a Planning Grant?**

Applicants are not required to be health centers or currently providing health services to apply for a Planning Grant.

**8. My health center has a designated Rural Health Center. Are we eligible for Planning Grant funds?**

Health centers that are designated Rural Health Centers are eligible for this opportunity. The organization can use the funds for planning activities to bring the health center into compliance with section 330 Health Center Program requirements. A summary of the key health center program requirements are available at <http://bphc.hrsa.gov/about/requirements.htm>.

**9. Are Federally Qualified Health Center Look-Alikes eligible for the FY 2011 Planning Grants?**

Yes, however, the FY 2011 Health Center Planning Grant funding opportunity is not designed to support the further development of health centers that are already meeting section 330 requirements. All applicants will be required to demonstrate the need for Planning Grant funding to complete essential planning activities for establishing a health center.

**10. My organization submitted an application for the Federally Qualified Health Center Look Alike designation. Are we still eligible to apply for the Planning Grant funding opportunity?**

Yes, however, please remember your organization will be expected to demonstrate the need for Planning Grant funds. Your organization may want to reconsider whether this funding opportunity is the appropriate avenue to apply for section 330 funding if the proposed health center is capable of meeting all of the section 330 Health Center Program requirements.

**11. Can an organization that received New Access Point funding under the ARRA initiative apply for the Planning Grant funding opportunity?**

Applicant organizations that have received New Access Point (NAP) funding under the ARRA initiative are not eligible to apply for the FY 2011 Planning Grant funding opportunity because the NAP funding is considered section 330 Health Center Program funding.

**12. Are public and private nonprofit entities in Hawaii, Alaska, and the U.S. Territories eligible for FY 2011 Planning Grant Funding?**

Yes. Public and private nonprofit entities that are located in Hawaii, Alaska, and the U.S. Territories are eligible to apply for the FY 2011 Health Center Planning Grant funding opportunity.

## ISSUE: Funding Restrictions

### 1. Are there items or activities that are ineligible for Planning Grant funding?

Planning Grant funding may NOT be used for the following:

- Direct patient care and/or services (e.g., expanded hours);
- Land or facility purchase;
- Construction, alteration, or renovation;
- Grant writing activities;
- A service area for which an applicant was previously awarded a Planning grant; or
- Equipment purchases related to service delivery (e.g. medical supplies such as syringes, blood tubes, plastic gloves, etc.).

\*NOTE: Applicants may propose Planning Grant funding to cover office supplies, staff training, and educational equipment. Applicants are required to demonstrate how the equipment will help facilitate the implementation of the proposed project.

For more detailed information, please review page 16 in the Planning Grant guidance at [www.hrsa.gov/grants](http://www.hrsa.gov/grants).

## ISSUE: Application Development

### 1. What are the required components of the FY 2011 Planning Grant application?

Planning Grants assist organizations by providing funding to conduct the necessary steps for opening a primary health care center, including conducting a needs assessment, identifying appropriate short- and long-term strategic planning, developing coordination and collaborations with other providers of care, assessing organizational capability, and determining cost-effectiveness.

Applicants are required to do the following:

- **Demonstrate the need for primary and preventive health care services.**
- **Present a sound and complete application**
- **Demonstrate collaboration**
- **Present a sound and complete work plan.** Specifically, applicants must propose a work plan that addresses ALL of the following planning activities associated with the development of a section 330 health center:
  - Conducting a comprehensive needs assessment;
  - Designing an appropriate health care service delivery model, based on the comprehensive needs assessment;
  - Efforts to secure financial, professional, and technical assistance;

- Increasing community involvement in the development and/or operational stages of a comprehensive health center; and
- Developing linkages/building partnerships with other providers in the community.

For more detailed information, please review page 2 of the HRSA-11-021 Planning Grant funding opportunity announcement at <http://www.hrsa.gov/grants>.

## **2. Is there a Funding Preference for Planning Grants in FY 2011?**

No, there are no funding preferences for Planning Grants in FY 2011.

## **3. What are the Funding Priorities for Planning Grants in FY 2011?**

There are two funding priorities identified for Planning Grants in FY 2011:

- 1) High Poverty Areas (5 points): Eligible Planning Grant applicants who demonstrate that their proposed service area has a poverty rate greater than the national rate of 14.3% (as determined by the Bureau of Census) will receive an additional 5 points. Applicants proposing to serve multiple zip codes should calculate the average poverty rate for the service area.
- 2) Sparsely Populated Rural Areas (5 Points): Eligible applicants who demonstrate that the entire proposed service area has seven or fewer people per square mile will receive an additional 5 points. When determining whether the area is sparsely populated, the defined service area must be considered in whole, not in part (e.g., entire census tract/zip code, not just a specified area within the census track/zip code).

*Documentation of funding priorities will be assessed by HRSA to determine the award of priority points.*

## **4. How does a funding priority impact the scoring of an application?**

Applicants who meet the specified criteria for High Poverty and/or Sparsely Populated Rural Areas can receive between 5 and 10 additional points towards their total application score.

## **5. Will the additional priority points be calculated and viewable by applicants in EHB?**

No, applicants will not be able view priority points awarded while completing their application in EHB.

## **6. Does an applicant organization need to submit letters of support for the Planning Grant application or for the proposed future health center?**

Applicants are only required to submit letters of support that document support from other health care providers (including any FQHC, health department, local hospital and rural health clinic) in the proposed service area for the Planning Grant application. If the letters of support are not available, the applicant must submit an explanation for why the letters could not be obtained.

Applicants are not required to submit letters of support for the proposed future health center. However, applicants are required to include a plan for securing letters of support from local health care providers in the proposed service area for the proposed future health center.

**7. Can I propose a Planning Grant for a mobile medical van?**

The Health Center Planning grant funding opportunity is intended to support the planning and development efforts for a future health center. This funding opportunity is not intended to support the implementation of service delivery activities. Applicants may not propose planning activities for mobile medical vans for the Planning Grant funding opportunity because it is considered service delivery related and therefore is a restricted use of Health Center Planning grant funds.

**8. Can I propose a Planning Grant for an intermittent site?**

No. Applicants may not propose planning activities for intermittent sites because it is considered service delivery related and therefore is a restricted use of Health Center Planning grant funds. The planning activities proposed must be for a new permanent health center.

**9. Can I propose a Planning Grant for an administrative site?**

Applicants may not propose a Planning Grant for an administrative site because it is considered service delivery related and therefore is a restricted use of Health Center Planning grant funds. The purpose of the Health Center Planning Grant funding opportunity is to support organizations in implementing planning activities for the development of section 330 compliant service site.

**10. Can an organization submit multiple applications for Planning Grants (HRSA-11-021)?**

Eligible applicants may only submit one application per organization in FY 2011 for Planning Grant funding.

**11. Is there an established page limit and format for Project Abstract, Narrative, and Project Work Plan?**

There is an 80-page limit (approximately 10 MB) on the length of the total application when printed by HRSA. Applicants should use an easily readable font, such as Times Roman, Arial, Courier, or CG Times. The text and table portions of the application must be submitted in not less than a 12- point font and 1.0 line spacing. Applications not adhering to 12-point font requirements may be returned. For charts, graphs, footnotes, and budget tables, applicants may use a different pitch or size font but not less than 10 pitch or size font. It is vital that the charts are legible when scanned or reproduced. Please refer to page 5 in the HRSA-11-021 funding guidance and page 10 of the HRSA Electronic Handbook Submission Guide available on the Health Center Planning Grant Technical Assistance webpage at <http://www.hrsa.gov/grants/apply/assistance/planning>.

## **ISSUE: Tribal Entities**

### **1. We are a tribal organization. Do we have to meet all of the program governance requirements?**

No. Tribal entities operated by an Indian tribe or tribal or Indian organization under the Indian Self-Determination Act or an urban Indian organization under the Indian Health Care Improvement Act (25 U.S.C. 1651 et seq.) are not required to meet the governance requirements of the Health Center Program. However, tribal entities are expected to meet all of the other statutory and regulatory requirements. For more information on this topic, refer to Policy Information Notice 98-12: Implementation of the Section 330 Governance Requirements available at <http://bphc.hrsa.gov/policy/pin9812.htm> and Policy Information Notice 98-23: Health Center Program Expectations available at <http://bphc.hrsa.gov/policy/pin9823/governance.htm>.

### **2. Are tribal entities required to respond to the Governance Criterion in the Program Narrative?**

Yes. Applicants identified as Tribal entities are still required to respond to the Governance Criterion. These applicants are expected to demonstrate planning activities for the development or enhancement of the governance structure for the future health center.

## **ISSUE: Budget**

### **1. I have specific questions on preparing my application budget, who should I contact?**

Health Center Planning Grant applicants with questions concerning the business, administrative, or fiscal issues related to the Health Center Planning Grant application may contact:

Brian Feldman  
Health Resources and Services Administration  
Office of Federal Assistance Management

Division of Grants Management Operations  
Rockville, MD 20857  
Telephone: 301-443-3190  
Fax: 301-443-6686  
Email: [bfeldman@hrsa.gov](mailto:bfeldman@hrsa.gov)

## **ISSUE: Project Work Plan**

### **1. Will the Project Work Plan be uploaded into EHB for the Planning Grant application?**

No. Applicants will now complete the Project Work Plan Form online in EHB. Directions for completing the Project Work Plan Form can be found in Appendix B in the Planning Grant guidance and the Health Center Planning Grant User Guide for Applicants, available on the Health Center Planning Grant Technical Assistance website.

### **2. Are there a minimum or maximum number of goals that can be proposed in the work plan?**

At minimum, all applicants are required to respond to all of the required goals identified under the five section 330(c) (1) planning areas. Applicants may propose up to five additional goals.

### **3. Are there any required objectives that applicants must respond to for the work plan?**

No. In the Work Plan, applicants must outline individualized objectives related to the planning and development of a comprehensive health center in compliance with the requirements of section 330 of the PHS Act, as amended and applicable regulations (<http://www.bphc.hrsa.gov/about/requirements.htm>).

### **4. Are there a maximum number of objectives and action steps that can be proposed for each goal?**

Yes. Applicants may propose up to 10 objectives for each required and additional goal proposed. There is no established limit for the number of action steps that may be proposed for each goal.

### **5. My organization has already completed some of the required goals. Are we still required to report objectives, action steps, expected outcomes, evaluation measures and the person/area responsible for these completed goals?**

Yes. An applicant organization that has completed one or more of the required activities/goals that must be included in the work plan is required to provide a

description of the completed activity(ies) and enter the objectives, action plans, expected outcomes, evaluative measures, and person/area responsible completed to achieve the goal.

**6. My organization completed a comprehensive needs assessment on our targeted service area last year. Is this recent enough to submit for the application?**

Yes. Applicants may submit a comprehensive needs assessment for their targeted service area completed prior to submitting a planning grant application. The completed needs assessment must be submitted under Attachment 11. It will be the applicant's responsibility to demonstrate that the needs assessment submitted reflects the current state of the proposed service area AND incorporates the following required elements:

- Health indices for the population in the area (e.g., infant mortality rate, diabetes incidence);
- Economic factors affecting the population's access to health services (e.g., percentage of the population with incomes at or below 200% of the poverty level, geographic areas where the poverty rate is greater than the national poverty rate of 14.3%, joblessness rate, estimated uninsured rate);
- Demographic factors affecting the population's need and demand for health services (e.g., percentage of the population age 65 and over, various types of languages spoken);
- Health resources currently available to the population, including access to primary care providers and resources and/or services of other public and private organizations within the proposed service area that are providing care to the target population(s);
- The capacity within the service area to sustain a comprehensive health center;
- Specific plans regarding the collection of data

Please refer to page 30 for more information.

**7. Our proposed service area already has an MUA/MUP designation. Are we required to respond to Goal A.2?**

Goal A.2 is only applicable for applicants proposing a service area that does not have an MUA/MUP designation. If your service area is already a designated MUA or MUP, please state, "This goal is not applicable for my organization because the proposed service area has an MUA and/or MUP designation" under the objective component. Applicants will also enter not applicable or N/A for each of the other work plan form components for this goal in order to continue to the next section of the project work plan.

**8. My organization is not proposing to serve a special population. Are we required to respond to Goal B.2?**

No. Applicants that are not proposing to serve a special population are not required to respond to Goal B.2. Applicants should enter “Not Applicable” for each component (objectives, action plans, etc.) of Goal B.2 to bypass this goal in the Project Work Plan Form.

**9. Are tribal entities required to respond to goal D.2: *Developing a Governing Board that aligns with section 330 statutory and regulatory requirements?***

Yes. Applicants identified as tribal entities are still required to respond to goal D.2. The organization should instead enter objectives, action plans, expected outcomes, and evaluation measures for developing or enhancing the governance structure for the future health center. Also, the organization’s governing board is still required to fulfill all other statutory and regulatory board responsibilities and requirements.

**10. What is the difference between a goal, objective, and action steps?**

A goal is a projected end-point or outcome. Goals are relatively broad and express a sense of a desired future state or direction. Goals should address identified needs or problems and are usually long-term (1 year or more).

Objectives are descriptions of desired, measurable, time-framed results or outcomes and are usually short term (1 year or less). Objectives (intended results or outcomes) are measures of progress towards a goal. The objectives should serve as the “plan” for the identified action steps.

Action steps are major activities that must occur to accomplish an objective. Additional information on the development of goals, objectives, and action steps are and sample work plan is available in the HRSA-11-021 Health Center Planning Grant funding guidance on page 46- 48.

**ISSUE: Application Submission**

**1. Where can I get an application for Planning Grants (HRSA-11-021)?**

The Planning Grant application and technical assistance materials are available online at <http://www.hrsa.gov/grants/apply/assistance/planning>. You can also visit <http://www.grants.gov/> for an application. Below are directions for accessing the application in Grants.Gov.

Go to <http://www.grants.gov/>.

Step 1: Under the ‘Quick Links’ header on the right, select the ‘Grant Search’ link.

Step 2: Under the ‘Search by Funding Opportunity Number’ field, enter HRSA-11-021

Step 3: Click on the ‘Application’ at the top of webpage.

Step 4: Click on the ‘download’ link.

Step 5: Click on Download Application Package.

## 2. How do I submit my application and when is it due?

HRSA has implemented a two phase application submission process for the FY 2011 Health Center Planning Grant funding opportunity. In Phase 1, all Health Center Planning Grant applications must submit the following documents in Grants.gov by 8:00 p.m., ET on March 18, 2011 AND receive a validation email:

- SF 424 Face Page (Application for Federal Assistance)  
\*\*only electronic signature is required;
- Project Summary/Abstract (uploaded on line 15 of the SF 424 Face Page);
- Project/Performance Site Location(s)
- Additional Performance Site Location(s) (*this form is an attachment of the Project/Performance Site Location form*)
- HHS Checklist Form PHS-5161.
- Grants.gov Lobbying Form
- SF-424 LLL Disclosure of Lobbying Activities (*only required for applicants engaged in lobbying activities*)

Applicants are strongly encouraged to visit the Grants.gov Applicant Resources webpage for access to FAQs, registration user guides, and application submission user guides. The Applicant Resources webpage is available at <http://www.grants.gov/applicants/resources.jsp>.

The directions for completing the SF 424 Face Page are provided within the document. Simply place your browser on the highlighted section and a note box will appear with the direction for entering information for that section.

For Phase 2, applicants are required to submit the following documents by 5:00 p.m., ET in the HRSA EHBs by April 8, 2011:

- Project Narrative- will be uploaded by applicant to the SF-424 Face Page in EHB
- Budget Narrative and Budget Justification
- SF 424A Budget information for Non-Construction Programs
- SF 424B Assurances for Non-Construction Programs
- SF LLL Disclosure of Lobbying Activities (*only required for applicants engaged in lobbying activities*)
- Attachments 1-11
- Program Specific Forms:
  - Form 1A: General Information
  - Form 4: Community Characteristics
  - Form 12: Organizational Contacts
  - Project Work Plan Form

## 3. When can applicants begin completing the HRSA EHB submission process?

Applicants can begin Phase 2 in HRSA's EHBs after Phase 1 in Grants.gov has been completed (by the Grants.gov due date), and HRSA has issued an email confirmation to the Authorized Official that will contain the applicant's assigned application tracking number. The Authorized Official(s) registered in Grants.gov be notified by email when the application is ready within HRSA's EHBs for Phase 2. This email notification will be sent within 7 business days of receipt of the Grants.gov validation email.

Please contact the HRSA Call Center at 1-877-464-4772 if an e-mail notification is not received or for assistance with accessing the application in EHB. Contact the BPHC Help Desk at 1-877-974-2742 for assistance with completing the application forms. Please note that the EHB Tracking Number is listed as the Field Application Tracking Number. To maximize time for completing the documents required for the EHB submission, applicants should complete the grants.gov portion as soon as possible.

#### **4. Can I submit more than one application?**

No, please submit only one application for the Planning Grant funding opportunity.

### **ISSUE: Award Information**

#### **1. When will funds for Planning Grants be awarded?**

Planning Grant awards will be issued on or about August 1, 2011.

#### **2. If my organization is awarded a Planning Grant, does this mean our organization is now a Federally Qualified Health Center (FQHC) or FQHC Look Alike?**

Applicants awarded a Planning Grant will NOT automatically receive FQHC designation or FQHC Look Alike designation. Once the organization has established the health center (or is ready to establish the health center), the organization must apply for New Access Point funding for FQHC designation or apply for Federally Qualified Health Center Look Alike designation. The organization will receive an FQHC or FQHC Look Alike designation if they are awarded a NAP or approved for FQHC Look Alike designation, respectively. These are the only avenues by which an organization may enter the Health Center Program. Please visit the HRSA Bureau of Primary Health Care Health Center Program website for more information at <http://bphc.hrsa.gov/>.

### **ISSUE: Forms and Attachments**

#### **1. How should attachments be formatted?**

All attachments should be provided to HRSA in a computer-readable format (i.e., do not upload text as images). To the extent possible, HRSA recommends PDF files but will

accept Microsoft Word or Excel files. Please do not use spaces or special characters when naming files. Applicants should avoid Excel documents with multiple spreadsheets as individual worksheets may not print out in its entirety.

Do not use the attachments to submit information that is required in the Narrative. Be sure to cross-reference all tables and attachments to the appropriate text in the application. Be sure to upload the attachments in the order indicated in the funding opportunity announcement. Refer to pages 9-14 in the Planning Grant funding opportunity announcement for more information.

**2. Can applicants upload additional attachments?**

Applicants may upload additional relevant material in Attachment 11 of the Planning Grant application. Please note that all attachments are included in the 80 page limit.

**3. Is there a specific order required for the assembly of the application?**

Yes. All applications should follow the order described in HRSA-11-021.

**4. How should the totals on Form 4 be entered?**

Applicants are required to enter the number of persons and percentage of the population for each community characteristic listed under the five categories. For the Service Area Data columns, the total number of persons for each category should equal the total population in the proposed service area, and the total percentage of persons for each category should equal 100%. For the Target Population Data columns, the total number of persons for each category should equal the total number of persons to be targeted within the proposed service area. The total percentage of persons to be targeted should also equal 100%.

**5. Question 18 on the SF-424 Form asks if the applicant has submitted forms SF 424A and SF-424 B. The forms have not been submitted to HRSA yet. Should I check yes or no for this question?**

Please check yes. The forms will later be submitted in the HRSA EHB system.

**6. We are a Public Agency. Are we required to provide Articles of Incorporation for Attachment 8?**

Public Agency applicants are not required to provide Articles of Incorporation for Attachment 8. Please upload a written explanation for why your organization does not have an Articles of Incorporation in lieu of the requested Signed Seal Page. Please refer to Policy Information Notice 2010-01: Confirming Public Agency Status under the Health Center Program and FQHC Look-Alike Program available at <http://bphc.hrsa.gov/policy/pin1001/> to determine whether your organization is considered a public agency.

**7. As a Public Agency, are we required to submit our most recent audit for Attachment 7?**

Public Agencies are not required to submit an independent financial audit. Please submit an explanation describing why this document is unavailable in lieu of an independent financial audit.

**ISSUE: Technical Assistance and Contact Information**

**1. If I encounter technical difficulties when trying to submit my application electronically in Grants.gov or HRSA's EHB, who should I contact?**

For Grants.gov technical assistance, please refer to <http://www.grants.gov> or call the Grants.gov Contact Center 24 hours a day, 7 days a week (excluding Federal holidays) at 1-800-518-4726. Please register on Grants.gov as early as possible as registration may take up to a month.

Please contact the BPHC Help Desk for technical assistance on submitting an application in the HRSA EHBs. The BPHC Help Desk can be reached at 1-877-974-2742. Applicants may also refer to the HRSA Electronic Submission User Guide available at <http://www.hrsa.gov/grants/userguide.htm>.

**2. Who should I contact with programmatic questions concerning the Planning Grant application requirements and process?**

If you have questions regarding the FY 2011 Planning Grant application and/or the review process described in this application guidance, please call Xanthia James in the Bureau of Primary Health Care's (BPHC) Office of Policy and Program Development at 301-594-4300 or [XJames@hrsa.gov](mailto:XJames@hrsa.gov).

The BPHC will announce a pre-applicant teleconference conference call shortly after the guidance release date. Please visit <http://www.hrsa.gov/grants/apply/assistance/planning> for the call date and additional resources.