

**Emergency Medical Services for Children  
2013 Targeted Issue Technical Assistance Conference Call Summary Notes and FAQ**

**Thursday, January 24, 2013 at 1:00pm (Eastern)**

There is a new HRSA funding opportunity announcement (FOA) for **Emergency Medical Services Children Targeted Issues Demonstration Projects**. The FOA for Targeted Issues grants is intended to invite applications that will expand and improve the care provided in the prehospital setting by emergency medical services (EMS) providers for critically ill and injured children. Applicants should address specific needs in the field of prehospital pediatric emergency care that transcends state boundaries.

There will be two categories of grantees. **Category I** applicants will demonstrate an infrastructure for pediatric prehospital research and **Category II** applicants will improve pediatric prehospital research. Typically, projects will result in a new product/resource or the demonstration of the effectiveness of a model system component or service of value to the nation.

Eligible applicants are state governments and accredited schools of medicine. Seven grants will be awarded of which one to two will be Category I and four to five will be Category II. Each award will be up to **\$300,000** in total (direct and indirect) costs per year for three years. The project period will run from **September 1, 2013 to August 31, 2016**.

Please note the application deadline is **April 9, 2013 at 11:59pm (eastern)**. All applicants are urged to ensure that the Authorized Organization Representative (AOR) is available to submit the application in advance of the published deadline as HRSA will **not** accept submission or re-submission of incomplete, rejected, or otherwise delayed applications after the deadline.

If an application is rejected by Grants.gov due to errors, it must be corrected and resubmitted to Grants.gov **before** the deadline. Therefore, applicants should submit applications two to three days in advance to accommodate for any unforeseen circumstances.

If, for any reason, an application is submitted more than once prior to the application due date, HRSA will only accept the applicant's last validated electronic submission prior to the Grants.gov application due date as the final and only acceptable application.

For questions or comments, please contact Tasmeen Weik, Director of Research for the EMSC Program (HRSA) at [tweik@hrsa.gov](mailto:tweik@hrsa.gov).

**Frequently Asked Questions (FAQ)**

**1. Is my institution eligible to apply?**

Eligibility requirements are stated in the FOA, as repeated below. It is the responsibility of the applicant to demonstrate eligibility to meet the requirements provided below. Applicants may submit supporting documentation as appendices to the project narrative in order to show their eligibility.

As explained in the FOA, applications may be submitted by State governments and accredited schools of medicine. The term "school of medicine" is defined in section 799B(1)(A) of the Public Health Service Act (42 U.S.C. 295p(1)(A)) as follows: "The term ... "school of medicine" ... mean[s] an accredited public or nonprofit private school in a State that provides training leading ...

to a degree of doctor of medicine ... and including advanced training related to such training provided by any such school” (emphasis added).

The term “accredited” in this context is defined in section 799B(1)(E) of the Public Health Service Act (42 U.S.C. 295p(1)(E)) as follows: “The term ‘accredited’ ... when applied to a school of medicine ... means a school or program that is accredited by a recognized body or bodies approved for such purpose by the Secretary of Education, except that a new school or program that, by reason of an insufficient period of operation, is not, at the time of application for a grant or contract under this subchapter, eligible for accreditation by such a recognized body or bodies, shall be deemed accredited for purposes of this subchapter, if the Secretary of Education finds, after consultation with the appropriate accreditation body or bodies, that there is reasonable assurance that the school or program will meet the accreditation standards of such body or bodies prior to the beginning of the academic year following the normal graduation date of the first entering class in such school or program.

HRSA cannot pre-determine which organizations are or are not eligible to apply for this grant funding opportunity. You may wish to consult your organizational counsel or other staff for assistance in obtaining documentation to submit with your application that demonstrates satisfaction of these eligibility requirements or clarification as to whether your organization can demonstrate its eligibility under this standard.

## **2. What is the application process if I am unable to apply electronically?**

If you are unable to apply electronically, you will need written exemption from this requirement in advance by the Director HRSA’s Division of Grant Policy. A request to submit a paper application should be made in advance of application deadline. Written exemption from electronic application does not mean you have an extended application deadline. Applications are still due **April 9, 2013** if submitted a paper application. Please note, all are encouraged to submit applications electronically.

## **3. I did not submit a letter of intent. Can I still apply?**

An applicant is eligible to apply even if no letter of intent is submitted.

## **4. Is the number of letter of intents received by HRSA made public to all applicants?**

No. The letter of intent is used for internal purposes.

## **5. What are the application format requirements (page limit, file size, etc.)?**

Under Content and Form of Application Submission on page 9, the FOA states, “The total size of all uploaded files may not exceed the equivalent of 80 pages when printed by HRSA. The total file size may not exceed 10MB.” The 80-page limit includes the abstract, project and budget narratives, attachments and letters of commitment and support. Please note standard forms are NOT included in the page limit.

HRSA strongly urges applicants to print their application prior to submission to ensure it does not exceed the 80-page limit.

Page 10 of the FOA provides information on all required sections of grant application and whether each is or is not counted in the page limit.

## **6. What are the attachments requested for this FOA?**

The following attachments are required for submission (page 11 of FOA):

- Position descriptions
- Biographical sketches of key personnel
- Letters of agreement and/or disagreement of proposed/existing contracts
- Proof of IRB consultation
- Other relevant documents

On page 21 of the FOA you will find the requirement for each attachment.

## **7. Is there a limit on the number of pages for the biosketch?**

The biographical sketches should be two pages in length according to the grant guidance on page 21 under “Attachments.”

## **8. What information do I need to provide from my Institutional Review Board (IRB)?**

We suggest that you meet with the IRB chair or with an IRB representative in your institution, discuss your project goals to determine if you will need to go through the IRB process. Applicants should address the timeline to obtain IRB approval and provide proof of consultation with the IRB as well as review schedules for your institution in an attachment (page 11). Please note that if your entire project depends upon IRB approval, IRB approval may be required as a condition for the release of grant funds. Proof of IRB approval will be required **within 30 days of award**. Therefore, it is recommended that applications submit projects for IRB approval at the time of grant application. For multi-site studies, proof of consultation should be provided for the main site but proof of IRB approval will be required from ALL sites within 30 days of the grant award.

## **9. What are the project focus areas and goals for this TI Demonstration Project Grants FOA?**

As stated on page 1 under “Project Focus Area,” the applicant’s goals should have a pediatric focus, be on national scope, and related directly to improving the care provided by EMS providers in the prehospital setting.

There will be two categories of grants for this award. Category I projects will demonstrate the establishment of an infrastructure for pediatric prehospital research. Category II will improve pediatric prehospital research.

Specifically, Category I applicants will demonstrate the ability of EMS systems to conduct pediatric research by establishing an EMS Research Node Center (E-RNC) for the Pediatric Emergency Care Applied Research Network ([PECARN](#)). Please note, current participation or affiliation with PECARN is NOT required. Page 2, describes in detail specific goals of the E-RNC. Specific goals and responsibilities of the E-RNC can be found on Page 2.

Specifically, Category II projects are investigator initiated designs that seek to improve the pediatric care provided by EMS providers through novel approaches. Category II projects should address one of the specific areas as listed on Page 3.

Please follow the instructions for the category to which you wish to apply and ensure that your application clearly identifies the category.

**10. For Category I grants, does the EMSC Program have an idea about the node they are trying to create, in terms of:**

- a. **Scope of EMSA's size, proximity to each other, volume, association with academic medical center, etc.?** (For example, is HRSA interested in a node of 3 agencies from across the country rather than 3 local agencies within one state or region?)

We have not specified these details because we do not know what the ideal structure may be. The EMS agencies can be part of the same system or from across the country. Size also does not matter as long as there are enough resources from the grant allocated to collect pilot data from the agencies.

- b. **Patient care reports: electronic or paper?**

There is no preference. You do, however, have to describe the data collection system and describe the agency's capability to provide data for research studies.

**11. For Category I grants, are the 1-2 projects that are expected to have pilot data by the end of the 3-year grant program expected to be funded by the TI grant funds, or would the TI grant funds cover the demonstration of EMSA collaboration and external funds be sought for the purpose of the studies?**

Only one pilot data collection has to be completed as part of the TI grant. The idea is to set you up to write a grant for a large scale interventional study. Page 2, further describes the specific goals of the E-RNC for each project year.

**12. Are all co-investigators required to have an affiliation with a school of medicine or department of health?**

No. Only the PI's institution is required to be a school of medicine or State government as described in the eligibility section.

**13. Are all key personnel required to have affiliation with a school of medicine or department of health?**

No. Only the PI's institution is required to be a school of medicine or State government as described in the eligibility section.

**14. How should the staffing plan be presented in the grant application?**

The staffing plan is described on page 16 of the FOA. It is recommended that attachment 1 contain position descriptions that include the roles, responsibilities, and qualifications of proposed project staff. Copies of biographical sketches for any key employed personnel that will be assigned to work on the proposed project must be included in Attachment 2. These individuals will be your key personnel.

You should also describe the strengths/merits of this staffing plan based upon those individuals within the program narrative under *Section 5: Organizational Capability* (see page 20 of the application guidance). Follow the instructions within *Section 5: Organizational Capability* in terms of what to address and also note for each individual named/described whether they are in Attachment 1 or both Attachment 1 and Attachment 2.

**15. What does “Rights in Data” mean?**

Any product or materials developed in whole or in part with HRSA funds needs to be public access. An awardee must submit a master electronic or digital file of the product developed through the grant award to HRSA. In order to sell rights to an entity he/she must receive permission from HRSA. More information on “rights in data” can be found on page 4 of the FOA.

**16. Can my institution submit more than one Targeted Issue grant application?**

Yes, your institution can submit multiple Targeted Issue grant applications. However, only three (3) awards may be made in a State (to a state or to a school of medicine) in any fiscal year.

A Principal Investigator (PI) cannot be named as the PI in multiple applications in each category. A PI may only submit a maximum of one application in each category. An individual applying as a PI may not be listed with more than 10% effort as co-investigator in more than one application per category.

**17. For a Category I grant, is it one physician/site PI and 3 EMS systems or is it 3 physician/site PI’s and 3 EMS systems for the node? What are some potential models?**

There is no requirement for any specific physician PI. The following are examples of potential models (there may be additional models that applicants propose):

- Three EMS agencies affiliated with a school or medicine or state government with one agency serving as the E-RNC in addition to serving as an EMSA. There may be three total PI’s, all of whom are EMS providers. (3 total PI’s)
- A school of medicine serves as the convening body for three EMS agencies. There may be one E-RNC PI and three EMSA PI’s. (4 total PI’s)
- There may be a state department of health applying with the state serving as the PI for the E-RNC and three EMSA PI’s. (4 total PI’s)

The E-RNC PI provides overall leadership to the node. The EMSA PI’s should be individuals that are employed by the EMS agency and can commit the EMS agency to activities.

**18. What abstracts do I need to submit?**

There is a one page limit for the abstract you submit in grants.gov with your grant application. Please note, that the abstract is uploaded as part of page 2 of SF 424-Box 15.

**19. The abstract asks for goals and objectives while the narrative asks for specific aims. Which should I provide?**

Goals and objectives and specific aims were used interchangeably in the FOA. Please refer to goals and objectives in the abstract and specific aims in the narrative. Please remember to clearly indicate which category you are applying for in the project abstract as well as narrative.

**20. How do we limit the abstract to 1 page when the guidance suggests that the methods section “is usually several paragraphs long and describes the activities which have been proposed or are being implemented to achieve the stated objectives?”**

Please include some sentences describing the methods. You do not need to write several paragraphs. There is a 1 page limit.

**21. What are some examples of modes of dissemination beyond peer review publication for Category I and II?**

Examples of modes of dissemination beyond peer review publication include, but are not limited to, presentations at national group conferences targeted to your focus area, use of social media, newsletter articles, or other media to reach specific communities, development of toolkits and other products designed to engage target audiences.

**22. Are there any other funding restrictions in this grant application?**

Funding restrictions for this grant application are listed on page 23 of the grant guidance. “Applications responding to this announcement may request funding for a project period of up to three (3) years at no more than \$300,000 per year. “Applications that exceed the ceiling amount will be considered non-responsive and will not be considered for funding under this announcement.” – page 7 of the grant guidance.

The ceiling amount of \$300,000 includes direct and indirects.

**23. What is a salary limitation and how does it apply for this grant?**

There is a salary limitation that is now in effect for all HRSA grants that limits the salary amount *that may be awarded and charged to HRSA grants and cooperative agreements*. Page 13 of the grant guidance states, “Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II.” The Executive Level II salary of the Federal Executive Pay scale is \$179,700. This amount reflects an individual’s base salary exclusive of fringe. For example, if an individual’s base salary is \$350,000 per year plus fringe benefits of 25% (\$87,500) and that individual is devoting 50% of their time to this award, their base salary should be adjusted to \$179,700 plus fringe of 25% (\$44,925) and a total of \$112,312.50 may be included in the project budget and charged to the award in salary/fringe for that individual.

**24. Can co-investigators budget effort if submitted a separate application as a PI within the same grant category?**

Co-investigators who submit a separate application as a PI within the same grant category should not be budgeted at more than 10% effort.

**25. Are there any travel requirements that should be included in the budget?**

Yes. For both Category I and Category II, expenses for an annual trip of up to two key staff personnel to travel to Washington, DC to meet with the Federal Program staff and/or attend key EMSC training should be included in the budget. It is suggested a three night trip should be budgeted.

It is also recommended that travel for presentation at scientific meetings and other training meetings be budgeted as appropriate.

In addition, Category I applicants should include funding for the E-RNC PI, E-RNC administrator, and the EMSA site investigators for each EMSA site to travel to two PECARN steering committee meetings per year. Applicants should also budget funds for registration costs estimated at \$5,000 per meeting.

In addition, page 15 of the FOA states, “Category I applicants are encouraged to budget at 2-3 trips over the grant period to the EMSC data coordinating center in order to obtain data and statistical support for protocol development.”

**26. Is there a cap on the indirect cost rate percentage of modified total direct costs that can be requested for the new EMSC Targeted Issues grants?**

Yes. The indirect costs rate refers to the “Other Sponsored Program/Activities” rate and to neither research rate, nor the education/training program rate. Page 16 states, “Those applicants without an established indirect cost rate for “other sponsored program” may only request 10% of salaries and wages, and must request an “other sponsored programs” rate through HRSA’s Division of Cost Allocation (DCA). Please note, that if indirect costs are requested, the applicant must submit a copy of the latest negotiated rate agreement.

**27. How will I know the application has been received?**

Applications completed online are considered formally submitted when the application has been successfully transmitted electronically to the correct funding opportunity number, by the organization’s AOR through Grants.gov and validated by Grants.gov on or before the deadline date and time.

Page 22 (Section: Receipt Acknowledgment) states, “Upon receipt of an application, Grants.gov will send a series of email messages to document the progress of an application through the system.” The first email will confirm receipt in the system; the second will indicate whether the application has been successfully validated or has been rejected due to errors; the third will be sent when the application has been successfully downloaded at HRSA; and the fourth will notify the applicant of the Agency Tracking Number assigned to the application. Please note these email messages may be sent to the AOR and not the PI.

**28. Are there examples of prior Targeted Issues grants for public viewing?**

Examples of prior Targeted Issue grants can be found at <http://www.childrensnational.org/emsc>. Note that the funding priorities and focus areas differed in prior years. Please read the current FOA carefully for the current focus area.

**29. What is the purpose of the E-RNC?**

The purpose of E-RNC is to demonstrate the ability of the E-RNC to form an infrastructure that can conceptualize a design pediatric prehospital research studies, efficiently collect appropriate data to answer research questions, and effectively seek funding support for a large scale pediatric EMS study. Page 2 of the FOA provides detailed goals of the E-RNC.