

ARPA NEVADA HEALTH WORKFORCE PIPELINE GRANT Q & A

Q: Do you think I could apply to this myself to cover an MPH/MSW? It says individual cost for training is up to \$60,000, but I don't see MDs being considered.

A: There is no preference on the health-related degree program, so long as you can demonstrate the need of the field of study/profession within the community you intend to serve.

Q: Is there a place where a narrative is located or placed? It's not clear where we should submit the narrative in the application package. Can we submit a narrative in addition to the scope of work?

A: If you feel it would be beneficial to submit a general project concept narrative, this can be submitted as an attachment in addition to the baseline narrative we specifically request for each goal to be listed within the scope of work (pg. 15).

Q: Can you define clinical rotations in more detail? Do these rotations require clinical experience or can they also include other experiential training, such as billing and coding, pharmacy, food pantry, etc.

A: Clinical rotation examples could include (but are not limited to), nurse practitioners, clinical nurse specialists, nurse anesthetists, nurse midwives, dental, dental hygienists, social work students, etc. So, these rotations would require clinical experience where the individual would be providing clinical care or service to patients and/or clients. This portion is focused on the clinical encounter more than administrative functions.

Q: Is personnel time allowable as a direct expense?

A: Yes, personnel costs directly attributed to the project can be charged as a direct expense. Other staff that cannot be directly attributed to the project should be captured within the indirect line item. As noted in the RFA, the indirect line item should not exceed 10%. If the personnel are located in the direct budget line item, they will need to ensure time and effort tracking and attestation to work on this project.

Q: Are operational costs allowable?

A: Yes, operational costs directly attributed to the project can be charged as a direct expense (ex: operating costs for direct staff).

Q: Are program development costs allowable? (i.e.: developing an online asynchronous training)

A: Yes, however it depends on the proposed program. As referenced in the RFA, we ask (and highly suggest) that all applicants review the materials developed by the Nevada Health care Workforce and Pipeline Development Workgroup to avoid duplication of existing and potential project concepts.

Q: What component would include paid work-based learning and/or paid internships for students?

A: It would depend on the requirements of the educational or training program. If an educational program or training program (a component listed within the RFA or is proposed by the applicant) stated that this was a requirement for the student to successfully complete the program and receive certification, or degree then this would be considered as an allowable expense. This can also be work placement for students or others new to the applicable field to gain work-based learning experience to eventually qualify for permanent employment.

Q: Is tuition reimbursement allowable under Component #6?

A: Yes.

Q: What component, if any, would support employer-based incentives?

A: While Component 3: Clinical Rotations, appears to be most in alignment with this proposed incentive, this need may be true in other categories as well. For example, if an agency was willing to act as a preceptor for an epi. fellow, but would need an incentive to serve as a location, such incentive could also be proposed within Component 1.

Q: The PI would like to distribute training scholarships (\$60,000) to participants at any Nevada Systems of Higher Education institution. How would the funds need to be tracked, and how would the funds be distributed to each student? As the grantor, is there a preferred method?

A: We do not have a preferred method. Please just ensure you detail how you would track completion of a training program, degree program, or course and how you would ensure the individual payment did not exceed \$60,000.

Q: Regarding Component 1 (bio/epi) and Component 6 (training scholarships), what are DPBH's most pressing workforce needs?

A: In relation to Component 1, individuals with PhDs in the field of epidemiology would be beneficial to DPBH. Furthermore, graduate degrees or courses in epidemiology and Biostatistics would also be of benefit as well.

Q: Local health authorities have asked for support in upskilling the existing workforce through things like stackable certificates and online programming, funding for scholarships and GA positions (if allowable), funding for experiential learning, and foundational public health training for employees who do not have any formal public health education. What would be most helpful to DPBH's workforce?

A: There is a broad array of options at DPBH to support various workforce needs. This includes providing specific trainings for staff to further develop competency in a specific area to be more effective in their specific career. This could be providing training or certificates for staff for free to them with the expenses being incurred by the training entity or tuition or training reimbursement to the employee if they attend the course individually.

There is also a need to help current staff complete educational programs to promote within the agency. This may include individual courses, certificates, or degree programs and is based on the pipeline for the different staff members.

The areas of need/training could be everything from basic public or behavioral health training, to fiscal or management training, to leadership training. This is dependent on the individual.

GA positions could be an allowable route so long as the proposed concept addresses an identified need and showcases the effectiveness in addressing any gaps or barriers.