



**STATE OF VERMONT**  
JOINT FISCAL OFFICE

**MEMORANDUM**

To: James Reardon, Commissioner of Finance & Management  
From: Nathan Lavery, Fiscal Analyst  
Date: January 11, 2010  
Subject: JFO #2419, #2420, #2421, #2422

No Joint Fiscal Committee member has requested that the following items be held for review:

**JFO #2419** — \$1,198,956 grant from the U.S. Department Health and Human Services to the Vermont Department of Mental Health. These funds will be used to implement the Attachment, Self-Regulation and Competency (ARC) framework for complex trauma treatment aimed at improving outcomes for children ages 3 – 18 years old that have experienced complex trauma. **One (1) limited service position is associated with this request.**

*[JFO received 12/8/09]*

**JFO #2420** — \$237,500 grant from the U.S. Department of Housing and Urban Development (HUD) to the Vermont Department of Children and Families, Office of Economic Opportunity. These grant funds will be used to cover building rehabilitation and/or new construction costs for seven homeless shelters across Vermont.

*[JFO received 12/8/09]*

**JFO #2421** — \$250,000 grant from the U.S. Department Justice to the Vermont Judiciary. These grant funds will be used to support modeling (in Chittenden County) a statewide approach for creating integrated "criminal justice-capable" systems of care that divert persons with mental illness from the criminal justice system. **This request includes establishment of one (1) limited service position.**

*[JFO received 12/8/09]*

**JFO #2422** — \$830,600 grant from the U.S. Centers for Disease Control and Prevention to the Vermont Department of Health, awarded under the American Recovery and Reinvestment Act. These grant funds will be used to establish an internal surveillance and prevention strategy designed to reduce the incidence of health care-associated infections. **This request includes establishment of one (1) limited service position.**

*[JFO received 12/10/09]*

The Governor's approval may now be considered final. We ask that you inform the Secretary of Administration and your staff of this action.

cc: Michael Hartman, Commissioner  
Wendy Davis, Commissioner  
Stephen Dale, Commissioner  
Robert Greemore, Court Administrator



**STATE OF VERMONT**  
JOINT FISCAL OFFICE

**MEMORANDUM**

To: Joint Fiscal Committee Members  
From: Nathan Lavery, Fiscal Analyst  
Date: December 9, 2009  
Subject: Grant Requests

Enclosed please find five (5) requests that the Joint Fiscal Office has received from the administration. If approved, these requests would result in the establishment of 4 new limited service positions.

**JFO #2418** — Request to **establish one (1) limited service position** in the Department of Public Safety. Funding for this position is provided by the \$3,061,782 Byrne Justice Assistance Grant awarded under the American Recovery and Reinvestment Act, and **expedited review of this item has been requested**. Joint Fiscal Committee members will be contacted within two weeks with a request to waive the statutory review period and accept this item. Note: The underlying grant was approved as part of the FY2010 budget (Sec. B.209).

*[JFO received 12/3/09]*

**JFO #2419** — \$1,198,956 grant from the U.S. Department Health and Human Services to the Vermont Department of Mental Health. These funds will be used to implement the Attachment, Self-Regulation and Competency (ARC) framework for complex trauma treatment aimed at improving outcomes for children ages 3 – 18 years old that have experienced complex trauma. **One (1) limited service position is associated with this request**. Note: Request is comprised of selected pages from complete submission; additional information available upon request.

*[JFO received 12/8/09]*

**JFO #2420** — \$237,500 grant from the U.S. Department of Housing and Urban Development (HUD) to the Vermont Department of Children and Families, Office of Economic Opportunity. These grant funds will be used to cover building rehabilitation and/or new construction costs for seven homeless shelters across Vermont in order to increase capacity or improve safety.

*[JFO received 12/8/09]*

**JFO #2421** — \$250,000 grant from the U.S. Department Justice to the Vermont Judiciary. These grant funds will be used to support modeling (in Chittenden County) a statewide approach for creating integrated "criminal justice-capable" systems of care that divert persons with mental illness from the criminal justice system. **This request includes establishment of one (1) limited service position**.

*[JFO received 12/8/09]*

**JFO #2422** — \$830,600 grant from the U.S. Centers for Disease Control and Prevention to the Vermont Department of Health, awarded under the American Recovery and Reinvestment Act. These grant funds will be used to establish an internal surveillance and prevention strategy designed to reduce the incidence of health care-associated infections. **This request includes establishment of one (1) limited service position.**

*[JFO received 12/10/09]*

In accordance with the procedures for processing such requests, we ask you to review the enclosed and notify the Joint Fiscal Office (Nathan Lavery at (802) 828-1488; [nlavery@leg.state.vt.us](mailto:nlavery@leg.state.vt.us)) if you have questions or would like an item held for Joint Fiscal Committee review. Unless we hear from you to the contrary by December 23 we will assume that you agree to consider as final the Governor's acceptance of these requests.

cc: James Reardon, Commissioner  
Thomas Tremblay, Commissioner  
Wendy Davis, Commissioner  
Stephen Dale, Commissioner  
Robert Greemore, Court Administrator

ARRA ACTIVITY ACCEPTANCE REQUEST:  ARRA Competitive Grant (Alternate Form AA-1)  Other ARRA Activity (Not subject to AA-1 Process)

Revision?  Yes      Revision Date: \_\_\_\_\_

**INSTRUCTIONS:** This form must be completed in its entirety and is required for:  
 1) acceptance of all ARRA Discretionary Grants, and  
 2) PRIOR to receipt of all ARRA Formula/Block Grants, and  
 3) PRIOR to receipts of all ARRA funding for Individual Entitlement Programs.

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**NOTE:** Incomplete forms will be returned to departments and will result in the delay of spending authority release.

**BASIC ARRA INFORMATION**

1. Agency (ARRA-F): AHS      2. Department (ARRA-F): Health (Bus. Unit #03420)      3. DUNS # (ARRA-C): 80-937-6155

4. Office Location: \_\_\_\_\_ City/town: Burlington      County: Chittenden

5. ARRA Activity (ARRA 1-01): Healthcare-Associated Infections      6. ARRA Code (ARRA 2-1): E70

7. Legal Title of Grant: Building and Sustaining State Programs to Prevent Healthcare-Associated Infections

8. Federal Agency Award # (ARRA-B): 3U50CI123665-05S1      9. CFDA # (ARRA-E): 93.717

10. Federal Funding Agency's US Treasury Account Symbol (TAS): \_\_\_\_\_ (if provided by the federal funding agency)

11. Federal (or VT) Funding Agency (ARRA-A): Centers for Disease Control and Prevention      12. Award Date: 8/28/2009

13. Award Amount \$830,600      14. Check if this amount is an estimate:

15. Grant Period (ARRA-H) From: 9/1/2009 To: 12/31/2011

16. Date by which ARRA funds must be:  Obligated by Date: 12/31/2011 and/or  Spent by Date: 3/31/2011

17. Purpose of Grant/ARRA Narrative (ARRA 2-02): see attached summary

18. Area that will Benefit (name the state, county, city or school district): Vermont

19. Impact on existing program if grant is not Accepted: none

**20. BUDGET INFORMATION** (Note the total of columns A+B+C must equal the total of columns D+E+F)

Column Reference	A	B	C	D	E	F
	←-----State Fiscal Year-----→			←-----Federal Fiscal Year-----→		
Fiscal Year	SFY 2009	SFY 2010	SFY 2011 & Beyond	FFY 2009	FFY 2010	SFY 2011 & Beyond
<b>Expenditures:</b>						
Personnel Costs	\$	\$64,250	\$231,305	\$295,555	\$	\$
3 <sup>rd</sup> Party Contracts	\$	\$0	\$0	\$0	\$	\$
Operating Expenses	\$	\$0	\$2,210	\$2,210	\$	\$
Grants/Sub-Awards	\$	\$185,750	\$347,085	\$532,835	\$	\$
<b>Total Expenditures</b>	\$0	\$250,000	\$580,600	\$830,600	\$	\$
<b>Revenues:</b>						
<b>State Funds:</b>	\$	\$	\$	\$	\$	\$
Cash	\$	\$	\$	\$	\$	\$
In-Kind	\$	\$	\$	\$	\$	\$
<b>ARRA Federal Funds:</b>	\$	\$	\$	\$	\$	\$
(Direct Costs)	\$	\$229,710	\$507,557	\$737,267	\$	\$
(Statewide Indirect)	\$	\$1,015	\$3,652	\$4,667	\$	\$
(Dept'l Indirect)	\$	\$19,275	\$69,391	\$88,666	\$	\$
<b>Sub-total ARRA Funds</b>	\$	\$250,000	\$580,600	\$830,600	\$	\$
<b>Other Funds:</b>	\$	\$	\$	\$	\$	\$
(Other Federal)	\$	\$	\$	\$	\$	\$
(list source)	\$	\$	\$	\$	\$	\$
<b>Total Revenues</b>	\$0	\$250,000	\$580,600	\$830,600	\$	\$

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JOINT FISCAL OFFICE

Comments about expenditures or revenues may be made in the space provided below:

**21. VISION Tracking Information:**

DeptID/Appropriation:	Other VISION Chartfield (funds, programs or projects)	Total Amount (all FYs)	Comments
3420010000	program code 39002	\$66,176	
3420021000	new program code to be assigned only upon JFC approval	\$764,424	
		\$	
		\$	
		\$	
<b>Total</b>		<b>\$830,600</b>	This Total MUST agree with the total of Item 10, columns A+B+C above

**PERSONAL SERVICE INFORMATION**

22. Will monies from this grant be used to fund one or more Personal Service Contracts?  Yes  No  
 If "Yes", appointing authority must initial here to indicate intent to follow current competitive bidding process/policy.

Appointing Authority Name: \_\_\_\_\_ Agreed by: \_\_\_\_\_ (initial)

23. State Position Information and Title(s):	# Existing Positions Retained	Est. Annual Regular Hours	# Positions Created (New)	Est. Annual Regular Hours
Financial Administrator	.10	208		
Public Health Analyst II	.25	520		
HAI Prevention Coordinator			1	2,080
<b>Total Positions</b>	<b>.35</b>	<b>728</b>	<b>1</b>	<b>2,080</b>

24. Is the appropriate Position Request Form attached for new position(s) listed in Line 12 above?  
 YES - Form attached or  No new positions created

25. Equipment and space for these positions:  Is presently available.  Can be obtained w/available funds.

26. Does this qualify as "Infrastructure"?  Yes  No If Yes complete next line:

**27. Infrastructure Rationale (select one) (ARRA 2-06):**

1.  To Preserve & create jobs & promote economic recovery.
2.  To assist those most impacted by the recession.
3.  To provide investment needed to increase economic efficiency by spurring technological advances in science & health.
4.  To invest in transportation, environmental protection, & other infrastructure that will provide long-term economic benefits.
5.  To stabilize State & local government budgets, in order to minimize & avoid reductions in essential services & counterproductive state & local tax increases.

**28. AUTHORIZATION AGENCY/DEPARTMENT SIGNATURES**

I/we certify that no funds beyond basic application preparation and filing costs have been expended or committed in anticipation of Joint Fiscal Committee approval of this grant, unless previous notification was made on Form AA-IPN (if applicable). I/we further certify that these funds will be used only in accordance with the federal American Recovery & Reinvestment Act and all federal and state rules and regulations pertaining thereto:	ARRA Activity Manager: <i>Patsy Tassler Kelso</i>	Date: <i>11/5/09</i>
	Name: Patsy Tassler Kelso, Ph.D.	Title: State Epidemiologist for Infectious Disease
	Department Head: <i>Christine Finley</i>	Date: <i>11/5/09</i>
	Name: Christine Finley	Title: Deputy Commissioner, VDH
	Agency Secretary (if required): <i>Patrick Flood</i>	Date: <i>11/13/09</i>
Name: <i>PATRICK FLOOD</i>	Title: <i>DER. SECRETARY</i>	

**29. REVIEW BY FINANCE & MANAGEMENT** (continue on separate sheet if necessary)

To Release Spending Authority in VISION: FY 20 \_\_\_\_\_ \$ \_\_\_\_\_ ation(s): \_\_\_\_\_

Analyst (initial): <i>JA</i>	Date: <i>11/20/09</i>	Commissioner Finance & Management initial: <i>JK</i>	Date: <i>11/20/09</i>
For ESR Use Only:	Assigned ESR Director's Signature: <i>Joan Stewart</i>	Date: <i>11/18/09</i>	

\*\*\* Section 30 through 33 are required ONLY when Form ESR-2 is used in lieu of Form AA-1 \*\*\*

**30. SECRETARY OF ADMINISTRATION**

<input type="checkbox"/> Check One Box: Accepted	(Secretary's signature or designee) <i>T. Bell</i>	Date: <i>11/30/09</i>
<input type="checkbox"/> Rejected		Date:

**31. ACTION BY GOVERNOR**

<input checked="" type="checkbox"/> Check One Box: Request to JFO	(Governor's signature or designee) <i>[Signature]</i>	Date: <i>12/1/09</i>
<input type="checkbox"/> Rejected		Date:

**32. SENT TO JFO**

<input type="checkbox"/> Sent to JFO	Date:
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\*\*\* Section 33 is a required section \*\*\*

**33. ARRA FORM ESR-2 DOCUMENTATION CHECK LIST (check all that apply):**

<input type="checkbox"/> Notice of Award or Proof of Award (REQUIRED)	<input type="checkbox"/> Dept. project approval (if applicable)	<input type="checkbox"/> Grant (Project) Timeline (if applicable)
<input type="checkbox"/> Request Memo	<input type="checkbox"/> Governor's Certification (if applicable)	<input type="checkbox"/> Request for Extension (if applicable)
<input type="checkbox"/> Grant Agreement	<input type="checkbox"/> Notice of Donation (if any)	<input type="checkbox"/> Form AA-1PN attached (if applicable)
	<input type="checkbox"/> Position Request Form(s)	



**Grant Number:** 3U50CI123665-05S1

**Principal Investigator(s):**  
PATSY TASSLER

**Project Title:** EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES -  
ARRA - HAI

VERMONT ST DEPT. OF HEALTH  
108 CHERRY STREET  
BURLINGTON, VT 05401

**Budget Period:** 09/01/2009 – 12/31/2011  
**Project Period:** 04/01/2004 – 12/31/2011

Dear Business Official:

The Centers for Disease Control and Prevention hereby awards a grant in the amount of \$830,600 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to VT ST OFFICE OF THE GOVERNOR in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 42 CFR 52 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact the individual(s) referenced in Section IV.

Sincerely yours,

Sharron Orum  
Grants Management Officer  
Centers for Disease Control and Prevention

Additional information follows



## Project Abstract Summary

### \* Project Summary

Vermont's efforts regarding healthcare-associated infections (HAI) have to date focused on internal surveillance, state-mandated public reporting of infection rates, and facility-specific training and prevention initiatives. While public reporting may have a role in reducing infection rates, a structured, well-coordinated and efficient internal surveillance and prevention strategy seems to be a critical next step in reducing the incidence of HAI. The ARRA funds that Vermont is seeking would provide resources for this work.

Vermont's objectives under Activity A are to institute regular reporting of HAI data through the National Healthcare Safety Network (NHSN) system, and to develop a State HAI Prevention Plan. Activity B objectives include implementing a validation system for data reported to NHSN, and providing "mini-grants" and technical assistance to hospitals to encourage them to report additional data to NHSN and develop electronic systems for uploading the data where feasible. Activity C objectives are focused on two quality improvement collaboratives. The first collaborative would train front-line hospital staff on evidence-based infection prevention guidelines. The second collaborative would build on and expand work being conducted through Vermont's Medicare Quality Improvement Organization related to the prevention of antibiotic resistant infections, including measuring and improving hand hygiene practices.

\* Estimated number of people to be served as a result of the award of this grant.

610000

**BUDGET INFORMATION - Non-Construction Programs**

OMB Approval No. 4040-0006  
Expiration Date 07/30/2010

**SECTION A - BUDGET SUMMARY**

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Epi & Lab Capacity HAI	93.717	\$ 0.00	\$ 0.00	\$ 957,187.00	\$ 0.00	\$ 957,187.00
2.						
3.						
4.						
5. Totals		\$	\$	\$ 957,187.00	\$	\$ 957,187.00

**SECTION B - BUDGET CATEGORIES**

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
	Epi & Lab Capacity HAI				
<b>a. Personnel</b>	\$ 217,759.00	\$	\$	\$	\$ 217,759.00
<b>b. Fringe Benefits</b>	65,328.00				65,328.00
<b>c. Travel</b>	2,210.00				2,210.00
<b>d. Equipment</b>	0.00				
<b>e. Supplies</b>	0.00				
<b>f. Contractual</b>	541,235.00				541,235.00
<b>g. Construction</b>	0.00				
<b>h. Other</b>	0.00				
<b>i. Total Direct Charges (sum of 6a-6h)</b>	826,532.00				\$ 826,532.00
<b>j. Indirect Charges</b>	130,655.00				\$ 130,655.00
<b>k. TOTALS (sum of 6i and 6j)</b>	\$ 957,187.00	\$	\$	\$	\$ 957,187.00
<b>7. Program Income</b>	\$ 0.00	\$	\$	\$	\$

Authorized for Local Reproduction

**SECTION C - NON-FEDERAL RESOURCES**

(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8.	Epi & Lab Capacity HAI	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
9.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12. TOTAL (sum of lines 8-11)		\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

**SECTION D - FORECASTED CASH NEEDS**

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
14. Non-Federal	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15. TOTAL (sum of lines 13 and 14)	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

**SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT**

(a) Grant Program	FUTURE FUNDING PERIODS (YEARS)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16. Epi & Lab Capacity HAI	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
17. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
19. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20. TOTAL (sum of lines 16 - 19)	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

**SECTION F - OTHER BUDGET INFORMATION**

21. Direct Charges: <input type="text"/>	22. Indirect Charges: <input type="text"/>
23. Remarks: <input type="text"/>	

**Budget Justification – Epidemiology and Laboratory Capacity  
Healthcare-Associated Infections – Building and Sustaining State Programs to Prevent  
Healthcare-associated Infections  
Vermont Department of Health (VDH)  
08/30/09 – 12/31/11**

**Personnel**

**\$217,759**

Due to this funding, a Financial Administrator position at .1 FTE, a Public Health Analyst position at .25 FTE, and the State Epidemiologist position at .25 FTE have been retained in the Vermont Department of Health. With this funding, one new position will be established at the Health Department for the Prevention Coordinator.

PERSONNEL	ANNUAL SALARY	PERCENTAGE OF TIME	FUNDING PERIOD	AMOUNT REQUESTED
State Epidemiologist	\$108,181	25%	2.3 years	\$62,204
Public Health Analyst II	\$61,173	25%	2.3 years	\$35,175
Financial Administrator	\$64,500	10%	2.3 years	\$14,835
HAI Prevention Coordinator	\$45,889	100%	2.3 years	\$105,545

State Epidemiologist

Patsy Tassler Kelso, Ph.D. is the principal investigator for the ELC grant, and will supervise the HAI Prevention Coordinator position. She will oversee the implementation of healthcare-associated infections surveillance and prevention activities in the Infectious Disease Epidemiology Section. She is an Assistant Professor of Medicine in the School of Medicine at the University of Vermont. Dr. Kelso reports to the Health Surveillance Director.

Public Health Analyst II

The analyst will serve a consultative role for the state plan development, participate in the data validation project, and review data and create reports from the NHSN.

Financial Administrator

We estimate that the administration of this grant will require .1 FTE of a financial administrator in the Department's business office. This administrator will be assigned the specific duties of tracking and reporting programmatic and fiscal activity related to the Recovery Act funds per OMB requirements.

HAI Prevention Coordinator

This will be a new position created by this funding opportunity. The Coordinator will play a lead role in the process of developing a state HAI Prevention Plan for submission to the CDC by January 1, 2010. Additional duties may include data validation for the National Healthcare Safety Network (NHSN) surveillance data submitted by hospitals, healthcare worker education about infection control (including CDC's ONE and ONLY campaign), a coordinating role in fit testing for healthcare workers, and healthcare provider education about antibiotic stewardship (including CDC's GET SMART campaign).

**Indirect Costs****\$130,655**

The Vermont Department of Health uses a Cost Allocation Plan, not an indirect rate. The Vermont Department of Health is a department of the Vermont Agency of Human Services, a public assistance agency, which uses a Cost Allocation Plan in lieu of an indirect rate agreement as authorized by OMB Circular A-87, Attachment D. This Cost Allocation Plan was approved by the US Department of Health and Human Services effective October 1, 1987. A copy of the original approval and a copy of the approval letter of April 17, 2003 are attached. The Cost Allocation Plan summarizes actual, allowable costs incurred in the operation of the program. These costs include items which are often shown as direct costs, such as telephone and general office supply expenses, as well as items which are often included in an indirect rate, such as the cost of office space and administrative salaries. These costs are allocated to the program based on the salaries and wages paid in the department (or division) bearing an original expense. Because these are actual costs, unlike an Indirect Cost Rate, these costs will vary from quarter to quarter and cannot be fixed as a result of program costs. Based on costs to this program during recent quarters, we would currently estimate these allocated costs at 60% of the direct salary line item.

**Fringe Benefits****\$65,328**

The actual cost of fringe benefits (not a fringe benefit rate) will be reported as a direct cost of the program. The actual cost of fringe benefits varies from employee to employee based on salary, employee choice of health care plan, and employee election of certain benefits. The usual components of these fringe benefits are FICA at 7.65% of salary, retirement at 7% of salary, dental and medical and life insurance coverage at 80% of the actual costs of the insurance premium if and as elected by the employee, and \$1.50 per pay period for the employee assistance program. The cost of each employee's fringe benefits will be allocated to the program based on hours worked in the program relative to all hours worked by the employee. Based on the current cost of fringe benefits for employees working in similar programs, we are estimating the cost of these fringe benefits at 30% of salary.

**Contractual****\$541,235**

Contract to the Vermont Program for Quality in Health Care (VPQHC) to support the grant activities, as follows:

VPQHC PERSONNEL	ANNUAL SALARY & FRINGE	% TIME	FUNDING PERIOD (Activity Supported)	AMOUNT REQUESTED
Medical Director	\$167,100	2%	0.3 years (A)	\$1,003
Quality Improvement Specialist	\$86,020	10%	2.3 years (A, B, C)	\$19,785
Research Analyst	\$87,089	10%	2.3 years (A, B, C)	\$20,030
Critical Access Hospitals Quality Improvement MD	\$156,000	5%	2.3 years (B, C)	\$17,940
Project Coordinator	\$66,587	15%	2.0 years (B,C)	\$19,976
<b>TOTAL PERSONNEL</b>				<b>\$78,734</b>

**In-state Travel** \$0

**Out-of-state Travel** \$2,210

Funding is requested to support travel for two persons to attend a healthcare-associated infections meeting at the CDC. Estimated expenses are:

Airfare (2 x \$500 each)	\$1,000
Meal allowance (2 x 4 days @ \$32/day)	\$256
Hotel (2 x 3 nights @ \$159/night)	\$954

**TOTAL FUNDS REQUESTED: Healthcare-Associated Infections** \$957,187

The Recovery Act requires that Recovery Act funds be tracked separately from other funds. The State of Vermont uses Fund numbers in its accounting system to identify the various sources of funds used by the State. The Department of Finance has assigned a unique fund number (22040) to identify all ARRA funds. The Agency of Human Services of the State of Vermont uses an HHS approved Cost Allocation plan to allocate and track costs for its various programs. Each ARRA-funded program will be assigned a unique program code within the Cost Allocation Plan. Through the combination of fund numbers and program codes, all ARRA funds will be tracked at the program level. Recovery Act funds will be managed through these separate Recovery Act-specific accounts and will not be commingled with other funds in our financial system.

**STATE OF VERMONT  
Joint Fiscal Committee Review  
Limited Service - Grant Funded  
Position Request Form**

This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: AHS/Health Date: 10/19/09

Name and Phone (of the person completing this request): Patsy Tassler Kelso, 802-863-7286

Request is for:

- Positions funded and attached to a new grant.
- Positions funded and attached to an existing grant approved by JFO # \_\_\_\_\_

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):  
Centers for Disease Control and Prevention,  
Building and Sustaining State Programs to Prevent Healthcare-Associated Infections,  
Budget justification for funding details (attached)

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:

<u>Title* of Position(s) Requested</u>	<u># of Positions</u>	<u>Division/Program</u>	<u>Grant Funding Period/Anticipated End Date</u>
HAI Prevention Coordinator	1	Surveillance/Infectious Disease	08/30/09 – 12/31/11

\* In the RFR-C, we recommend a Public Health Nurse II, AC: EPIDEMIOLOGIST for this position.

\*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:

The HAI coordinator is essential to achieve the aims of this grant: to implement evidence-based HAI surveillance and prevention programs that promote patient safety and decrease infection transmission in Vermont hospitals. The coordinator will develop the state HAI prevention plan, implement an electronic HAI reporting system, pilot evidence-based HAI prevention initiatives, and serve as a resource to hospitals on HAI best practices.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32 VSA Sec 5(b)).

*Christine Soudley* \_\_\_\_\_ Date 11/5/09  
Signature of Agency or Department Head

*Molly Paul* \_\_\_\_\_ Date 11/18/09  
Approved/Denied by Department of Human Resources

*[Signature]* \_\_\_\_\_ Date 11/20/09  
Approved/Denied by Finance and Management

*Tan dell* \_\_\_\_\_ Date 11/30/09  
Approved/Denied by Secretary of Administration

Comments:

20 2009



VT

**Budget Justification – Epidemiology and Laboratory Capacity  
 Healthcare-Associated Infections – Building and Sustaining State Programs to Prevent  
 Healthcare-associated Infections  
 Vermont Department of Health (VDH)  
 08/30/09 – 12/31/11**

**Personnel**

~~\$217,759~~ 155,555

Due to this funding, a Financial Administrator position at .1 FTE, a Public Health Analyst position at .25 FTE, and the State Epidemiologist position at .25 FTE have been retained in the Vermont Department of Health. With this funding, one new position will be established at the Health Department for the Prevention Coordinator.

PERSONNEL	ANNUAL SALARY	PERCENTAGE OF TIME	FUNDING PERIOD	AMOUNT REQUESTED
State Epidemiologist	\$108,181	25%	2.3 years	<del>\$62,204</del> $\phi$
Public Health Analyst II	\$61,173	25%	2.3 years	\$35,175
Financial Administrator	\$64,500	10%	2.3 years	\$14,835
HAI Prevention Coordinator	\$45,889	100%	2.3 years	\$105,545

State Epidemiologist

Patsy Tassler Kelso, Ph.D. is the principal investigator for the ELC grant, and will supervise the HAI Prevention Coordinator position. She will oversee the implementation of healthcare-associated infections surveillance and prevention activities in the Infectious Disease Epidemiology Section. She is an Assistant Professor of Medicine in the School of Medicine at the University of Vermont. Dr. Kelso reports to the Health Surveillance Director.

Public Health Analyst II

The analyst will serve a consultative role for the state plan development, participate in the data validation project, and review data and create reports from the NHSN.

Financial Administrator

We estimate that the administration of this grant will require .1 FTE of a financial administrator in the Department's business office. This administrator will be assigned the specific duties of tracking and reporting programmatic and fiscal activity related to the Recovery Act funds per OMB requirements.

HAI Prevention Coordinator

This will be a new position created by this funding opportunity. The Coordinator will play a lead role in the process of developing a state HAI Prevention Plan for submission to the CDC by January 1, 2010. Additional duties may include data validation for the National Healthcare Safety Network (NHSN) surveillance data submitted by hospitals, healthcare worker education about infection control (including CDC's ONE and ONLY campaign), a coordinating role in fit testing for healthcare workers, and healthcare provider education about antibiotic stewardship (including CDC's GET SMART campaign).

**Indirect Costs**

~~\$130,655~~

93,333

The Vermont Department of Health uses a Cost Allocation Plan, not an indirect rate. The Vermont Department of Health is a department of the Vermont Agency of Human Services, a public assistance agency, which uses a Cost Allocation Plan in lieu of an indirect rate agreement as authorized by OMB Circular A-87, Attachment D. This Cost Allocation Plan was approved by the US Department of Health and Human Services effective October 1, 1987. A copy of the original approval and a copy of the approval letter of April 17, 2003 are attached. The Cost Allocation Plan summarizes actual, allowable costs incurred in the operation of the program. These costs include items which are often shown as direct costs, such as telephone and general office supply expenses, as well as items which are often included in an indirect rate, such as the cost of office space and administrative salaries. These costs are allocated to the program based on the salaries and wages paid in the department (or division) bearing an original expense. Because these are actual costs, unlike an Indirect Cost Rate, these costs will vary from quarter to quarter and cannot be fixed as a result of program costs. Based on costs to this program during recent quarters, we would currently estimate these allocated costs at 60% of the direct salary line item.

**Fringe Benefits**

~~\$65,328~~

46,000

The actual cost of fringe benefits (not a fringe benefit rate) will be reported as a direct cost of the program. The actual cost of fringe benefits varies from employee to employee based on salary, employee choice of health care plan, and employee election of certain benefits. The usual components of these fringe benefits are FICA at 7.65% of salary, retirement at 7% of salary, dental and medical and life insurance coverage at 80% of the actual costs of the insurance premium if and as elected by the employee, and \$1.50 per pay period for the employee assistance program. The cost of each employee's fringe benefits will be allocated to the program based on hours worked in the program relative to all hours worked by the employee. Based on the current cost of fringe benefits for employees working in similar programs, we are estimating the cost of these fringe benefits at 30% of salary.

**Contractual**

~~\$541,235~~

532,830

Contract to the Vermont Program for Quality in Health Care (VPQHC) to support the grant activities, as follows:

VPQHC PERSONNEL	ANNUAL SALARY & FRINGE	% TIME	FUNDING PERIOD (Activity Supported)	AMOUNT REQUESTED
Medical Director	\$167,100	2%	0.3 years (A)	\$1,003
Quality Improvement Specialist	\$86,020	10%	2.3 years (A, B, C)	\$19,785
Research Analyst	\$87,089	10%	2.3 years (A, B, C)	\$20,030
Critical Access Hospitals	\$156,000	5%	2.3 years (B, C)	\$17,940
Quality Improvement MD				
Project Coordinator	\$66,587	15%	2.0 years (B,C)	\$19,976
TOTAL PERSONNEL				\$78,734 <i>OK</i>

VPQHC Administrative Costs

\$29,532 *OK*

This includes the allocated costs of the Executive Director, Business Manager, Administrative Assistant, and IT Manager (\$12,840 per year x 2.3 years)

VPQHC Project Expenses

Activity A

\$5,752 *OK*

Mileage reimbursement for travel to plan development meetings (6 meetings x 132 miles x \$0.505/mile = \$400)

Refreshments for plan development meetings (\$40/meeting x 6 meetings = \$240)

Stipends for meeting attendees (\$75/person x 8 people/meeting x 6 meetings = \$3,600)

Meeting room rental (\$75/meeting x 6 meetings = \$450)

Operating overhead (3% of operating budget @ \$3,540/year x 0.3 years = \$1,062)

Activity B

\$148,773 *OK*

Mileage reimbursement for travel to hospitals to provide technical support for new NHSN reporting (10 hospitals x 125 miles x \$0.505/mile = \$631)

Operating overhead (3% of operating budget @ \$3,540/year x 2.3 years = \$8,142)

Stipend grants of up to \$10,000 will be awarded to each of Vermont's 14 hospitals to support efforts to improve the efficiency of data collection and to allow expansion of MDRO surveillance. (\$10,000 x 14 hospitals = \$140,000)

Activity C – Prevention Collaboratives

~~\$278,444~~ *270,000*

APIC Support including provision of EPI 101 educational content and infection prevention speakers for interactive webinars and live meetings, CNE credit for live meetings, APIC Elimination Guides for all participants, access to online APIC text and 1 year membership in APIC (\$197,500)

Meeting Room (4 centralized live meetings x \$600 = \$2,400)

Meal/refreshments (4 centralized live meetings x \$2100 = ~~\$8,400~~) *Ø*

Webinar (2), Listserv, Website posting (\$800)

Prof Final Report Editor (\$5,000)

Mileage reimbursement for travel by staff and faculty to centralized Collaborative location (4meetings x 100miles x \$.505/mile = \$202)

Stipend grants of up to \$4,000 will be awarded to each of Vermont's 14 hospitals to support their participation in the Infection Prevention Advocate Collaborative and the Collaborative to Reduce MRSA Rates. Hospitals have stated that hiring per diem staff to cover for front-line staff who are attending trainings or meetings is a significant barrier to participation. (4 meetings x \$500/person x 2 persons/hospital x 14 hospitals = \$56,000)

Operating overhead (3% of operating budget @ \$3,540/year x 2.3 years = \$8,142)

Equipment

\$0

Supplies

\$0

Other

\$0

**In-state Travel**

\$0

**Out-of-state Travel**

\$2,210 *OK*

Funding is requested to support travel for two persons to attend a healthcare-associated infections meeting at the CDC. Estimated expenses are:

Airfare(2 x \$500 each)	\$1,000
Meal allowance (2 x 4 days @ \$32/day)	\$256
Hotel (2 x 3 nights @ \$159/night)	\$954

**TOTAL FUNDS REQUESTED: Healthcare-Associated Infections**

~~\$957,187~~

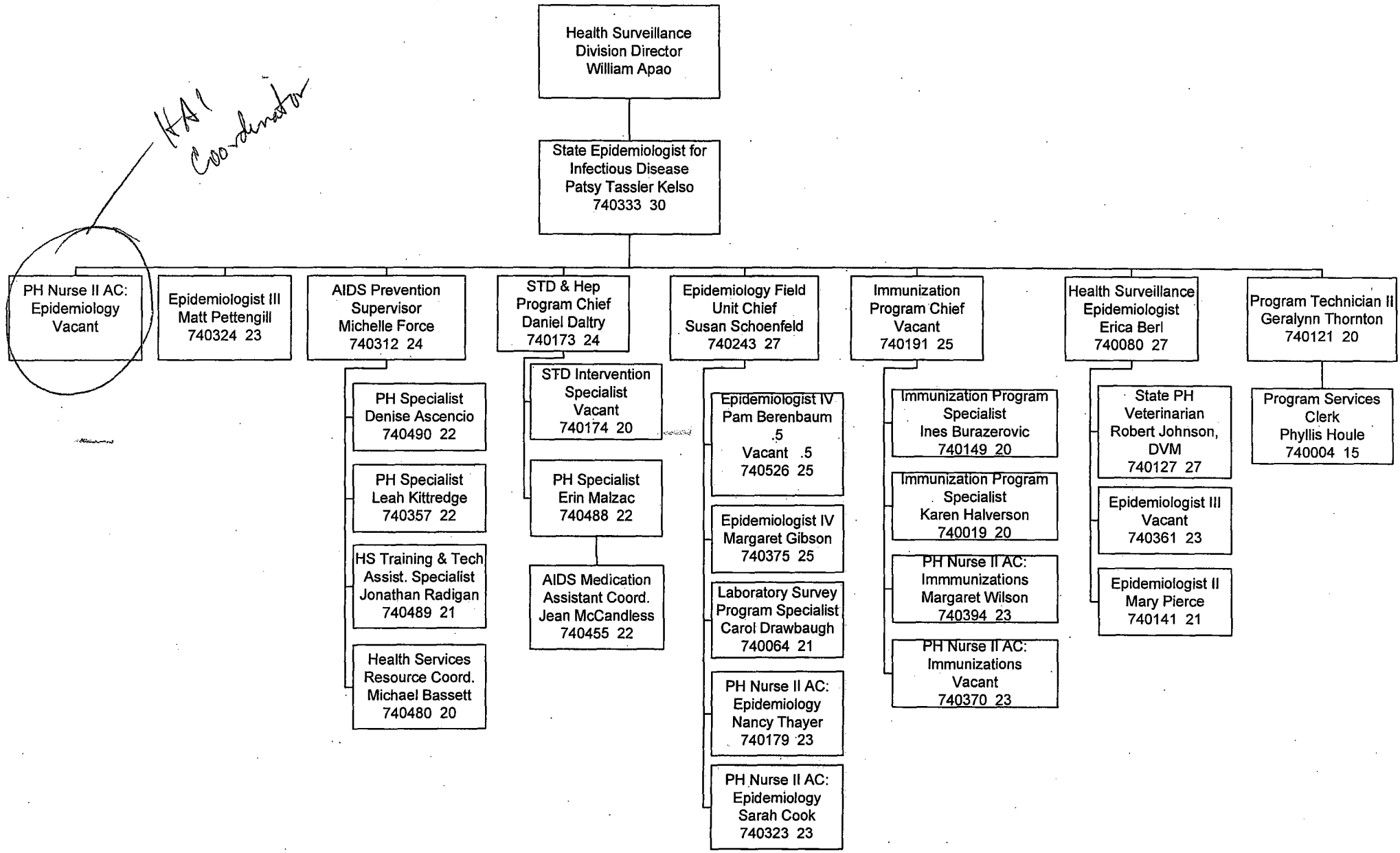
830,600

The Recovery Act requires that Recovery Act funds be tracked separately from other funds. The State of Vermont uses Fund numbers in its accounting system to identify the various sources of funds used by the State. The Department of Finance has assigned a unique fund number (22040) to identify all ARRA funds. The Agency of Human Services of the State of Vermont uses an HHS approved Cost Allocation plan to allocate and track costs for its various programs. Each ARRA-funded program will be assigned a unique program code within the Cost Allocation Plan. Through the combination of fund numbers and program codes, all ARRA funds will be tracked at the program level. Recovery Act funds will be managed through these separate Recovery Act-specific accounts and will not be commingled with other funds in our financial system.


# Division of Health Surveillance – Infectious Disease

## October 1, 2009

*HA1  
Coordinator*



## MEMORANDUM

To: Jim Giffin, AHS CFO  
Thru: Leo Clark, VDH CFO   
Subject: Grant Acceptance & Establishment of Position Packet  
Date: November 5, 2009

The Department of Health (VDH) has received a grant of \$830,600 from the Centers for Disease Control and Prevention to support efforts to prevent healthcare-associated infections (HAI) in Vermont. These are ARRA funds available for expenditure between 09/01/09 and 12/31/11.

The objectives of the grant are threefold:

Activity A will institute regular reporting of HAI data through the National Healthcare Safety Network (NHSN) system and develop a State HAI Prevention Plan.

Activity B will implement a validation system for data reported to NHSN and provide "mini-grants" and technical assistance to hospitals to encourage them to report additional data to NHSN and develop electronic systems for uploading the data where feasible.

Activity C will establish two quality improvement collaboratives. The first collaborative would train front-line hospital staff on evidence-based infection prevention guidelines. The second would build on and expand work being conducted through Vermont's Medicare Quality Improvement Organization related to the prevention of antibiotic resistant infections including measuring and improving hand hygiene practices.

All grant costs are budgeted for 2.3 years. Funds will be used: 1) to cover the costs of project personnel; 2) to support a grant to the Vermont Program for Quality in Health Care; and 3) for travel to a required conference. Project personnel include two existing VDH positions (25% of a Public Health Analyst and 10% of a Financial Administrator) plus 100% of the cost of a new limited service position (HAI Prevention Coordinator). The sub-grant to VPQHC will fund personnel, travel costs, meetings, trainings and mini-grants to hospitals.

The SFY10 project budget attached (\$250,000) assumes all State personnel for six months and a payment of \$185,750 via the VPQHC grant. The remaining grant funds (\$580,600) will be budgeted in SFY11 and SFY12.

Please let me know if you need further information or wish to discuss this grant in further detail.

Thanks.

VPQHC Administrative Costs \$29,532  
This includes the allocated costs of the Executive Director, Business Manager, Administrative Assistant, and IT Manager (\$12,840 per year x 2.3 years)

VPQHC Project Expenses

Activity A \$5,752  
Mileage reimbursement for travel to plan development meetings (6 meetings x 132 miles x \$0.505/mile = \$400)  
Refreshments for plan development meetings (\$40/meeting x 6 meetings = \$240)  
Stipends for meeting attendees (\$75/person x 8 people/meeting x 6 meetings = \$3,600)  
Meeting room rental (\$75/meeting x 6 meetings = \$450)  
Operating overhead (3% of operating budget @ \$3,540/year x 0.3 years = \$1,062)

Activity B \$148,773  
Mileage reimbursement for travel to hospitals to provide technical support for new NHSN reporting (10 hospitals x 125 miles x \$0.505/mile = \$631)  
Operating overhead (3% of operating budget @ \$3,540/year x 2.3 years = \$8,142)

Stipend grants of up to \$10,000 will be awarded to each of Vermont's 14 hospitals to support efforts to improve the efficiency of data collection and to allow expansion of MDRO surveillance. (\$10,000 x 14 hospitals = \$140,000)

Activity C – Prevention Collaboratives \$278,444  
APIC Support including provision of EPI 101 educational content and infection prevention speakers for interactive webinars and live meetings, CNE credit for live meetings, APIC Elimination Guides for all participants, access to online APIC text and 1 year membership in APIC (\$197,500)  
Meeting Room (4 centralized live meetings x \$600 = \$2,400)  
Meal/refreshments (4 centralized live meetings x \$2100 = \$8,400)  
Webinar (2), Listserv, Website posting (\$800)  
Prof Final Report Editor (\$5,000)  
Mileage reimbursement for travel by staff and faculty to centralized Collaborative location (4meetings x 100miles x \$.505/mile = \$202)  
Stipend grants of up to \$4,000 will be awarded to each of Vermont's 14 hospitals to support their participation in the Infection Prevention Advocate Collaborative and the Collaborative to Reduce MRSA Rates. Hospitals have stated that hiring per diem staff to cover for front-line staff who are attending trainings or meetings is a significant barrier to participation. (4 meetings x \$500/person x 2 persons/hospital x 14 hospitals = \$56,000)  
Operating overhead (3% of operating budget @ \$3,540/year x 2.3 years = \$8,142)

**Equipment \$0**

**Supplies \$0**

**Other \$0**





ARRA ACTIVITY ACCEPTANCE REQUEST:  **ARRA Competitive Grant** (Alternate Form AA-1)  **Other ARRA Activity** (Not subject to AA-1 Process)

Revision?  Yes      Revision Date:

**INSTRUCTIONS:** This form must be completed in its entirety and is required for:  
 1) acceptance of all ARRA Discretionary Grants, and  
 2) PRIOR to receipt of all ARRA Formula/Block Grants, and  
 3) PRIOR to receipts of all ARRA funding for Individual Entitlement Programs.

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#TRCDB  
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**NOTE:** Incomplete forms will be returned to departments and will result in the delay of spending authority release.

**BASIC ARRA INFORMATION**

1. Agency (ARRA-F): AHS      2. Department (ARRA-F): Health (Bus. Unit #03420)      3. DUNS # (ARRA-C): 80-937-6155

4. Office Location:      City/town: Burlington      County: Chittenden

5. ARRA Activity (ARRA 1-01): Healthcare-Associated Infections      6. ARRA Code (ARRA 2-1): E70

7. Legal Title of Grant: Building and Sustaining State Programs to Prevent Healthcare-Associated Infections

8. Federal Agency Award # (ARRA-B): 3U50CI123665-05S1      9. CFDA # (ARRA-E): 93.717

10. Federal Funding Agency's US Treasury Account Symbol (TAS):  
(if provided by the federal funding agency)

11. Federal (or VT) Funding Agency (ARRA-A): Centers for Disease Control and Prevention      12. Award Date: 8/28/2009

13. Award Amount \$830,600      14. Check if this amount is an estimate:

15. Grant Period (ARRA-H) From: 9/1/2009 To: 12/31/2011

16. Date by which ARRA funds must be:  Obligated by Date: 12/31/2011 and/or  Spent by Date: 3/31/2011

17. Purpose of Grant/ARRA Narrative (ARRA 2-02):  
see attached summary

18. Area that will Benefit (name the state, county, city or school district): Vermont

19. Impact on existing program if grant is not Accepted:  
none

**20. BUDGET INFORMATION** (Note the total of columns A+B+C must equal the total of columns D+E+F)

Column Reference	A	B	C	D	E	F
	←-----State Fiscal Year-----→			←-----Federal Fiscal Year-----→		
Fiscal Year	SFY 2009	SFY 2010	SFY 2011 & Beyond	FFY 2009	FFY 2010	SFY 2011 & Beyond
<b>Expenditures:</b>						
Personnel Costs	\$	\$64,250	\$231,305	\$295,555	\$	\$
3 <sup>rd</sup> Party Contracts	\$	\$0	\$0	\$0	\$	\$
Operating Expenses	\$	\$0	\$2,210	\$2,210	\$	\$
Grants/Sub-Awards	\$	\$185,750	\$347,085	\$532,835	\$	\$
<b>Total Expenditures</b>	\$0	\$250,000	\$580,600	\$830,600	\$	\$
<b>Revenues:</b>						
<b>State Funds:</b>	\$	\$	\$	\$	\$	\$
Cash	\$	\$	\$	\$	\$	\$
In-Kind	\$	\$	\$	\$	\$	\$
<b>ARRA Federal Funds:</b>	\$	\$	\$	\$	\$	\$
(Direct Costs)	\$	\$229,710	\$507,557	\$737,267	\$	\$
(Statewide Indirect)	\$	\$1,015	\$3,652	\$4,667	\$	\$
(Dept'l Indirect)	\$	\$19,275	\$69,391	\$88,666	\$	\$
<b>Sub-total ARRA Funds</b>	\$	\$250,000	\$580,600	\$830,600	\$	\$
<b>Other Funds:</b>	\$	\$	\$	\$	\$	\$
(Other Federal)	\$	\$	\$	\$	\$	\$
(list source)	\$	\$	\$	\$	\$	\$
<b>Total Revenues</b>	\$0	\$250,000	\$580,600	\$830,600	\$	\$

**RECEIVED**  
DEC 2 2009  
10  
JOINT FISCAL OFFICE

Comments about expenditures or revenues may be made in the space provided below:

21. VISION Tracking Information:			
DeptID/Appropriation:	Other VISION Chartfield (funds, programs or projects)	Total Amount (all FYs)	Comments
3420010000	program code 39002	\$66,176	
3420021000	new program code to be assigned only upon JFC approval	\$764,424	
		\$	
		\$	
		\$	
<b>Total</b>		<b>\$830,600</b>	This Total MUST agree with the total of Item 10, columns A+B+C above

**PERSONAL SERVICE INFORMATION**

22. Will monies from this grant be used to fund one or more Personal Service Contracts?  Yes  No  
 If "Yes", appointing authority must initial here to indicate intent to follow current competitive bidding process/policy.

Appointing Authority Name: \_\_\_\_\_ Agreed by: \_\_\_\_\_ (initial)

23. State Position Information and Title(s):	# Existing Positions Retained	Est. Annual Regular Hours	# Positions Created (New)	Est. Annual Regular Hours
Financial Administrator	.10	208		
Public Health Analyst II	.25	520		
HAI Prevention Coordinator			1	2,080
<b>Total Positions</b>	<b>.35</b>	<b>728</b>	<b>1</b>	<b>2,080</b>

24. Is the appropriate Position Request Form attached for new position(s) listed in Line 12 above?  
 YES – Form attached or  No new positions created

25. Equipment and space for these positions:  Is presently available.  Can be obtained w/available funds.

26. Does this qualify as "Infrastructure"?  Yes  No If Yes complete next line:

27. Infrastructure Rationale (select one) (ARRA 2-06):  
 1.  To Preserve & create jobs & promote economic recovery.  
 2.  To assist those most impacted by the recession.  
 3.  To provide investment needed to increase economic efficiency by spurring technological advances in science & health.  
 4.  To invest in transportation, environmental protection, & other infrastructure that will provide long-term economic benefits.  
 5.  To stabilize State & local government budgets, in order to minimize & avoid reductions in essential services & counterproductive state & local tax increases.

**28. AUTHORIZATION AGENCY/DEPARTMENT SIGNATURES**

I/we certify that no funds beyond basic application preparation and filing costs have been expended or committed in anticipation of Joint Fiscal Committee approval of this grant, unless previous notification was made on Form AA-1PN (if applicable). I/we further certify that these funds will be used only in accordance with the federal American Recovery & Reinvestment Act and all federal and state rules and regulations pertaining thereto:	ARRA Activity Manager: <i>Patsy Tassler Kelso</i>	Date: 11/5/09
	Name: Patsy Tassler Kelso, Ph.D.	Title: State Epidemiologist for Infectious Disease
	Department Head: <i>Christine Finley</i>	Date: 11/5/09
	Name: Christine Finley	Title: Deputy Commissioner, VDH
	Agency Secretary (if required): <i>Patrick Flood</i>	Date: 11/13/09
	Name: PATRICK FLOOD	Title: DER. SECRETARY

29. REVIEW BY FINANCE & MANAGEMENT (continue on separate sheet if necessary)

<input type="checkbox"/>	<b>To Release Spending Authority in VISION:</b>	FY 20 <u>    </u> \$	ation(s):
--------------------------	---	----------------------	-----------

Analyst (initial): <u>  H  </u>	Date: <u>11/20/09</u>	Commissioner Finance & Management initial): <u>  g  </u>	Date: <u>11/23/09</u>
For ESR Use Only:	Assigned ESR Director's Signature: <u>Joan Stewart</u>	Date: <u>10/18/09</u>	

\*\*\* Section 30 through 33 are required ONLY when Form ESR-2 is used in lieu of Form AA-1 \*\*\*

**30. SECRETARY OF ADMINISTRATION**

<input type="checkbox"/>	Check One Box: Accepted	(Secretary's signature or designee) <u>  Tee  </u>	Date: <u>11/3/09</u>
<input type="checkbox"/>	Rejected		Date:

**31. ACTION BY GOVERNOR**

<input checked="" type="checkbox"/>	Check One Box: Request to JFO	(Governor's signature or designee) <u>  [Signature]  </u>	Date: <u>12/1/09</u>
<input type="checkbox"/>	Rejected		Date:

**32. SENT TO JFO**

<input type="checkbox"/>	Sent to JFO	Date:
--------------------------	-------------	-------

\*\*\* Section 33 is a required section \*\*\*

**33. ARRA FORM ESR-2 DOCUMENTATION CHECK LIST (check all that apply):**

<input type="checkbox"/> Notice of Award or Proof of Award (REQUIRED) <input type="checkbox"/> Request Memo <input type="checkbox"/> Grant Agreement	<input type="checkbox"/> Dept. project approval (if applicable) <input type="checkbox"/> Governor's Certification (if applicable) <input type="checkbox"/> Notice of Donation (if any) <input type="checkbox"/> Position Request Form(s)	<input type="checkbox"/> Grant (Project) Timeline (if applicable) <input type="checkbox"/> Request for Extension (if applicable) <input type="checkbox"/> Form AA-1PN attached (if applicable)
--	---	--



**Notice of Award**  
**SPECIALIZED CTR COOPERATIVE AGREEMENT**  
Department of Health and Human Services  
Centers for Disease Control and Prevention  
NATIONAL CENTER FOR INFECTIOUS DISEASES (NCID)

**Issue Date:** 08/28/2009



**Grant Number:** 3U50CI123665-05S1

**Principal Investigator(s):**  
PATSY TASSLER

**Project Title:** EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES -  
ARRA - HAI

VERMONT ST DEPT. OF HEALTH  
108 CHERRY STREET  
BURLINGTON, VT 05401

**Budget Period:** 09/01/2009 – 12/31/2011  
**Project Period:** 04/01/2004 – 12/31/2011

Dear Business Official:

The Centers for Disease Control and Prevention hereby awards a grant in the amount of \$830,600 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to VT ST OFFICE OF THE GOVERNOR in support of the above referenced project. This award is pursuant to the authority of 42 USC 241 42 CFR 52 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact the individual(s) referenced in Section IV.

Sincerely yours,

Sharron Orum  
Grants Management Officer  
Centers for Disease Control and Prevention

Additional information follows

## Project Abstract Summary

### \* Project Summary

Vermont's efforts regarding healthcare-associated infections (HAI) have to date focused on internal surveillance, state-mandated public reporting of infection rates, and facility-specific training and prevention initiatives. While public reporting may have a role in reducing infection rates, a structured, well-coordinated and efficient internal surveillance and prevention strategy seems to be a critical next step in reducing the incidence of HAI. The ARRA funds that Vermont is seeking would provide resources for this work.

Vermont's objectives under Activity A are to institute regular reporting of HAI data through the National Healthcare Safety Network (NHSN) system, and to develop a State HAI Prevention Plan. Activity B objectives include implementing a validation system for data reported to NHSN, and providing "mini-grants" and technical assistance to hospitals to encourage them to report additional data to NHSN and develop electronic systems for uploading the data where feasible. Activity C objectives are focused on two quality improvement collaboratives. The first collaborative would train front-line hospital staff on evidence-based infection prevention guidelines. The second collaborative would build on and expand work being conducted through Vermont's Medicare Quality Improvement Organization related to the prevention of antibiotic resistant infections, including measuring and improving hand hygiene practices.

\* Estimated number of people to be served as a result of the award of this grant.

610000

**BUDGET INFORMATION - Non-Construction Programs**

OMB Approval No. 4040-0006  
Expiration Date 07/30/2010

**SECTION A - BUDGET SUMMARY**

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Epi & Lab Capacity HAI	93.717	\$ 0.00	\$ 0.00	\$ 957,187.00	\$ 0.00	\$ 957,187.00
2.						
3.						
4.						
5. <b>Totals</b>		\$	\$	\$ 957,187.00	\$	\$ 957,187.00

**SECTION B - BUDGET CATEGORIES**

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
	Epi & Lab Capacity HAI				
a. Personnel	\$ 217,759.00	\$	\$	\$	\$ 217,759.00
b. Fringe Benefits	65,328.00				65,328.00
c. Travel	2,210.00				2,210.00
d. Equipment	0.00				
e. Supplies	0.00				
f. Contractual	541,235.00				541,235.00
g. Construction	0.00				
h. Other	0.00				
i. Total Direct Charges (sum of 6a-6h)	826,532.00				\$ 826,532.00
j. Indirect Charges	130,655.00				\$ 130,655.00
k. TOTALS (sum of 6i and 6j)	\$ 957,187.00	\$	\$	\$	\$ 957,187.00
7. Program Income	\$ 0.00	\$	\$	\$	\$

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Standard Form 424A (Rev. 7-97)  
Prescribed by OMB (Circular A-102) Page 1A

**SECTION C - NON-FEDERAL RESOURCES**

(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8.	Epi & Lab Capacity HAI	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
9.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12. TOTAL (sum of lines 8-11)		\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

**SECTION D - FORECASTED CASH NEEDS**

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
14. Non-Federal	\$ <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15. TOTAL (sum of lines 13 and 14)		\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

**SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT**

(a) Grant Program		FUTURE FUNDING PERIODS (YEARS)			
		(b) First	(c) Second	(d) Third	(e) Fourth
16.	Epi & Lab Capacity HAI	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
17.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
19.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20. TOTAL (sum of lines 16 - 19)		\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

**SECTION F - OTHER BUDGET INFORMATION**

21. Direct Charges: <input type="text"/>	22. Indirect Charges: <input type="text"/>
23. Remarks: <input type="text"/>	



**Budget Justification – Epidemiology and Laboratory Capacity  
Healthcare-Associated Infections – Building and Sustaining State Programs to Prevent  
Healthcare-associated Infections  
Vermont Department of Health (VDH)  
08/30/09 – 12/31/11**

**Personnel**

**\$217,759**

Due to this funding, a Financial Administrator position at .1 FTE, a Public Health Analyst position at .25 FTE, and the State Epidemiologist position at .25 FTE have been retained in the Vermont Department of Health. With this funding, one new position will be established at the Health Department for the Prevention Coordinator.

PERSONNEL	ANNUAL SALARY	PERCENTAGE OF TIME	FUNDING PERIOD	AMOUNT REQUESTED
State Epidemiologist	\$108,181	25%	2.3 years	\$62,204
Public Health Analyst II	\$61,173	25%	2.3 years	\$35,175
Financial Administrator	\$64,500	10%	2.3 years	\$14,835
HAI Prevention Coordinator	\$45,889	100%	2.3 years	\$105,545

State Epidemiologist

Patsy Tassler Kelso, Ph.D. is the principal investigator for the ELC grant, and will supervise the HAI Prevention Coordinator position. She will oversee the implementation of healthcare-associated infections surveillance and prevention activities in the Infectious Disease Epidemiology Section. She is an Assistant Professor of Medicine in the School of Medicine at the University of Vermont. Dr. Kelso reports to the Health Surveillance Director.

Public Health Analyst II

The analyst will serve a consultative role for the state plan development, participate in the data validation project, and review data and create reports from the NHSN.

Financial Administrator

We estimate that the administration of this grant will require .1 FTE of a financial administrator in the Department's business office. This administrator will be assigned the specific duties of tracking and reporting programmatic and fiscal activity related to the Recovery Act funds per OMB requirements.

HAI Prevention Coordinator

This will be a new position created by this funding opportunity. The Coordinator will play a lead role in the process of developing a state HAI Prevention Plan for submission to the CDC by January 1, 2010. Additional duties may include data validation for the National Healthcare Safety Network (NHSN) surveillance data submitted by hospitals, healthcare worker education about infection control (including CDC's ONE and ONLY campaign), a coordinating role in fit testing for healthcare workers, and healthcare provider education about antibiotic stewardship (including CDC's GET SMART campaign).

**Indirect Costs****\$130,655**

The Vermont Department of Health uses a Cost Allocation Plan, not an indirect rate. The Vermont Department of Health is a department of the Vermont Agency of Human Services, a public assistance agency, which uses a Cost Allocation Plan in lieu of an indirect rate agreement as authorized by OMB Circular A-87, Attachment D. This Cost Allocation Plan was approved by the US Department of Health and Human Services effective October 1, 1987. A copy of the original approval and a copy of the approval letter of April 17, 2003 are attached. The Cost Allocation Plan summarizes actual, allowable costs incurred in the operation of the program. These costs include items which are often shown as direct costs, such as telephone and general office supply expenses, as well as items which are often included in an indirect rate, such as the cost of office space and administrative salaries. These costs are allocated to the program based on the salaries and wages paid in the department (or division) bearing an original expense. Because these are actual costs, unlike an Indirect Cost Rate, these costs will vary from quarter to quarter and cannot be fixed as a result of program costs. Based on costs to this program during recent quarters, we would currently estimate these allocated costs at 60% of the direct salary line item.

**Fringe Benefits****\$65,328**

The actual cost of fringe benefits (not a fringe benefit rate) will be reported as a direct cost of the program. The actual cost of fringe benefits varies from employee to employee based on salary, employee choice of health care plan, and employee election of certain benefits. The usual components of these fringe benefits are FICA at 7.65% of salary, retirement at 7% of salary, dental and medical and life insurance coverage at 80% of the actual costs of the insurance premium if and as elected by the employee, and \$1.50 per pay period for the employee assistance program. The cost of each employee's fringe benefits will be allocated to the program based on hours worked in the program relative to all hours worked by the employee. Based on the current cost of fringe benefits for employees working in similar programs, we are estimating the cost of these fringe benefits at 30% of salary.

**Contractual****\$541,235**

Contract to the Vermont Program for Quality in Health Care (VPQHC) to support the grant activities, as follows:

VPQHC PERSONNEL	ANNUAL SALARY & FRINGE	% TIME	FUNDING PERIOD (Activity Supported)	AMOUNT REQUESTED
Medical Director	\$167,100	2%	0.3 years (A)	\$1,003
Quality Improvement Specialist	\$86,020	10%	2.3 years (A, B, C)	\$19,785
Research Analyst	\$87,089	10%	2.3 years (A, B, C)	\$20,030
Critical Access Hospitals Quality Improvement MD	\$156,000	5%	2.3 years (B, C)	\$17,940
Project Coordinator	\$66,587	15%	2.0 years (B,C)	\$19,976
<b>TOTAL PERSONNEL</b>				<b>\$78,734</b>

**In-state Travel** **\$0**

**Out-of-state Travel** **\$2,210**

Funding is requested to support travel for two persons to attend a healthcare-associated infections meeting at the CDC. Estimated expenses are:

Airfare (2 x \$500 each)	\$1,000
Meal allowance (2 x 4 days @ \$32/day)	\$256
Hotel (2 x 3 nights @ \$159/night)	\$954

**TOTAL FUNDS REQUESTED: Healthcare-Associated Infections** **\$957,187**

The Recovery Act requires that Recovery Act funds be tracked separately from other funds. The State of Vermont uses Fund numbers in its accounting system to identify the various sources of funds used by the State. The Department of Finance has assigned a unique fund number (22040) to identify all ARRA funds. The Agency of Human Services of the State of Vermont uses an HHS approved Cost Allocation plan to allocate and track costs for its various programs. Each ARRA-funded program will be assigned a unique program code within the Cost Allocation Plan. Through the combination of fund numbers and program codes, all ARRA funds will be tracked at the program level. Recovery Act funds will be managed through these separate Recovery Act-specific accounts and will not be commingled with other funds in our financial system.

**STATE OF VERMONT  
Joint Fiscal Committee Review  
Limited Service - Grant Funded  
Position Request Form**

This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: AHS/Health Date: 10/19/09

Name and Phone (of the person completing this request): Patsy Tassler Kelso, 802-863-7286

Request is for:

- Positions funded and attached to a new grant.  
 Positions funded and attached to an existing grant approved by JFO # \_\_\_\_\_

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):

Centers for Disease Control and Prevention,  
 Building and Sustaining State Programs to Prevent Healthcare-Associated Infections,  
 Budget justification for funding details (attached)

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:

<u>Title* of Position(s) Requested</u>	<u># of Positions</u>	<u>Division/Program</u>	<u>Grant Funding Period/Anticipated End Date</u>
HAI Prevention Coordinator	1	Surveillance/Infectious Disease	08/30/09 – 12/31/11

\* In the RFR-C, we recommend a Public Health Nurse II, AC: EPIDEMIOLOGIST for this position.

\*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:

The HAI coordinator is essential to achieve the aims of this grant: to implement evidence-based HAI surveillance and prevention programs that promote patient safety and decrease infection transmission in Vermont hospitals. The coordinator will develop the state HAI prevention plan, implement an electronic HAI reporting system, pilot evidence-based HAI prevention initiatives, and serve as a resource to hospitals on HAI best practices.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32 VSA Sec 5(b)).

Signature of Agency or Department Head: *Christine Senley* Date: 11/5/09

Approved/Denied by Department of Human Resources: *Molly Paul* Date: 11/18/09

Approved/Denied by Finance and Management: *[Signature]* Date: 11/20/09

Approved/Denied by Secretary of Administration: *Tan dell* Date: 11/30/09

Comments:

*27 2009*

VT

**Budget Justification – Epidemiology and Laboratory Capacity  
 Healthcare-Associated Infections – Building and Sustaining State Programs to Prevent  
 Healthcare-associated Infections  
 Vermont Department of Health (VDH)  
 08/30/09 – 12/31/11**

**Personnel**

~~\$217,759~~ 155,555

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**Indirect Costs**

~~\$130,655~~

93,333

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**Fringe Benefits**

~~\$65,328~~

46,000

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**Contractual**

~~\$541,235~~

532,880

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Critical Access Hospitals Quality Improvement MD Project Coordinator	\$156,000	5%	2.3 years (B, C)	\$17,940
TOTAL PERSONNEL	\$66,587	15%	2.0 years (B,C)	\$19,976
				\$78,734 <i>ok</i>

VPQHC Administrative Costs \$29,532 *OK*  
This includes the allocated costs of the Executive Director, Business Manager, Administrative Assistant, and IT Manager (\$12,840 per year x 2.3 years)

VPQHC Project Expenses

Activity A \$5,752 *OK*  
Mileage reimbursement for travel to plan development meetings (6 meetings x 132 miles x \$0.505/mile = \$400)

Refreshments for plan development meetings (\$40/meeting x 6 meetings = \$240)

Stipends for meeting attendees (\$75/person x 8 people/meeting x 6 meetings = \$3,600)

Meeting room rental (\$75/meeting x 6 meetings = \$450)

Operating overhead (3% of operating budget @ \$3,540/year x 0.3 years = \$1,062)

Activity B \$148,773 *OK*

Mileage reimbursement for travel to hospitals to provide technical support for new NHSN reporting (10 hospitals x 125 miles x \$0.505/mile = \$631)

Operating overhead (3% of operating budget @ \$3,540/year x 2.3 years = \$8,142)

Stipend grants of up to \$10,000 will be awarded to each of Vermont's 14 hospitals to support efforts to improve the efficiency of data collection and to allow expansion of MDRO surveillance. (\$10,000 x 14 hospitals = \$140,000)

Activity C - Prevention Collaboratives

APIC Support including provision of EPI 101 educational content and infection prevention speakers for interactive webinars and live meetings, CNE credit for live meetings, APIC Elimination Guides for all participants, access to online APIC text and 1 year membership in APIC (\$197,500) ~~\$278,444~~ *270,000*

Meeting Room (4 centralized live meetings x \$600 = \$2,400)

Meal/refreshments (4 centralized live meetings x \$2100 = ~~\$8,400~~) *Ø*

Webinar (2), Listserv, Website posting (\$800)

Prof Final Report Editor (\$5,000)

Mileage reimbursement for travel by staff and faculty to centralized Collaborative location (4meetings x 100miles x \$.505/mile = \$202)

Stipend grants of up to \$4,000 will be awarded to each of Vermont's 14 hospitals to support their participation in the Infection Prevention Advocate Collaborative and the Collaborative to Reduce MRSA Rates. Hospitals have stated that hiring per diem staff to cover for front-line staff who are attending trainings or meetings is a significant barrier to participation. (4 meetings x \$500/person x 2 persons/hospital x 14 hospitals = \$56,000)

Operating overhead (3% of operating budget @ \$3,540/year x 2.3 years = \$8,142)

Equipment \$0

Supplies \$0

Other \$0

**In-state Travel**

\$0

**Out-of-state Travel**

\$2,210 *OK*

Funding is requested to support travel for two persons to attend a healthcare-associated infections meeting at the CDC. Estimated expenses are:

Airfare (2 x \$500 each)	\$1,000
Meal allowance (2 x 4 days @ \$32/day)	\$256
Hotel (2 x 3 nights @ \$159/night)	\$954

**TOTAL FUNDS REQUESTED: Healthcare-Associated Infections**

~~\$957,187~~

*830,600*

The Recovery Act requires that Recovery Act funds be tracked separately from other funds. The State of Vermont uses Fund numbers in its accounting system to identify the various sources of funds used by the State. The Department of Finance has assigned a unique fund number (22040) to identify all ARRA funds. The Agency of Human Services of the State of Vermont uses an IHS approved Cost Allocation plan to allocate and track costs for its various programs. Each ARRA-funded program will be assigned a unique program code within the Cost Allocation Plan. Through the combination of fund numbers and program codes, all ARRA funds will be tracked at the program level. Recovery Act funds will be managed through these separate Recovery Act-specific accounts and will not be commingled with other funds in our financial system.







**Department of Health**  
*Business Office*

**MEMORANDUM**

To: Jim Giffin, AHS CFO  
Thru: Leo Clark, VDH CFO  
Subject: Grant Acceptance & Establishment of Position Packet  
Date: November 5, 2009

The Department of Health (VDH) has received a grant of \$830,600 from the Centers for Disease Control and Prevention to support efforts to prevent healthcare-associated infections (HAI) in Vermont. These are ARRA funds available for expenditure between 09/01/09 and 12/31/11.

The objectives of the grant are threefold:

Activity A will institute regular reporting of HAI data through the National Healthcare Safety Network (NHSN) system and develop a State HAI Prevention Plan.

Activity B will implement a validation system for data reported to NHSN and provide "mini-grants" and technical assistance to hospitals to encourage them to report additional data to NHSN and develop electronic systems for uploading the data where feasible.

Activity C will establish two quality improvement collaboratives. The first collaborative would train front-line hospital staff on evidence-based infection prevention guidelines. The second would build on and expand work being conducted through Vermont's Medicare Quality Improvement Organization related to the prevention of antibiotic resistant infections including measuring and improving hand hygiene practices.

All grant costs are budgeted for 2.3 years. Funds will be used: 1) to cover the costs of project personnel; 2) to support a grant to the Vermont Program for Quality in Health Care; and 3) for travel to a required conference. Project personnel include two existing VDH positions (25% of a Public Health Analyst and 10% of a Financial Administrator) plus 100% of the cost of a new limited service position (HAI Prevention Coordinator). The sub-grant to VPQHC will fund personnel, travel costs, meetings, trainings and mini-grants to hospitals.

The SFY10 project budget attached (\$250,000) assumes all State personnel for six months and a payment of \$185,750 via the VPQHC grant. The remaining grant funds (\$580,600) will be budgeted in SFY11 and SFY12.

Please let me know if you need further information or wish to discuss this grant in further detail.

Thanks.

VPQHC Administrative Costs \$29,532  
 This includes the allocated costs of the Executive Director, Business Manager, Administrative Assistant, and IT Manager (\$12,840 per year x 2.3 years)

VPQHC Project Expenses

Activity A \$5,752  
 Mileage reimbursement for travel to plan development meetings (6 meetings x 132 miles x \$0.505/mile = \$400)  
 Refreshments for plan development meetings (\$40/meeting x 6 meetings = \$240)  
 Stipends for meeting attendees (\$75/person x 8 people/meeting x 6 meetings = \$3,600)  
 Meeting room rental (\$75/meeting x 6 meetings = \$450)  
 Operating overhead (3% of operating budget @ \$3,540/year x 0.3 years = \$1,062)

Activity B \$148,773  
 Mileage reimbursement for travel to hospitals to provide technical support for new NHSN reporting (10 hospitals x 125 miles x \$0.505/mile = \$631)  
 Operating overhead (3% of operating budget @ \$3,540/year x 2.3 years = \$8,142)

Stipend grants of up to \$10,000 will be awarded to each of Vermont's 14 hospitals to support efforts to improve the efficiency of data collection and to allow expansion of MDRO surveillance. (\$10,000 x 14 hospitals = \$140,000)

Activity C – Prevention Collaboratives \$278,444  
 APIC Support including provision of EPI 101 educational content and infection prevention speakers for interactive webinars and live meetings, CNE credit for live meetings, APIC Elimination Guides for all participants, access to online APIC text and 1 year membership in APIC (\$197,500)

Meeting Room (4 centralized live meetings x \$600 = \$2,400)  
 Meal/refreshments (4 centralized live meetings x \$2100 = \$8,400)  
 Webinar (2), Listserv, Website posting (\$800)  
 Prof Final Report Editor (\$5,000)  
 Mileage reimbursement for travel by staff and faculty to centralized Collaborative location (4meetings x 100miles x \$.505/mile = \$202)  
 Stipend grants of up to \$4,000 will be awarded to each of Vermont's 14 hospitals to support their participation in the Infection Prevention Advocate Collaborative and the Collaborative to Reduce MRSA Rates. Hospitals have stated that hiring per diem staff to cover for front-line staff who are attending trainings or meetings is a significant barrier to participation. (4 meetings x \$500/person x 2 persons/hospital x 14 hospitals = \$56,000)  
 Operating overhead (3% of operating budget @ \$3,540/year x 2.3 years = \$8,142)

<b>Equipment</b>	<b>\$0</b>
<b>Supplies</b>	<b>\$0</b>
<b>Other</b>	<b>\$0</b>



**STATE OF VERMONT**  
JOINT FISCAL OFFICE

**MEMORANDUM**

**To:** Representative Steven Maier  
Senator Douglas Racine

**From:** Nathan Lavery, Fiscal Analyst

**Date:** December 9, 2009

**Subject:** JFO #2422

In accordance with Sec. E.129 of Act 1 of the 2009 Special Session, Representative Michael Obuchowski asked that I forward to you a copy of the enclosed American Recovery and Reinvestment Act grant materials and cover memo (JFO #2422 ). He requests your observations regarding the enclosed item.

cc: Rep. Michael Obuchowski  
Stephen Klein