



Budgetary Guidance
Public Health Emergency Preparedness
Cities Readiness Initiative Contract
Budget Period One (BP1)
July 1, 2024 – June 30, 2025

The following is guidance for preparing the Regional Public Health Emergency Preparedness (PHEP) Cities Readiness Initiative (CRI) budgets for the period July 1, 2024, through June 30, 2025.

Purpose of Funding

The Regional PHEP CRI contractual funding is meant to enhance and build on preparedness capabilities by meeting the requirements established by the Centers for Disease Control and Prevention (CDC) to demonstrate operational readiness. This can be accomplished through the development of plans, planning activities and coordination amongst regional partners. Regional PHEP CRI funding is not meant to fully support all public health preparedness and response activities conducted by Local Health Departments/Districts (LHD). Regional PHEP CRI funding is meant to support regional activities outlined in the contractual agreement.

Regional CRI Contract Budget Allocations

When determining the Region’s CRI budget allocations, each CRI Region must meet and vote on the work that needs to be accomplished for the year and the funding allocations to support Regional PHEP CRI contractual activities at the local and regional level. LHD Subcontractors using the same consultant/subcontractor for similar Regional CRI activities should coordinate to consolidate resources to avoid duplication of work to maximize the use of Regional CRI funding for the Region. After funding allocations are voted and agreed upon, any unallocated funding should remain with the Regional PHEP CRI Contractor to support regional activities.

Budget Categories

Regional CRI funding may be used as described under the following budget categories. Each budget category lists the justification details required for completing Regional PHEP CRI budgets. The Regional PHEP CRI budget must be completed on the Regional Budget Worksheet developed by the Department of Public Health. These forms can be found on the Department of Public Health Website at <https://portal.ct.gov/DPH/Public-Health-Preparedness/Main-Page/LHD-Funding-Guidance>.

1. Personnel

Regional CRI funding can be used to support the LHD staff working on CRI contractual activities both at the local and regional level including working collaboratively with the CRI Coordinator to develop a regional Public Health Emergency Response Plans and annexes, and collectively demonstrate operational readiness, participation in the planning, and providing documentation for regional ORR submission.

Funds can be used to support staff completing CRI contractual activities and deliverables. The justification must include the following:

- The name of individual(s)
- The position titles of the individual(s)
- Salary details
- Justification summary detailing PHEP activities and deliverables to be accomplished by the individual(s)

A director of health (DoH) salary should not be charged to CRI contractual funding. Under normal municipal and/or district annual budget processes, a DoH salary is budgeted through municipal funding, district member town contributions, or on state per capita funding. Charging a DoH salary to a federal funding source is considered supplanting funds which is not an allowable cost.

2. Contractual

Contractor Budgets

Funds can be used to support contractual services from LHD/Tribal subcontractors or vendors.

- The contractor must list the LHD/Tribal subcontractors and their allocations for their budgets.
 - The LHD/Tribal subcontractor budgets will be included in the Regional Budget Worksheet as individual tabs as their justifications.
- Funding can also be utilized for the region to hire services from consultants and vendors. The justification must include the following:
 - Name of the Contractor/Vendor
 - Business Address/Telephone
 - The type of contract: Fee for Service, Hourly Rate, Other
 - Total cost of services and
 - Description of services

Use of Consultants/Vendors under LHD/Tribal Subcontractor Budgets

LHDs who are using the same consultant/vendor within a Region for PHEP activities should work together to ensure there is no duplication of effort and to maximize the resources and services available to the Region.

3. Supplies

Funds may be used to purchase *office supplies to support PHEP funded staff* working on public health preparedness activities not to exceed \$500.

Justification shall include the following:

- Office supply item/description/justification,
- Unit cost,
- Quantity, and
- Total costs

4. Travel

In-State

Mileage reimbursement is for in-state travel to participate in public health preparedness activities and meetings. Must include number of preparedness meetings to be attended, an estimate of number of miles traveled and the mileage reimbursement rate (cost per mile).

Out of State

Funds can be used for *one (1) staff person* to attend a PHEP-related conference not to exceed \$2,500. The justification shall include:

- the name of the preparedness conference,
- name and title of person attending,
- date and location of conference,
- breakdown of costs for the travel,
- itemization of costs and registration fees, and
- the allowable travel and per diem rates that are established for all government related travel.

5. Communication Costs

System Costs

Funds may be used for the costs of using, sharing and/or maintaining a communication platform. This should be a budget line item included in the Regional Contractor budget, rather than with individual health departments.

The justification shall include:

- the type of communication system, vendor,
- monthly/quarterly fee/total costs,
- how the system is used,
- list all health departments using and/or cost sharing for a communication system.

If the LHD/Tribal Subcontractor is paying for the communication system for the Region, then they are required to include that in their budget with the required justification. A communication system for the use of only a single LHD subcontractor will be denied.

Cell Phone(s)

Funds can be used for the monthly costs for up to three cell phones for local health staff. The intent for supporting three lines is that the cell phones would correspond with the health department/district's staff 3-deep list for the individuals who serve as back-ups to the Director of Health. The cost for the three lines shall not exceed \$600 per line for a total of \$1,800 per year.

6. Attorney Fees

Consultation with an attorney for guidance in the development of Memorandums of Understanding and Mutual Aid Agreements with preparedness partners such as community-based organizations, private sector entities, and other health departments or municipal departments.