

Hospital Association COVID-19 Preparedness and Response Activities

(CFDA #93.899) Funding

The U.S. Department of Health and Human Services, Assistant Secretary for Preparedness and Response (“ASPR”), established the Hospital Association COVID-19 Preparedness and Response Activities (CFDA #93.899) funding opportunity to support the urgent preparedness and response needs of hospitals, health systems, and health care workers on the front lines of the COVID-19 pandemic in order to prepare them to safely and successfully identify, isolate, assess, transport, and treat patients with COVID-19 or persons under investigation (PUIs) for COVID-19 (“COVID-19 Program”)

Through the ASPR Program, HEF has been awarded federal funds (“Funds”) to lead West Virginia’s statewide preparedness and response under the COVID-19 Program (“Award”).

Subrecipient Activities. West Virginia Acute Care hospitals may utilize the Subaward to conduct any of the following activities (collectively, the “Activities”):

- A. Purchase PPE in accordance with CDC guidelines and with attention to supply chain shortages.
- B. Retrofit separate areas to screen and treat large numbers of persons with suspected COVID-19 infections, including isolation areas in or around hospital emergency departments to assess potentially large numbers of persons under investigation for COVID-19 infection.
- C. Add physical infrastructure needs, which may include minor retrofitting and alterations of inpatient care areas for enhanced infection control (e.g., donning/doffing rooms).
- D. Reconfigure patient flow in emergency departments to provide isolation capacity for PUIs for COVID-19 and other potentially infectious patients.
- E. Implement expanded telemedicine, telehealth, or other virtual health capabilities to ensure that appropriate care can be provided to individuals in their homes or residential facilities when social distancing measures are used to reduce virus transmission and that specialty care providers can provide consultation remotely.
- F. Create alternate care sites (e.g., temporary structures, etc.) to provide surge capacity for patient care, or increase the numbers of patient care beds at a facility.