Fiscal Year 2024 Early Childhood Development (ECD) Non-Competing Continuation (NCC) Progress Report Instructions for FY23 Award Recipients

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Purpose

The purpose of Early Childhood Development (ECD) funding is to improve developmental outcomes by increasing developmental screenings[1] and access to appropriate follow-up services for children ages 0-5, and by expanding, enhancing, and further integrating ECD expertise into care teams. Submission and approval of this ECD Non-Competing Continuation (NCC) will provide funding for the next ECD budget period (September 1, 2024-August 31, 2025). This funding is dependent upon congressional appropriation, satisfactory progress, and a decision that continued funding is in the best interest of the federal government.

Submission and Award Information

NCC submissions will be available starting March 1, 2024, and are due in the HRSA Electronic Handbooks (EHBs) by **5 p.m. ET on April 12, 2024**. We anticipate releasing year 2 ECD funding on or around the budget period start date of September 1, 2024.

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[1] Comprehensive developmental screening refers to screenings for general developmental milestones; early social-emotional and relational health; autism; and social determinants of health and other family, caregiver, and/or community risks and needs, as well as strengths and protective factors. See Hagan, J. F., Shaw, J. S., & Duncan, P. M. (Eds.). (2017). Bright futures: Guidelines for health supervision of infants, children, and adolescents (4th ed.). American Academy of Pediatrics; AAP COUNCIL ON COMMUNITY PEDIATRICS. Poverty and Child Health in the United States. Pediatrics. 2016; 137(4):e20160339

General Instructions

To find your ECD NCC in EHBs:
- Select the **Grants tab** on the HRSA EHBs Home page to navigate to the My Grant Portfolio – List page.
- Select the **Grants Folder** for your H8K grant.
- Select the **Work on My NCC Report** link under the Submissions section.
- Locate the record titled "Noncompeting Continuation Progress Report".

Select the **Start** link to begin working on your ECD NCC. After you have started working on the NCC, the system will display an Edit link instead of the Start link the next time you access this page.

In your NCC you must include all forms and attachments identified in Table 1: Forms and Attachments. Complete all forms online, including the Work Plan Update, directly in EHBs. You must upload attachments into EHBs.

We will consider NCCs that lack required information to be incomplete or non-responsive and will return them via a "Change Requested" notification in EHBs. If we do not receive your NCC by April 12, 2024, or if we receive an incomplete or non-responsive NCC, a delay in Notice of Award (NOA) issuance or a lapse in funding could occur.

We recommend that attachments not exceed **10 pages**. Do not count the standard OMB-approved forms or your indirect cost rate agreement, if applicable, in the page limit. Narrative documents submitted as attachments must be single-spaced with 12-point, easily readable font (e.g., Times New Roman, Arial, and Calibri) and one-inch margins. You may use smaller font (no less than 10 point) for tables, charts, and footnotes.

Table 1: Forms and Attachments

ECD NCC Progress Report Section	Form or Attachment	Instructions
SF-PPR and SF-PPR-2	Form	Refer to the Basic Information section.
Budget Information: Budget Details	Form	Refer to the Budget Information section.
Budget Narrative	Attachment	Refer to the Budget Narrative section.
Work Plan Update	Form	Refer to the Work Plan Update section.
Key Contact/Principal	Form	Refer to the Key Contact/Principal section.
Attachment 1: Other Relevant Documents (if applicable)	Attachment	Refer to the Attachment 1 section.

Basic Information

The SF-PPR form displays basic information about your health center. Review and update the information as necessary.

The SF-PPR-2 form displays project information related to lobbying activities, areas affected by the project, and the point of contact. Review and update the information as necessary.

Budget Information: Budget Details Form

Information in the Budget Details Form will reflect **only** your Early Childhood Development (H8K) award amount and any non-federal funding supporting your H8K project.

In **Section A: Budget Summary**, verify the pre-populated Federal, Non-Federal, and Total budget numbers. The total federal funding requested must equal the Recommended Federal Budget figure that is pre-populated at the top of the Budget Information: Budget Details form. This figure should correspond with the recommended future support figure (Item 33) on the H8K NOA.

Note: You may **not** use the NCC to request changes in the total award, funding type(s), or allocation of funds between funding types. **Funding must be requested and will be awarded proportionately for all funding types as currently funded under the Health Center Program.** You may not add new funding types.

In the Non-Federal column provide the total of the non-federal funding sources. Enter all other project costs in the non-federal column. As per 45 CFR §75.302, you must document use of ECD funds separately and distinctly from other Health Center Program funds and other federal awards.

The amount(s) in the total column will be calculated automatically as the sum of the federal and non-federal columns. The amounts for each category in the federal and non-federal columns, as well as the totals, should align with the Budget Narrative.

In **Section B: Budget Categories**, by object class category, provide the H8K federal funding request for the upcoming budget period in the first column and the non-federal funding in the second column. Each line represents a distinct object class category that must be addressed in the Budget Narrative.

You may only claim indirect costs with an approved indirect cost rate (see details in the Budget Narrative section below).

In **Section C: Non-Federal Resources**, provide a breakdown of non-federal funds by funding source (e.g., state, local) for each funding type (CHC, MHC, HCH, PHPC). If you are a state agency, leave the "State" column blank and include State funding in the "Applicant" column. When providing Non-Federal Resources by funding source, include non-ECD federal funds supporting the proposed project in the "Other" category. Program Income must be consistent with the Total Program Income (patient service revenue) presented in the budget narrative and other NCC components, as applicable.

Salary Limitation

The Consolidated Appropriations Act, 2023 (P.L. 117-328), Division H, § 202, states "None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II." Effective January 2024, the salary rate limitation is $221,900. Use the link under Personnel Costs to ensure your budget request reflects the most current rate.

The salary limitation reflects an individual's base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to your organization. This salary limitation also applies to subrecipients under a HRSA grant. See Section 5.1.iv Budget – Salary Limitation of HRSA's SF-

[424 Application Guide](#) for additional information. As required by law, salary rate limitations may apply in future years.

Budget Narrative

Information in the Budget Narrative will reflect **only** your H8K award amount and any non-federal funding supporting your H8K project.

You are required to upload a line-item Budget Narrative in EHBs that outlines federal and non-federal costs for the next ECD budget period (September 1, 2024, to August 31, 2025) by object class category. This attachment should align with the budget information provided in the [Budget Information: Budget Details form](#) and your [Work Plan Update](#). In addition, provide a table of personnel to be paid with federal funds, if applicable, as shown in the example provided in the Budget Narrative on the [ECD TA webpage](#). Your budget narrative must:

- Demonstrate that you will use ECD funds for costs that will advance progress on the ECD objectives.
- Include detailed calculations explaining how each line-item expense is derived (e.g., cost per unit).
- Not include [ineligible costs](#).
- Provide us with sufficient information to determine that you will use ECD funds separately and distinctly from other Health Center Program support (e.g., H80 awards).
- Highlight changes from the current budget year.

Include the following in the Budget Narrative:

Personnel Costs: List personnel categories, such as Medical Staff or Administrative Staff, broken out by Federal and Non-Federal funding. The amounts for each category in the Federal and Non-Federal columns, as well as the totals, should align with the Budget Information Form (SF-424A) and Personnel Justification Table.

If personnel costs are included in your budget, you must include a Personnel Justification Table. List all direct hire personnel who will be supported with ECD funds, and include their name (if possible), position title, percentage full-time equivalency (FTE), and annual salary. If budgeted positions are not yet filled, write TBD in place of the staff name. ECD funds may not be used to pay the salary of an individual at a rate in excess of [Executive Level II of the Federal Executive Pay scale.](#)[2]

Fringe Benefits: List the components of the fringe benefit rate for direct hire staff. Fringe benefits should be directly proportional to the personnel costs allocated for the ECD project.

Travel: List expenses associated with both local and long-distance travel for consultants, direct hire personnel, and/or contractors. Detail travel costs consistent with your established travel policy and in compliance with [45 C.F.R. § 75.474](#).

Equipment: Equipment costs are limited to year one only. A budget that includes equipment costs will be considered non-responsive and will be returned via a "Change Requested" notification in EHBs.

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[2] OPM "Rates of Pay for the Executive Schedule" link on this website has the most current salary limitation.

*Supplies***:** List supplies that support your ECD project individually, separating items into three categories: office, medical, and educational. Include equipment that does not meet the $5,000 threshold listed above.

Contractual Services: Clearly state the purpose of each contract, including specific deliverables. You find must have an established and adequate procurement system with fully developed written procedures for awarding and monitoring contracts.

*Other***:** Include all costs that do not fit into any other category and provide an explanation of each cost. List any EHR license fees for new personnel and health information technology.

*Indirect Costs***:** Include indirect costs in your budget request only if your organization has a negotiated indirect cost rate agreement or is claiming a de minimis rate of 10 percent of modified total direct costs. If your budget includes indirect costs, you must upload a copy of your most recent indirect cost rate agreement as Attachment 1: Other Relevant Documents or indicate that you are using the de minimis indirect cost rate of 10 percent of modified total direct costs under the requirements detailed at 45 C.F.R. § 75.414.

Note: If you carry out all or a portion of their project through a subaward (as defined in 45 CFR part 75.2), you must document your determination that, at the time such a subaward is made, the subrecipient has met all the Health Center Program requirements. See Chapter 12: Contracts and Subawards of the Health Center Program Compliance Manual for additional information.

Ineligible Costs

ECD funds may only be used for allowable costs. ECD funds may not be used for the following:

- Costs already supported by H80 operational grant or related supplemental funding;
- Purchase or upgrade of an electronic health record (EHR) that is not certified to the latest standards of the Office of the National Coordinator for Health Information Technology Certification Program;
- Equipment, including moveable items that are non-expendable, tangible personal property (including information technology systems) having a useful life of more than 1 year and a per-unit acquisition cost of $5,000 or more;
- Minor alteration/renovation activities;
- New construction activities, including additions or expansions;
- Purchase and/or installation of trailers and pre-fabricated modular units;
- Facility or land purchases; or
- Costs not aligned with the ECD purpose;

We recommend the *HHS Grants Policy Statement* to develop an appropriate budget.

Work Plan Update

You will use this part of the form to document progress on activities included in your current ECD work plan, note updates to activities, and describe new activities to support achievement of the ECD objectives:

- Workforce recruitment, retention, development, and engagement;
- Patient/caregiver experience;

- Access and affordability; and
- Population health and health-related social needs.

Your Work Plan Update Form will pre-populate the Focus Area, Activity, and Activity Selection Rationale from your FY 2023 ECD Competitive Application Work Plan. Prepopulated information is not editable. Contact your program contact if the work plan that you previously submitted does not match the Work Plan Update in EHBs. Refer to the example project work plan for example uses of ECD funding.

You will review and complete the following fields for each activity on the Work Plan Update Form in EHBs:

- Activity Progress (Required)
    - Indicate the implementation status (i.e., Not yet started, Partially implemented, Fully implemented, Will not implement, New).
- Activity Progress Narrative Update (Required)
    - Describe progress to date and anticipated progress for each Activity proposed in your FY 2023 ECD application through the end of the current budget period (through August 31, 2024).
    - If you plan to adjust an activity, provide activity revisions.
    - For each activity that you mark as 'Will not complete,' explain the reason the activity will not be completed.
- Lessons Learned
    - Describe successes and lessons learned.

As needed, add activities using the "New Activity" button located at the top of the screen, above the Work Plan Update table.

- Use a separate row for each activity.
- Select "Add Activity" to open the list of activity options.
- Select the focus area and activity from the list or write in your own "other" activity (up to 125 characters, including spaces) for each focus area.
- Indicate "New" in the Activity Progress column.
- Explain in the Activity Progress Update column the reason for adding the activity.

You will complete the following fields for each new activity:

- Focus Area
    - Select a Focus Area using the pre-populated list of Focus Areas. At least one focus area is required.
- Activity
    - Select from the pre-populated list or write in your own "other" activity.
    - If you selected Other specify the activity (up to 300 characters, including spaces).

- Activity Selection Rationale
  - Describe how new activities address an unmet need or barrier to achieving the following project objectives:
    - Increase the number of children ages 0-5 who receive recommended developmental screenings, and
    - Increase the number of children and their families assisted with accessing appropriate follow-up services within 30 days of a developmental screening identifying an area of concern.
- Activity Progress Narrative Update
  - For each activity marked as 'New', explain the reason for adding the activity.
- Lessons Learned
  - NOTE: Lessons Learned are not required for newly added activities.

Activities Consistent with Budget

You will use this part of the form to document activity, budget, and/or equipment changes from the original approved work plan.

- If you select 'Yes' to an activity, budget, or equipment change, you must describe the activity change, and
- You must indicate 'Yes' or 'No' to submitting a prior approval request, if applicable.

Barriers

You will use this part of the form to document any barriers or issues encountered and identify the steps taken to mitigate the issues or barriers in implementing the approved ECD activities by:

- Answering a question about whether you encountered or anticipate any issues or barriers in use of the funding and/or implementing the planned activities consistent with your approved FY 2023 ECD application or non-competing continuation, as applicable.
- If 'Yes' is selected, identify one or more issues or barriers that you encountered or anticipate or select 'Other'.
- If 'Other' is selected, you must explain the issue(s)/barrier(s) in the narrative box provided.
- If issues or barriers have been identified, explain any steps you may have taken to mitigate the issues/barriers.

Point-in-Time Impact Assessment

You will use this part of the form to indicate the degree to which ECD supported activities to date are achieving the funding objectives or project requirements as stated in the Notice of Funding Opportunity. A response to each question is required.

For the Program requirement: *"Increase the number of children ages 0-5 who receive recommended developmental screenings,"* a narrative response is optional but highly encouraged.

For the Program Requirement: *"Increase the number of children and their families assisted with accessing appropriate follow-up services within 30 days of a developmental screening identifying an area of concern,"* use the narrative box to provide the number of children ages 0-5* and their families assisted with accessing appropriate follow-up services within 30 days of a developmental screening

identifying an area of concern for the period from **September 1, 2023, to February 29, 2024,** and any additional comments or supporting data. A response is required in this field.

* For the purposes of this measure, count the number of children ages 0 – 5 and their families assisted with access to follow-up care per occurrence within the calendar year.

Training and Technical Assistance

You will use this part of the form to document training and technical assistance (T/TA) related to the FY23 Early Childhood Development award that you have used to date. A response selection is required.
- If applicable, identify the type of T/TA by selecting one or more choices.

You may also indicate your interest in receiving information about available T/TA resources related to this project.

Key Contact/Principal

The 'Key Contact/Principal' form provides an opportunity to add, update, delete, or change the key contact information. You must enter at least one key contact to complete the form. The form also has a 'Biographical Sketch' section, which is optional, and allows you to upload relevant documents of the key contacts.

1. **Key Contacts/Principal Information**

You will use this part of the form to add, update, delete, or change the key contact information. The system allows you to add any number of contacts (no max limit). You must enter at least one contact to complete the form.

Add New Key Contact
- Select 'Key Contact/Principal' from left menu or select 'Update' link for 'Key Contact/Principal' form from 'NCC Progress Report - Status Overview' page.
- Select the 'Add' button from the 'Key Contact/Principal' form.
- Select key contact by selecting the radio button option and selecting 'Add Selected Person' button to add the key contact to the form. Alternatively, choose to add a new key contact by selecting 'Add New Key Contact/Principal' button.
- Fill all the required fields and select the 'Save and Continue' button to navigate to the 'Key Contact/Principal – Add Confirm' page.
- Select the 'Confirm' button to add the key contact to the form.
- Select the 'Save' button on the 'Key Contact/Principal' page. A success message is displayed at the top of the page.

Update or Delete Key Contacts
- Select the Update dropdown menu under Options.
- Select Update to make any necessary updates, or Delete to remove a contact.
- Select the 'Save' button on the 'Key Contact/Principal' page. A success message is displayed at the top of the page.

2. **Biographical Sketch**

You may use this optional part of the form to attach files to the 'Biographical Sketch' section.
- Select the 'Attach File' button.
- Select 'Choose File button to select the file you wish to upload.

- Enter a description of the document in the comment box.
- Select the 'Upload' button.
- Select 'Save'. A success message is displayed at the top of the page.

Attachment 1: Other Relevant Documents

If applicable, upload an indirect cost rate agreement or other relevant documents to support the proposed project as Attachment 1 in the Appendices section in EHBs.

Technical Assistance Contacts

ASSISTANCE NEEDED	CONTACT
General Technical Assistance	The ECD TA webpage includes example forms, a technical assistance webinar recording, and other resources.
Budget/Fiscal Questions	**Division of Grant Management Operations** Health Resources and Services Administration Vera Windham Grants Management Specialist Division of Grants Management Operations, OFAM Health Resources and Services Administration 5600 Fishers Lane, Mailstop 10SWH03 Rockville, MD 20857 Telephone: (301) 443-6859 Email: VWindham@hrsa.gov
ECD NCC Progress Report Requirements Questions	**BPHC Contact Form** Submit a Web Request at BPHC Contact Form • Under *Funding,* select Non-competing Continuation (NCC) Progress Reports • Select *Early Childhood Development (ECD)*
HRSA EHBs Submission Assistance	**Health Center Program Support** 877-464-4772 (select option 1) 8 a.m. – 8 p. m ET, Monday – Friday (Except federal holidays). Contact Health Center Program Support at BPHC Contact Form Under *Technical Support*, select *EHBs Tasks/EHBs Technical Issues.*

Appendix A: Focus and Activity Areas

The following list includes the focus and activity areas presented in the Work Plan Update. All ECD-supported activities must be conducted in alignment with your scope of project.

- Workforce Recruitment, Retention, Development, and Engagement

    o Workforce recruitment, including recruiting/contracting for early childhood development specialists/expertise

    o Workforce training, including training health center staff to expand or enhance early childhood expertise

    o Workforce engagement, including staff satisfaction activities.

- Patient/Caregiver Experience

    o Team-based care coordination (required)

    o Partnership and engagement with patients, families, and caregivers

    o Building trusting relationships

- Access and Affordability

    o Outreach

    o Mobile screenings

    o Transportation

    o Translation

    o Patient education

    o Eligibility assistance

- Population Health and Health-Related Social Needs

    o Care coordination and patient/caregiver navigation

    o Eligibility assistance and referrals to address social risk factors

    o Enhancing health IT workflows

    o Community partnerships and collaborations