

THE NAVAJO NATION

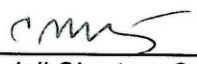
JONATHAN NEZ | PRESIDENT MYRON LIZER | VICE PRESIDENT



January 13, 2022

TRANSMITTAL

TO : Chris Kescoli, Department Manager III
Department of Emergency Medical Services (EMS) / NN DPS

FROM : 
Cordell Shortey, Contracting Officer
Contracts and Grants Section / OMB

SUBJECT : NDOH - Covid - 19 EMS Services; Fiscal Recovery Funds (FRF)- Defunded CARES Act

I. Information on Contract (per Original Award):

NDOH - Covid-19 EMS Services		U.S. Treasury American Recovery Plan Act (ARPA)	21.019
Title of Contract		Funding Agency	CFDA No. - Federal
CJY-41-21	\$ 1,808,662.00	2022	03/11/2021 to 12/31/2026
Grant No.	Amount	Fiscal Year	Term - Begin and End Date

II. Data Entered in FMIS Regarding:

☒ New Contract or Grant Company No. 8059 Business Unit (K#) K211524

☐ Contract Mod No. _____

☐ Amt of Award _____ to _____
AMOUNT FROM TO

☐ Budget Period - Extend End Date: From _____ To _____

☐ Other, specify: _____

Authorizing Document - Attached:

☐ Contract / Agreement - Date executed _____

☐ NNC / Committee Resolution - No. & Date _____

☒ Other, specify: NN Council Resolution CJY-41-21

III. Comments by CGS:

Budget received on January 10, 2022 is authorized for implementation pursuant to FY 2022 NN BIM Appendix L Section II.B and approved by Mr. Tom Platero. Amount was allocated to Navajo Department of Health (NDOH), but NDOH authorized via email to EMS to budget and be responsible party. CGS corrected the budget to reflect the amount allocated by President Nez on October 12, 2021.

Attachment

Copy: Contract files
Contract Accounting / OOC / DPM
Tom Platero, Interim E.D. - NN FRF Office

Revised April 2018



Office of Management and Budget ♦ Post Office Box 646 ♦ Window Rock, AZ 86515
(928) 871-6470 Telephone ♦ (928) 871-6567 Facsimile

FY 2022

THE NAVAJO NATION PROGRAM BUDGET SUMMARY

Page ____ of ____
BUDGET FORM 1

PART I. Business Unit No.: <u> New </u>		Program Title: <u>Navajo EMS/ COVID-19 EMS Services</u>		Division/Branch: <u>NDPS/ NEMS</u>	
Prepared By: <u>Ramon Pete</u>		Phone No.: <u>928-871-6410</u>		Email Address: <u>ramonpete@navajo-nsn.gov</u>	

PART II. FUNDING SOURCE(S)	Fiscal Year /Term	Amount	% of Total	PART III. BUDGET SUMMARY	Fund Type Code	(A) NNC Approved Original Budget	(B) Proposed Budget	(C) Difference or Total
CARES - COVID 19 EMS Services	01/1/2022-12/31/2022	1,808,662.62	100%	2001 Personnel Expenses				
				3000 Travel Expenses				
				3500 Meeting Expenses				
				4000 Supplies				
				5000 Lease and Rental				
				5500 Communications and Utilities				
				6000 Repairs and Maintenance				
				6500 Contractual Services				
				7000 Special Transactions				
				8000 Public Assistance				
				9000 Capital Outlay			1,808,662.62	
				9500 Matching Funds				
				9500 Indirect Cost				
TOTAL:						\$0.00	1,808,662.62	0

PART IV. POSITIONS AND VEHICLES	(D)	(E)
Total # of Positions Budgeted:		
Total # of Vehicles Budgeted:		7

PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.	
SUBMITTED BY: <u>Chris Kescoli</u> Department Manager III's Printed Name <u><i>al</i> 1/6/22</u> Program Manager's Signature and Date	APPROVED BY: <u>Jesse Delmar</u> Division Director / Branch Chief's Printed Name <u><i>Jesse Delmar</i> 010622</u> Division Director / Branch Chief's Signature and Date

*Edit by CGS - 1/13/22

FY 2022

**THE NAVAJO NATION
PROGRAM PERFORMANCE CRITERIA**

Page ____ of ____
BUDGET FORM 2

PART I. PROGRAM INFORMATION:

Business Unit No.: _____ New _____

Program Name/Title: _____ Navajo Emergency Medical Service/ CARES COVID 19 EMS Services _____

PART II. PLAN OF OPERATION/RESOLUTION NUMBER/PURPOSE OF PROGRAM:

LOCAU-09-20 The Navajo Department of Emergency Medical Service is a dedicated, progressive service focused on quality care. Expanded advanced life support capabilities and transport services are pre-eminent. The department consists of a well-organized structure of dedicated personnel determined to provide elite services within the Territorial jurisdiction of the Navajo Nation as defined by Title 7 N.C.C. §254 and 18 U.S.C. Section 1151.

PART III. PROGRAM PERFORMANCE CRITERIA:**1. Goal Statement:**

EMS Testing Blitz

Program Performance Measure/Objectives

Drive up testing to all of the 13 base location

1st QTR		2nd QTR		3rd QTR		4th QTR	
Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual

		500		500		500	
--	--	-----	--	-----	--	-----	--

2. Goal Statement:

On board ambulance testing

Program Performance Measure/Objectives

Routine and/ or consistent with signs/ symptoms of COVID-19.

		500		500		500	
--	--	-----	--	-----	--	-----	--

3. Goal Statement:

Patient refusals

Program Performance Measure/Objectives

Routine and/ or consistent with signs/ symptoms of COVID-19.

		500		500		500	
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4. Goal Statement:

First responder/ EMS Personnel Testing

Program Performance Measure/Objectives

Increase availability of testing for individuals who believe they were exposed to COVID-19.

		500		500		500	
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5. Goal Statement:

Program Performance Measure/Objectives

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PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.

Chris Kescoli

Department Manager III's Printed Name

 1/6/22

Program Manager's Signature and Date

Jesse Delmar

Division Director/Branch Chief's Printed Name

 01/06/22

Division Director/Branch Chief's Signature and Date



FY 2022

**THE NAVAJO NATION
DETAILED BUDGET AND JUSTIFICATION**

Page ____ of ____
BUDGET FORM 4

PART I. PROGRAM INFORMATION:				
Program Name/Title: Navajo Emergency Medical Service/ COVID-19 Test Related		Business Unit No.: New		
PART II. DETAILED BUDGET:				
(A)	(B)	(C)	(D)	
Object Code (LOD 6)	Object Code Description and Justification (LOD 7)	Total by DETAILED Object Code (LOD 6)	Total by MAJOR Object Code (LOD 4)	
	9000 Capital Outlay		1,808,662.62	
9160	Vehicles	1,808,662.62	1,808,662.62	
	9164 Specialized Vehicles; ambulances for COVID-19 vaccination activities			
	Total - Mod. 04 Units Cost/unit 1,808,662.62 7 258,380.37			
TOTAL		1,808,662.62	1,808,662.62	1,808,662.62

* 11/13/22 - Edit by CHS to reconcile with amount allocated by President per on 10/12/21

THE NAVAJO NATION
SIHASIN, UUFB, AND CARES PROJECT DESCRIPTION FORM

- 1) This form needs to be submitted separately for each project type being proposed.
- 2) This form needs to be returned to: paulsonchaco@navajo-nsn.gov and brendayazzie@navajo-nsn.gov

Part 1. Identification of parties.

Entity Requesting Funds: Department of Emergency Medical Service

(NN Governmental Unit, Enterprise, Chapter, Etc.)

Entity Mailing Address: _____

Form Prepared by: Chris Kescoli

phone/email: (928)871-6410/ckescoli@navajo-nsn.gov

Title & type of Project: COVID-19 EMS Services

Amount of FRF Funds Being Requested: \$1,808,662.62

Part 2. Project details.

- (a) Describe the Program(s) and/or Project(s) to be funded, including how the funds will be used, for what purposes, the location(s) to be served, and what COVID-related needs will be addressed:

The funds will be used to provide emergency medical services for COVID-19 patients transport and COVID-19 testing of patients. All communities will be served across the Nation. There is not enough EMS vehicles with updated equipment to transport patients between health facilities and from resident to hospitals. All current vehicles have outdated equipment, therefore, new vehicles would need to be equipped.

_____ ☐ document attached

- (b) Explain how the Project will benefit the Navajo Nation, Navajo Communities, or the Navajo People:

The project will reduce transmission and mitigate COVID-19.

_____ ☐ document attached

- (c) Provide a prospective timeline showing the estimated date of completion of the Project and/or each phase of the Project. Disclose any challenges that may prevent you from incurring costs for all funding by December 31, 2024 and/or fully expending funds and completing the Program(s) or Project(s) by December 31, 2026:

The estimated date of completion will be May 31, 2023. Approximately \$1,808,662.62 will be spend by December 31, 2023. The procurement process will be a challenge internally expediting documents. It takes about 6-12 months to build custom units with updated equipment.

_____ ☐ document attached

(d) Identify who (person within the Entity) will be responsible for implementing the Project:

The Department Manager for EMS will be responsible for the project.

☐ document attached

(e) Explain who will be responsible for operations and maintenance costs for the Project once completed, and how such costs will be funded prospectively:

The Department Manager will be responsible for operations and costs.

☐ document attached

(f) State which of the (66) Fiscal Recovery Fund eligibility expenditure categories in Exhibit B the proposed Project or Program falls under, and explain the reasons why:

1.2 COVID-19 Testing

1.6 Medical Expenses

☐ document attached

Part 3. Additional documents.

List here all additional supporting documents attached to this request (or indicate N/A):

CJY-67-20 (Public Health)

Part 4. Affirmation by Funding Recipient.

Funding Recipient affirms that its receipt of Fiscal Recovery Funds and the implementation of this project shall be in accordance with Resolution No. CJY-41-21, the ARPA, ARPA Regulations, and with all applicable federal and Navajo Nation laws, regulations, and policies:

Signature of Preparer:

Printed Name of Preparer

Chris Kescoli

NDOH EMS defunded project

Jill Jim

Thu 1/6/2022 9:42 AM

To: Chris Kescoli <ckescoli@navajo-nsn.gov>;

Cc: Tom Platero <t.platero@navajo-nsn.gov>; Jesse Delmar <jdelmar@navajo-nsn.gov>;

 1 attachments (118 KB)

2021.09.08_Section 5.6 Project Description_NDOH COVID-19 EMS.pdf;

Chris,

Can you do the budget for the defunded project regarding EMS vehicles? I would like this be deposited to EMS and not NDOH. I included Mr. Platero, so he can follow up with you.

This project was approved and Mr. Platero needs budget forms 1-4 so an account can be created.

Tom: I hope I explained everything okay.

Thanks,

Jill Jim, Ph.D, MPH, MHA

Executive Director

Navajo Department of Health

Phone: (928) 871-6350

Email: JillJim@navajo-nsn.gov

Website: <https://www.ndoh.navajo-nsn.gov/>