



Maine EMS Sustainability Grant Program Application Guide

This document is a guide to support eligible EMS entities applying to the Maine EMS Sustainability Grant Funding Program. This document covers each section of the grant application.

Application Content

Section 1: Funding Amount & Name of EMS Entity

1. Are you requesting your entity's maximum allocation as listed in the funding opportunity announcement?
 - Choose **YES** to request the entire grant amount for your entity. You will proceed to question three
 - Choose **NO** to request less than what is allocated. You will then proceed to the next question.
2. Enter your funding request amount.
3. Select your EMS Agency
 - Section two only applies to ambulance service & non-transporting EMS agencies.
 - Section three only applies to Maine EMS-licensed training centers.

Section 2: Ambulance Service & Non-Transporting EMS Agency Grant Funded Categories

4. Please select the category(ies) you would like to fund. (select all that apply).
 - ☐ The initiation or support of programs, applications, or the use of consultants or experts to establish or support an ongoing mental health and wellness program.
 - ☐ The consolidation and/or regionalization of the delivery of emergency medical services.
 - ☐ Inter-municipality EMS planning for rural patient transport.
 - ☐ Supporting training directly related to the provision of clinical care, safety, leadership, or management of EMS.
 - ☐ Supplementing wages, benefits, stipends, and incentives for EMS clinicians, Ambulance Operators, and/or administrative support staff (e.g. service-level medical director, quality assurance and improvement officer, infection control officer, training officer, and administrative aid).



- ☐ Implementation of other programming directly related to the Maine EMS Plan for a Sustainable EMS System in the State of Maine: A Vision for 2035, as published on May 22, 2023, which is incorporated into this rule by reference and available for download online:
<https://www.maine.gov/ems/sites/maine.gov/ems/files/inline-files/20230522-Maine-EMS-Vision-and-Plan.pdf>.
- ☐ Investment in capital expenditures not to exceed \$100,000.00 in the aggregate.

Section 3: EMS Training Center Grant Funded Categories

5. Please select the category(ies) you would like to fund. (select all that apply).
- ☐ Support the hiring of qualified and credentialed instructors to adequately cover course administration and demand for delivery over the three (3) year grant period.
 - ☐ Supplement the cost(s) of program administration and maintenance over the three (3) year grant period.
 - ☐ Increase licensure classes offered over the three (3) year grant period.
 - ☐ Increase total number of EMS students over the three (3) year grant period.
 - ☐ Create new hybrid course offerings over the three (3) year grant period.
 - ☐ Offer learning opportunities at a reduced cost over the three (3) year grant period.
 - ☐ Increase non-licensure – EMS Professional Development offerings (Leadership Training, Safety Officer Courses, Continuous Quality Improvement, EMS Business Training) over the three (3) year grant period.

Section 4: Project Plans and Timelines

6. Please describe your project plan.
- Provide detailed information on how you will use the grant funds to achieve your goals and objectives. This would be your budget narrative.
 - You must type or cut and paste your project plan, the application does not allow attachments.
 - Be specific to what is requested.
 - Your plan must include anticipated or projected costs for all the categories you selected in Section 2 or 3 of the application.
 - Question 6 is limited to 4,000 characters
7. Please describe your project timeline.
- Provide a chronological outline of your project, including start and end dates, major activities, milestones and deliverables.
 - You must type or cut and paste your project timelines, the application does not allow attachments.
 - Question 7 is limited to 4,000 characters.



Section 5: Applicant Information

1. Are you the applicant and the signatory for this application? (*Person who is legally authorized to sign and has authority on behalf of your entity*)
 - Choose **YES**, you will proceed to Section 6: Signatory Information
 - Choose **NO**, you will proceed to the next question.
2. Please enter your full name
3. Please enter your title
4. Phone Number
5. Email address

Section 6: Signatory Information

(It is important to correctly enter your information accurately)

6. Please enter the full name of the signatory.
7. What is the signatory's title?
8. What is the signatory's phone number?
9. What is the signatory's email address?

After completing this section, the signatory will receive an email requesting their signature on the grant application using Adobe E-Sign.

The EMS Sustainability Grant application will be submitted electronically once this section is completed, and you will receive the following automated message.

Thank you for applying to the EMS Sustainability Grant Program. We will be in contact with you soon. If you have any questions, you can email grants.ems@maine.gov or your grant specialist.