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Lifespan Respite Care Program
Program Announcement and Grant Application
Instructions

U.S. Administration on Aging
FY 2010

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Department of Health and Human Services (HHS)

Administration on Aging (AoA)

AoA Center: Center for Program Operations

Funding Opportunity Title: *Lifespan Respite Care Program*

Announcement Type: *Initial*

Funding Opportunity Number: HHS-2010-AoA-LR-1018

Catalog of Federal Domestic Assistance (CFDA) Number: 93.072

Key Dates:

- **Open Information Teleconference for Applicants:** April 20, 2010, 2:00 PM Eastern Time. **Telephone Number:** 1-888-603-9214 (Toll Free) **Participant Pass Code:** Lifespan
- **Letters of Intent due:** May 7, 2010
- **Application deadline:** The deadline date for submission of applications is 11:59 p.m., Eastern Time, on **June 7 2010**
- **Projected Start Date:** September 1, 2010

Overview:

The U.S. Administration on Aging (AoA) is providing this competitive grants opportunity to eligible state agencies for implementing the requirements of the Lifespan Respite Care Act of 2006 (P.L. 109-716). Lifespan Respite Care programs are coordinated systems of accessible, community-based respite care services for family caregivers of children or adults of all ages with special needs.

The AoA plans to fund approximately 10-15 grants under this Announcement, with a federal funding level of up to \$200,000 per award for a 36 month project period. Eligible state agencies funded under this announcement shall use grant funds for the purposes of planning, establishing and expanding/enhancing Lifespan Respite Care systems in the states, including new and planned emergency respite services, training and recruiting respite workers and volunteers and assisting caregivers with gaining access to needed services. Eligible recipients of respite services under this Program Announcement include family members, foster parents, or other adults providing unpaid care to adults who require care to meet basic needs or prevent injury and to children who require care beyond that required to meet the basic needs of the child.

This is a limited grant competition. Awards will only be made to eligible States/state agencies who:

- Administer the State's programs under the Older Americans Act of 1965;
- or**
- Administer title XIX of the social Security Act; **or**
- Are designated by the Governor of the State to administer the State's programs

- under this title; **AND** who are
- An aging and disability resource center working in collaboration with a state respite coalition or organization; **AND**
- Did not receive funding under this program in FY 2009.

The applicant must demonstrate the support and active involvement of a range of government and non-government, private, nonprofit and other organizations with a stake in serving populations eligible to receive services under the Lifespan Respite Care Act. Only one application per State will be funded. Once funded, grantees will be expected to collaborate with multiple state and local agencies representing all ages, populations and disability/disease groups in planning and carrying out the requirements of the project.

Prospective applicants should be sure to read, understand and fully respond to all requirements of this announcement.

I. FUNDING OPPORTUNITY DESCRIPTION

Statutory Authority

The statutory authority for grants under this program announcement is contained in Title XXIX of the Public Health Service Act (42 U.S.C. 201 et seq.), as amended by the Public Health Service Act P.L.109-716. (Catalog of Federal Domestic Assistance 93.072).

Purpose

The U.S. Administration on Aging (AoA) is providing this competitive grants opportunity to assist eligible state agencies to implement the requirements of the Lifespan Respite Care Act of 2006 (P.L. 109-716). Eligible State agencies receiving funding under this Announcement will work through aging and disability resource centers and in collaboration with state respite coalitions or other state respite organizations to enhance and expand the availability of Lifespan respite services in the state.

Successful applicants under this competitive grants opportunity will be required to establish state and local coordinated Lifespan Respite Care systems to serve family caregivers regardless of age or special need of the care recipient. Grantees will also be required to develop and provide new and planned emergency respite services, train and recruit respite workers and volunteers and assist caregivers in gaining access to respite care services. Eligible respite recipients include family members, foster parents, or other adults providing **unpaid** care to adults who require care to meet basic needs or prevent injury and to children who require care beyond that required to meet the basic needs of the child. Programs developed under this Announcement must, from the outset, address the respite needs of **all** age and disability/special needs populations. No phase-in or preferences for specific age groups or disability categories will be permitted.

An applicant applying for grants funds under this announcement should be aware that *this is a highly competitive opportunity*. Limited funds are available to support applicants' proposed projects. Therefore only those applications deemed to show the greatest likelihood of implementing or enhancing lifespan respite care statewide from those states

that are building or enhancing the capacity of their long-term care systems to respond to the comprehensive needs, including respite care needs of their residents, will be selected for funding.

Background

Who are caregivers?

Caregivers have often been called the backbone of America's long-term care system. On a daily basis, these individuals assist relatives and other loved ones with daily tasks ranging from assisting with personal care and homemaking to carrying out more complex health-related interventions like medication administration and wound care. A 2009 study examining the prevalence and experiences of family caregivers estimated that 65.7 million people in the U.S. were unpaid family caregivers to an adult or child. Nearly 32 percent (36.5 million) of U.S. households reported the presence of a family caregiver during the same 12 months.¹

Caregivers may be found in every community and come from every walk of life. Caregivers are male and female, younger and older, and may or may not possess adequate financial resources to meet their own daily needs or the needs of those for whom they care. The same 2009 study revealed that 66 percent of caregivers are female and average 48 years of age. Approximately 86 percent care for a relative who is most often a parent (36 percent), while one in seven caregivers (14 percent) provides care over and above regular parenting to a child with special needs.² In addition to what is known about the "average" caregiver, there continue to be caregivers in need of respite services that do not fit this typical profile, including:

- Caregivers "sandwiched" between two generations of individuals needing care: young children and aging family members;
- Grandparents or other relatives of children, with or without disabilities;
- Younger individuals caring for a parent, grandparent or sibling;
- Family caregivers caring for adults over the age of eighteen with special needs; and
- Families of military personnel returning from combat with traumatic brain injuries, and other serious chronic and/or debilitating conditions.

While the spectrum of individuals classified as "caregivers" is growing in number and diversity, one fact remains: caregivers often do not recognize the fact that what they are doing is caregiving. Most often, caregivers view their work as fulfilling a familial role. Caregivers often do not know how, nor do they want, to ask for help. However, when caregivers ask for assistance, they often encounter fragmented, narrowly targeted programs or are unable to afford the respite options available to them.³ Many others simply lack sufficient information about where to find respite providers or how to choose from among those that are available.

¹ National Alliance for Caregiving/AARP. *Caregiving in the U.S. 2009*. Bethesda, MD: National Alliance for Caregiving and Washington, D.C.: AARP, 2009.

² National Alliance for Caregiving/AARP, 2009.

³ Whitlatch, C.J. and Feinberg, L.F. Family and Friends as Respite Workers. *Journal of Aging Social Policy*. New York: Routledge, 2006. 18(3-4): 127-139. AND Yanizi, NM, Rosenberg, MW, and McKeever, P. *Getting out of the House: The Challenges Mothers Face When their Children Have Long-Term Care Needs*. 2007, *Health Soc. Care Community* 15 (1):45-55.

Research has also shown that while caregiving can be a very rewarding experience for many, it is also stressful and can impact caregivers' lives in many ways, including declining health, forced changes in employment, and additional competing demands from other family members. A 2006 study found that caregivers often report deteriorating health as a result of the care they provide. Caregivers surveyed in this study most often reported energy and sleep problems, stress and/or panic attacks, physical pain, and depression among those health factors to worsen as a result of the care they provided.⁴

For the purposes of this Program Announcement, caregivers include grandparents of any age who are primary caretakers of children or adults with special needs. Further, "unpaid family caregivers" are those caregivers who do not receive funding to provide care as their primary means of income. It is anticipated that some caregivers accessing a Lifespan Respite Program may also receive minimal payments from State or Federal sources (e.g., HCBS waivers, Independence Plus, 1115 Waivers, etc.), however this is not to be considered a primary source of income.

What is Respite?

Respite provides temporary relief for caregivers from the ongoing responsibility of caring for an individual of any age with special needs. Respite does much to strengthen the family system while protecting the health and well being of both caregiver and care recipient and is a key component of long-term care services. Studies as far back as 1992 showed respite provided to caregivers of the elderly resulted in fewer hospital admissions for acute care.⁵ A 1994 study showed that 64 percent of caregivers of the elderly receiving four hours of respite per week for one year reported improved physical health while 78 percent improved their mental health and 50 percent showed improvements in the care recipient.⁶

Currently, several Federal, state and private funding streams support or have the potential to support planned and emergency or crisis respite care for caregivers. Examples of Federal programs that may provide respite services include (but are not limited to) the Older Americans Act, National Family Caregiver Support Program (NFCSP), Medicaid waivers, Child Welfare Services block grants, State Developmental Disability Councils, the Alzheimer's Disease Supportive Services Program (ADSSP), and programs operated by the Department of Veterans Affairs to purchase respite for caregivers of Veterans of all ages. Each program often contains specific eligibility requirements in order to receive services, potentially creating difficulties in accessing services and gaps in service availability.

In recent years, both Congress and the Executive Branch have placed greater emphasis on respite care as an essential component of long-term care support options. For example, the Older Americans Act Amendments of 2000 created the National Family Caregiver Support

⁴ Evercare & National Alliance for Caregiving. *Study of Caregivers in Decline: Findings from a National Survey*. Washington, DC: National Alliance for Caregiving. September 2006.

⁵ Chang, J.I., Karuza, J., Katz, P.R., Klingensmith, K. (1992). *Patient Outcomes in hospital-based respite: A study of potential risks and benefits*. *Journal of the American Board of Family Practice* 5:475-481.

⁶ Theis, SL, Moss, JH, and Pearson, MA (1994). *Respite for caregivers: An evaluation study*. *Journal of Community Health Nursing*. 11(1): 31-44.

Program (NFCSP). The NFCSP provides a range of services designed to meet the diverse needs of caregivers, including respite, access assistance and caregiver training and education.

Section 1915(c) and 1115 Medicaid waivers include provisions for respite care and permit states to include respite as a service options available under these programs. The Real Choice Systems Change Grants begun in 2003 included respite care feasibility studies and demonstration grants. Several demonstration projects and model grants included respite care for families of children with developmental disabilities. Other initiatives such as Money Follows the Person recognized the crucial role of respite care in allowing families to continue providing care at home.

Additionally, to encourage states to develop models of assistance for persons with Alzheimer's disease, and to encourage close coordination and incorporation of those services into the broader home and community-based care system, Congress created the Alzheimer's Disease Supportive Services Program (ADSSP) in 1991. In 1998, Congress transferred the administration of the program to AoA in an effort to ensure coordination with other programs for older Americans. The ADSSP is demonstrating how existing evidence-based/evidence-informed service interventions for persons with Alzheimer's disease and related disorders can enable them to remain in the community and how such approaches can be translated into effective programs at the community level.

The disparate nature of both funding streams and eligibility requirements for respite programs may result in long waiting lists or complex bureaucratic mazes of application processes and/or eligibility requirements which are difficult for families to navigate. Even if families have sufficient resources available to pay for respite, they often encounter difficulties finding sufficient providers able to deliver respite in a manner most appropriate to their needs and situation.

The Lifespan Respite Care Act – Overview

The Lifespan Respite Care Act defines *lifespan respite care* as “a coordinated system of accessible, community-based respite care services for family caregivers of children or adults with special needs.” Such systems bring together Federal, state and local resources and funding streams to help support, expand and streamline the delivery of planned and emergency respite services while also providing for the recruitment and training of respite workers and caregiver training and empowerment.

The Lifespan Respite Care Act is intended to accomplish several objectives. **First**, because respite is often in short supply or inaccessible to people of all ages and disabilities, the Lifespan Respite Care Act seeks to expand and enhance respite services in the states. **Second**, multiple respite programs funded by many different sources often exist in the states. The Lifespan Respite Care Act is designed to improve coordination and dissemination of service delivery between the various programs available. **Third**, because multiple respite programs exist and service gaps are created due to specific eligibility criteria of many respite programs, they may be difficult for consumers to identify and access. The Lifespan Respite Care Act seeks to improve access to programs by streamlining the means by which consumers access those programs and by filling gaps in service where necessary. **Finally**, by expanding and enhancing respite services, and

improving coordination and access, the Lifespan Respite Act is designed to improve the overall quality of the respite services currently available.

Rather than supplant, replace, or duplicate Federal, state, local and private respite care development and funding activities, the Lifespan Respite Care Act is intended to facilitate coordination between programs, reduce duplication of effort, and assist in the development of respite care infrastructure at the state and local level. The Lifespan Respite Care Act is intended to improve the delivery and quality of respite services available to families across age and disability spectrums by establishing coordinated lifespan respite systems.

Applicants to this Program Announcement are encouraged to read the text of the Lifespan Respite Care Act of 2006 in its entirety, including the committee report accompanying the legislation. Full text of the legislation may be found at: <http://thomas.loc.gov/cgi-bin/cpquery/T?&report=hr716&dbname=109&> .

Status of Lifespan Respite Programs in the States

Many state Lifespan Respite programs in existence today, and which predate the Federal Lifespan Respite Care Program, have created community-based networks of local partnerships designed to ensure capacity of available respite services. These partnerships often include family caregivers, providers, state and federally funded programs, area agencies on aging, non-profit organizations, health services, local businesses and faith-based organizations. Services provided by Lifespan Respite programs include awareness building, partnership development, volunteer and paid respite staff recruitment, training, gap identification, and resource development.

In states where Lifespan Respite activities are under way, there exists a great deal of diversity with respect to program structure and operation. Despite the varied approaches to designing and administering Lifespan Respite programs in the states, the unifying characteristic of each is a coordinated approach to ensuring respite services are available to all who need it. Each program reflects the diverse needs of the state's population of respite consumers (caregivers) and care recipients.

Prior to the passage of the Federal Lifespan Respite Care Act in 2006, several states implemented Lifespan Respite Programs through state legislation while others relied on the commitments and activities of a dedicated group of volunteers to implement a program without authorizing legislation. Still other states have programs that function on a much smaller scale, acting as a single point of entry for respite services, or offering vouchers for respite services or training staff and volunteers.⁷

In FY 2009, Congress appropriated \$2.5 million for grants to eligible State agencies to implement the Federal Lifespan Respite Care program. In September 2009, AoA announced the first twelve states to receive grants to implement Lifespan Respite Care Programs. As with the early development of Lifespan Respite Programs in the states, these twelve grantees are using a variety of

⁷ For more information on the status of Lifespan Respite Programs in the states, visit the ARCH National Respite Network's web site at: <http://chtop.org/ARCH.html>

approaches to develop their programs.⁸ Applicants under this Program Announcement are encouraged to consider the range of possible approaches and the broadest partnerships possible in the design and implementation of their programs.

Funding Opportunity Description⁹

Required Program Elements

The goal of this program announcement is to implement the requirements of the Lifespan Respite Care Act of 2006. To that end, AoA is looking to fund projects that propose to serve all eligible respite recipients, including family members, foster parents, or other adults providing unpaid care to adults needing care to meet basic daily needs or prevent injury **and** to children who require care beyond that required to meet their basic needs.

AoA understands that the current status of Lifespan Respite Program development may vary from state to state. AoA also recognizes that not all states will start from the same place in designing their programs. Therefore, proposals will be evaluated based on the **extent of the progress** a state expects to make under the grant in developing Lifespan Respite Programs and not on the current status of such efforts in the states. States that already have systems that include major elements of a Lifespan Respite Care Program will be successful in their applications for funding under this announcement only to the extent that further progress can be demonstrated (e.g., by adding additional functions, expanding target group coverage, etc.). Successful applicants will propose a project that fully implements all required services specified by the Lifespan Respite Care Act, on a statewide basis while ensuring the following:

- **Proposed programs must demonstrate thorough understanding of the population to be served.** Knowledge of the family caregiver population for whom lifespan respite program services are to be provided, or for whom respite care workers and volunteers will be recruited and trained, is an essential requirement of any successful application under this Announcement. To that end, the application narrative must fully describe the needs of the caregiver population and the current respite infrastructure in the state. The proposed intervention must fully describe how respite information dissemination and coordination, respite care services and worker and volunteer recruitment and training will be carried out. The plan for administering, collaborating, and coordinating respite care activities in the state with other related services or programs must also be described. Applicants should refer to *Section IV, 2.c* (Pages 19-23) of this Announcement for a full description of legislatively mandated application narrative requirements.
- **Proposed programs must coordinate with, and on behalf of, existing respite programs and infrastructures.** The Lifespan Respite Care Act is designed to facilitate coordination between respite programs in the state and reduce or eliminate duplication of effort and to assist in the development of statewide respite care infrastructure. Grantees under this Program Announcement are required to coordinate with existing

⁸ For more information about the twelve states to receive Federal Lifespan Respite Care Program grants in 2009, visit AoA's web site at: http://www.aoa.gov/AoARoot/AoA_Programs/HCLTC/LRCP/index.aspx

⁹ Applications submitted under this Announcement should fully address each of the elements described below **and** those found in Section IV 2 c. (Project Narrative) found on Pages 19-23 of this Announcement.

public or private respite care programs already in existence when implementing State or local respite programs. Applicants should describe their approach for working with public and private non-profit State respite coalitions or respite organizations to implement a lifespan respite program

- **Proposed programs must help families navigate the respite care system and gain access to those programs most appropriate for their needs.** Once operational, Lifespan Respite Programs should assist families by first identifying current respite funding streams in the State and assisting families in determining for which existing program they are eligible. Families who do not qualify for any existing respite programs or services may have those services paid for by the Lifespan Respite Care Program. Applicants under this announcement should clearly describe their approach for coordinating and improving access to existing respite programs and services and filling gaps where necessary.
- **Proposed programs must serve all family members, regardless of age or disability.** When preparing applications for submission, states are reminded that the Lifespan Respite Care Act is intended to improve the delivery and quality of respite services available in a state or locality to families across the age and disability spectrum by establishing coordinated lifespan respite *systems*. All family members, regardless of the age, disability or chronic condition of their loved ones, should be able to access a Lifespan Respite Program to obtain information on how and where to find respite services and providers from among those currently existing. Applicants under this Program Announcement are required to describe their plan for serving all age groups and disability categories, without preference for a select demographic group or disability population.
- **Proposed programs must demonstrate stakeholder collaboration and full implementation.** Successful applications will demonstrate the broadest possible collaboration with relevant respite stakeholders from across the age and disability spectrum. Further, applicants must propose a program that immediately addresses the respite needs of all ages and special needs categories. ***No phase-in or preferences for age groups or disability categories will be permitted.*** Each application submitted under this Announcement must include a description of the eligible State agency's:
 - Ability to work with other State and community-based agencies;
 - Understanding of respite care, and family caregiver issues across all age groups, disabilities, and chronic conditions; and
 - Capacity to ensure meaningful involvement of family members, family caregivers, and care recipients.

Additionally, a memorandum of agreement regarding the joint responsibility for the eligible State agency's lifespan respite program between the eligible State agency and a public or private nonprofit **statewide** respite coalition or organization must be in place at the time of application. **A copy of such memorandum must be included as part of the Application package.**

Required Activities and Use of Funds

Lifespan Respite programs developed or enhanced under this Announcement must meet the unique needs of the states in which they operate and employ a coordinated approach for ensuring statewide availability of respite services. Application narratives under this Announcement should clearly and completely describe the eligible State agency's plan for implementing the required services and any optional services listed below. Within that framework, each applicant under this Announcement must fully describe how their program will, at a minimum:

- Expand and enhance respite care services to family members;
- Improve the statewide dissemination and coordination of respite care; and
- Provide, supplement, or improve access and quality of respite care services to family caregivers, thereby reducing family caregiver strain.

Each eligible State agency awarded a grant under this Announcement shall use all or part of the funds awarded for the following **required** services:

- Development and enhancement of lifespan respite care at the State and local levels;
- The provision of respite care services for family caregivers caring for children or adults;
- Training and recruiting of respite care workers and volunteers;
- The provision of information to caregivers about available respite and support services; and
- Assistance to caregivers in gaining access to such services.

Additionally, funds available under this Announcement may be used to develop a range of **optional** services, including:

- Training programs for family caregivers to assist family caregivers in making informed decisions about respite care services;
- Other services essential to the provision of respite care as may be specified by AoA; or
- Training and education for new caregivers.

Grants and Subcontracts

Each eligible State agency awarded a grant under this Announcement may carry out the required and optional activities described above directly or by grant to, or contract with, public or private entities. Due to the nature of this program, the State Project Director must maintain an **active** role in the implementation and management of this project. Applicants who propose conduit or pass-through funding for another agency to lead the project will not be considered for funding.

Applicants under this funding announcement should clearly describe, if necessary, their processes for subcontracting specific activities under this Program Announcement. Additionally, applicants should clearly describe the role of the project director along with the stakeholder group that will guide the design and implementation of the Lifespan Respite Program in the state.

Stakeholder Involvement and Partnerships

Eligible State agencies awarded a grant under this Announcement must carry out the activities of their programs in collaboration with a non-profit statewide respite coalition or organization and in partnership with all relevant stakeholders at the state and local levels. Applicants should detail the means by which the respite coalition/organization and the ADRC will work collaboratively with the grantee in designing, implementing and managing the program.

In addition to the core partnership between grantee, ADRC and Respite coalition, Lifespan Respite Programs funded under this announcement must work in conjunction with all relevant stakeholders to ensure the program reaches the broadest population of eligible services recipients possible. Potential stakeholders include (a) entities of state and local government that administer and deliver human services programs designed to meet the respite care needs of family caregivers; and (b) state and local chapters of organizations and entities representing individuals with special needs from across the disease and disability spectrum and for whom respite is an essential component of their ongoing support in a community setting.

Applications should clearly demonstrate the involvement of key state- and local-level organizations and stakeholders from across the age and disability spectrum as full partners in the design, implementation, and evaluation of the Lifespan Respite Program. For example, such a group might include but is *not limited to*:

- **State government agencies** providing human services programs, of which respite may (or may not) be a component service;
- **Providers** of respite care serving the full range of population groups with varying, disabilities and service needs and for whom respite is an essential component of remaining in the community; and
- **Non-profit organizations** that function at the state and local levels to enhance services and education to persons with respite care needs, their families, and caregivers to enhance and promote the coordination of a more comprehensive and appropriate service delivery between the social service network and the state service system.

Products

As with states funded previously, grantees under this funding announcement will be doing much to advance Lifespan Respite Care Programs at the state and local level. As such, grantees' experiences during the lifespan of the project will be looked at with interest by other states seeking guidance and direction as they embark on the development of similar programs into the foreseeable future. To more easily facilitate replication of programs and approaches by other states and to eliminate the need to "reinvent the wheel," grantees under this funding announcement will be asked to submit to AoA key products that can serve as resource guides for future Lifespan Respite Care program development, enhancement, and expansion.

Grantees will be encouraged to develop for dissemination products such as: (1) a "how-to" manual that will readily allow others to implement a Lifespan Respite Care program within

their own state or community; (2) materials (i.e., training tools, surveys, brochures, etc) that can be easily reproduced by others implementing such programs at the state or community level; and (3) a cost assessment methodology that will enable an estimation of the cost of program start-up and operation and the costs of serving clients as the program matures. Copies of all final products should be submitted to AoA at the conclusion of the specified grant period.

Information Sharing

As a new program, this funding opportunity presents a unique opportunity for grantees to learn from one another and to share their experiences in program implementation with the broader human services community. To facilitate information sharing on a range of program development issues and to provide regular opportunities for peer-to-peer exchange of information and ideas, the AoA Project Officer and grantee Project Directors will meet, at a minimum, every other month by phone. During the bi-monthly phone meetings, the grantee Project Directors and the AoA Project Officer will review project developments and accomplishments as well as discuss future endeavors and goals. These meetings will also be an opportunity to provide guidance and technical assistance regarding program development and to hear from National stakeholder organizations about those issues of importance to Lifespan Respite Care Programs nationwide.

Participation in and Collaboration with Technical Assistance Efforts

The Lifespan Respite Care Act permits the establishment of a resource center to maintain a national database of lifespan respite care, provide training and technical assistance to State, community and non-profit respite care programs, and provide information, referral, and education programs to the public on lifespan respite care. In 2009, AoA funded targeted Technical Assistance activities for Lifespan Respite Care Program development and implementation. The Family Caregiver Alliance (FCA) in San Francisco, with a subcontract to the ARCH National Respite Network (ARCH), is tasked with the development and delivery of targeted Technical Assistance to both Family Caregiver Support Programs and Lifespan Respite Care Programs, nationwide. Together, FCA and ARCH will collaborate to translate what is currently known about the design and delivery of cutting-edge caregiver services and supports, including respite programs, into practical tools and resources needed by program administrators and front-line staff.

Successful grantees under this Program Announcement will be expected to participate in technical assistance activities as they pertain to Lifespan Respite Care Program development, management, and expansion. This includes but is not limited to participation in regularly scheduled conference calls, web casts and one-on-one Technical Assistance opportunities initiated by the AoA Project Officer, FCA/ARCH, or as requested by the grantee and stakeholders themselves.

Applicants under this Program Announcement are encouraged to budget resources for travel to and participation in the National Respite Conference, convened annually by ARCH. This conference provides participants with the opportunity to learn about the latest trends in respite program development and with the opportunity to network and share best practices associated with Lifespan Respite Care Program implementation.

II. AWARD INFORMATION

Award type: Grants to Eligible State Agencies
Estimated Federal Funds Available: \$2,257,000
Estimated Number of Awards: Up to 10-15 Grants
Projected Start Date: September 1, 2010
Estimated Project Length: 36 Months

The amount of Federal funds available for this new funding opportunity is approximately \$2,257,000. The AoA plans to fund approximately 10-15 grants under this Announcement, with a federal funding level of up to \$200,000 per award for a 36 month project period. Eligible state agencies funded under this announcement shall use grant funds for the purposes of planning and establishing Lifespan Respite Care systems, as outlined in the Lifespan Respite Care Act of 2006.

Because the nature and scope of the proposed projects will vary from application to application, it is anticipated that the size of each award will also vary. Funding awards will be reflective of the scope of work proposed by each applicant. Projects will be funded for a 36-month project period. AoA reserves the right to offer a funding level that differs from the requested amount.

Funding will be allocated in total at the time of the award. Grantees are required to provide at least a 25% match of total project cost. Funds made available under this Announcement shall be used to supplement and must not supplant other Federal, State, and local funds available for respite care services.

AoA and Grantee Collaboration

The Administration on Aging will assist each of the grantees in understanding the strategic goals and objectives, policy perspectives, and priorities of the Assistant Secretary for Aging and the Department of Health and Human Services, by sharing such information via email, conference calls, briefings, memos, and other consultations. The AoA project officer will provide technical assistance and guidance for all grant management and implementation issues and as such should be the first point of contact for grantees and partners with any questions pertaining to program management or implementation. The AoA project officer will also share information with each grantee about other federally sponsored projects and activities relevant to activities funded under this announcement.

Each grantee under this announcement must develop a project work plan to be submitted as part of the application package. Within 45 days of award, the grantee and AoA project officer will agree upon and finalize a work plan that details expectations for major activities, products, and reports during the project period. The work plan should include a detailed timetable with tangible milestones. In addition, the work plan should contain project and activity implementation plans, including potential sub-grantees/subcontractors, staff assignments, and other areas that require AoA consultation, review, and/or prior approval. Either the AoA project director or the grantee can propose a revision of the final work plan at any time.

III. ELIGIBILITY INFORMATION

A. Eligible Applicants

This is a limited grant competition. Awards will only be made to eligible state agencies to implement the requirements of the Lifespan Respite Care Act of 2006 (P.L. 109-716). Eligible state agencies are those that administer the State's program under the Older Americans Act of 1965; or, administer the State's program under title XIX of the Social Security Act; or, are designated by the governor of the state to administer the State's programs under this Announcement. **Current FY 2009 Lifespan Respite Care Program grantees/states are not eligible to apply for funding under this Program Announcement.**

In carrying out the activities under the Announcement, the eligible State agency is an aging and disability resource center/single entry point entity **and** works in collaboration with a public or private nonprofit statewide respite care coalition or organization to ensure full, statewide deployment of all required programs and activities of the Lifespan Respite Care Act. For the purposes of this Announcement, "aging and disability resource center" refers to an entity that provides a coordinated system for ensuring (a) **comprehensive information** on available public and private long-term care programs, options, and resources; (b) **options counseling** to assist individuals in assessing existing or anticipated long-term care needs, and developing and implementing a plan for long term care designed to meet specific needs and circumstances; and (c) **consumer access** to the range of publicly funded long-term care programs for which consumers may be eligible by serving as a convenient point of entry for such programs.

When awarding grants under this Announcement, priority consideration will be given to eligible State agencies showing the greatest likelihood of implementing or enhancing lifespan respite care statewide and who are building or enhancing the capacity of their long-term care systems to respond to the comprehensive needs, including respite care needs, of their residents.

B. Cost Sharing or Matching

Section 2902 of the Public Health Service Act (42 U.S.C. 201 et seq.), as amended, requires that grantees provide at least 25% match (cash or in-kind) of total costs. Waivers to these match requirements are not allowed.

The formula for calculating the required match is:

$$\frac{\text{Federal Funds requested (e.g., \$200,000)} \times \text{Applicant Match Rate (25\%)} = \$66,667}{\text{Federal Match Rate (i.e., 75\%)}} \quad \text{Project Match}$$

Under this program, AoA will fund no more than 75% of the project's total cost, which

means the applicant must cover at least 25% of the project's total cost with non-Federal resources. In other words, for every three (3) dollars received in Federal funding, the applicant must contribute at least one (1) dollar in non-Federal resources toward the project's total cost. This "three-to-one" ratio is reflected in the formula included under Item 18 in Attachment A. You can use this formula to calculate your minimum required match. A common error applicants make is to match 25% of the Federal share, rather than 25% of the project's total cost. Please note, applications with a match greater than the minimum required will **not** receive additional consideration under the review. Match is not one of the responsiveness criteria as noted in Section III, 3 Application Screening Criteria.

C. Responsiveness and Screening Criteria

Applications will go through an initial screening to verify that the applicant:

- Is an Eligible State Agency, as outlined in Section III (I) of this Program Announcement;
- Has included with the application package submitted an MOU between the Eligible State Agency and the statewide respite organization/coalition; and
- Does not propose conduit or pass-through funding for another agency to lead the project.

Applications that do not meet all of the above responsiveness criteria will be administratively eliminated and will not be reviewed.

Application Screening Criteria

All applications will be screened to assure a level playing field for all applicants. Applications that fail to meet the three screening criteria described below will **not** be reviewed and will receive **no** further consideration.

In order for an application to be reviewed, it must meet the following screening requirements:

1. Applications must be submitted electronically via <http://www.grants.gov> by 11:59 PM, Eastern Time, on **June 7, 2010**.
2. The Project Narrative section of the Application must be **double-spaced**, on 8 1/2" x 11" plain white paper with **1" margins** on both sides, and a **font size of not less than 11**.

The Project Narrative must not exceed 20 pages. NOTE: The Project Work Plan, Letters of Commitment, and Vitae of Key Project Personnel **are not counted** as part of the Project Narrative for purposes of the 20-page limit.

Additional Resources

The list below identifies a few, but not all, of the online resources that may be available to assist you with application preparation, planning and program implementation:

- Full text of both the authorizing legislation and the accompanying Committee Report may be found at:
<http://thomas.loc.gov/cgi-bin/cpquery/T?&report=hr716&dbname=109&>
- For information about state lifespan respite efforts visit the ARCH National Respite Network web site at: <http://chtop.org/ARCH.html>
- For information about the twelve states funded to implement Lifespan Respite Programs in FY 2009, visit the AoA web site at:
http://www.aoa.gov/AoARoot/AoA_Programs/HCLTC/LRCP/index.aspx
- For information about Technical Assistance available to Caregiver and Lifespan Respite Care Programs, please visit the Family Caregiver Alliance web site at:
http://www.caregiver.org/caregiver/jsp/content_node.jsp?nodeid=2343

IV. APPLICATION AND SUBMISSION INFORMATION

A. Address to Request Application Package

Application materials can be obtained from <http://www.grants.gov> or <http://www.aoa.gov/AoARoot/Grants/Funding/index.aspx>.

Contact person regarding this Program Announcement:

U.S. Department of Health and Human Services
Administration on Aging
Greg Link, Aging Services Program Specialist
Room 5610
Washington, D.C. 20201

Or by calling: 202-357-3545

Or e-mailing: greg.link@aoa.hhs.gov

Please note, AoA is requiring applications for all announcements to be submitted electronically through <http://www.grants.gov>. The Grants.gov registration process can take several days. If your organization is not currently registered with <http://www.grants.gov>, please begin this process immediately. **For assistance with <http://www.grants.gov>, please contact them at support@grants.gov or 1-800-518-4726 between 7 a.m. and 9 p.m. Eastern Time.** At <http://www.grants.gov>, you will be able to download a copy of the application packet, complete it off-line, and then upload and submit the application via the Grants.gov website.

Applications submitted via <http://www.grants.gov>:

- You may access the electronic application for this program on <http://www.grants.gov>. You must search the downloadable application page by the Funding Opportunity Number (HHS-2010-AoA-LR-1018) or CFDA number (93.072).
- At the www.grants.gov website, you will find information about submitting an application electronically through the site, including the hours of operation.

AoA strongly recommends that you do not wait until the application due date to begin the application process through <http://www.grants.gov> because of the time delay.

- All applicants must have a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number and register in the Central Contractor Registry (CCR). You should allow a minimum of **five days** to complete the CCR registration.
- You must submit all documents electronically, including all information included on the SF424 and all necessary assurances and certifications.
- Prior to application submission, Microsoft Vista and Office 2007 users should review the Grants.gov compatibility information and submission instructions provided at <http://www.grants.gov> (click on “**Vista and Microsoft Office 2007 Compatibility Information**”).
- **Your application must comply with any page limitation requirements described in this Program Announcement.**
- After you electronically submit your application, you will receive an automatic acknowledgement from www.grants.gov that contains a Grants.gov tracking number. The Administration on Aging will retrieve your application form from Grants.gov.
- After the Administration on Aging retrieves your application form from Grants.gov, a return receipt will be emailed to the applicant contact. This will be in addition to the validation number provided by Grants.gov
- Each year organizations registered to apply for Federal grants through <http://www.grants.gov> will need to renew their registration with the Central Contractor Registry (CCR). You can register with the CCR online and it will take about 30 minutes (<http://www.ccr.gov>).

B. Content and Form of Application Submission

a. Letter of Intent

Applicants are encouraged to submit a letter of intent to apply for this funding opportunity to assist AoA in planning for the application independent review process. The deadline for submission of the letter of intent is **May 7, 2010**. Letters of intent should be faxed or emailed to:

Greg Link
U.S. Department of Health and Human Services
Administration on Aging
Washington, DC 20201
Email: greg.link@aoa.hhs.gov
Fax: 202-357-3558

b. DUNS Number

The Office of Management and Budget requires applicants to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when

applying for Federal grants or cooperative agreements on or after October 1, 2003. It is entered on the SF 424. It is a unique, **nine-digit identification number**, which provides unique identifiers of single business entities. The DUNS number is *free and easy* to obtain.

Organizations can receive a DUNS number at no cost by calling the dedicated toll-free DUNS Number request line at 1-866-705-5711 or by using this link: https://www.whitehouse.gov/omb/grants/duns_num_guide.pdf.

c. Project Narrative

The Project Narrative must be double-spaced, on 8 ½” x 11” paper with 1” margins on both sides, and a font size of not less than 11. You can use smaller font sizes to fill in the Standard Forms and Sample Formats. The suggested length for the Project Narrative is ten to twenty pages; twenty pages is the maximum length allowed. AoA will not accept applications with a Project Narrative that exceeds 20 pages. The Project Work Plan, Letters of Commitment, and Vitae of Key Personnel are not counted as part of the Project Narrative for purposes of the 20-page limit, but all of the other sections noted below are included in the limit.

The components of the Project Narrative counted as part of the 20 page limit include:

- Summary/Abstract
- Problem Statement
- Goal(s) and Objective(s)
- Proposed Intervention
- Special Target Populations and Organizations
- Outcomes
- Project Management
- Evaluation
- Dissemination
- Organizational Capability

The Project Narrative is the most important part of the application, since it will be used as the primary basis to determine whether or not your project meets the minimum requirements for grants under Title IV of the Older Americans Act. The Project Narrative should provide a **clear and concise** description of your project. AoA recommends that your project narrative include the following components:

Summary/Abstract. This section should include a brief - no more than 265 words maximum - description of the proposed project, including: goal(s), objectives, outcomes, and products to be developed. Detailed instructions for completing the summary/abstract are included in Attachment E of this document.

Problem Statement. This section should describe, in both quantitative and qualitative terms, the nature and scope of the particular problem or issue the proposed intervention is designed to address, including how the project will potentially affect the target populations (including specific subgroups within those

populations), and possibly the health care and social services systems (e.g., the use of health care and/or nursing home services).

For purposes of this Program Announcement, applicants are **required** to include the following descriptive information as it pertains to the caregiving needs and current respite care infrastructure in their state:

- The population of family caregivers in the state;
- The extent and nature of the respite care needs of that population;
- Existing respite care services for that population, including numbers of family caregivers being served and the extent of unmet needs;
- Existing methods or systems to coordinate respite care information and services to the population at the State and local level and the extent of unmet need in this area;
- A description of respite care services available to family caregivers in the eligible State agency's State or locality, including unmet needs and how the eligible State agency's plan for use of funds will improve the coordination and distribution of respite care services for family caregivers of children and adults with special needs; and
- The criteria used to identify family caregivers eligible for respite care services;

Goals and Objectives. This section should consist of a description of the project's goal(s) and major objectives. Unless the project involves multiple, complex interventions, we recommend you have only one overall goal.

Proposed Intervention. This section should provide a clear and concise description of the intervention you are proposing to use to address the problem described in the "Problem Statement". You should also describe the rationale for using the particular intervention, including factors such as: "lessons learned" for similar projects previously tested in your community, or in other areas of the country; factors in the larger environment that have created the "right conditions" for the intervention (e.g., existing social, economic or political factors that you'll be able to take advantage of, etc.). Also note any major barriers you anticipate encountering, and how your project will be able to overcome those barriers. Be sure to describe the role and makeup of the strategic partnerships you plan to involve in implementing the intervention, including other organizations, funding sources, and/or consumer groups.

In addition, applicants **must** describe the following:

- How respite care information dissemination and coordination, respite care services, respite care worker and volunteer recruitment and training programs, or training programs for family caregivers that assist them in making informed decisions about respite care services will be provided using funds provided under this Announcement;
- A plan for administration, collaboration, and coordination of the proposed respite care activities with other related services or programs offered by public or private, nonprofit entities, including area agencies on aging;
- How the population, including family caregivers, care recipients, and relevant public or private agencies, will participate in the planning and implementation of

- the proposed respite care activities;
- How the proposed respite care activities will make use, to the maximum extent feasible, of other Federal, State, and local funds, programs, contributions, other forms of reimbursements, personnel, and facilities; and
 - A description of how the quality and safety of any respite care services provided will be monitored, including methods to ensure that respite care workers and volunteers are appropriately screened and possess the necessary skills to care for the needs of the care recipient in the absence of the family caregiver.

Special Target Populations and Organizations. This section should describe how the proposed intervention will target all eligible respite populations, including limited-English speaking populations. This section should also describe how you plan to involve community-based organizations in a meaningful way in the planning and implementation of the proposed project. Describe in detail the roles and makeup of the strategic State and local partnerships that will be involved in implementing the Lifespan Respite Care program, including other agencies, organizations, funding entities, and/or citizen groups. Describe how the program will coordinate with other programs and organizations to carry out the proposed activities.

Outcomes. This section of the project narrative must clearly identify the **measurable** outcome(s) that will result from the project. (NOTE: AoA will not fund any project that does not include measurable outcomes). This section should also describe how the project's findings might benefit the field at large, (e.g., how the findings could help other organizations throughout the nation to address the same or similar problems.) List measurable outcomes in the attached work plan grid (Attachment D) under "Measurable Outcomes" in addition to any discussion included in the narrative along with a description of how the project might benefit the field at large.

A "measurable outcome" is an observable end-result that describes how a particular intervention benefits consumers. It demonstrates the functional status, mental well-being, knowledge, skill, attitude, awareness or behavior.) It can also describe a change in the degree to which consumers exercise choice over the types of services they receive, or whether they are satisfied with the way a service is delivered. Additional examples include: a change in the responsiveness or cost-effectiveness of a service delivery system; a new model of support or care that can be replicated in the aging network; new knowledge that can contribute to the field of aging; a measurable increase in community awareness; or a measurable increase in persons receiving services. A measurable outcome is not a measurable "output", such as: the number of clients served; the number of training sessions held; or the number of service units provided.

You should keep the focus of this section on describing what outcome(s) will be produced by the project. You should use the Evaluation section noted below to describe **how** the outcome(s) will be measured and reported.

Your application will be scored on the clarity and nature of your proposed outcomes, not on the number of outcomes cited. It is totally appropriate for a

project to have only ONE outcome that it is trying to achieve through the intervention reflected in the project's design.

Project Management. This section should include a clear delineation of the roles and responsibilities of project staff, consultants and partner organizations including the Respite Coalition/organization and ADRC, and how they will contribute to achieving the project's objectives and outcomes. It should specify who would have day-to-day responsibility for key tasks such as: leadership of project; monitoring the project's on-going progress (including training, evaluation, service delivery, and monitoring fidelity of the program), preparation of reports; communications with other partners and AoA. It should also describe the approach that will be used to monitor and track progress on the project's tasks and objectives.

Evaluation.¹⁰ This section should describe the methods, techniques, and tools that will be used to: 1) determine whether or not the proposed intervention achieved its anticipated outcome(s), 2) document the "lessons learned" – both positive and negative - from the project that will be useful to people interested in replicating the program, if it proves successful, and 3) the results expected from proposed respite care activities and the procedures to be used for evaluating those results. Results from the evaluation should be discussed in articles that are submitted to academic/research journals.

Applicants under this Announcement must establish and describe measurable performance goals for their programs, including indicators to be used to track progress on the performance goals. The measurable performance goals and indicators should be incorporated into the design of the program's evaluation, and be used to measure the success of Lifespan Respite Care programs both for the funding period and beyond. The goals and indicators must be developed with input from the stakeholders and must include input from consumers of lifespan respite services.

Grantees should clearly state performance goals and indicators related to their Lifespan Respite Care programs. Examples of performance goals and indicators include:

1. **Expansion and enhancement of respite care services to family caregivers** – e.g., the extent to which respite care services have been made more available on a statewide basis;
2. **Improvement of the statewide dissemination and coordination of respite care** – e.g., expansion of program capacity, new respite options, and closer collaboration between respite programs;
3. **Provision, supplementation, or improvement to respite care access** - e.g., family caregivers report being able to better gain access to and understanding of the respite options available to them;
4. **Responsiveness** to the needs, preferences, unique circumstances, and feedback of individuals as it relates to the receipt of respite care services; and

¹⁰ The Lifespan Respite Care Act requires a Government Accountability Office (GAO) report be completed no later than January 1, 2011. The Comptroller General of the United States is to conduct an evaluation and submit a report to Congress on the effectiveness of lifespan respite programs, including an analysis of cost benefits and improved efficiency in service delivery.

5. **Efficiency and Effectiveness** - e.g., reduction of family caregiver burden and strain, reduction in the length of time it takes to receive respite services, streamlined intake, screening, and eligibility determination processes.

Dissemination. This section should describe the method(s) that will be used to disseminate project products in a timely manner and in easily understandable formats, to parties who might be interested in using the results of the project to inform practice, service delivery, program development, and/or policy-making, including and especially those parties who would be interested in replicating the project. Products such as a “how-to” manual that will readily allow others to implement a Lifespan Respite Care program within their own state or community; training tools, brochures and materials that can be easily reproduced by others implementing such programs at the state or community level can save time and prevent duplication of effort; and a cost assessment methodology that will enable an estimation of the cost of program start-up and operation and the costs of serving clients as the program matures are all useful and valuable tools to which others may turn when starting similar programs.

Organizational Capability Statement. Applications should include an organizational capability statement and vitae for key project personnel. The organizational capability statement should describe how the applicant agency (or the particular division of a larger agency which will have responsibility for this project) is organized, the nature and scope of its work and/or the capabilities it possesses. **It should also address the organization’s capability to sustain project activities after Federal financial assistance has ended.**

This description should cover capabilities of the applicant agency not included in the program narrative, such as any current or previous relevant experience and/or the record of the project team in preparing cogent and useful reports, publications, and other products. If appropriate, include an organization chart showing the relationship of the project to the current organization. Please attach short vitae for key project staff only. Neither vitas nor an organizational chart will count towards the narrative page limit. Also include information about any contractual organization(s) that will have a significant role(s) in implementing project and achieving project goals.

d. The Work Plan

The Project Work Plan should reflect and be consistent with the Project Narrative and Budget and should **cover all three (3) years** of the project period. It should include a statement of the project’s overall goal, anticipated outcome(s), key objectives, and the major tasks / action steps that will be pursued to achieve the goal and outcome(s). For each major task / action step, the work plan should identify timeframes involved (including start- and end-dates), and the lead person responsible for completing the task. Please use the Sample Work Plan format included in Attachment D.

e. Letters of Commitment from Key Participating Organizations and Agencies

Include confirmation of the commitments to the project (should it be funded) made by **key** collaborating organizations and agencies in this part of the application. Any organization that is specifically named to have a significant role in carrying out the project should be considered an essential collaborator. For applications submitted electronically via Grants.gov, signed letters of commitment should be scanned and included as attachments. Applicants unable to scan the signed letters of commitment may fax them to the AoA Office of Grants Management at 202-357-3467 by the application submission deadline. In your fax, be sure to include the funding opportunity number and your agency name.

f. Budget Narrative/Justification

The Budget Narrative/Justification should be provided using the format included as Attachment C of this Program Announcement. Applicants are encouraged to pay particular attention to Attachment B, which provides an example of the level of detail sought. A combined multi-year Budget Narrative/Justification, as well as a detailed Budget Narrative/Justification for each year of potential grant funding is required.

C. Submission Dates and Times

The deadline for the submission of applications under this Program Announcement is Monday, **June 7, 2010**. Applications must be submitted electronically by 11:59 p.m. Eastern Time, Monday, **June 7, 2010**.

Applications that fail to meet the application due date will **not** be reviewed and will receive **no** further consideration.

Grants.gov will automatically send applicants a tracking number and date of receipt verification electronically once the application has been successfully received and validated in Grants.gov. After the Administration on Aging retrieves your application form from Grants.gov, a return receipt will be emailed to the applicant contact. This will be in addition to the validation number provided by Grants.gov

D. Intergovernmental Review

This funding opportunity announcement is not subject to the requirements of Executive Order 12372, "Intergovernmental Review of Federal Programs"

E. Funding Restrictions

The following activities are not fundable:

- Construction and/or major rehabilitation of buildings
- Basic research (e.g. scientific or medical experiments)
- Continuation of existing projects without expansion or new and innovative approaches

F. Other Submissions Requirements

Letters of intent are due **May 7, 2010** and should be emailed or faxed to:

Greg Link, Aging Services Program Specialist
Email: greg.link@aoa.hhs.gov
Fax: 202-357-3558

V. APPLICATION REVIEW INFORMATION

A. Criteria

Applications will be scored by assigning a maximum of 100 points across the five standard categories used for all AoA grant programs. Applicants should be sure to address/answer in their applications each of the questions in the sub-categories listed below:

Project Relevance & Current Need - (20 points);

Approach - (30 points);

Budget – (10 points);

Project Impact - (20 points)

Organizational Capacity - (20 points)

a. Project Relevance & Current Need

Weight: 20 points

i. Purpose and Need (10 Points)

1. Does the proposed project clearly and adequately respond to the priority area, as described in this Program Announcement?
2. Does this applicant clearly describe the need for developing Lifespan Respite Care in the state?
3. Does the applicant demonstrate knowledge of the family caregiver populations to be served?
4. Does the application describe:
 - (a) The population of caregivers in the state;
 - (b) The extent and nature of respite needs of that population;
 - (c) Existing respite care services, including numbers currently served;
 - (d) Existing methods to coordinate respite information and services to the population?
 - (e) Respite services currently available in the state, including unmet needs?
 - (f) The criteria used to identify family caregivers eligible for respite care services?

ii. Problem to be Addressed (10 Points)

1. Does the applicant include a description of the problems this proposal is intended to address through the development of a Lifespan Respite

- Program?
2. Does the applicant provide appropriate demographic information as it applies to the State where the Lifespan Respite Program will be implemented?
 3. Is the proposed project justified in terms of the most recent, relevant, and available information and knowledge?

b. Approach

Weight: 30points

i. Goals/Objectives (5 points)

1. Has the applicant stated clear and meaningful goals and objectives for the proposed program as well as problems that relate to the proposed program?
2. Are the goals and objectives reasonable and likely to be achieved?
3. Does the project take into account barriers and opportunities that exist in the larger environment that may impact on the project's success?
4. Does the intervention optimize the use of potential partnerships with other organizations and/or consumer groups, as appropriate?

ii. Work Plan/Management Plan (5 points)

1. Is the project work plan clear and comprehensive?
2. Does the work plan include sensible and feasible timeframes for the accomplishment of tasks presented?
3. Does the work plan include specific objectives and tasks that are linked to measurable outcomes?
4. Does the proposal include a clear and coherent management plan, including plans for administration, collaboration and coordination of respite care activities with other related services or programs offered by public or private nonprofit entities, including AAAs and other respite care organizations?
5. Are the roles and responsibilities of project staff, consultants and partners clearly delineated and linked to specific objectives and tasks?
6. Are the qualifications of the project staff, consultants and/or partners, and the proposed level of effort, adequate to carryout the project?

iii. Methods of Addressing the Problem (10 points)

1. Has the applicant described a coherent approach to implementing Lifespan Respite Care program that would successfully address the problems described?
2. Has the applicant adequately described the plan for using funds to improve coordination, access to, and distribution of respite care services for family caregivers of children and adults with special needs?
3. Has the applicant adequately described the criteria to be used to identify family caregivers eligible for respite services?
4. Based on the information provided by the applicant, is it likely the approach will achieve the specified goals?

iv. Coordination and Linkages (10 points)

1. Does the application detail the means by which the State respite coalition/organization and the ADRC will work collaboratively with the grantee in designing, implementing and managing the program?

2. Does the application describe how state and/or local community-based organizations will be involved in a meaningful way in the planning and implementation of the Lifespan Respite Program?
3. Does the applicant demonstrate inclusion of the full range of age and disability populations in the planning and implementation of the Lifespan Respite Program?
4. Does the proposed project include all eligible population groups, including disadvantaged and limited-English speaking populations in its targeting?
5. Does the application describe the plan for administering, collaborating and coordinating respite care activities in the state with other related programs and services?
6. Does the Memorandum of Understanding included in the application provide for adequate flexibility to modify parameters agreed to by the Eligible State Agency and the Respite Coalition/organization?

c. Budget

Weight: 10 points

i. Budget Adequacy, Scope and Applicability (10 points)

1. Is the budget justified with respect to the adequacy and reasonableness of resources requested?
2. Is the scope of project activities consistent with the resources requested?
3. Is the time commitment of the proposed director and other key project personnel sufficient to assure proper direction, management and timely completion of the project?
4. Are the budget amounts proposed for personnel proportionate to other activities, given the scope of the proposal?
5. Are budget line items clearly delineated and consistent with work plan objectives?

d. Project Impact

Weight: 20 points

i. Project Outcomes (5 points)

1. Are the expected project benefits/results clear, realistic, and consistent with the objectives and purpose of the project?
2. Are the proposed outcomes quantifiable and measurable, consistent with the definition of a project outcome contained in Attachment E of the Program Announcement?
3. Are the anticipated outcomes of the proposed project likely to be achieved and will they significantly benefit the populations affected by the intervention, and the field as a whole?

ii. Project Evaluation (5 points)

1. Does the project evaluation reflect a thoughtful and well-designed approach that will be able to successfully measure whether or not the project has achieved its proposed outcome(s)?
2. Does the plan include the qualitative and/or quantitative methods necessary to reliably measure outcomes?
3. Is the evaluation also designed to capture “lessons learned” from the overall effort that might be of use to others in the field, especially those who might be interested in replicating the project?
4. Will the evaluation permit a determination of whether objectives have been

achieved?

5. Does the applicant describe how the quality and safety of respite care services will be monitored, including methods to ensure appropriate screening of workers?

iii. Sustainability (7 points)

1. Is there a plan to make use, to the maximum extent possible, other Federal, state and local funds, programs, contributions, other forms of reimbursement, personnel, and facilities to expand and enhance availability of respite services?
2. Is there a clear plan for sustainability of the Program, beyond Federal funding?
3. Is there a realistic plan to try to secure resources to continue program activities after Federal financial assistance has ended?

iv. Dissemination (3 points)

1. Will the dissemination plan get relevant and easy to use information about respite care services, worker recruitment and training, and programs for family caregivers, including training, in a timely manner to parties that might be interested in making use of its findings, particularly to those who might want to replicate the project?
2. Does the dissemination plan include multiple means for delivering information, including electronic, print and web based methods?

e. Organizational Capacity

Weight: 20 points

i. Project Staffing and Qualifications (10 points)

1. Does the applicant organization clearly identify their capacity for carrying out the proposed project and evaluation?
2. Do the proposed project director(s), key staff and consultants have the background, experience, and other qualifications required to carry out their designated roles?
3. Are letters from participating organizations included, as appropriate, and do they express the clear commitment and areas of responsibility of those organizations, consistent with the work plan description of their intended roles and contributions?

ii. Organization and Management (10 points)

1. Does the applicant demonstrate the commitment to lead the project?
2. Does the application adequately describe the agency's ability to work with other state and community based agencies?
3. Does the applicant's proposed approach for working with public and private non-profit state respite coalitions/organizations seem feasible?
4. Does the applicant demonstrate an understanding of respite care and family caregiver issues across all age groups, disabilities, and chronic conditions?
5. Does the applicant demonstrate capacity and commitment to ensuring meaningful involvement of family members, family caregivers, and care recipients?
6. Does the applicant demonstrate the commitment to implement the program so as to serve all age groups, disability populations without preference for

- select demographic or disability groups?
7. Do the proposed project director(s), key staff and consultants have the background, experience, and other qualifications required to carry out their designated roles?
 8. Are letters from participating organizations included, as appropriate, and do they express the clear commitment and areas of responsibility of those organizations, consistent with the work plan description of their intended roles and contributions?
 9. Are assurances in place that the grantee will have a system for maintaining confidentiality of care recipient and family caregiver records?

B. Review and Selection Process

An independent review panel of at least three individuals will evaluate applications that pass the screening and meet the responsiveness criteria if applicable. These reviewers are experts in their field, and are drawn from academic institutions, non-profit organizations, state and local government, and Federal government agencies. Based on the Application Review Criteria as outlined under section V.1, the reviewers will comment on and score the applications, focusing their comments and scoring decisions on the identified criteria.

Final award decisions will be made by the Assistant Secretary for Aging (ASA). In making these decisions, the ASA will take into consideration: recommendations of the review panel; reviews for programmatic and grants management compliance; the reasonableness of the estimated cost to the government considering the available funding and anticipated results; and the likelihood that the proposed project will result in the benefits expected.

Applicants have the option of omitting from the application specific salary rates or Social Security Numbers for individuals specified in the application budget.

VI. AWARD ADMINISTRATION INFORMATION

A. Award Notices

Successful applicants will receive an electronic Notice of Award. The Notice of Award is the authorizing document from the U.S. Administration on Aging authorizing official, Officer of Grants Management, and the AoA Office of Budget and Finance. Unsuccessful applicants are **generally** notified within 30 days of the final funding decision and will receive a disapproval letter via e-mail or U.S. mail.

B. Administrative and National Policy Requirements

The award is subject to DHHS Administrative Requirements, which can be found in 45CFR Part 74 and 92 and the Standard Terms and Conditions implemented through the HHS Grants Policy Statement located at <http://www.hhs.gov/grantsnet/adminis/gpd/index.htm> .

C. Reporting

Instructions for annual financial and semi-annual program performance reports will be included with the award packets sent to successful applicants. An original and two copies of the financial report and the AoA program progress report are requested. Awardees will receive instructions for both reports with their Notice of Financial Assistance Award. Final performance and financial reports are due 90 days after the end of the project period. For more information see DHHS / AoA Standard Terms and Conditions.

Grantees are required to submit a quarterly Federal Cash Transaction Report (SF-272) to the Payment Managements System as identified in their award documents for the calendar quarters ending 3/31, 6/30, 9/30, and 12/31 through the life of their award. In addition, a Financial Status Report (SF-269) will be required as denoted in the Notice of Award. Please Note: HHS is transitioning to the combined Federal Financial Report (FFR) known as the SF-425, which will replace the Financial Status SF-269 and Federal Cash Transaction Report SF-272. HHS/AOA will provide further guidance implementing the use of the new form at a later date.

VII. AGENCY CONTACTS

Project Officer:

U.S. Department of Health and Human Services
Administration on Aging
Washington, DC 20201
Attn: Greg Link, Aging Services Program Specialist
Telephone: (202) 357-3545
e-mail: greg.link@aoa.hhs.gov

Grants Management Officer:

U.S. Department of Health and Human Services
Administration on Aging
Washington, DC 20201
Attn: Rebecca Mann
Telephone: (202) 357-3423
e-mail: grants.office@aoa.hhs.gov

VIII. OTHER INFORMATION

A. Application Elements

SF 424 – Application for Federal Assistance (See Attachment A for Instructions).

SF 424A – Budget Information. (See Attachment A for Instructions).

Separate Budget Narrative/Justification (See Attachments B and C for a Budget Narrative/Justification Sample Format with Examples and a Sample

Template).

NOTE: Applicants requesting funding for multi-year grant projects are REQUIRED to provide a combined multi-year Budget Narrative/Justification, as well as a detailed Budget Narrative/Justification for each year of potential grant funding. Also, when more than 33% of a project's total budget is listed in the contractual line item, detailed Budget Narratives/Justifications are REQUIRED for each sub-contractor or sub-grant for each year of potential grant funding.

SF 424B – Assurances. Note: Be sure to complete this form according to instructions and have it signed and dated by the authorized representative (see item 18d on the SF 424).

Lobbying Certification

Proof of non-profit status, if applicable

Copy of the applicant's most recent indirect cost agreement, if requesting indirect costs. If any sub-contractors or sub-grantees are requesting indirect costs, copies of their indirect cost agreements must also be included with the application.

Project Narrative with Work Plan (See Attachment D for Sample Work Plan Format).

Organizational Capability Statement and Vitae for Key Project Personnel.

Letters of Commitment from Key Partners.

“Survey on Ensuring Equal Opportunity for Applicants” (Optional non-profit Applicants)

B. The Paperwork Reduction Act of 1995 (P.L. 104-13)

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The project description and Budget Narrative/Justification is approved under OMB control number 0985-0018 which expires on 5/31/10.

Public reporting burden for this collection of information is estimated to average 10 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed and reviewing the collection information.

ATTACHMENTS

**Attachment A:
Instructions for Completing Required Forms
(SF 424, Budget (SF 424A), Budget Narrative/Justification)**

**Attachment B:
Budget Narrative/Justification Format – Sample Format with Examples**

**Attachment C:
Budget Narrative/Justification – Sample Template**

**Attachment D:
Project Work Plan - Sample Template**

**Attachment E:
Instructions for Completing the Summary/Abstract**

Attachment A: Instructions for Completing Required Forms (SF 424, Budget (SF 424A), Budget Narrative/Justification)

This section provides step-by-step instructions for completing the four (4) standard Federal forms required as part of your grant application, including special instructions for completing Standard Budget Forms 424 and 424A. Standard Forms 424 and 424A are used for a wide variety of Federal grant programs, and Federal agencies have the discretion to require some or all of the information on these forms. AoA does not require all the information on these Standard Forms. Accordingly, please use the instructions below in lieu of the standard instructions attached to SF 424 and 424A to complete these forms.

a. Standard Form 424

1. **Type of Submission:** (Required): Select one type of submission in accordance with agency instructions.

- Preapplication
- Application
- Changed/Corrected Application – If AoA requests, check if this submission is to change or correct a previously submitted application.

2. **Type of Application:** (Required) Select one type of application in accordance with agency instructions.

- New
- Continuation
- Revision

3. **Date Received:** Leave this field blank.

4. **Applicant Identifier:** Leave this field blank

5a **Federal Entity Identifier:** Leave this field blank

5b. **Federal Award Identifier:** For new applications leave blank. For a continuation or revision to an existing award, enter the previously assigned Federal award (grant) number.

6. **Date Received by State:** Leave this field blank.

7. **State Application Identifier:** Leave this field blank.

8. **Applicant Information:** Enter the following in accordance with agency instructions:

a. Legal Name: (Required): Enter the name that the organization has registered with the Central Contractor Registry. Information on registering with CCR may be obtained by visiting the Grants.gov website (<http://www.grants.gov>).

b. Employer/Taxpayer Number (EIN/TIN): (Required): Enter the Employer or Taxpayer Identification Number (EIN or TIN) as assigned by the Internal Revenue Service.

c. Organizational DUNS: (Required) Enter the organization's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained by visiting the Grants.gov website (<http://www.grants.gov>).

d. Address: (Required) Enter the complete address including the county.

e. Organizational Unit: Enter the name of the primary organizational unit (and department or division, if applicable) that will undertake the project.

f. Name and contact information of person to be contacted on matters involving this application: Enter the name (First and last name required), organizational affiliation (if affiliated with an organization other than the applicant organization), telephone number (Required), fax number, and email address (Required) of the person to contact on matters related to this application.

9. Type of Applicant: (Required) Select the applicant organization "type" from the following drop down list.

A. State Government B. County Government C. City or Township Government D. Special District Government E. Regional Organization F. U.S. Territory or Possession G. Independent School District H. Public/State Controlled Institution of Higher Education I. Indian/Native American Tribal Government (Federally Recognized) J. Indian/Native American Tribal Government (Other than Federally Recognized) K. Indian/Native American Tribally Designated Organization L. Public/Indian Housing Authority M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education) N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education) O. Private Institution of Higher Education P. Individual Q. For-Profit Organization (Other than Small Business) R. Small Business S. Hispanic-serving Institution T. Historically Black Colleges and Universities (HBCUs) U. Tribally Controlled Colleges and Universities (TCCUs) V. Alaska Native and Native Hawaiian Serving Institutions W. Non-domestic (non-US) Entity X. Other (specify)

10. Name Of Federal Agency: (Required) Enter U.S. Administration on Aging

11. Catalog Of Federal Domestic Assistance Number/Title: The CFDA number can be found on page one of the Program Announcement.

12. Funding Opportunity Number/Title: (Required) The Funding Opportunity Number and title of the opportunity can be found on page one of the Program Announcement.

13. Competition Identification Number/Title: Leave this field blank.

14. Areas Affected By Project: List the largest political entity affected (cities, counties, state etc).

15. Descriptive Title of Applicant's Project: (Required) Enter a brief descriptive title of the project.

16. Congressional Districts Of: (Required) 16a. Enter the applicant's Congressional District, and 16b. Enter all district(s) affected by the program or project. Enter in the

format: 2 characters State Abbreviation – 3 characters District Number, e.g., CA-005 for California 5th district, CA-012 for California 12th district, NC-103 for North Carolina’s 103rd district. If all congressional districts in a state are affected, enter “all” for the district number, e.g., MD-all for all congressional districts in Maryland. If nationwide, i.e. all districts within all states are affected, enter US-all.

17. Proposed Project Start and End Dates: (Required) Enter the proposed start date and final end date of the project. Therefore, if you are applying for a multi-year grant, such as a 3 year grant project, the final project end date will be 3 years after the proposed start date. In general, all start dates on the SF424 should be the 1st of the month and the end date of the last day of the month of the final year. The Grants Officer can alter the start and end date at their discretion.

18. Estimated Funding: (Required) Enter the amount requested or to be contributed during the first funding/budget period by each contributor. If a multi-year application insert the total amount requested over the entire period. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses.

NOTE: Applicants should review cost sharing or matching principles contained in Subpart C of 45 CFR Part 74 or 45 CFR Part 92 before completing Item 18 and the Budget Information Sections A, B and C noted below.

All budget information entered under item 18 should cover the upcoming budget period. For sub-item 18a, enter the Federal funds being requested. Sub-items 18b-18e is considered matching funds. The dollar amounts entered in sub-items 18b-18f must total at least 1/3rd of the amount of Federal funds being requested (the amount in 18a). For a full explanation of AoA’s match requirements, see the information in the box below. For sub-item 18f, enter only the amount, if any, that is going to be used as part of the required match.

There are two types of match: 1) non-Federal cash and 2) non-Federal in-kind. In general, costs borne by the applicant and cash contributions of any and all third parties involved in the project, including sub-grantees, contractors and consultants, are considered **matching funds**. Generally, most contributions from sub-contractors or sub-grantees (third parties) will be non-Federal in-kind matching funds. Volunteered time and use of facilities to hold meetings or conduct project activities may be considered in-kind (third party) donations. Examples of **non-Federal cash match** includes budgetary funds provided from the applicant agency’s budget for costs associated with the project.

NOTE: Indirect charges may only be requested if: (1) the applicant has a current indirect cost rate agreement approved by the Department of Health and Human Services or another Federal agency; or (2) the applicant is a state or local government agency. State governments should enter the amount of indirect costs determined in accordance with DHHS requirements. **If indirect costs are to be included in the application, a copy of the approved indirect cost agreement must be included with the application. Further, if any sub-contractors or sub-grantees are requesting indirect costs, copies of their indirect cost agreements must also be**

included with the application.

AOA's Match Requirement

Under this and other OAA programs, AoA will fund no more than 75 % of the **project's total cost**, which means the applicant must cover at least 25% of the **project's total cost** with non-Federal resources. In other words, for every three (3) dollars received in Federal funding, the applicant must contribute at least one (1) dollar in non-Federal resources toward the project's total cost (i.e., the amount on line 18g.). This "three-to-one" ratio is reflected in the following formula which you can use to calculate your minimum required match:

Federal Funds Requested (i.e., amount on line 15a) / 3 = Minimum Match Requirement

For example, if you request \$100,000 in Federal funds, then your **minimum** match requirement is \$100,000/3 or \$33,333. In this example the **project's total cost** would be \$133,333.

A **common error** applicants make is to match 25% of the Federal share, rather than 25% of the project's total cost, so be sure to use one of the formulas above to calculate your match requirement.

If the required non-Federal share is not met by a funded project, AoA will disallow any unmatched Federal dollars.

19. Is Application Subject to Review by State Under Executive Order 12372 Process?

Check c. Program is not covered by E.O. 12372

20. Is the Applicant Delinquent on any Federal Debt? (Required) This question applies to the applicant organization, not the person who signs as the authorized representative. If yes, include an explanation on the continuation sheet.

21. Authorized Representative: (Required) To be signed and dated by the authorized representative of the applicant organization. Enter the name (First and last name required) title (Required), telephone number (Required), fax number, and email address (Required) of the person authorized to sign for the applicant. A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)

b. Standard Form 424A

NOTE: Standard Form 424A is designed to accommodate applications for multiple grant programs; thus, for purposes of this AoA program, many of the budget item columns and rows are not applicable. You should only consider and respond to the budget items for which guidance is provided below. Unless otherwise indicated, the SF 424A should reflect a one year budget.

Section A - Budget Summary

Line 5: Leave columns (c) and (d) blank. Enter TOTAL Federal costs in column (e) and total non-Federal costs (including third party in-kind contributions and any program income to be used as part of the grantee match) in column (f). Enter the sum of columns (e) and (f) in column (g).

Section B - Budget Categories

Column 3: Enter the breakdown of how you plan to use the Federal funds being requested by object class category (see instructions for each object class category below).

Column 4: Enter the breakdown of how you plan to use the non-Federal share by object class category.

Column 5: Enter the total funds required for the project (sum of Columns 3 and 4) by object class category.

Separate Budget Narrative/Justification Requirement

Applicants requesting funding for multi-year grant programs are REQUIRED to provide a combined multi-year Budget Narrative/Justification, as well as a detailed Budget Narrative/Justification for each year of potential grant funding. A separate Budget Narrative/Justification is also REQUIRED for each potential year of grant funding requested.

For your use in developing and presenting your Budget Narrative/Justification, a sample format with examples and a blank sample template have been included in these Attachments. In your Budget Narrative/Justification, you should include a breakdown of the budgetary costs for all of the object class categories noted in Section B, across three columns: Federal; non-Federal cash; and non-Federal in-kind. Cost breakdowns, or justifications, are required for any cost of \$1,000 or for the thresholds as established in the examples. The Budget Narratives/Justifications should fully explain and justify the costs in each of the major budget items for each of the object class categories, as described below. Non-Federal cash as well as, sub-contractor or sub-grantee (third party) in-kind contributions designated as match must be clearly identified and explained in the Budget Narrative/Justification. The full Budget Narrative/Justification should be included in the application immediately following the SF 424 forms.

- Line 6a: **Personnel:** Enter total costs of salaries and wages of applicant/grantee staff. Do not include the costs of consultants, which should be included under 6h - Other.
In the Justification: Identify the project director, if known. Specify the key staff, their titles, and time commitments in the budget justification.
- Line 6b: **Fringe Benefits:** Enter the total costs of fringe benefits unless treated as part of an approved indirect cost rate.
In the Justification: If the total fringe benefit rate exceeds 35% of Personnel costs, provide a break-down of amounts and percentages that comprise fringe benefit costs, such as health insurance, FICA, retirement, etc. A percentage of 35% or less does not require a break down but you must show the percentage charged for each full/part time employee.
- Line 6c: **Travel:** Enter total costs of all travel (local and non-local) for staff on the project. NEW: Local travel is considered under this cost item not under Other. Local transportation (all travel which does not require per diem is considered local travel). Do not enter costs for consultant's travel - this should be included in line 6h.
In the Justification: Include the total number of trips, number of travelers, destinations, purpose (e.g., attend conference), length of stay, subsistence allowances (per diem), and transportation costs (including mileage rates).
- Line 6d: **Equipment:** Enter the total costs of all equipment to be acquired by the project. For all grantees, "equipment" is non-expendable tangible personal property

having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. If the item does not meet the \$5,000 threshold, include it in your budget under Supplies, line 6e.

In the Justification: Equipment to be purchased with federal funds must be justified as necessary for the conduct of the project. The equipment must be used for project-related functions. Further, the purchase of specific items of equipment should not be included in the submitted budget if those items of equipment, or a reasonable facsimile, are otherwise available to the applicant or its sub-grantees.

Line 6e: **Supplies:** Enter the total costs of all tangible expendable personal property (supplies) other than those included on line 6d.

In the Justification: . For any grant award that has supply costs in excess of 5% of total direct costs (Federal or Non-Federal), you must provide a detailed breakdown of the supply items (e.g., 6% of \$100,000 = \$6,000 – breakdown of supplies needed). If the 5% is applied against \$1 million total direct costs (5% x \$1,000,000 = \$50,000) a detailed breakdown of supplies is not needed. Please note: any supply costs of \$5,000 or less regardless of total direct costs does not require a detailed budget breakdown (e.g., 5% x \$100,000 = \$5,000 – no breakdown needed).

Line 6f: **Contractual:** Regardless of the dollar value of any contract, you must follow your established policies and procedures for procurements and meet the minimum standards established in the Code of Federal Regulations (CFR's) mentioned below. Enter the total costs of all contracts, including (1) procurement contracts (except those which belong on other lines such as equipment, supplies, etc.). Note: The 33% provision has been removed and line item budget detail is not required as long as you meet the established procurement standards. Also include any contracts with organizations for the provision of technical assistance. Do not include payments to individuals on this line.

In the Justification: Provide the following three items – 1) Attach a list of contractors indicating the name of the organization; 2) the purpose of the contract; and 3) the estimated dollar amount. If the name of the contractor and estimated costs are not available or have not been negotiated, indicate when this information will be available. The Federal government reserves the right to request the final executed contracts at any time. If an individual contractual item is over the small purchase threshold, currently set at \$100K in the CFR, you must certify that your procurement standards are in accordance with the policies and procedures as stated in 45 CFR 74.44 for non-profits and 92.36 for states, in lieu of providing separate detailed budgets. This certification should be referenced in the justification and attached to the budget narrative.

Line 6g: **Construction:** Leave blank since construction is not an allowable costs for this program.

Line 6h: **Other:** Enter the total of all other costs. Such costs, where applicable, may include, but are not limited to: insurance, medical and dental costs (i.e. for project volunteers this is different from personnel fringe benefits), non-contractual fees and travel paid directly to *individual* consultants, postage, space and equipment rentals/lease, printing and publication, computer use, training and staff

development costs (i.e. registration fees). If a cost does not clearly fit under another category, and it qualifies as an allowable cost, then rest assured this is where it belongs.

In the Justification: Provide a reasonable explanation for items in this category. For example, individual consultants explain the nature of services provided and the relation to activities in the work plan or indicate where it is described in the work plan. Describe the types of activities for staff development costs.

Line 6i: **Total Direct Charges:** Show the totals of Lines 6a through 6h.

Line 6j: **Indirect Charges:** Enter the total amount of indirect charges (costs), if any. If no indirect costs are requested, enter "none." Indirect charges may be requested if: (1) the applicant has a current indirect cost rate agreement approved by the Department of Health and Human Services or another federal agency; or (2) the applicant is a state or local government agency. **State governments should enter the amount of indirect costs determined in accordance with DHHS requirements.** An applicant that will charge indirect costs to the grant must enclose a copy of the current rate agreement. Indirect Costs can only be claimed on Federal funds, more specifically, they are to only be claimed on the Federal share of your direct costs. Any unused portion of the grantee's eligible Indirect Cost amount that are not claimed on the Federal share of direct charges can be claimed as un-reimbursed indirect charges, and that portion can be used towards meeting the recipient match.

Line 6k: **Total:** Enter the total amounts of Lines 6i and 6j.

Line 7: **Program Income:** As appropriate, include the estimated amount of income, if any, you expect to be generated from this project that you wish to designate as match (equal to the amount shown for Item 15(f) on Form 424). **Note:** Any program income indicated at the bottom of Section B and for item 15(f) on the face sheet of Form 424 will be included as part of non-Federal match and will be subject to the rules for documenting completion of this pledge. If program income is expected, but is not needed to achieve matching funds, **do not** include that portion here or on Item 15(f) of the Form 424 face sheet. Any anticipated program income that will not be applied as grantee match should be described in the Level of Effort section of the Program Narrative.

Section C - Non-Federal Resources

Line 12: Enter the amounts of non-Federal resources that will be used in carrying out the proposed project, by source (Applicant; State; Other) and enter the total amount in Column (e). Keep in mind that if the match requirement is not met, Federal dollars may be reduced.

Section D - Forecasted Cash Needs - Not applicable.

Section E - Budget Estimate of Federal Funds Needed for Balance of

the Project

Line 20: Section E is relevant for multi-year grant applications, where the project period is 24 months or longer. This section does not apply to grant awards where the project period is less than 17 months.

Section F - Other Budget Information

Line 22: Indirect Charges: Enter the type of indirect rate (provisional, predetermined, final or fixed) to be in effect during the funding period, the base to which the rate is applied, and the total indirect costs. Include a copy of your current Indirect Cost Rate Agreement.

Line 23: Remarks: Provide any other comments deemed necessary.

c. Standard Form 424B - Assurances

This form contains assurances required of applicants under the discretionary funds programs administered by the Administration on Aging. Please note that a duly authorized representative of the applicant organization must certify that the organization is in compliance with these assurances.

d. Certification Regarding Lobbying

This form contains certifications that are required of the applicant organization regarding lobbying. Please note that a duly authorized representative of the applicant organization must attest to the applicant's compliance with these certifications.

Proof of Non-Profit Status

Non-profit applicants must submit proof of non-profit status. Any of the following constitutes acceptable proof of such status:

- A copy of a currently valid IRS tax exemption certificate.
- A statement from a State taxing body, State attorney general, or other appropriate State official certifying that the applicant organization has a non-profit status and that none of the net earnings accrue to any private shareholders or individuals.
- A certified copy of the organization's certificate of incorporation or similar document that clearly establishes non-profit status.

Indirect Cost Agreement

Applicants that have included indirect costs in their budgets must include a copy of the current indirect cost rate agreement approved by the Department of Health and Human Services or another Federal agency. This is optional for applicants that have not included indirect costs in their budgets.

Attachment B: Budget Narrative/Justification – Page 1 – Sample Format

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	TOTAL	Justification
Personnel	\$47,700	\$23,554	\$0	\$71,254	<p>Federal Project Director (name) = .5 FTE @ \$95,401/yr = \$47,700</p> <p>Non-Fed Cash Officer Manager (name) = .5FTE @ \$47,108/yr = <u>\$23,554</u></p> <p>Total \$71,254</p>
Fringe Benefits	\$17,482	\$8,632	\$0	\$26,114	<p>Federal Fringe on Project Director at 36.65% = \$17,482 FICA (7.65%) Health (25%) Dental (2%) Life (1%) Unemployment (1%)</p> <p>Non-Fed Cash Fringe on Office Manager at 36.65% = \$8,632 FICA (7.65%) Health (25%) Dental (2%) Life (1%) Unemployment (1%)</p>
Travel	\$4,707	\$2,940	\$0	\$7,647	<p>Federal Local travel: 6 TA site visits for 1 person Mileage: 6RT @ .585 x 700 miles \$2,457 Lodging: 15 days @ \$110/day \$1,650 Per Diem: 15 days @ \$40/day <u>\$600</u> Total \$4,707</p> <p>Non-Fed Cash Travel to National Conference in (Destination) for 3 people Airfare 1 RT x 3 staff @ \$500 \$1,500 Lodging: 3 days x 3 staff @ \$120/day \$1,080 Per Diem: 3 days x 3 staff @ \$40/day <u>\$360</u> Total \$2,940</p>

Attachment B: Budget Narrative/Justification – Page 2 – Sample Format

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	TOTAL	Justification
Equipment	\$10,000	\$0	\$0	\$10,000	<p><i>No Equipment requested OR:</i></p> <p>Call Center Equipment Installation = \$5,000 Phones = <u>\$5,000</u> Total \$10,000</p>
Supplies	\$3,700	\$5,784	\$0	\$9,484	<p>Federal</p> <p>2 desks @ \$1,500 \$3,000 2 chairs @ \$300 \$600 2 cabinets @ \$200 \$400</p> <p>Non-Fed Cash</p> <p>2 Laptop computers \$3,000 Printer cartridges @ \$50/month \$300 Consumable supplies (pens, paper, clips etc...) @ \$182/month <u>\$2,184</u> Total \$9,484</p>
Contractual	\$30,171	\$0	\$0	\$30,171	<p>(organization name, purpose of contract and estimated dollar amount)</p> <p>Contract with AAA to provide respite services: 11 care givers @ \$1,682 = \$18,502 Volunteer Coordinator = <u>\$11,669</u> Total \$30,171</p> <p><i>If contract details are unknown due to contract yet to be made provide same information listed above and: A detailed evaluation plan and budget will be submitted by (date), when contract is made.</i></p>

Attachment B: Budget Narrative/Justification – Page 3 – Sample Format

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	TOTAL	Justification
Other	\$5,600	\$0	\$5,880	\$11,480	<p>Federal</p> <p>2 consultants @ \$100/hr for 24.5 hours each = \$4,900</p> <p>Printing 10,000 Brochures @ \$.05 = \$500</p> <p>Local conference registration fee (name conference) = <u>\$200</u></p> <p>Total = \$5,600</p> <p>In-Kind</p> <p>Volunteers</p> <p>15 volunteers @ \$8/hr for 49 hours = \$5,880</p>
Indirect Charges	\$20,934	\$0	\$0	\$20,934	<p>21.5 % of salaries and fringe = \$20,934</p> <p>IDC rate is attached.</p>
TOTAL	\$140,294	\$40,910	\$5,880	\$187,084	

Attachment C: Budget Narrative/Justification — Sample Template

Object Class Category	Federal Funds	Non-Federal Cash	Non-Federal In-Kind	TOTAL	Justification
Personnel					
Fringe Benefits					
Travel					
Equipment					
Supplies					
Contractual					
Other					
Indirect Charges					
TOTAL					

Attachment D: Project Work Plan, Page 1 – Sample Template

Goal:

Measurable Outcome(s):

* **Time Frame** (Start/End Dates by Month in Project Cycle)

Major Objectives	Key Tasks	Lead Person	1*	2*	3*	4*	5*	6*	7*	8*	9*	10*	11*	12*
1.														
2.														

Attachment D: Project Work Plan, Page 2 – Sample Template

Goal:

Measurable Outcome(s):

* **Time Frame** (Start/End Dates by Month in Project Cycle)

Major Objectives	Key Tasks	Lead Person	1*	2*	3*	4*	5*	6*	7*	8*	9*	10*	11*	12*
3.														
4.														

Attachment D: Project Work Plan, Page 3 – Sample Template

Goal:

Measurable Outcome(s):

* **Time Frame** (Start/End Dates by Month in Project Cycle)

Major Objectives	Key Tasks	Lead Person	1*	2*	3*	4*	5*	6*	7*	8*	9*	10*	11*	12*
5.														
6.														

NOTE: Please do not infer from this sample format that your work plan must have 6 major objectives. If you need more pages, simply repeat this format on additional pages.

Attachment E: Instructions for Completing the Project Summary/Abstract

- All applications for grant funding must include a Summary/Abstract that concisely describes the proposed project. It should be written for the general public.
- To ensure uniformity, please limit the length to no more than 265 words on a single page with a font size of not less than 11, doubled-spaced.
- The abstract must include the project's goal(s), objectives, overall approach (including target population and significant partnerships), anticipated outcomes, products, and duration. The following are very simple descriptions of these terms, and a sample Compendium abstract.

Goal(s) – broad, overall purpose, usually in a mission statement, i.e. what you want to do, where you want to be

Objective(s) – narrow, more specific, identifiable or measurable steps toward a goal. Part of the planning process or sequence (the “how”). Specific performances which will result in the attainment of a goal.

Outcomes - measurable results of a project. Positive benefits or negative changes, or measurable characteristics that occur as a result of an organization's or program's activities. (outcomes are the end-point)

Products – materials, deliverables.

- A model abstract/summary is provided below:

The grantee, Okoboji University, supports this three year Dementia Disease demonstration (DD) project in collaboration with the local Alzheimer's Association and related Dementias groups. The **goal** of the project is to provide comprehensive, coordinated care to individuals with memory concerns and to their caregivers. The approach is to expand the services and to integrate the bio-psycho-social aspects of care. The **objectives** are: 1) to provide dementia specific care, i.e., care management fully integrated into the services provided; 2) to train staff, students and volunteers; 3) to establish a system infrastructure to support services to individuals with early stage dementia and to their caregivers; 4) to develop linkages with community agencies; 5) to expand the assessment and intervention services; 6) to evaluate the impact of the added services; 7) to disseminate project information. The expected **outcomes** of this DD project are: patients will maintain as high a level of mental function and physical functions (thru Yoga) as possible; caregivers will increase ability to cope with changes; and pre and post – project patient evaluation will reflect positive results from expanded and integrated services. The **products** from this project are: a final report, including evaluation results; a website; articles for publication; data on driver assessment and in-home cognitive retraining; abstracts for national conferences.