Administration for Community Living

Center for Integrated Programs

Lifespan Respite Care Program: Grants to New States
HHS-2017-ACL-CIP-LRLR-0209
Application Due Date: 06/14/2017
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Executive Summary

The Administration for Community Living (ACL) is providing this competitive grants opportunity to eligible state agencies for implementing the requirements of the Lifespan Respite Care Act of 2006 (P.L.109-442). ACL will fund up to two (2) cooperative agreements, with a federal funding level of up to $200,000 per award for a 36-month project and budget period.

Eligible state agencies funded under this announcement shall use grant funds for planning, establishing and/or expanding, and 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.

This is a limited grant competition. By statute, awards may only be made to eligible state agencies that administer the State's program under the Older Americans Act of 1965; or, that administer the State's program under Title XIX of the Social Security Act; or, are designated by the governor of a state to administer the program activities described in this Announcement.

The grant competition is further limited as follows: Only those states not previously funded under the Lifespan Respite Care Program at any time from fiscal year 2009 through fiscal year 2016 are eligible to apply for funding available under this Announcement.

All applicants must demonstrate the support and active involvement of a range of governmental and non-governmental 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 or inclusive of all ages, populations, disabilities and chronic conditions 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

Purpose
The Administration for Community Living (ACL) is providing this competitive grants opportunity to assist eligible state agencies with implementation of the requirements of the Lifespan Respite Care Act of 2006 (P.L. 109-442). Eligible State agencies receiving funding under this Announcement will work through aging and disability resource centers (ADRCs)/No Wrong Door systems and in collaboration with state respite organizations and/or coalitions to enhance and expand the availability of lifespan respite services.

Successful applicants will be required to establish or expand state and local coordinated Lifespan Respite Care systems to serve family caregivers regardless of the age, disability or chronic condition 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 (including grandparents of any age who are primary caretakers of children or adult with special needs), 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 (collectively referred to as family members). Further, all programs must, from the outset, address the respite needs of all populations regardless of the age and/or disability/special needs of the care recipient populations. No phase-in or preference for specific age groups or disability categories will be permitted.

Applicants 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 success will be selected for funding. Applications will be evaluated on the extent to which each of the required elements described in this Announcement is addressed in the application narratives and supporting documents.

Background

Who are caregivers?
Caregivers are often referred to as the backbone of America’s long-term care system. On a daily basis, family caregivers assist relatives and other loved ones with a broad range of tasks ranging from routine to complex. According to the 2015 Report, Caregiving in the U.S., an estimated 43.5 million adults in the United States have provided unpaid care to an adult or a child in the prior 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. While the spectrum of individuals classified as “family caregivers” is diverse, several key factors come into play when considering the best ways to support them in their roles:

- Family caregivers perform tasks ranging from administrative tasks such as bill paying and household management to providing complex medical care to their loved ones;[2]
- Family caregivers often do not recognize that they are caregivers and, instead, view what they are doing as fulfilling a familial role;
- Once caregivers recognize themselves as such, they often reach out for help too late;
- When caregivers ask for assistance like respite care, they often encounter fragmented, narrowly targeted programs or are unable to afford the respite options available to them;[3] and
- Many family caregivers lack sufficient information about where to find supportive services, including respite, or how to choose from among the available options.

What is Respite?
Respite is temporary relief for caregivers from the ongoing responsibility of caring for an individual of any age with special needs. Respite is intended to strengthen the family system while protecting the health and well-being of both the caregiver and the care recipient and is a key component of long-term care services.

Currently, several Federal, state and private funding streams support, or have the potential to support, planned and emergency or crisis respite care for caregivers. Each program typically contains specific eligibility requirements in order to receive services, potentially creating difficulties in accessing services and gaps in service availability. For example, the National Family Caregiver Support Program (NFCSF) is designed to address difficulties and service gaps, providing a range of services to meet the diverse needs of caregivers, including respite, access to assistance and caregiver training and education. Section 1915(c) and 1115 Medicaid waivers also include provisions for respite care and permit states to include a respite option in their Medicaid waiver service package. In recent years, the U.S. Department of Veterans Affairs (VA) has increasingly focused on providing a range of services, including respite, to family members caring for Veterans of past and present conflicts. Additionally, there are demonstration projects, model grants and other initiatives that include respite care for families of children with developmental disabilities.

The disparate nature of both funding streams and eligibility requirements for respite programs may result in long waiting lists or complex bureaucratic application processes and/or eligibility requirements that are difficult for families to navigate. Even if families have sufficient resources available to pay for respite, they often encounter difficulties finding suitable providers able to deliver respite in a manner appropriate to accommodate their needs. The need to coordinate the availability and dissemination of information about respite programs, identify and fill gaps in available respite options, recruit and train respite providers and volunteers, and improve the overall quality of available respite resources is a central component of the Lifespan Respite Care Act of 2006.

The Lifespan Respite Care Act – Overview

The Lifespan Respite Care Act (the 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 a system brings 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 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 Act seeks to expand and enhance respite services in the states. Second, multiple respite programs are often funded through a variety of sources in the states. The Act is designed to improve coordination and dissemination of service delivery between the various programs. Third, consumers may experience difficulties in navigating the multiple respite programs that exist. The Act seeks to improve access to programs by streamlining the means by which consumers access them and by filling service gaps where necessary. Finally, by expanding and enhancing respite services, and improving coordination and access, the 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 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 levels. The implementation of the Act should 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: https://www.congress.gov/congressional-report/109th-congress/house-report/716?q=%7B%22search%22%3A%5B%22Lifespan+Respite+Act+of+2006%22%5D%7D

Current Program Status
Lifespan Respite Programs have been in existence in states since the 1990’s. Several state lifespan respite care programs came into existence through state legislation while others relied on the commitments and activities of a dedicated group of volunteers to implement a program without authorizing legislation. The early efforts by states helped to create community-based networks of local partnerships, including family caregivers, providers, state and federally funded programs, area agencies on aging, non-profit organizations, health services, local businesses and faith-based organizations all working to ensure capacity of available respite and related services. These programs were the precursors to the Federal program created in 2006 with the passage of the Lifespan Respite Care Act.

Status of the Federal Lifespan Respite Care Program

ACL began implementing the Lifespan Respite Care Program in 2009. Congress appropriated approximately $3.3 million for grants to eligible State agencies to implement the Federal Lifespan Respite Care Program. To date, ACL has funded 35 states and Washington, D.C. to develop and implement Lifespan Respite Care Program.

Grantees have made considerable progress towards building sustainable programs capable of meeting the respite care needs of caregivers across the lifespan.[4] Since 2009, many states have performed needs assessments and environmental scans to determine the respite funding streams available, existing programs providing respite services, quantitative and qualitative data collection, populations served and service gaps; broadened stakeholder collaborations to ensure representation of all ages, disabilities and chronic conditions; and initiated a range of activities to develop comprehensive and sustainable lifespan respite programs, including:

- Developing and adapting statewide respite plans and/or policies to guide further development of respite and caregiver support programs;
- Outreach and education initiatives targeted to caregivers;
- Integrating lifespan respite principles and practice into other statewide long-term services and supports (LTSS) initiatives designed to improve systems and services for individuals of all ages with disabilities and their family caregivers;
- Developing, expanding and enhancing ADRC databases and web sites to make respite information and access more easily attainable;
- Addressing the emergency respite needs of family caregivers;
- The development and implementation of person-centered respite voucher programs;
- Working with the faith-based organizations to develop community-wide respite options; and
- Increasing the workforce available to provide respite by recruiting, training and retaining volunteers to fill gaps in respite services.

Activities and Recommended Approaches:

The overarching goal of this FOA is to support the development, implementation and integration of the requirements of the Lifespan Respite Care Act of 2006. To that end, ACL will only 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.

Applicants are expected to propose how they will accomplish the priorities and the "Additional Application Elements" described below. Applicants are encouraged to consider a broad range of possible approaches, strategies and partnerships in carrying out program priorities.

Application narratives 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 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.

Applicants 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 evidence based, quality 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 FOA may be used to develop a range of optional services, including:

• Training for family caregivers to assist family caregivers in making informed decisions such as, "choosing and controlling their services through decision-making" about respite care services;
• Other services essential to the provision of respite care; or
• Training and education for new caregivers

Additional Application Elements

ACL understands that the current status of program development varies from state to state. ACL also recognizes that not all states will start from the same place in designing or bringing to scale and integrating their programs. Therefore, all proposals will be evaluated based on the extent of the progress a state expects to make under the grant in building upon previous projects. Applicants will be required to fully describe their state’s present capacity to deliver Lifespan Respite and how proposed new activities build upon and strengthen those capacities.

All applicants must propose projects that implement the required services specified by the Lifespan Respite Care Act as described above, while demonstrating:

1. An 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.

   Applicants must fully describe the needs of the caregiver population and the current respite infrastructure in the state. The proposed intervention must also 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, Project Narrative section of this Announcement for a full description of legislatively mandated application narrative elements.

2. How proposed programs will help families choose and control their services and better navigate the respite care system and gain access to the programs most appropriate for their needs. Lifespan Respite Care Programs should assist families by first identifying current respite funding streams in the State and assist families with eligibility determination. Families who do not previously qualify for any existing respite programs or services may have those services paid for by the Lifespan Respite Care Program. Therefore, applicants should describe how proposed activities will further enable families to choose, control and navigate available service options and gain access to those services.

3. How all family members, regardless of age or disability will be served. All family members, regardless of the age, disability or chronic condition of their loved ones, should be able to access a Lifespan Respite Care Program to obtain information on how and where to find respite services and providers from among those currently existing.
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.

For the purpose of this Program Announcement, family 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.

All activities proposed in response to this Announcement must, from the outset, address the respite needs of all age and disability/special needs populations. To that end, applicants must describe their plan for serving all age groups and disability categories, without preference for a select demographic group or disability population. No phase-in or preferences for age groups or disability categories will be permitted.

4. Stakeholder collaboration, partnerships and consumer inclusion. The Lifespan Respite Care Act is designed to facilitate coordination of respite programs in the state, reduce or eliminate duplication of effort and assist in the development of the statewide respite care infrastructure. Grantees will be required to coordinate with existing public or private respite care programs and should demonstrate the broadest possible collaboration with relevant respite and other stakeholders from across the age and disability spectrum. Applications must include a description of the eligible State agency’s:

- Ability to work with other State and community-based agencies, such as, disabilities and/or behavioral health services agencies, Centers for Independent Living and other community-based agencies or faith-based initiatives supporting aging adults and people with disabilities;
- 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 from a person-centered and family centered perspective.

Applications should clearly demonstrate via letters of support and other mechanisms, the commitment of key state and local organizations and stakeholders from across the age and disability spectrum as full partners in the design, implementation, and evaluation of the Lifespan Respite Program. Such organizations might include but are not limited to:

- State government agencies providing human services programs across the age and disability spectrum of which respite may (or may not) be a component service (e.g., Medicaid, National Family Caregiver Support Program);
- 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.

Grantees must propose how they will carry out the activities of their programs in collaboration with a non-profit statewide respite coalition and the Aging and Disability Resource Center (ADRC)/No Wrong Door (NWD) system. Applicants should detail the means by which the respite coalition/organization and the ADRC/NWD will work collaboratively in designing, implementing and managing the program.

IMPORTANT! A memorandum of agreement regarding the joint responsibility for the development of the state’s lifespan respite program between the eligible State agency and the public or private nonprofit statewide respite coalition or organization must be in place at the time of application and submitted with the application. Applicants are encouraged to embed flexibility within the MOU so that all parties to the Agreement can modify scope, tasks or partnerships as the need arises. A copy of such memorandum must be included as part of ALL application packages.
5. Sustainability. The ultimate goal of this funding opportunity is to realize the development of functioning and sustainable state Lifespan Respite Care Programs. Therefore, applications will be scored on the extent to which a plan for the project’s sustainability is articulated. Applicants are encouraged to consider a range of materials and resources for developing sustainable programs that may be found on the Lifespan Respite Technical Assistance Center at: https://lifespanrespite.wildapricot.org/Sustainability_Tools/

Products

Grantees will be doing much to advance Lifespan Respite Care Programs at the state and local level. As such, grantees’ experiences during the course 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 will be asked to submit to ACL and the ACL Lifespan Respite Technical Assistance Center, key products that can serve as resource guides for future Lifespan Respite Care Program development, enhancement, and expansion.

Grantees are 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) caregiver assessment and satisfaction instruments and other grant-related tools and resources. Copies of all final products are to be submitted to ACL at the conclusion of the grant.

Semi-Annual Reporting and Project Evaluation

Performance measurement, reporting, and project evaluation are key components of program design and implementation. Based upon work of past, current and future grantees, ACL will likely be developing and seeking OMB clearance for a new reporting format that specifically captures the accomplishments and impacts of the Lifespan Respite Care Program. Applicants should be aware that, if funded, reporting requirements in terms of templates used and information required could change midway through the project period. Should that happen, ACL will work closely with grantees to ensure a full understanding of, and transition to, the new reporting requirements.

In 2014, the ACL Lifespan Respite Technical Assistance Center developed a document to assist current and future Lifespan Respite grantees conceptualize, develop, and implement useful performance metrics. The document is titled: "Measuring Systems Change and Consumer Outcomes: Recommendations for Developing Performance Metrics for State Lifespan Respite Programs" and can be accessed at: https://archrespite.org/images/docs/2014_Guidebooks/PerformanceMeasurementGuide_web.pdf. Applicants are encouraged to review the document and consider this information when identifying outcomes to be pursued under this FOA.

If funded, applicants will be expected to submit program and progress reports semi-annually using standard ACL templates and processes. Semi-annual reports will include information on project accomplishments, challenges, progress towards measurable outcomes and products developed. When reporting accomplishments, grantees may wish to employ a range of strategies for measuring and reporting progress on systems development, family caregivers served, and partnership and stakeholder involvement and other relevant outcomes. Additionally, because these grants will be forward funded, grantees will be expected to report semi-annually on the specific progress towards each of the project’s goals and objectives.

The ACL Project Officer and grantee staff and partners (as appropriate) will meet at least semi-annually by phone to 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 stakeholder organizations about those issues of importance to Lifespan Respite Care Programs nationwide.

Finally, applications will be scored on the extent to which a robust project evaluation is undertaken.
Evaluations should, at a minimum, determine the effectiveness and impacts of the strategies and processes used for execution of project goals at both the systems development and consumer (service provision) levels.

**Participation in Technical Assistance Efforts**

Grantees will be expected to participate in technical assistance activities as they pertain to Lifespan Respite Care Program development, management, and integration. 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 ACL Project Officer, the Lifespan Respite Program Technical Assistance Resource Center, or as requested by the grantee and stakeholders themselves.

Additionally, grantees are strongly 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.

**Grants and Subcontracts**

Grantees may carry out the required and optional activities described above directly or by sub-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, the need to subcontract any specific grant activities. In addition to describing the reasons why sub-awards might be needed, applicants should outline their processes for subcontracting these activities. Applicants should also clearly describe the role of the project director along with the stakeholder group that will guide the design and implementation of the Lifespan Respite Care Program in the state.

**Endnotes:**


[4] For more information about the current Lifespan Respite Care Program grantees and their activities, please visit ACL’s web site at: http://www.acl.gov/Programs/CIP/OCASD/LifespanRespite/index.aspx

**Statutory Authority**

The Administration for Community Living (ACL) is providing this competitive grants opportunity to eligible state agencies for implementing the requirements of the Lifespan Respite Care Act of 2006 (P.L. 109-442).

**II. Award Information**

<table>
<thead>
<tr>
<th>Funding Instrument Type:</th>
<th>Cooperative Agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated Total Funding:</td>
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<td>Expected Number of Awards:</td>
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</table>
Award Ceiling:  $200,000 Per Project Period
Award Floor:  $200,000 Per Project Period
Length of Project Period:  Other

36 month project and budget period, forward funded.

Based on the availability of funding, ACL plans to fund up to two (2) grants under this opportunity, with a federal funding level of up to $200,000 per award for a 36-month project and budget award. Funding will be allocated in total at the time of award. Grantees shall use funds under this funding opportunity for the purposes of planning and establishing Lifespan Respite Care systems, as outlined in the Lifespan Respite Care Act of 2006.

Funding decisions are at the discretion of the Administrator for ACL. Only those applications ranking the highest in a third-party review will be recommended for funding by the ACL Program Officer. It is anticipated that not all applications will be funded. Further, 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 programs 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.

### III. Eligibility Information

#### 1. Eligible Applicants

Section 2901(4) of Title XXIX - Lifespan Respite Care Act states that eligible entities are state agencies that administer the State's program under the Older American Act of 1965, or administers the State's program under Title XIX of the Social Security Act, or is designated by the Governor of such State to administer the State's program under this title. Entities eligible to apply for funds under this program announcement is further limited on only those states not previously funded under the Lifespan Respite Care Program at any time from fiscal year 2009 through fiscal year 2016.

#### 2. Cost Sharing or Matching

Cost Sharing / Matching Requirement: Yes

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.**

Under this ACL program, ACL 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 the “Instructions for Completing Requested Forms.” 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.

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. 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. **ACL encourages you to not exceed the minimum match requirement.**

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.

3. Responsiveness and Screening Criteria

Application Responsiveness Criteria
All Applications will go through an application responsiveness screening to verify that the applicant:

1. Is an eligible applicant, as outlined in Section III (I) of this Program Announcement;
2. Has included in the application package a Memorandum Of Agreement between the Eligible State Agency and the statewide respite coalition/organization; AND
3. Does not propose conduit or pass-through funding for another agency to lead the project.

Applications that fail to meet all three of the above criteria will not be reviewed further and will receive no further consideration.

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:

2. The Project Narrative section of the Application must be double-spaced, on 8½” x 11” plain white paper with 1” margins on both sides, and a standard font size of not less than 11, preferably Times New Roman or Arial.
3. The Project Narrative must not exceed 20 pages. Project Narratives that exceed 20 pages will have the additional pages removed and only the first 20 pages of the Project Narrative will be provided to the merit reviewers for funding consideration. 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.

Unsuccessful submissions will require authenticated verification from [http://www.grants.gov](http://www.grants.gov) indicating system problems existed at the time of your submission. For example, you will be required to provide an [http://www.grants.gov](http://www.grants.gov) submission error notification and/or tracking number in order to substantiate missing the application deadline.

IV. Application and Submission Information

1. Address to Request Application Package

Application materials can be obtained from [http://www.grants.gov](http://www.grants.gov) or [http://www.acl.gov/Funding_Opportunities/Announcements/Index.aspx](http://www.acl.gov/Funding_Opportunities/Announcements/Index.aspx).

Please note, ACL is requiring applications for all announcements to be submitted electronically through [http://www.grants.gov](http://www.grants.gov). The Grants.gov ([http://www.grants.gov](http://www.grants.gov)) registration process can take several days. If your organization is not currently registered with [http://www.grants.gov](http://www.grants.gov), please begin this process immediately. For assistance with [http://www.grants.gov](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 the [http://www.grants.gov](http://www.grants.gov) website, you will find information about submitting an application electronically through the site, including the hours of operation. ACL strongly recommends that you do not wait until the application due date to begin the application process through [http://www.grants.gov](http://www.grants.gov) because of the time involved to complete the registration process.

All applicants must have a DUNS number ([http://fedgov.dnb.com/webform/](http://fedgov.dnb.com/webform/)) and be registered with the System for Award Management (SAM, [www.sam.gov](http://www.sam.gov)) and maintain an active SAM registration until the application process is complete, and should a grant be made, throughout the life of the award. Applicants should finalize a new, or renew an existing, registration at least two weeks before the application deadline. This action should allow you time to resolve any issues that may arise. Failure to comply with these requirements may result in your inability to submit your application or receive an award. Maintain documentation (with dates) of your efforts to register or renew at least two weeks before the deadline. See the SAM Quick Guide for Grantees at: [https://www.sam.gov/sam/transcript/SAMQuickGuideGrantsRegistrations-v1.6.pdf](https://www.sam.gov/sam/transcript/SAMQuickGuideGrantsRegistrations-v1.6.pdf).

The agency is prohibited from making an award until an applicant has complied with these requirements. At the time an award is ready to be made, if the intended recipient has not complied with these requirements, the agency:

- May determine that the applicant is not qualified to receive an award; and
- May use that determination as a basis for making an award to another applicant.

Note: Once your SAM registration is active, you will need to allow 24 to 48 hours for the information to be available in Grants.gov before you can submit an application through Grants.gov. This action should allow you time to resolve any issues that may arise. Failure to comply with these requirements may result in your inability to submit your application or receive an award.

- **Note:** Failure to submit the correct suffix can lead to delays in identifying your organization and access to funding in the Payment Management System.
- Effective October 1, 2010, HHS requires all entities that plan to apply for and ultimately receive Federal grant funds from any HHS Operating/Staff Division (OPDIV/STAFFDIV) or receive sub-awards directly from the recipients of those grant funds to:
  1. Be registered in SAM prior to submitting an application or plan;
  2. Maintain an active SAM registration with current information at all times during which it has an active award or an application or plan under consideration by an OPDIV; and
  3. Provide its DUNS number in each application or plan to submit to the OPDIV.

An award cannot be made until the applicant has complied with these requirements.

Additionally, all first-tier sub-award recipients must have a DUNS number at the time the sub-award is made.

- Since October 1, 2003, The Office of Management and Budget has required applicants to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal grants or cooperative agreements. 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 to access a guide: [http://www.whitehouse.gov/sites/default/files/omb/grants/duns_num_guide.pdf](http://www.whitehouse.gov/sites/default/files/omb/grants/duns_num_guide.pdf).
- You must submit all documents electronically, including all information included on the SF424 and all necessary assurances and certifications.
- **Your application must comply with any page limitation requirements described in this Program**
Announcement.


Contact person regarding this Program Announcement:

U.S. Department of Health and Human Services
Administration for Community Living
Victoria Wright
Center for Integrated Programs
Phone Number: (202) 795-7473
E-mail: victoria.wright@acl.hhs.gov

2. Content and Form of Application Submission

Letter of Intent

Due Date for Letter of Intent: 05/03/2017

Applicants are requested, but not required, to submit a letter of intent to apply for this funding opportunity to assist ACL in planning for the application independent review process. The purpose of the letter of intent is to allow our staff to estimate the number of independent reviewers needed and to avoid potential conflicts of interest in the review.

Letters of intent should be sent to:

U.S. Department of Health and Human Services
Administration for Community Living
Victoria Wright
Center for Integrated Programs
Email: victoria.wright@acl.hhs.gov
Fax: 202-795-7473

Project Narrative

The Project Narrative must be double-spaced, on 8 ½” x 11” paper with 1” margins on both sides, and a standard font size of not less than 11, preferably Times New Roman or Arial. You can use smaller font sizes to fill in the Standard Forms and Sample Formats. The suggested length for the Project Narrative is 10 to 20 pages; 20 pages is the maximum length allowed. Project Narratives that exceed 20 pages will have the additional pages removed and only the first 20 pages of the Project Narrative will be provided to the merit reviewers for funding consideration. 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 sample 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
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 the authorizing statutes. The Project Narrative should provide a clear and concise description of your project. ACL 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 the “Instructions for Completing the Project Summary/Abstract.”

**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 older adults and/or people with disabilities, their families and caregivers and the health care and social services systems.

For purposes of this Funding Opportunity 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, and the criteria used to identify family caregivers eligible for respite care services;
- 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 demand or need;
- Existing methods or systems to coordinate respite care information and services to the population at the State and local level, and identification of barriers that impede increased access to lifespan respite care services; and
- 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.

**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: "evidence-based intervention", “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 or economic 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 any strategic partnerships you plan to involve in implementing the intervention, including other organizations, supporters, and/or consumer groups.
In addition, applicants must describe the following:

- How respite care information dissemination and coordination, respite care services, respite care workers 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 evidence-based interventions and 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 Aging & Disability Resource Centers/No Wrong Door Systems, Medicaid, National Family Caregiver Support Programs, Veterans Affairs, Protection & Advocacy entities, Developmental Disability Councils, University Centers of Excellence in Developmental Disabilities Education, Research & Service, Area Agencies on Aging, Centers for Independent Living, community-based organizations providing supports to people with disabilities, and faith-based entities;
- 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;
- 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; and
- A description of the measures to be taken to ensure the confidentiality of the individuals served by the program.

Special Target Populations and Organizations

This section should describe how you plan to involve organizations in a meaningful way in the planning and implementation of the proposed project. This section should also describe whether, and if so, how the proposed intervention will target disadvantaged populations, including but not limited to low-income families, rural populations, limited-English speaking populations, and Native American populations.

Outcomes

This section of the project narrative must clearly identify the measurable outcome(s) that will result from the project. (NOTE: ACL 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 optional work plan grid (“Project Work Plan – Sample Template”) 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, skills, attitudes, 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 ACL network; new knowledge that can contribute to the field of respite; 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, 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, preparation of reports; communications with other partners and ACL. It should also describe the approach that will be used to monitor and track progress on the project’s tasks and objectives.

**Evaluation**
This section should describe the method(s), techniques and tools that will be used to: 1) determine whether or not the proposed intervention achieved its anticipated outcome(s), and 2) document the “lessons learned” – both positive and negative - from the project that will be useful to people interested in replicating the intervention, if it proves successful.

**Dissemination**
This section should describe the method that will be used to disseminate the project’s results and findings 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.

**Organizational Capacity Statement**
Each application 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 include the organization’s capability to sustain some or all 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 vitae 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.

**Other**

**Budget Narrative/Justification**
The Budget Narrative/Justification can be provided using the format included in the document, “Budget Narrative/Justification – Sample Format.” Applicants are encouraged to pay particular attention to this document, 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 is required.

NOTE: Applicants will be required to resubmit budget narrative/justification documents that do not include the appropriate level of detail. For successful applicants this could create a delay in receiving the grant award.

**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 “Project Work Plan - Sample Template” format as a reference and resource, if desired.

**Important:** because these grants will be forward funded, grantees will be expected to report semi-annually on the specific progress towards each of the project’s goals and objectives.

**Letters of Commitment from Key Participating Organizations and Agencies**

Include confirmation of the commitments to the project (should it be funded) made by essential 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 [http://www.grants.gov](http://www.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 ACL Office of Grants Management at 202-205-0414 by the application submission deadline.

In your fax, be sure to include the funding opportunity number and your agency name.

**3. Submission Dates and Times**

Due Date for Applications: **06/14/2017**

Date for Informational Conference Call: **05/03/2017**

To access the informational conference call on 5/03/2017 at 3pm eastern standard time, please dial 1-800-369-1122 and enter password 9371195 when prompted.

Applications that fail to meet the application due date will not be reviewed and will receive no further consideration. You are strongly encouraged to submit your application a minimum of 3-5 days prior to the application closing date. Do not wait until the last day in the event you encounter technical difficulties, either on your end or, with [https://www.grants.gov/](https://www.grants.gov/). Grants.gov can take up to 48 hours to notify you of a successful submission.

In addition, if you are submitting your application via Grants.gov, you must (1) be designated by your organization as an Authorized Organization Representative (AOR); and (2) register yourself with Grants.gov as an AOR. Details on these steps are outlined at the following Grants.gov Web page: [https://www.grants.gov/web/grants/register.html](https://www.grants.gov/web/grants/register.html)

After you electronically submit your application, you will receive from Grants.gov an automatic notification of receipt that contains a Grants.gov tracking number. (This notification indicates receipt by Grants.gov only.)

If you are experiencing problems submitting your application through Grants.gov, please contact the Grants.gov Support Desk, toll-free, at 1-800-518-4726. You must obtain a Grants.gov Support Desk Case Number and must keep a record of it.

If you are prevented from electronically submitting your application on the application deadline because of technical problems with the Grants.gov system, please contact the person listed under For Further Information Contact in section VII of this notice and provide a written explanation of the technical problem you experienced with Grants.gov, along with the Grants.gov Support Desk Case Number. ACL will contact you after a determination is made on whether your application will be accepted.

**Note:** We will not consider your application for further review if you failed to fully register to submit your application to Grants.gov before the application deadline or if the technical problem you experienced is unrelated to the Grants.gov system.
Unsuccessful submissions will require authenticated verification from [https://www.grants.gov/](https://www.grants.gov/) indicating system problems existed at the time of your submission. For example, you will be required to provide an [https://www.grants.gov/](https://www.grants.gov/) submission error notification and/or tracking number in order to substantiate missing the cut off date.

Grants.gov ([https://www.grants.gov/](https://www.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 [https://www.grants.gov/](https://www.grants.gov/).

### 4. Intergovernmental Review

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

### 5. 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

**Note:** A recent Government Accountability Office (GAO) report has raised considerable concerns about grantees and contractors charging the Federal government for additional meals outside of the standard allowance for travel subsistence known as per diem expenses. Executive Orders on Promoting Efficient Spending (EO 13589) and Delivering Efficient, Effective and Accountable Government (EO 13576) have been issued and instruct Federal agencies to promote efficient spending. Therefore, if meals are to be charged in your proposal, applicants should understand such costs must meet the following criteria outlined in the Executive Orders and HHS Grants Policy Statement:

- Meals are generally unallowable except for the following:
  - For subjects and patients under study (usually a research program);
  - Where specifically approved as part of the project or program activity, e.g., in programs providing children’s services (e.g., Headstart);
  - When an organization customarily provides meals to employees working beyond the normal workday, as a part of a formal compensation arrangement;
  - As part of a per diem or subsistence allowance provided in conjunction with allowable travel; and
  - Under a conference grant, when meals are a necessary and integral part of a conference, provided that meal costs are not duplicated in participants’ per diem or subsistence allowances. (Note: conference grant means the sole purpose of the award is to hold a conference)

### 6. Other Submission Requirements

**IMPORTANT!** A memorandum of agreement regarding the joint responsibility for the development of the state’s lifespan respite program between the eligible State agency and the public or private nonprofit statewide respite coalition or organization must be in place at the time of application and submitted with the application. Applicants are encouraged to embed flexibility within the Memorandum Of Agreement so that all parties to the Agreement can modify scope, tasks or partnerships as the need arises. A copy of such memorandum must be included as part of ALL application packages.
V. Application Review Information

1. Criteria

Applicants must document all of their source material. If any text, language and/or materials are from another source, the applicant must make it clear the material is being quoted and where the text comes from. The applicant must also cite any sources when they obtain numbers, ideas, or other material that is not their own. If the applicant fails to comply with this requirement, regardless of the severity or frequency of the plagiarism, the reviewers shall reduce their scores accordingly even to the degree of issuing no points at all.

Applications are scored by assigning a maximum of 100 points across five criteria:

1. Project Relevance & Current Need
2. Approach
3. Budget
4. Project Impact
5. Organizational Capacity

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<tr>
<th>Project Relevance &amp; Current Need</th>
<th>Maximum Points: 20</th>
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Project Relevance and Current 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?

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 research information and knowledge?

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<tr>
<th>Approach</th>
<th>Maximum Points: 30</th>
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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?

**Work Plan/Management Plan (5 points)**

1. Is the project work plan clear and comprehensive, covering all years of the proposed project?

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 Area Agencies on Aging, Centers for Independent Living, community-based organizations providing supports to people with disabilities, faith-based entities, Aging & Disability Resource Centers 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?

**Methods of Addressing the Problem (10 Points)**

1. Has the applicant described a coherent approach to implementing a Lifespan Respite Care program that would successfully address the problems described?

2. Has the applicant adequately described the plan for using funds to implement each of the required services?

3. Has the applicant described how proposed activities will improve coordination, access to, choice and control, and distribution of respite care services for family caregivers of children and adults with special needs?

4. Has the applicant adequately described the criteria to be used to identify family caregivers eligible for respite services?

5. Based on the information provided by the applicant, is it likely the approach will achieve the specified goals?

**Coordination and Linkages (10 Points)**

1. Does the application detail the means by which the State respite coalition/organization and the ADRC/NWD system will work collaboratively with the applicant 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 Agreement included in the application provide for adequate flexibility to modify parameters agreed to by the Eligible State Agency and the Respite Coalition/organization?
Budget

Maximum Points: 10

1. Does the budget and associated narrative cover all years of the proposed project?
2. Is the budget justified with respect to the adequacy and reasonableness of resources requested?
3. Are the resources requested sufficient to carry out the project activities?
4. 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?
5. Are the budget amounts proposed for personnel proportionate to other activities, given the scope of the proposal?
6. Are budget line items clearly delineated and consistent with work plan objectives?

Project Impact

Maximum Points: 20

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 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?

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?
6. Is the applicant’s commitment to partnering with ACL, the Resource Center, and other grantees in the development of a performance measures framework adequately described?

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 and realistic plan to try to secure resources to continue program activities after Federal financial assistance has ended?
3. Is the sustainability of the program likely?

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?

Organizational Capacity

Maximum Points: 20

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?

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 applicant will have a system for maintaining confidentiality of care recipient and family caregiver records?

2. Review and Selection Process

As required by 2 CFR 200 of the Uniform Guidance, effective January 1, 2016, ACL is required to review and consider any information about the applicant that is in the Federal Awardee Performance and Integrity Information System (FAPIIS), https://www.fapiis.gov before making any award in excess of the simplified acquisition threshold (currently $150,000) over the period of performance. An applicant may review and comment on any information about itself that a federal awarding agency has previously entered into FAPIIS. ACL will consider any comments by the applicant, in addition to other information in FAPIIS, in making a judgment about the applicant's integrity, business ethics, and record of performance under federal awards when completing the review of risk posed by applicants as described in 2 CFR § 200.205 Federal Awarding Agency Review of Risk Posed by Applicants https://www.ecfr.gov/cgi-bin/text-idx?node=se2.1.200_1205&rgn=div8).
An independent review panel of at least three individuals will evaluate applications that pass the screening and meet the responsiveness criteria. 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 Administrator of ACL. In making these decisions, the ACL Administrator 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.

Award notices to successful applicants are expected to be sent on or around August 8, 2017 for an anticipated project start date of September 1, 2017.

VI. Award Administration Information

1. Award Notices

Successful applicants will receive an electronic Notice of Award. The Notice of Award is the authorizing document from the U.S. Administration for Community Living authorizing official, Office of Grants Management. Acceptance of this award is signified by the drawdown of funds from the Payment Management System. 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. Unless indicated otherwise in this announcement, unsuccessful applications will not be retained by the agency and destroyed.

2. Administrative and National Policy Requirements

The award is subject to DHHS Administrative Requirements, which can be found in 45 CFR Part 75 and the Standard Terms and Conditions, included in the Notice of Award as well as implemented through the HHS Grants Policy Statement.

A standard term and condition of award will be included in the final notice of award; all applicants will be subject to a term and condition that applies the terms of 48 CFR section 3.908 to the award and requires the grantees inform their employee in writing of employee whistleblower rights and protections under 41 U.S.C. 4712 in the predominant native language of the workforce.

3. Reporting

ACL requires the submission of the SF-425 (Federal Financial Report). The reporting cycle will be reflected in the Notice of Award. The ACL program progress report is due semi-annually from the start date of the award and is due within 30 days of the reporting period end date. The final progress report and SF-425 reports are due 90 days after the end of the project period.

Grantees are required to complete the federal cash transactions portion of the SF-425 within 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, the fully completed SF-425 will be required as denoted in the Notice of Award terms and conditions.

Important: because these grants will be forward funded, grantees will be expected to report semi-annually on the specific progress towards each of the project’s goals and objectives.
VII. Agency Contacts

Project Officer
U.S. Department of Health and Human Services
Administration for Community Living
Victoria Wright
Phone Number: (202) 795-7473
E-mail: victoria.wright@acl.hhs.gov

Grants Management Specialist
U.S. Department of Health and Human Services
Administration for Community Living
Sherlonda Blue
Phone Number: (202) 795-7310
E-mail: Sherlonda.Blue@acl.hhs.gov

VIII. Other Information

1. Application Elements
a. SF 424, required – Application for Federal Assistance (See “Instructions for Completing Required Forms” for assistance).

b. SF 424A, required – Budget Information. (See Appendix for instructions).

c. Separate Budget Narrative/Justification, required (See “Budget Narrative/Justification - Sample Format” for examples and “Budget Narrative/Justification – Sample Template.”)

NOTE: Applicants requesting funding for multi-year grant projects are REQUIRED to provide a Narrative/Justification for each year of potential grant funding, as well as a combined multi-year detailed Budget Narrative/Justification.

d. SF 424B – Assurance, required. 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).

e. Lobbying Certification, required

f. Proof of non-profit status, if applicable

g. Copy of the applicant’s most recent indirect cost agreement or cost allocation plan, 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.

h. Project Narrative with Work Plan, required (See “Project Work Plan – Sample Template” for a formatting suggestions).

i. Organizational Capability Statement and Vitae for Key Project Personnel.

j. Letters of Commitment from Key Partners, if applicable.

k. Memorandum of Understanding between the Eligible State Agency (Applicant) and the Statewide Respite Coalition/Organization (REQUIRED).

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 0985-0043 which expires on 6/30/17. 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.

Instructions for Completing Required Forms
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. ACL 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 ACL 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 System for Award Management (SAM), formally the Central Contractor Registry. Information on registering with SAM may be obtained by visiting the Grants.gov website ([https://www.grants.gov](https://www.grants.gov)) or by going directly to the SAM website ([www.sam.gov](http://www.sam.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. In addition, we encourage the organization to include the correct suffix used to identify your organization in order to properly align access to the Payment Management System.

   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 ([https://www.grants.gov](https://www.grants.gov)). Your DUNS number can be verified at [https://fedgov.dnb.com/webform/](https://fedgov.dnb.com/webform/).

   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.


10. **Name Of Federal Agency:** (REQUIRED) Enter U.S. Administration for Community Living

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 (This is not a narrative description).

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. See the below website to find your congressional district: [https://www.house.gov/](https://www.house.gov/)

17. **Proposed Project Start and End Dates:** (REQUIRED) Enter the proposed start date and final end date of the project. **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, for example 7/01/2014 to 6/30/2017. The Grants Officer can alter the start and end date at their discretion.

18. **Estimated Funding:** (REQUIRED) If requesting multi-year funding, enter the full amount requested from the Federal Government in line item 18.a., as a multi-year total. For example and illustrative purposes only, if year one is $100,000, year two is $100,000, and year three is $100,000, then the full amount of Federal funds requested would be reflected as $300,000. The amount of matching funds is denoted by lines b. through f. with a combined Federal and non-Federal total entered on line g. Lines b. through f. represents contributions to the project by the applicant and by your partners during the total project period, broken down by each type of contributor. The value of in-kind contributions should be included on appropriate lines, as applicable.

**NOTE:** Applicants should review cost sharing or matching principles contained in Subpart C of 45 CFR Part 75 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 total project 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 ACL’s match requirements, see the information in the box below. For sub-item 18f (program income), enter only the amount, if any, that is going to be used as part of the required match. Program Income submitted as match will become a part of the award match and recipients will be held accountable to meet their share of project expenses even if program income is not generated during the award period.

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. Examples of non-Federal cash match includes budgetary funds provided from the applicant agency’s budget for costs associated with the project. Generally, most contributions from sub-contractors or sub-grantees (third parties) will be non-Federal in-kind matching funds. Volunteered time and use of third party facilities to hold meetings or
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 or cost allocation plan must be included with the application. Further, if any sub-contractors or sub-grantees are requesting indirect costs, a copy of the latest approved indirect cost agreements must also be included with the application, or reference to an approved cost allocation plan.

ACL's Match Requirement:
Under many ACL programs, ACL 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:

FederalFundsRequested*MatchPercentage = Minimum Match Requirement

Inverse Match Percentage

Examples of varying match levels:
1) $100,000(federalfundsrequested)*5%(match) = $5,263
   95%
2) $100,000*25%(match) = $33,333
   75%
3) $100,000*35%(match) = $53,846
   65%
4) $100,000*45%(match) = $81,818
   55%

If the required non-Federal share is not provided by the completion date of the funded project period, ACL will reduce the Federal dollars awarded when closing out the award to meet the match percentage, which may result in a requirement to return Federal funds.

19. Is Application Subject to Review by State Under Executive Order 12372 Process? Please refer to IV. Application and Submission Information, 4. Intergovernmental Review to determine if the ACL program is subject to E.O. 12372 and respond accordingly.

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.)

**Standard Form 424A**

NOTE: Standard Form 424A is designed to accommodate applications for multiple grant programs; thus, for purposes of this ACL 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 multi-year budget.

**Section A - Budget Summary**

**Line 5:** Leave columns (c) and (d) blank. Enter TOTAL Federal costs in column (e) and total nonFederal 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 1: Enter the breakdown of how you plan to use the Federal funds being requested by object class category.

Column 2: 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 1 and 2) by object class category.

**Section C – Non Federal Resources**

Column A: Enter the federal grant program.

Column B: Enter in any non-federal resources that the applicant will contribute to the project.

Column C: Enter in any non-federal resources that the state will contribute to the project.

Column D: Enter in any non-federal resources that other sources will contribute to the project.

Column E: Enter the total non-federal resources for each program listed in column A.

**Section D –Forecasted Cash Needs**

**Line 13:** Enter Federal forecasted cash needs broken down by quarter for the first year only.

**Line 14:** Enter Non-Federal forecasted cash needs broken down by quarter for the first year.
Line 15: Enter total forecasted cash needs broken down by quarter for the first year.

Note: This area is not meant to be one whereby an applicant merely divides the requested funding by four and inserts that amount in each quarter but an area where thought is given as to how your estimated expenses will be incurred during each quarter. For example, if you have initial startup costs in the first quarter of your award reflect that in quarter one or you do not expect to have contracts awarded and funded until quarter three, reflect those costs in that quarter.

Section E – Budget Estimates of Federal Funds Needed for Balance of the Project (i.e. subsequent years 2, 3, 4 or 5 as applicable).

Column A: Enter the federal grant program

Column B (first): Enter the requested year two funding.

Column C (second): Enter the requested year three funding.

Column D (third): Enter the requested year four funding, if applicable.

Column E (forth): Enter the requested year five funding, if applicable.

Section F – Other Budget Information

Line 21: Enter the total Indirect Charges

Line 22: Enter the total Direct charges (calculation of indirect rate and direct charges).

Line 23: Enter any pertinent remarks related to the budget.

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 breakdown 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 subgrantees.

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 break down 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 awards to organizations for the provision of technical assistance. Do not include payments to individuals on this line. Please be advised: A subrecipient is involved in financial assistance activities by receiving a sub-award and a subcontractor is involved in procurement activities by receiving a sub-contract. Through the recipient, a subrecipient performs work to accomplish the public purpose authorized by law. Generally speaking, a sub-contractor does not seek to accomplish a public benefit and does not perform substantive work on the project. It is merely a vendor providing goods or services to directly benefit the recipient, for example procuring landscaping or janitorial services. In either case, you are encouraged to clearly describe the type of work that will be accomplished and type of relationship with the lower tiered entity whether it be labeled as a subaward or subcontract.

**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 Part 75 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.

Note: A recent Government Accountability Office (GAO) report number 11-43, has raised considerable concerns about grantees and contractors charging the Federal government for additional meals outside of the standard allowance for travel subsistence known as per diem expenses. If meals are to be charged towards the grant they must meet the following criteria outlined in the Grants Policy Statement:

- **Meals are generally unallowable except for the following:**
  - For subjects and patients under study (usually a research program);
  - Where specifically approved as part of the project or program activity, e.g., in programs providing children’s services (e.g., Headstart);
  - When an organization customarily provides meals to employees working beyond the normal workday, as a part of a formal compensation arrangement;
  - As part of a per diem or subsistence allowance provided in conjunction with allowable travel; and
  - Under a conference grant, when meals are a necessary and integral part of a conference, provided that meal costs are not duplicated in participants’ per diem or subsistence allowances (Note: the sole purpose of the grant award is to hold a conference).

**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.

c. **Standard Form 424B – Assurances (required)**

This form contains assurances required of applicants under the discretionary funds programs administered by the Administration for Community Living. 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 (required)**

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 (as applicable)**

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.

### Budget Narrative/Justification - Sample Format

NOTE: Applicants requesting funding for a multi-year grant program are REQUIRED to provide a detailed Budget Narrative/Justification for EACH potential year of grant funding requested.

<table>
<thead>
<tr>
<th>Object Class Category</th>
<th>Federal Funds</th>
<th>Non-Federal Cash</th>
<th>Non-Federal In-Kind</th>
<th>TOTAL</th>
<th>Justification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>$47,700</td>
<td>$23,554</td>
<td>$0</td>
<td>$71,254</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>Federal</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Project Director (name) = .5 FTE @ $95,401/yr = $47,700</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td>Non-Fed Cash</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Officer Manager (name) = .5FTE @ $47,108/yr = $23,554</td>
</tr>
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<td></td>
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<td></td>
<td><strong>Total</strong></td>
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<td></td>
<td></td>
<td></td>
<td>71,254</td>
</tr>
<tr>
<td>Fringe Benefits</td>
<td>$17,482</td>
<td>$8,632</td>
<td>$0</td>
<td>$26,114</td>
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<td><strong>Federal</strong></td>
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<td>Fringe on Project Director at 36.65% = $17,482</td>
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<td>FICA (7.65%)</td>
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<td>Health (25%)</td>
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<td>Dental (2%)</td>
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<td>Life (1%)</td>
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<td>Unemployment (1%)</td>
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<td></td>
<td>Non-Fed Cash</td>
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<td></td>
<td></td>
<td>Fringe on Office Manager at 36.65% = $8,632</td>
</tr>
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<td></td>
<td>FICA (7.65%)</td>
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<td>Health (25%)</td>
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<td>Dental (2%)</td>
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<td>Life (1%)</td>
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<td></td>
<td></td>
<td></td>
<td>Unemployment (1%)</td>
</tr>
<tr>
<td>Travel</td>
<td>$4,707</td>
<td>$2,940</td>
<td>$0</td>
<td>$7,647</td>
<td></td>
</tr>
<tr>
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<td></td>
<td><strong>Federal</strong></td>
</tr>
<tr>
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<td></td>
<td></td>
<td>Local travel: 6 TA site visits for 1 person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Mileage: 6RT @ .585 x 700 miles $2,457</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Lodging: 15 days @ $110/day $1,650</td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td>Per Diem: 15 days @ $40/day $600</td>
</tr>
<tr>
<td>Category</td>
<td>Total</td>
<td>Federal</td>
<td>Non-Fed Cash</td>
<td>Contractual</td>
<td></td>
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<tr>
<td>----------------</td>
<td>---------</td>
<td>---------</td>
<td>--------------</td>
<td>-------------</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>$4,707</td>
<td>$0</td>
<td>$0</td>
<td>$30,171</td>
<td></td>
</tr>
<tr>
<td><strong>Non-Fed Cash</strong></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Travel to National Conference in (Destination) for 3 people</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Airfare 1 RT x 3 staff @ $500</td>
<td></td>
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</tr>
<tr>
<td>$1,500</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Lodging: 3 days x 3 staff @ $120/day</td>
<td></td>
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</tr>
<tr>
<td>$1,080</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Per Diem: 3 days x 3 staff @ $40/day</td>
<td></td>
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</tr>
<tr>
<td>$360</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$2,940</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Equipment</strong></td>
<td>$10,000</td>
<td>$0</td>
<td>$0</td>
<td>$10,000</td>
<td></td>
</tr>
<tr>
<td>Call Center Equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Installation =</td>
<td>$5,000</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phones =</td>
<td>$5,000</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$10,000</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Supplies</strong></td>
<td>$3,700</td>
<td>$5,670</td>
<td>$0</td>
<td>$9,460</td>
<td></td>
</tr>
<tr>
<td>2 desks @ $1,500</td>
<td>$3,000</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 chairs @ $300</td>
<td>$600</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 cabinets @ $200</td>
<td>$400</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Federal</strong></td>
<td>$3,000</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Laptop computers</td>
<td>$3,000</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Printer cartridges @ $50/month</td>
<td>$300</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consumable supplies (pens, paper, clips etc…) @ $180/month</td>
<td>$2,160</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Non-Fed Cash</strong></td>
<td>$30,171</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contract with AAA to provide respite services:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 care givers @ $1,682 =</td>
<td>$18,502</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Volunteer Coordinator =</td>
<td>$11,669</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$30,171</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

*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.

<table>
<thead>
<tr>
<th></th>
<th>Federal</th>
<th>Non-Federal Cash</th>
<th>Non-Federal In-Kind</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Other</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$5,600</td>
<td>$0</td>
<td>$5,880</td>
<td>$11,480</td>
</tr>
<tr>
<td><strong>Indirect Charges</strong></td>
<td>$20,934</td>
<td>$0</td>
<td>$0</td>
<td>$20,934</td>
</tr>
<tr>
<td><strong>Federal</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 consultants @ $100/hr for 24.5 hours each =</td>
<td>$4,900</td>
<td></td>
<td></td>
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<tr>
<td>Printing 10,000 Brochures @ $.05 =</td>
<td>$500</td>
<td></td>
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<tr>
<td>Local conference registration fee (name conference) = $200</td>
<td></td>
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</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td>$5,600</td>
</tr>
<tr>
<td><strong>In-Kind Volunteers</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>15 volunteers @ $8/hr for 49 hours =</td>
<td>$5,880</td>
<td></td>
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<tr>
<td><strong>IDC rate is attached.</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>$140,294</td>
<td>$40,866</td>
<td>$5,880</td>
<td>$187,060</td>
</tr>
</tbody>
</table>

Budget Narrative/Justification - Sample Template

NOTE: Applicants requesting funding for a multi-year grant program are REQUIRED to provide a detailed Budget Narrative/Justification for EACH potential year of grant funding requested.

<table>
<thead>
<tr>
<th>Object Class Category</th>
<th>Federal Funds</th>
<th>Non-Federal Cash</th>
<th>Non-Federal In-Kind</th>
<th>TOTAL</th>
<th>Justification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td></td>
<td></td>
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<tr>
<td>Fringe Benefits</td>
<td></td>
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<tr>
<td>Travel</td>
<td></td>
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</tr>
<tr>
<td>Equipment</td>
<td></td>
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<tr>
<td>Supplies</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Contractual</td>
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</tr>
<tr>
<td>Other</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Indirect Charges</td>
<td></td>
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<td></td>
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<tr>
<td><strong>TOTAL</strong></td>
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</tbody>
</table>

Project Work Plan - Sample Template

NOTE: Applicants requesting funding for a multi-year grant program are REQUIRED to provide a Project Work Plan for EACH potential year of grant funding requested.

Goal:
Measurable Outcome(s):

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

<table>
<thead>
<tr>
<th>Major Objectives</th>
<th>Key Tasks</th>
<th>Lead Person</th>
<th>1*</th>
<th>2*</th>
<th>3*</th>
<th>4*</th>
<th>5*</th>
<th>6*</th>
<th>7*</th>
<th>8*</th>
<th>9*</th>
<th>10*</th>
<th>11*</th>
<th>12*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
2.

3.

4.

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.

**Instructions for Completing the Project Summary/Abstract**