



Request for Applications (RFA) Community Mini-Grant Funding Application Packet

New York State Caregiving and Respite Coalition Volunteer Respite Programs

Issue Date: **August 25, 2022**

Application Due Date:
Completed applications must be sent via email to Doris Green at dgreen@lifespan-roch.org by 5:00 pm on **September 22, 2022**

Anticipated Notification of Award: **September 30, 2022**

Application Questions

Questions about this RFA must be submitted via e-mail to **Doris Green** at dgreen@lifespan-roch.org no later than 5:00 pm on September 6, 2022. **No telephone calls will be accepted.** All questions with answers will be posted on our website (www.nyscrc.org) by 5:00 pm on September 9, 2022.

LATE APPLICATIONS WILL NOT BE ACCEPTED

You will receive an email acknowledgment of receipt of your application. It is your responsibility to contact Doris Green at dgreen@lifespan-roch.org if it has not been acknowledged.

Mini-grant funding made available through the Lifespan Respite Program Grant initiative awarded to the NYS Office for the Aging by the Administration for Community Living, Grant # 90LRLI0023

Introduction

This Request for Applications (RFA) opportunity is being offered through the New York State Caregiving and Respite Coalition (NYSCRC), hosted by Lifespan of Greater Rochester Inc. (Lifespan), who will administer the RFA. The purpose is to provide the opportunity for the development and/or expansion of Volunteer Respite programs across New York State. This RFA offering is part of the New York State Office for the Aging's Lifespan Respite grant initiative funded under Grant # 90LRLI0023, awarded from the Administration for Community Living (ACL).

Qualified Applicants are Encouraged to Apply

This RFA opportunity is open to local and/or regional agencies (e.g., Area Agencies on Aging, Local Departments of Social Services, Offices of Mental Health, Developmental Disabilities Organizations, not-for-profit local and/or regional agencies, faith-based organizations, RSVP Programs, etc.) located in New York State serving caregivers with care recipients of any age living in New York State.

Applicants must adhere to standard assurances:

1. Services must be made available to eligible individuals without regard to race, color, religion, gender, national origin, partisan affiliation, or sexual orientation (even if your organization operates primarily to serve a particular ethnic, religious, or other specific population or special interest group).
2. Services must be provided to eligible individuals, subject to the availability of funding. This does not preclude a contractor from establishing uniformly applied, non-discriminatory service eligibility criteria or prioritizing the provision of services based on a standardized determination of needs, subject to the State Office for the Aging's approval.
3. Services provided must be secular in nature and in no event shall funds be used for religious/sectarian purposes or activities or to benefit a religious institution.

Developing or Expanding Volunteer Respite Programs - Community Mini-Grants

Family caregivers provide extraordinary care to their loved ones. We know, however, that they need a break to manage their own health and wellness, run errands, and get a break from their caregiving responsibilities. This RFA is being issued to encourage submission of applications to develop or expand innovative, local, or regional community volunteer respite programs for caregivers and their care recipients.

Applicants may specify whether the program will be open to all individuals or whether the program will be tailored to a particular age and/or disability group it intends to serve through the development or expansion of a Volunteer Respite Program. Applicants must develop and/or demonstrate an ability to have a volunteer respite program and commit to serve a minimum number of caregivers during the program period. Programs will be expected to develop a target number of respite volunteers and serve a minimum number of caregivers based on the amount of funding requested. For \$10,000 requests, a minimum target of 10 volunteers serving a minimum of 25 caregivers will be required. If additional funding is requested, applicants will be

expected to adjust the minimum target number of volunteers serving a minimum number of caregivers in accordance with the funding requested.

Applications must be for community-based respite programs. Overnight respite and institutionally-based respite is not eligible for this funding. Please note: Background checks will be required for all volunteers of respite programs funded through this RFA (e.g., checked against the internet-based registries: National Sex Offender Public Website (NSOPW) and New York State Unified Court System.)

As part of the Lifespan Respite Initiative, NYSCRC is making \$100,000 available for Mini-Grants. Between two and ten Mini-Grants will be awarded for a minimum grant award of \$10,000 to a maximum grant award of \$50,000 for the project period October 1, 2022 – August 31, 2023.

All Mini-Grant awards are dependent on funding being made available through the New York State Office for the Aging for this purpose.

Addendum to RFA

Lifespan reserves the right to amend the RFA by providing addenda. The addenda will be posted at www.nyscrc.org. It is your responsibility to check the website for any updates.

Application Questions

Questions about the Application should be submitted **in writing** to **Doris Green** at dgreen@lifespan-roch.org by 5:00 PM on September 6, 2022. All questions with answers will be posted on the website (www.nyscrc.org) by 5:00 PM on September 9, 2022. Please, no telephone calls regarding the application. Names or organizations will **not** be identified on the website.

Requirements for Proposals:

Eligibility: The following organizations are eligible to apply for funding: Local and/or regional agencies (e.g., Area Agencies on Aging, Local Departments of Social Services, Offices of Mental Health, developmental disabilities organizations, not-for-profit local and/or regional agencies, faith-based organizations, RSVP Programs, etc.) located in New York State serving caregivers with care recipients of any age living in New York State.

Format: Applications may be single-spaced. Please use one-inch margins and 12-point Arial type.

Application must include the following:

Application Cover Page: Complete, sign, and return with Application.

Part 1: Completion of Narrative Section: (three-page limit; see attached)

Part II: Completion of the Work Plan (Template provided): For each objective you identified, describe the measurable outcome(s), outline the key tasks, staff, and timetable for implementation and completion.

Part III: Budget: (Template provided)

Submit a simple budget including amount applicant is applying for. Budgets may not exceed the amount of the award unless the budget reflects additional program income and the source of that income. Grant funds may not be used to supplant existing funding for such services.

Please note: There is no match requirement.

Timeframe

Successful applicants will be notified by September 30, 2022, by e-mail. Activities should be scheduled to take place between October 1, 2022 – August 31, 2023, in order to be covered by this Mini-Grant.

Selection Process

A selection committee knowledgeable in the field of caregiving and respite programs and services will review and score applications. Lifespan Respite Advisory Committee, Lifespan of Greater Rochester program and/or budget staff, and NYSCRC staff will be part of the review and scoring process; the New York State Office for the Aging will be part of the final selection process.

The following criteria will be used to score proposals:

Applications will be scored based on the following criteria:

- Clearly meets the stated goal of developing and/or expanding a volunteer respite program.
- Clearly identifies a community gap and how it is being addressed through the program.
- Work Plan aligns with stated program objectives.
- Budget aligns with stated program objectives.
- ***Inclusion of the New York State Volunteer Respite training for volunteers is required. NYSCRC will provide required Trainer Training to all awardees at no cost.***

Application Process

Complete applications must be submitted by e-mail to Doris Green at dgreen@lifespan-roch.org by 5:00 pm on September 22, 2022, in order to be considered.

For Successful Applicants, the Reporting Requirements:

- Participation in project evaluation.
- All Invoices for reimbursement must be submitted by August 31, 2023.
- A written interim progress report must be submitted by March 31, 2023
- A final report must be submitted by September 15, 2023.
- Caregiver Respite Survey completed by all Caregivers participating under the Mini-Grant.
- Monthly on-line reporting of number of respite hours provided and number of caregivers served to be reported to NYSCRC.

**NEW YORK STATE CAREGIVING AND RESPITE COALITION
MINI-GRANT REQUEST**

Completed applications must be sent by email by **5:00 pm on September 22, 2022**, to:
dgreen@lifespan-roch.org
Applications received after this date and time will not be considered.

Community Mini-Grant Funding Application Packet: Volunteer Respite

COVER PAGE

Name of Organization: _____

Name and Title of Person completing application: _____

Address: _____

Phone: _____ E-mail: _____

Type of organization (please check):

_____ local government

_____ non-profit

_____ faith-based organization

_____ RSVP Program

_____ other – please specify _____

Project Name: _____

I certify that I am authorized to submit this application for Respite mini-grant funding on behalf of <Organization>.

Signature:
Title:
Date:

Community Mini-Grant Funding Application Packet: Volunteer Respite: PROJECT NARRATIVE

Three-page limit

Include the following in your project narrative:

- **Project Overview:**
 - Identify the population to be served.
 - Identify the intended service area for the project.
 - Describe the respite project, including how the funds will be used.
 - Describe the staff who will manage the respite project, including their experience with caregiving and respite services.
 - Describe agency's demonstrated experience in caregiving and respite services.
 - Describe demonstrated experience in managing volunteers.
 - Describe the benefits of your proposal. You may include how it will improve the access to respite services in your county or area to the population to be served, anticipated numbers to be served, and type(s) of services you will offer through your program.
 - Describe your volunteer recruitment approaches. Include outreach to be conducted and how you anticipate successfully recruiting the anticipated number of volunteers.
 - Describe how background checks of volunteers will be conducted.
 - Describe any partnerships or collaborations involved in implementing the project.
 - If appropriate, describe how you would plan to continue the program following the period of funding.

- **Evaluation:**
 - Applicants must agree to participate in the project evaluation being conducted for this RFA, including the use of any required surveys, reports, and/or other evaluation techniques being used by the project evaluator.

**Community Mini-Grant Funding Application Packet:
WORK PLAN TEMPLATE**

Agency: _____

Program Name: _____

Contract Period: 10/01/22 – 8/31/23

<p>Contact Information for Contractor's designee to receive notice: Name: Address: Telephone Number: E-mail Address:</p> <p>PROGRAM: Program Period: 10/1/22 – 8/31/23</p>			
Objective	Key Tasks	Staff	Timetable
Establish or expand innovative, local or regional community volunteer respite programs for caregivers and care recipients.			
<u>Direct Intervention</u> Provide in-home or community-based respite for caregivers	Annually, [Organization name] will provide [insert N] hours of in-home or community- based respite to [insert N] caregivers.		
Provide training to increase the pool of volunteer respite providers.	Annually, [Organization name] will train [insert N] of volunteers.		

[Organization may add additional program specific objectives]			

**Community Mini-Grant Funding Application Packet:
BUDGET TEMPLATE**

Agency: _____

Program Name: _____

Contract Period: 10/1/22 – 8/31/23 _____

Note: Budgets must be at least \$10,000 and not to exceed \$50,000

Budget Category	Administration	Services Costs	Total Costs
1. Personnel	\$	\$	\$
2. Fringe Benefits			
3. Equipment			
4. Travel			
5. Maintenance & Operations			
6. Other Expenses			
7. Subcontractors/Consultants			
8. Total Budget (sum of Lines 1 - 7)			
9. Less: Program Income/Contributions	\$	\$	\$
10. State Funds Requested (Line 9 minus Line 10)	\$	\$	\$