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California Department of Public Health



EDMUND G. BROWN JR.
Governor

DATE: December 19, 2014
TO: Prospective Applicants
FROM: Caroline Peck, M.D.,
Chief, Chronic Disease Control Branch

SUBJECT: Request for Applications (RFA) for California Alzheimer's Disease Centers

The Chronic Disease Control Branch, Alzheimer's Disease Program (ADP), is soliciting applications from eligible university medical centers to receive funds for California Alzheimer's Disease Centers (CADCs).

To submit an application, please read and follow the RFA instructions carefully. **Applications are due by 4:00 p.m. on February 6, 2015. No exceptions will be made to this deadline.**

An informational teleconference has been scheduled to provide further guidance and answer questions related to the RFA (please see RFA for more information).

We look forward to receiving your application.

Attachments



Request for Applications (RFA) No. 15-10022

California Alzheimer's Disease Centers

DECEMBER 2014

**Chronic Disease Control Branch
Alzheimer's Disease Program**
P. O. Box 997377 MS 7210
Sacramento, CA 95899-7377

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GENERAL INFORMATION

A. PURPOSE

The California Department of Public Health, Chronic Disease Control Branch, Alzheimer's Disease Program ("Department"), is seeking applications from eligible university medical centers to provide grant funding for California Alzheimer's Disease Centers (CADCs). These grants are authorized by Health and Safety (H&S) Code 125275, et seq.

B. BACKGROUND

The Alzheimer's Disease Program

In 1984, the State of California established the Alzheimer's Disease Program (ADP) through legislation (H&S Code 125280) that sought to relieve the human burden and economic cost associated with Alzheimer's Disease and related dementias, and to assist in ultimately discovering the cause, treatment, and prevention of these diseases. The ADP was mandated to establish a Statewide network of diagnostic and treatment centers at university medical centers to provide training to health care professionals, and to provide consultation and education to victims and families affected by Alzheimer's Disease. The state Alzheimer's Disease centers were established in 1985 and were named the Alzheimer's Disease Diagnostic and Treatment Centers (ADDTCs).

In 1997, these State centers were renamed the Alzheimer's Research Centers of California (ARCCs) to highlight the new clinical and translational research activities that had become an integral part of the Centers. In 2009, the California Legislature reduced the ADP funding by 50% and directed the Centers to discontinue all research activities and related data collection. The Centers were renamed the **California Alzheimer's Disease Centers (CADCs)** to reflect this change in mission. Current grant funding for these 10 CADCs will expire June 30, 2015.

The current ten CADCs are located at the following California university medical centers:

- University of California, San Diego
- University of California, Irvine
- University of Southern California
- University of Southern California / Rancho Research Institute
- University of California, Los Angeles
- Stanford University
- University of California, San Francisco
- University of California, San Francisco – Fresno

- University of California, Davis – East Bay
- University of California, Davis - Sacramento

C. ELIGIBILITY CRITERIA

This RFA is limited to California public or private postsecondary institutions with both a medical center and an established Alzheimer’s Disease diagnostic and treatment center. Applicants must be California-based, and all relevant grant activities must take place in California. Applicants who previously received grant awards from the ADP are eligible to apply for continued funding.

D. FUNDING GUIDELINES

It is anticipated that during Fiscal Year (FY) 2015–2016, the ADP will be authorized to award funds for the CADCs. Pending approval of funding, approximately \$2,818,000 total per year for three (3) years will be available under this RFA. The funding for these awards is solely from the State General Fund (SGF), as appropriated on an annual basis by the California State Legislature. The number of grants and total funding amount for each CADC will be determined by Department to allow for the maximum number of CADCs to be funded. Grant funds will not be disbursed until the grants are fully executed. If the Legislature reduces the amount of the appropriation for the Grant Program, Department may cancel the Grant or amend it to reflect reduced funding and reduced activities.

Applications will be submitted for a three-year duration, however funding is not guaranteed past year one. Successful applicants may be eligible for funding in grant years two and three based on satisfactory performance in year one, and continued appropriation by the legislature. It is anticipated that grants will be awarded for the initial 12-month period beginning July 1, 2015.

Budget Periods (these budget periods align with the expiration of the current CADC grants and the State fiscal year):

Year One – July 1, 2015 to June 30, 2016: \$2,818,000.00 anticipated
 Year Two – July 1, 2016 to June 30, 2017: \$2,818,000.00 anticipated
 Year Three – July 1, 2017 to June 30, 2018: \$2,818,000.00 anticipated

These amounts are subject to annual approval and appropriation by the legislature.

E. RFA TIME SCHEDULE

Below is the RFA time schedule for this application process.

Event	Date	Time (If applicable)
RFA Released	12/19/14	
Voluntary RFA Informational Teleconference	01/06/15	11:00 a.m.

Event	Date	Time (If applicable)
Mandatory Email - Intent to Submit an Application	01/09/15	4:00 p.m.
Application Due Date	02/06/15	4:00 p.m.
Grant Award Date	02/27/15	
Proposed Grant disbursement Date	07/01/15	

F. INFORMATIONAL TELECONFERENCE

A voluntary informational teleconference has been scheduled as follows to provide guidance and to answer questions related to the RFA requirements:

Teleconference:

Date: January 6, 2015

Time: 11:00 a.m. - 12:00 p.m.

Telephone Number: 1-877-715-9153

Passcode: 9766239

Prospective applicants that intend to submit an application are encouraged to participate in the teleconference. If applicants are not available for the teleconference, a summary of information will be posted on the ADP website following the call.

Applicants may email questions regarding the RFA to AlzheimersD@cdph.ca.gov by 4:00 p.m. two days prior to the teleconference so they may be answered during the teleconference. If there is time remaining at the end of the teleconference, applicants may be able to ask additional questions. **Technical assistance regarding programmatic content will not be available.** It is the responsibility of each prospective applicant to join the teleconference promptly at the time stated. Department reserves the right not to repeat information for participants that join the teleconference after it has begun. The teleconference is a public meeting and anyone can participate.

Department will not respond to inquiries regarding the RFA following the conclusion of the teleconference. Department will be unable to provide technical assistance to Applicants during the RFA process.

Department will post a teleconference summary, including all questions and responses by January 14, 2015 on Department website at:

<http://www.cdph.ca.gov/programs/alzheimers/Pages/Default.aspx>

Verbal remarks provided in response to questions during the teleconference will not be binding upon Department until they are confirmed in writing and posted to the website listed above.

G. INTENT TO APPLY

Prospective applicants must indicate their intent to submit an application by sending an email indicating this intent to Julie Parsons, Program Coordinator, ADP, **prior to January 9, 2015** at the following email address: **Email: alzheimersD@cdph.ca.gov**.

The email indicating intent to apply is a mandatory prerequisite to the submission of an application. This information is needed for Department planning purposes. Applications received from institutions that did not submit an email of their intent to apply will be considered non-compliant by Department and will not be reviewed.

H. SUBMISSION OF APPLICATION

All applicants are required to submit one (1) signed original application and three (3) copies. Write "**Original**" on the original application package *after* you have duplicated the copies. Each application set must be complete with a copy of all required attachments and documentation. Submit original and duplicate applications to:

Regular U.S. Mailing Address:

CA Department of Public Health
Alzheimer's Disease Program
MS 7210
P.O. Box 997377
Sacramento, CA 95899-7377

Express Mail or Hand Delivery:

CA Department of Public Health
Alzheimer's Disease Program
MS 7210
1616 Capitol Ave., Suite 74.420
Sacramento, CA 95814

- **Complete application packets must be received by Department no later than 4:00 p.m. on February 6, 2015.** It is the sole responsibility of the applicant to ensure that Department receives the application by the stated deadline.
- **Electronic or FAX applications will not be accepted.**

Applications will be date and time stamped upon receipt. Applications that meet the RFA submission requirements and are received in accordance with the RFA deadlines will be evaluated by Department. **Applications received with incomplete or missing information will be deemed non-compliant by Department and will not be considered for Grant funding.** Review of any application received is subject to the discretion of Department.

The acceptance of an application will not require Department to award Grant at the level requested, or in any amount at all. Expenses associated with preparing and submitting an application are solely the responsibility of the applicant and will not be reimbursed by Department.

I. APPLICATION REVIEW PROCESS

The application will be reviewed by Department staff. Each application will be scored for technical merit and the criteria outlined in this RFA. Applications will receive a technical score of up to 120 points based upon how clearly each of the RFA components are addressed. Applications with the highest scores will be considered for Grant funding.

<u>Component</u>	<u>Maximum Points</u>
Application Cover sheet	5
Institution/Agency Readiness/Capability	20
Work Plan Narrative	55
Work Plan Summary Table with Task-Based Budget	10
Budget & Budget Narrative	25
Program Staff	5
Federal Funding	0
Total	120

J. GRANT AWARD PROCESS

The award of a Grant is based on the review process and the selection of a Grantee is within the discretion of the Department. All applicants will receive notice of their application status by February 27, 2015. The State reserves the right to negotiate the applicant's proposed activities and budgets and not to award a Grant if negotiations are unsuccessful. All the terms of this RFA and subsequent Grant are non-negotiable. If an applicant fails to finalize the Grant agreement, the Department reserves the right to fund another applicant. Once an application is selected for funding, the applicant will receive Grant from the Department. The Grant will incorporate the RFA requirements, including the proposed work plan narrative, work plan summary with task-based budget, detailed budget and budget narrative submitted with the application. During the term of the Grant, if unanticipated events occur that impact the work plan or budget and require changes to them, a written request explaining the need to make changes to the implementation of the Grant must be submitted in writing or email to Department. Any changes must be approved by Department in writing prior to Grantees implementing them. A formal grant amendment may be required based on the changes requested.

K. GRANT CONDITIONS

The term of the Grant agreement is expected to be 36 months from July 1, 2015 through June 30, 2018. This may change if Department cannot execute the agreement in a timely manner due to unforeseen delays. Department reserves the right to amend the term and the funding amount. **Continued funding for years two and three are subject to satisfactory**

grant performance, including, but not limited to, fulfilment of reporting requirements and ability to fully expend all funds in year one (1).

Following the award notification, Grant documents must be submitted for Department review and approval in a timely manner. Grant documents submitted will include the final work plan narrative and work plan summary with task-based budget, and the budget and budget narrative. These documents will be incorporated into the Grant. The requirements of this RFA and the terms of the signed Grant are final and are non-negotiable.

Upon review and approval of these documents, the Grant will be fully executed, funds will be disbursed, and work will commence. The Grant will be of no force or effect until it is signed by Department and Grantee.

The Grantee is to fully expend all Grant funds in accordance with the task-based budget and work plan and in furtherance of the purpose of the Grant.

A copy of the Grant cover page (CDPH form 1229 (rev 7/14)) and relevant attachments are included in this RFA as Appendix A through Appendix E. Additional information related to grant conditions and requirements can be viewed at:

<http://www.dgs.ca.gov/ols/Resources/StateContractManual.aspx>.

Submission of an application by an eligible applicant indicates that the applicant and the official signing on behalf of the applicant organization have read, acknowledged and accepted all the provisions of this RFA, including the standard grant language used by the Department.

PROGRAM OVERVIEW

A. PROGRAM GUIDELINES

Grants issued under this RFA will be made to the highest scoring applicants, based upon an applicants demonstrated capacity to implement the purpose of the Grant. Grant funds appropriated for the purpose of this RFA shall first be used to maintain and enhance existing centers, and to prevent program cutbacks pursuant to H&S code 125280(c). Grants are awarded for the following purposes: to ensure that CADCs improve the quality of care available to the victims of Alzheimer's Disease, increase knowledge with respect to Alzheimer's Disease and related disorders, facilitate the collection of essential data regarding Alzheimer's Disease and related disorders, and to provide valuable services such as information referral, counseling and training to victims and their families.

To be awarded a Grant under this RFA, an Institution must demonstrate the capacity to:

1. Provide diagnostic and treatment services and improve the quality of care to victims of Alzheimer's Disease
2. Provide training, monitoring, consultation and continuing education to the families of those affected by Alzheimer's Disease
3. Increase the training of health care professionals with respect to Alzheimer's Disease
4. Have a proven capacity to implement the above services and the ability to fully expend any funds awarded under this RFA

Grant funds may be used for the following:

1. Salary and benefits for faculty, residents, fellows and staff of the CADC
2. Costs of supplies and equipment
3. General administrative costs of up to 8% of the total grant
4. Any other general costs incurred in providing the services authorized by this grant or the RFA

Grantees will be expected to participate in site visits, committee meetings, conference calls and conferences as necessary to allow the Department, or its designee, to monitor and evaluate the Grantee's compliance with requirements of this RFA.

It is incumbent upon applicants proposing projects under this RFA to review the sections below and any attachments thoroughly, and use the information and templates provided to develop their applications.

B. DESCRIPTION OF PROJECTS

Pursuant to the 2009 Legislative Budget Conference Committee recommendations, appropriations for research activities were eliminated. Therefore Grant funds shall not be used to conduct research projects.

Grant funds may be used only for CADC services, including, but not limited to, diagnostic screening, case management, disease management, support for caregivers, and related services for positive client outcomes. Grantees will be responsible for conducting and participating in the following services and activities on an annual basis:

I. Clinical Services

The focus of the CADC clinical services is providing high-quality, state-of-the-art clinical care that will result in beneficial outcomes for patients with Alzheimer's Disease and related disorders. CADCs will be required to:

- a. Provide clinical services to a minimum of 100 new patients each year
- b. Provide follow-up clinical services when clinically indicated, through telephone calls, letters, clinical visits, or other means
- c. Collect the CADC Common Clinical Care information: Initial Visit and Follow-up Forms
- d. Submit the CADC Common Clinical Care information collected to Department or its designee at least quarterly
- e. Collect additional CADC information, as needed, to improve services

II. Professional Training and Education

The primary objective of the Training and Education Activities is to improve clinical skills for health professionals involved in the evaluation, care, and treatment of persons with Alzheimer's Disease. CADCs will be required to provide these types of training and education activities to health professionals, which may include physicians, nurses, psychologists, social workers, pharmacists, gerontologists, and individuals in the nursing home industry.

Examples of activities and projects that address this objective include, but are not limited to, continuing medical education, in-service training; presentations to professional groups, fellowships, residencies, internships, academic classes, academic lectures, and CADC organized conferences or professional conferences.

III. Community Education

The objective of the Community Education Activities is to provide training and educational opportunities for patients, families, caregivers and community groups. The CADCs will be required to provide caregiver education that focuses on improving the quality of life for persons with dementia and their families.

Examples of activities and projects that address this objective include, but are not limited to, caregiver training, support group presentations, development of support groups and presentations to community groups.

Grantee is required to submit an annual Training and Education Activity Report (TEAR) to Department or its Designee. This report is a summary of all CADC training and education activities for the grant year and will be used to measure grant performance for continued Grant funding.

IV. Outreach/Underserved and Vulnerable Populations

The CADCs are required to develop and implement effective strategies, models, and innovative technologies that are culturally and linguistically competent to reduce the gaps in dementia care, treatment and services for California's underserved, vulnerable and disparate populations. These groups may include rural, urban, ethnic and racial populations, populations with health inequities and uninsured or underinsured persons. Applications will be required to:

- a. Identify and describe target populations for outreach activities
- b. Provide a rationale for the particular underserved/vulnerable/disparate populations selected for targeting
- c. Describe strategies for the provision and implementation of clinical and caregiver support services and the translation and dissemination of successful treatment and care methods into these communities

V. Dissemination and Implementation of the Guideline for Alzheimer's Disease Management

Clinical care at the CADCs should be delivered in accordance with the *Guideline for Alzheimer's Disease Management*, developed by the California Workgroup on Guidelines for Alzheimer's Disease Management. This section should describe how the Institution will disseminate and implement the Guidelines in their clinical setting, and provide education and training to ensure CADCs are providing high-quality, state-of-the-art culturally and linguistically competent clinical care that will result in beneficial outcomes for patients with Alzheimer's Disease and other dementias.

APPLICATION REQUIREMENTS

A. GENERAL INSTRUCTIONS

All applicants are to follow the instructions provided herein, using the attached forms and required templates. All sections, including attachments and templates, must be completed and submitted as requested. Any application that does not comply with this requirement will be considered non-compliant and will not be reviewed. Review of any application received is subject to Department discretion.

1. Develop applications by following all RFA instructions and clarifications issued by Department in the form of questions and answer notices, teleconference, clarification notices, Administration Bulletins or RFA addenda.
2. Before submitting an application, seek timely clarification through participation in the Informational Teleconference of any requirements or instructions that are unclear or not fully understood.
3. Read all instructions carefully. Be sure to include all of the information required in the RFA, including all attachments. Be sure to use the required templates that are provided with this RFA. Re-check the application to ensure completeness.
4. Do not provide materials that are not requested, such as brochures or samples of materials. These will be discarded and not reviewed.
5. In preparing an application response, all narrative portions should be straightforward, detailed and precise. Answer all questions in the order presented with clear titles for each section. CDPH will determine the responsiveness of an application by its quality, not its volume, packaging or colored displays.
6. Arrange for timely delivery of the application package in the manner requested and to the address specified in Section H, page 7, of this RFA.

B. FORMAT REQUIREMENTS

Format the narrative portions of the application as follows:

- Single-spaced with one-inch margins at the top, bottom and both sides
- Use a font style "Arial" with a font size of 12 points
- Print pages single-sided on white bond paper
- Sequentially paginate the pages in the application in the lower right corner
- Bind each application with staples or a binder clip. *Do not use binders*
- All RFA attachments that require a signature must be signed in ink, preferably in a color other than black or red. Signature stamps are unacceptable

C. APPLICATION COMPONENTS AND SCORING

1. PROJECT PROPOSAL COVER SHEET [5 points] (1 page limit)

The Project Proposal Cover Sheet (Attachment A) should be the first page of the application. Please complete and mark it as page #1. The cover sheet should be signed by an authorized representative of the applicant's organization.

2. INSTITUTION READINESS/CAPABILITY [20 points] (4 page limit)

- a. Describe the institution's commitment to performing the work necessary to implement the clinical services, professional and community education, outreach and dissemination of the Guideline activities as required by this RFA. If the institution is a currently funded CADC, include evidence of the CADC's history and actions taken as a result of past funding opportunities and how the activities proposed in this application will build on existing efforts. **[5 points]**
- b. Discuss the proposed staffing pattern and how this adequately supports the proposed activities. Attach an Organizational Chart after the Institution Readiness/Capability narrative that includes this staffing. **[5 points]**
- c. Discuss how staff who will be implementing project activities possess competencies in any or all of the following:
 - Knowledge of best practices in Alzheimer's Disease, including, but not limited to, diagnostic screening, case management, disease management, support for caregivers, and related services for positive client outcomes;
 - Experience in developing training and education programs for health professionals and/or community members that are designed to increase knowledge of Alzheimer's Disease, and incorporates current trends and best practices related to providing high-quality and state-of-the-art care;
 - Cultural/linguistic competency relevant to the population of focus for the proposed outreach **[7 points total]**
- d. Discuss your institution's ability to manage state funds to meet all financial obligations while awaiting reimbursement from the State and the ability to fully expend all funds awarded under this grant. If the institution is a currently funded CADC, include evidence of past fiscal performance and address any instances of unspent funds in the current grant cycle (FY 2012/13 – FY 2014/15). Include what measures have been or will be taken to ensure that future grant funds are spent in full and in accordance with the provisions of the grant. **[3 points]**

The Institution Readiness/Capability Narrative will be scored based on the extent to which each answer clearly demonstrates the Institution's ability and readiness to implement the proposed activities as of July 1, 2015, as well as the institution's history or demonstrated capacity to manage and spend funds.

The Institution Readiness/Capability Narrative should immediately follow the project proposal cover sheet.

3. WORK PLAN NARRATIVE [55 points total]

All proposed projects must include a work plan narrative for each of the three (3) budget periods. The work plan narrative should include the goals, measurable objectives, major activities and performance measures/deliverables proposed for each category listed below (and as described in detail under the Program Overview, Section B – Description of Projects, Pages 11-12). See Attachment B for template format.

The work plan narrative will be scored based on how clearly the work plan describes how the institution will address the primary objectives described below. The work plan narrative should list all activities in the order listed below and follow the Institution Readiness/Capability Narrative.

I. Clinical Services Narrative (15 points)

The applicant must submit a clinical services narrative that provides descriptive information on how the proposed clinical services provided will result in beneficial outcomes for patients with Alzheimer's Disease and related disorders. This narrative must address how the institution proposes to:

- a. Provide clinical services to a minimum of 100 new patients each year
- b. Provide follow-up evaluations or services when clinically indicated, through telephone calls, letters, clinical visits, or other means
- c. Collect the CADC Common Clinical Care information (CCI): Initial Visit and Follow-up Forms
- d. Submit the CADC Common Clinical Care information collected to CDPH or its designee at least quarterly

The clinical services narrative should include the following information:

1. Goal(s): Indicate the overall goal(s) of the CADCs Clinical Services. Goals should state what you hope to achieve.
2. Measureable Objectives: List each measurable objective listed above (100 new patient evaluations, follow up services and evaluations, CCI collection and submission).
3. Major Activities: Identify the specific functions, tasks, and activities the CADC will perform, in the order they will occur, that will lead to achieving each objective. Include actual or proposed evaluation methods that will measure the attainment of each objective.
4. Timeline: Include the approximate month/year for each activity that is realistic and achievable.
5. Staff responsible: Identify staff, by name and/or classification that are responsible for implementing each activity.
6. Performance measures and/or deliverable: Indicate how the institution will measure and/or prove the completion of objectives and tasks. These include tracking measures such as sign in sheets and deliverables, such as summary or data reports.

A clinical services narrative must be completed for each year of the grant period.

II. Professional Training and Education Narrative (15 Points)

The primary objective of the training and education activities is to improve clinical skills for health professionals involved in the evaluation, care, and treatment of persons with Alzheimer's Disease. The applicant must submit a professional training and education narrative that provides descriptive information on the training and education activities they will provide that will meet this objective.

The professional training and education narrative should include the following information:

1. **Goal(s):** Indicate the overall goal(s) of the CADCs Training and Education activities. Goals should state what you hope to achieve.
2. **Measureable Objectives:** List each measurable training and education objective the CADC hopes to achieve.
3. **Major Activities:** Identify the specific trainings, tasks, and activities the CADC will perform, in the order they will occur, that will lead to achieving this objective. Include actual or proposed evaluation methods that will measure the attainment of this objective. Identify the target audience for each training.
4. **Timeline:** Include the approximate month/year for each activity that is realistic and achievable.
5. **Staff responsible:** Identify staff, by name and/or classification that are responsible for implementing each activity.
6. **Performance measures and/or deliverable:** Indicate how the institution will measure and/or prove the completion of objectives and tasks. These include tracking measures such as sign in sheets and training evaluations. This should also include information on the development and submission of an annual Training and Education Activity Report (TEAR), which summarizes all CADC training and education activities for the grant year.

A professional training and education narrative must be completed for each year of the grant period.

III. Community Education Narrative (10 Points)

The objective of community education activities is to provide training and educational opportunities for patients, families, caregivers and community groups that focus on improving the quality of life for persons with the dementia and their families. The applicant must submit a community education narrative that provides descriptive information on the community education activities they will provide to meet this objective.

The community education narrative should include the following information:

1. **Goal(s):** Indicate the overall goal(s) of the CADCs Community Education activities. Goals should state what you hope to achieve.

2. **Measurable Objectives:** List each measurable community education objective the CADC hopes to achieve.

3. **Major Activities:** Identify the specific trainings, tasks, and activities the CADC will perform, in the order they will occur, that will lead to achieving this objective. Include actual or proposed evaluation methods that will measure the attainment of this objective. Identify the target audience for each training, and how the target audience was selected.

4. **Timeline:** Include the approximate month/year for each activity that is realistic and achievable.

5. **Staff responsible:** Identify staff, by name and/or classification that are responsible for implementing each activity.

6. **Performance measures and/or deliverable:** Indicate how you will measure and/or prove the completion of objectives and tasks. These include tracking measures such as sign in sheets and training evaluations. This should also include information on the development and submission of an annual Training and Education Activity Report (TEAR), which summarizes all CADC training and education activities for the grant year.

A community education narrative must be completed for each year of the grant period.

IV. Outreach/Underserved and Vulnerable Populations Narrative (10 Points)

The CADCs are required to develop and implement effective strategies, models, and innovative technologies that are culturally and linguistically competent to reduce the gaps in dementia care, treatment and services for California's underserved, vulnerable and disparate populations. The applicant must submit an outreach narrative that provides descriptive information on how they will develop and implement these strategies, and how they propose to reduce the gaps in dementia care, treatment and services for California's underserved, vulnerable and disparate populations. These groups may include rural, urban, ethnic and racial populations, populations with inequities and uninsured or underinsured persons.

At minimum the narrative should:

- a. Identify and describe those populations the institution will target in their outreach activities
- b. Provide a rationale for the particular selected underserved/vulnerable/disparate targeted populations
- c. Describe strategies for the a) provision and implementation of clinical and caregiver support services; and b) translation and dissemination of successful treatment and care methods into these communities

The outreach/underserved populations narrative should include the following information:

1. **Goal(s):** Indicate the overall goal(s) of the CADCs Outreach Services. Goals should state what you hope to achieve.

2. **Measureable Objectives:** List each measurable objective listed above (identification of under-served/vulnerable/disparate populations, rationale for selecting certain targets and strategies for implementation and how they will reduce gaps).

3. **Major Activities:** Identify the specific functions, tasks, and activities the institution will perform, the order they will occur, and how they will lead to achieving each objective. Include actual or proposed evaluation methods that will measure the attainment of each objective.

4. **Timeline:** Include the approximate month/year for each activity that is realistic and achievable.

5. **Staff responsible:** Identify staff, by name and/or classification that are responsible for implementing each activity.

6. **Performance measures and/or deliverable:** Indicate how you will measure and/or prove the completion of objectives and tasks. These include tracking measures that record how information was translated and/or distributed and when these methods were used.

An outreach/underserved populations services narrative must be completed for each year of the grant period.

V. Dissemination and Implementation of the Guideline for Alzheimer's Disease Management Narrative (5 points)

The applicant must submit a narrative that provides descriptive information on how the CADC will disseminate and implement the Guideline in their clinical practice and in their proposed education and training activities. At a minimum, the narrative should include information on: a) how the CADC will implement the use of these guidelines in their clinical services, including new patient evaluation and patient follow up and; b) information on how the CADC will distribute the guidelines in their proposed training and education activities.

The dissemination and implementation of the Guideline narrative should include the following information:

1. **Goal(s):** Indicate the overall goal(s) of the dissemination of the Guidelines. Goals should state what you hope to achieve.

2. **Measureable Objectives:** List each measurable objective listed above (Implementation in the CADC clinical practice, dissemination in training and education activities).

3. **Major Activities:** Identify the specific functions, tasks, and activities the CADC will perform, the order they will occur, and how they will lead to achieving each objective. Include actual or proposed evaluation methods that will measure the attainment of each objective.

4. **Timeline:** Include the approximate month/year for each activity that is realistic and achievable.

5. Staff responsible: Identify staff, by name and/or classification that are responsible for implementing each activity.

6. Performance measures and/or deliverable: Indicate how you will measure and/or prove the completion of objectives and tasks. These include tracking measures that record how and when the Guideline was used or distributed.

A dissemination and implementation of the Guideline narrative must be completed for each year of the grant period

3. WORK PLAN SUMMARY TABLE and TASK-BASED BUDGET [10 points]

All proposed projects must include a work plan summary table for each year of the three (3) budget periods using the Work Plan Summary Table template (Attachment C). This table summarizes items listed in the work plan narrative and will be incorporated in the Year-End Report. This template includes a table of goals, measureable objectives, major activities, with performance measures and defined dates for activities that are proposed. It also includes the cost of performing each major activity listed, as well as the total cost associated with performing each goal (Task-Based Budget). The costs associated with each major activity and goal will be the Task-Based Budget, and will be the official budget for the grant. This information will be used by Department, or its Designee, to evaluate the performance, progress and accomplishments of the center for future or continued funding. Each applicant will also be required to submit a line item budget (See section 4) which will identify specific costs related to each objective and will justify expenditures associated with the major activities in the Task-Based Budget. The work plan summary table will be scored based on the extent to which all project activities described in the work plan narrative are included, match with the work plan summary table, and the costs assigned to each activity and goal align with the line item budgets provided as Attachment D in the application.

Each work plan summary table should be identified by budget year, and should immediately follow the work plan narrative section. As necessary, add rows to include all objectives and activities for each goal, and ensure that each page is numbered and clearly aligns the activities with the goal and the budget year.

Each measurable objective and activity listed should include both the costs associated with performing the specific activities, as well as the total cost for achieving the goal. The costs in the work plan summary table and Task-Based Budgets will become the schedule for expenditures by the grantee and will be the basis for approval of invoices by Department. Approved work plan summary tables with Task-Based Budgets will become part of the grant as "Exhibit B, Attachment I", "Exhibit B, Attachment II" and Exhibit B, Attachment III". When an institution signs a grant, it agrees that the budgets are acceptable and they will expend State funds in accordance with the budgets.

4. BUDGET AND BUDGET NARRATIVE [25 points]

The application must contain three detailed line-item budgets (See Attachment D for the template). Round all dollar amounts and percentages to whole numbers.

The line-items budgets should immediately follow the work plan summary.

A budget narrative must be prepared for each budget period of the grant term. The budget narrative should provide a brief explanation of each line item (See Attachment E). For personnel line items, explain the time allocation for each position in the budget. Each position included in this section must be identified at least once within your work plan narrative activity descriptions. For operating or general expenses, explain the expenditures for each line item and justify their inclusion. Clearly align the items in the budget narrative to line items budgets, the activities outlined in the work plan narrative, and the costs listed in the work plan summary table.

The budget narrative should follow the line item budgets.

The budget and budget narrative will be scored based on the extent to which the budget narrative clearly relates each expense to the proposed activities and matches the line item budget and Task-Based Budget.

In preparing the line-item budgets, applicants should take into account the following:

- At this time, annual budget amounts for each of the fiscal years shall not exceed:
Year One – July 1, 2015 to June 30, 2016: \$281,800.00
Year Two – July 1, 2016 to June 30, 2017: \$281,800.00
Year Three – July 1, 2017 to June 30, 2018: \$281,800.00

1. Personnel

Personnel includes all personnel costs to operate the project.

- a. List personnel by job category or classification rather than by name to allow for staff changes. Each position must be included at least once within your work plan narrative under Staff Responsible.
- b. Indicate total monthly salary or salary range for Full Time Equivalent (FTEs). The salary range stated must include any anticipated increases (i.e., cost-of-living adjustments and merit salary adjustments) in order to avoid future grant amendments.
- c. Indicate percentage of time the position will be utilized in this project (e.g., 20 hours of work within a 40-hour week is 50 percent). All percentages should be in whole numbers. If biweekly pay periods cause the monthly salary amount to vary, indicate the variance in a footnote at the bottom of the page.
- d. Indicate the amount requested per position based upon the monthly salary ranges and total amounts. If the percentage rate for benefits differs for various

positions, indicate the specific amount for each position on a separate detail sheet.

- e. Subtotal all personnel costs.

2. Fringe Benefits

Fringe Benefits are usually applicable to direct salary & wages. Indicate the percentage rate for fringe benefits used and provide the basis for their calculation in the Budget Narrative (Attachment E). If a fringe benefit rate is not based on total salary, itemize in the Budget Narrative (Attachment E) how the fringe benefit amount is computed.

3. Operating Expenses

Operating Expenses include all costs except personnel costs. List only those items of operating expenses that apply to this project.

Project funds cannot be used for purchase or renovation of buildings, facilities or land, or the purchase of major equipment. Major equipment is defined as property costing over \$5,000 with a life expectancy of one or more years.

Examples of common operating expense line items are provided in the sample format. The following is a list of operating expense items most commonly recognized by the State:

- a. General Expenses – Includes office supplies, books, manuals, publications, and minor equipment (unit cost under \$5,000).
- b. Other Expenses – Includes utilities, telephone, space, insurance, equipment rental, postage, and duplication. These expenses must be itemized identifying the cost for each.
- c. Consultant Services/Subcontractors – Applicants planning to use consultants or subcontractors in the performance of the work must identify each proposed consultant/subcontractor, if known, at the time of application submission; each known consultant's/subcontractor's expertise; describe the responsibilities to be assigned to each consultant/subcontractor. Include a description of plans for overseeing the performance of consultants/subcontractors. Include in the application the consultant's title, hourly rate, and number of hours to be worked (e.g., per week, per month). Each subcontractor must be detailed within your work plan. Next to the subcontractor's name, list the work plan goal and objective of each subcontractor's responsibilities. Per State Contracting Manual 3.06(c) services to be performed under the terms of this RFA or any subsequent grant, are to be performed *primarily with the staff of the public entity* or, in the case of the educational institutions, auxiliaries or foundations, by the faculty, staff or students associated with the particular educational institution. The State reserves the right to approve the use of or changes in any

consultant/subcontractor selection. Notwithstanding the use of any consultant/subcontractor, the applicant will ultimately be responsible for performance of all terms and conditions of the resulting grant.

- d . Indirect Costs – These are overhead costs that are not directly identifiable to the applicant or to the applicant’s project and are generally expressed as a percentage of total personnel costs. Regulations specific to the CADCs (H&S Code 125280) allows for general administrative cost of up to 8 percent of the total grant.

5. PROGRAM STAFF [5 points] (3 page limit)

Identify all staff involved in the Institution’s activities, the functional titles of each person and the percentage of effort the individual will be utilized in this project. If an individual will not be funded by this grant, list their effort as 0. If a position is listed as vacant, list only the position title and the percentage of effort. Applications received without this information will be deemed non-compliant by the Department and will not be eligible for funding.

Identify staff with overall responsibility for the following tasks:

- a. Principal Investigator in charge of the CADC
- b. Custody of the grant
- c. Fiscal monitoring of the grant
- d. Preparation for site visits
- e. Preparation of Year-End Reports
- f. Preparation of Training and Activities Report
- g. Patient Information Coordinator
- h. Common Clinical Care Information collection and reporting

6. FEDERAL FUNDING [0 points] (5 page limit)

Identify any federal funding currently received by the Institution. Funding that ends prior to the proposed start date of this grant award does not need to be included. The federal funding information should be included if the Institution anticipates that funding will be renewed at any time during the three-year grant period. Applicants should provide a brief narrative on activities funded by federal monies that documents a clear separation of duties between federally funded activities versus activities proposed under this RFA. This section will not be scored, but is a requirement of this application. Applications received without this information will be deemed non-compliant by Department and will not be eligible for funding.