

NWX-HHS-AOA-1 (US)

Moderator: Erin Long

May 14, 2015

11:30 am CT

Coordinator: Welcome and thank you for standing by.

All participants are in a listen only mode for the duration of today's conference which is being recorded. If you have any objections, you may disconnect at this time.

After the presentation we will conduct a question and answer session. At that time if you have a question, please press star 1 and record your first and last name clearly when prompt.

Your host for today is Miss Erin Long. Ms. Long, you may begin. Thank you.

Erin Long: Hi everyone. Thank you for joining our call today. The call is to provide some information on the Administration on Aging/Administration for Community Living (AoA/ACL)'s recent funding opportunity announcement entitled Alzheimer's Disease Initiatives - Specialized Support of Services project (ADI-SSS). This project is funded solely by the 2015 Prevention and Public Health funds that come out of the Affordable Care Act.

Out of the gate I want to be sure to tell you that there is an updated funding opportunity announcement. You may hear me refer to it as FOA. And it was - the FOA was originally posted on May 6, we realized some things were missing and posted a new version on May 8. So please be sure that you're working from the May 8 version of the FOA because it does contain most of the information on the activities that you must engage in.

So basically the purpose of this call is to review the funding opportunity announcement, and then provide you all the opportunity to ask some clarifying questions. We will then post the recording and transcript of the call, and also post some frequently asked questions to provide a little extra direction during the process of drafting your applications.

To start off, I already gave you the name and the acronym. We require that, if you're going to apply for the grant, you have a letter of intent submitted to us by May 20. That would be next Wednesday. The letter of intent can come by email. I would actually prefer that it come by email just so that we can keep everything in one place. Then the due date for the applications is July 6.

What I'm going to do is go through the funding opportunity announcement. I'm not going to read it, but I'll sort of point out the highlights of it. So this funding opportunity is for cooperative agreements. By cooperative agreements, we mean that as an agency, AOA/ACL, and me as the program officer, will be substantially involved in the planning of your project and monitoring it closely to insure that we meet the goals that have been outlined in your proposals and in your work plans.

This project is designed to fill gaps in dementia-capable long term services and supports for persons living with and those at risk of developing Alzheimer's Disease and related dementias (ADRD), and their caregivers by providing quality, person centered services to help them remain independent and safe in their community.

There is a definition of dementia-capable systems that's included in the funding opportunity announcement (FOA). Basically, it is a system that meets the unique needs of persons living with dementia by identifying those with

possible dementia and recommending follow-up with a physician, insuring that the staff they encounter have appropriate training and understanding of the unique needs and services, and to provide quality, person centered services to help them remain independent and safe in their communities.

The way this ADI-SSS grant is designed is that we have identified four specific areas where we are aware of existing service gaps. The applicants should select three out of the four areas that they are going to address with the programs that they design.

This is the second time that this grant has been awarded. In 2014, we awarded ten grants to a variety of entities across the United States and Puerto Rico. They are all actively implementing their grants at this time.

Again, we have the four areas are 1) provision of effective support of services to persons living alone with ADRD in the community; 2) provision of effective care supportive services for persons living with moderate to severe impairment from ADRD and their caregivers; 3) improvement of the quality and effectiveness of programs and services dedicated to individuals aging with intellectual and developmental disabilities with ADRD, and those at risk of developing ADRD, and 4) development and delivery or delivery of behavioral symptom management training and expert consultations for family caregivers.

For items - for Points 1, 3 and 4, you might be able to find examples of the kind of activities that grantees are working on now. The Point 2 with regard to individuals living with moderate to severe impairment and their caregivers is a new service area that we have included this year. It's a target of the Advisory Council to the National Alzheimer's Project Act - the NAPA Act.

For more information on why we chose that, you might look at the NAPA web page and look for the presentations that were done at Advisory Council Meeting #15. They had an expert panel on advanced dementia and provided recommendations. So that might be - because that's a new area, I just wanted to point out why we decided to add that to the options for this project.

So we plan to award as many as ten grants. We have approximately \$9,825,091 to award to the various applicants. It's a little confusing in the FOA - I sort of misrepresented or it appears misrepresented in the funding announcement. It might be a little bit confusing in the way it was stated - that it says that the average award will that 9 million number.

That is the number available for awards, so that was an error on my part, and it is not the average award. The average award - the ceiling of the awards that we'll be giving is \$1 million with a floor of \$800,000. We anticipate the awards starting on September 1.

So one of the things I do want to make sure - I'll go in more depth to the eligibility requirements for the project - that it is clear that to be eligible for this project you have to already be operating within a dementia-capable system. Your application must demonstrate the existence of the dementia capable systems dedicated to the population you serve, and also articulate opportunities for the services that you're proposing that will enhance the system.

The services need to be evidence-based or evidence-informed to the extent possible. And when it comes to the dementia-capable system, it has to be a well-developed dementia-capable system or one that would be well developed within - and not be at the beginning of the development of a dementia-capable system.

The funding opportunity description, when you read it you'll get some background on the reasons why we have chosen the target areas that we have chosen, and a restatement of the target areas, and again why we did - why we chose what we did to do what we do.

So now I'm moving to the funding opportunity requirements. As I stated before, it will be a cooperative agreement. The cooperative agreement the way we designed these for this program is that it will have two phases. There will be a planning phase and an implementation phase.

In the planning phase, which would be when the grantee reviews the work plan that was developed for the application, and works with the program office. One of the components of this grant program is that we do have access to the National Alzheimer's and Dementia Resource Center. And they conduct activities to support this program and inform our grantees so as to better implement their program. And they design learning collaboratives around the activities that grantees are expected to engage in and grantees are expected to participate in those collaboratives.

So during the planning phase the successful applicants will be expected to work with me as the program manager and the technical assistance liaison to refine their projects. During this planning phase - it shouldn't last any longer than six months - of the first six months of the project. And during this planning phase grantees would only have access to the first 15% of the grant funds.

Once an agreeable work plan is in place, the grantee would then receive approval to move to the implementation phase of their program. And I just want to be clear. It can last up to six months. If you don't require six full

months to get to a place where everyone is comfortable, depending on the program it could be a month, it could be four months - whatever it takes.

Once in the implementation phase, the grantee will then begin carrying out the plan to accomplish the goals, objectives and core components of the project. And before a grantee can move to the implementation phase, they must go through a planning exit conference with myself and the TA Team.

There is a direct service requirement associated with this grant. The successful applicants are required to dedicate 30% of the first year budget, 40% of the second and 50% of the third to the provision of direct services to the communities that they service.

In light of the service priority of this funding opportunity, I can't stress enough that applicants that have budgets that reflect low administrative expenses will receive a more favorable rating because the goal is to have more resources going towards the provision of service and the grant activities rather than paying for the administrative costs of overhead.

There is a data collection piece of this program. Grantees will be required to collect information on services provided under the authority of an existing OMB approved data collection. It is our hope that we will also be getting approval for a second data collection that's more aligned - that's very targeted towards this ADI program. But what we have in place now will be demographics related to the provision of services and the expenditure of funds.

Each grantee will be required to conduct an evaluation at the onset of their programs. Grantees will be required to conduct a baseline assessment of the dementia capability of their existing system. The assessment will afford

grantees the opportunity to create a metrics to use in future service program evaluations as well as the basis for setting goals, objectives and milestones for program monitoring. At the conclusion of the program period, successful applicants will be able to document the progresses they have made by reporting on the aspects of their project that were successful and those that were not, as well as the lessons learned.

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

As I mentioned before, there is a technical assistance component of this project. Applicants will - are to draw on expertise of our program staff and our resources to develop and sustain their work plan. The grantees will be expected to participate in technical assistance activities.

We have the learning collaborative projects that are really driven by the wants and needs of grantees. We may have a topic that we discuss, and on which we choose to base the learning collaboratives. But then the members of the learning collaborative decide what the direction that they will work on whatever topic is decided.

The statutory authority for this program is within the Older Americans Act. While the funding is provided out of the Affordable Care Act PPHF money, the authority under which we are awarding these cooperative agreements is Title IV of the Older Americans Act.

Just to go over the award information again, they will be cooperative agreements. We have just under \$10 million in funding available for

approximately ten grants with a ceiling of \$1 million and a floor of \$800,000. The project periods - these are what we call forward funded grants. That means that the funds are awarded to the overall project, but then they're broken into three 12 month project periods. So it's a three year forward funded, meaning you'll get \$1 million to expend over three 12 month budget periods, all of which have to be outlined in the applications.

The size of the awards will vary based on what folks ask for and what the Assistant Secretary deems to approve once all of the reviews are conducted. All of the applications, those that make it through the initial screening process, will be reviewed by panels of outside experts, scored, and then recommendations will go to the Assistant Secretary. There are a couple paragraphs in here about what cooperative agreements, what substantial involvement under cooperative agreements means.

And then the responsibilities of the grantees as well as the responsibilities of the ACL project officer - they're pretty standard. Fulfill the requirements of the grant initiative, communicate with the project officer and the TA, conducting that baseline assessment that I mentioned earlier, producing and submitting all the reports. And at the conclusion of the project a summary or manual - and this is an important piece - a summary or a manual describing how the project was conducted and the goals were achieved. And it also could include how - whatever barriers you might have encountered and how you addressed them.

Grantees would be required to cooperate with any federal evaluation efforts, participate in those learning collaboratives I talked about, and also anything that you create including a disclaimer. As the project officer, my responsibilities include performing the day to day federal responsibilities, working cooperatively with the grantees to clarify programmatic and

budgetary issues, assisting grantees in understanding the strategic goals, policies and objectives, and the priorities of not only AOA and ACL, but the US Department of Health and Human Services and other federally sponsored project, providing to the technical advice, attending and participating in major events, and communicating just generally overall with the grantees.

As far as moving on to Section 3, the eligibility information - we're going to award the cooperative agreements to eligible domestic, public and/or private entities. Eligible entities are those that demonstrate the existence of the dementia capable system, dedicated to the population and articulate opportunities. I've already said that. Actually, that's in there twice. So that just means it's doubly important.

There are some organizations that are not eligible for this opportunity. Specifically the organizations and entities that received 2014 grants for this are ineligible. And also individuals, foreign entities and sole proprietorship organizations are not eligible to compete for or receive awards under the announcement. But other than that it's pretty wide open for a wide variety of entities to apply.

There is a cost sharing/match requirement included in this opportunity. And it is 25% either in cash or in kind. The applicants can apply for a waiver for a portion of the match, but it won't go any lower than 15%. And it would have to be a pretty good reason to receive that waiver.

You will need - applicants will need to meet the non-federal share of the project cost in their applications. There are two types of match - non-federal match cash and 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 fund. Volunteer time and use of facilities would be in kind.

I would like to stress that we encourage applicants not to exceed the minimum match requirement, the reason for that being that should a grantee not succeed in reaching their match and if they've over matched, should they - and their application was accepted with that over match, and then they are unsuccessful in achieving that match number, it will affect their award because - and whatever percent of the match that is not achieved would - that same percentage would have to be deducted from their base award amount. So again we encourage you not exceed the minimum match requirement.

So the responsiveness criteria - we have pretty substantial responsiveness criteria in this. Every application will go through an initial programmatic screening to verify that the applicant is responsive to the requirements. Those that don't meet the required criteria will be administratively eliminated and will not be reviewed.

The responsive ADI-SSS project application will do the following things: demonstrate an existing dementia capable home and community based service system or be well placed to have one in place within a year of the grant award; will not propose conduit or pass through funding for another agency to lead the project; not propose brick and mortar project; not be an individual entity, foreign entity or sole proprietorship organization; be leaders - they will be leaders or partners in existing dementia capable systems designed to improve the quality and effectiveness of programs and services.

They will demonstrate preparedness and agree to conduct baseline assessment of the dementia capability of the existing system with the intent of creating metrics for the use in future program evaluations as well as the basis for

setting goals, objectives and milestones for monitoring - program monitoring and reporting throughout the program period; demonstrate a capacity to serve persons of all ages with dementia including those with intellectual and developmental disabilities; develop and implement strong collaboration among entities serving individuals with ADRD and their caregivers including those but not limited to the state's agency on aging, Medicaid and agencies that serve persons living with intellectual and developmental disabilities.

Build on existing access points for services relevant to those agencies; agree to participate in learning collaboratives devoted to dementia capability and specialized services; and include a sustainability plan for program elements that are deemed successful. So those are the basic criteria. If you don't do those things clearly, then the application would be administratively eliminated.

Also there are application screening criteria that I want to point out. They must be submitted by 11:59 on I think it was July 6 is the day - on the due date. If they are received after that time they will not be considered.

The project narrative section must be double spaced on 8.5 x 11 with one inch margins, standard size font not less than 11. Very important is the project narrative must not exceed 20 pages. I know that seems like a little bit of space for a lot of information. But there are no limitations on the appendices that you can attach. So that would be where you would put things like budgets, budget narrative, work plan, resumes of key personnel and letters of commitment - things like that.

If an applicant submits an application with more than 20 pages of a project narrative, anything beyond the first 20 pages will not be counted or reviewed. And if your application is eliminated, you would be notified as appropriate.

Submission information. There is a substantial amount of information on what is required for applying for an ACL grant. I think it's pretty clear, but I want to be sure to encourage you to make sure that you have all these items in place well before the due date of the application.

Specifically we've run into problems with applicants not having DUNS numbers and access to the system award management system. They call it Sam - www.sam.gov is where all of that goes in. If you do not have a DUNS number and access to the Sam System on the day of the submission- it takes about two weeks to get that straightened out.

If you do not have that access ready to go and you can't upload your application, that would not be a reason for us to give you an extension or anything else. Just please make sure that you have all the access, you're registered in the Sam System, and have that all ready to go so that even if you're doing your application up to the last minute, that you will be able to do the submission.

The applications are due by 11:59 on the 6th. If you don't get the application in that time, there are very limited reasons why we would allow - we would consider if you had problems. Say if you had technical difficulties with the grants.gov system and you're submitting your application and it's not - the complication is a system complication but not because say you didn't have the DUNS number or the Sam access. You would request a ticket from the grants.gov. They would give you a ticket number, and then you would contact us if you were unable to make your submission. But it's very well laid out within a few pages of the - I think it's Pages like 9 to 11. And the Sam System and grants.gov have help desks that can help you sort things out if you - but I would encourage you to do that sooner rather than later.

Content and form of the application - the letter of intent as I mentioned is required. It is due on the 20th of May. There are required pieces of the application - the overall document. The application narrative is called the project narrative. There are several components of the narrative.

In this little description in the FOA you will see the requirements of the margins and the paper. The components of the narrative are the summary abstract, the problem statement, goals and objectives, proposed intervention, target populations, outcomes and project management, evaluation, dissemination and organizational capacity - the project narrative is the very - I can't stress enough, most important part of the application. It is the primary basis by which your application is reviewed. It should be clear and concise and should contain all of these areas.

I'm not going to go through all of the descriptions of those areas because I want to give you enough time to ask a few questions. The problem statement - it's bulleted. It's the description of what we're looking for. Goals and objectives - it should be clear and concise. Identify your proposed goals. We recommend that applicants consider having one overall goal, and then major objectives.

How you plan to address the problems that - in the intervention that you are going to use to address the problems. They must be evidence based, evidence informed. The target populations - this section should describe how you plan to involve community-based organizations in a meaningful way. How you - and how you will propose interventions to target disadvantaged populations.

Outcomes - very, very important piece of the project. We will not fund any projects that do not include measurable outcomes. Your outcome section,

should describe how project funding might benefit the field at large, and list measurable outcomes in an optional work plan grid. We have provided at the back of the document - there is a sample work plan. There is a sample budget. There's a sample budget narrative.

Project management should be clear - a delineation of roles and responsibilities. Should specify who would have day-to-day responsibilities for key tasks, and describe the approach used to monitor and track progress.

The evaluation - this section should describe the methods, techniques and tools that will be used to determine whether or not the proposed intervention achieved its anticipated outcomes in the lessons learned.

Dissemination - this section should describe the method by which you'll disseminate the project's results and findings. And organizational capacity should include the organizational capacity statement and vitae for the key personnel.

Each application - this as I mentioned before, this can be the org chart, vitae - all that can be included in an appendix. A very important piece of the project is the work plan. It should be consistent with the narrative and the budget, should cover all three years of the project period and include a statement of the project's overall goal, anticipated outcomes, key objectives and major tasks, and should include timeframes in which - and the lead person in which the task will be completed. As I mentioned, there is a sample included.

We encourage letters of commitment from key participating organizations. The budget narrative is - there's a sample. Budget narrative and justification is - there's a sample in the back. You are encouraged to pay particular attention to this document, and is a necessary component of the application.

We've gone over the due dates. We are having the call. Funding restrictions - no construction, no basic research, no continuation of existing project without some sort of expansion. Meals are generally unallowable. No - the following activities aren't fundable: pre-award cost, construction, - where did it go? I know I have it.

Other requirements -. There is a cap on researcher salaries. None of the funds appropriated from this program shall be used to pay the salary of an individual through a grant cooperative agreement in rates in an excess of the executive level two. These are restrictions that come with the Affordable Care Act funding. So they're going to seem odd to you as I read them off.

Gun control prohibition, and none of the funds appropriated in this program may be used in whole or part to advocate or promote gun control. Needle exchange - notwithstanding any other provision of the act, no funds appropriated in this act shall be used to carry out a program distributing sterile needles and syringes or and lastly, publicity and propaganda lobbying. You can't use these funds to do any sort of lobbying.

So the last section I want to run through real quick is the criteria by which the applications will be reviewed. I would encourage you to pay very, very close attention to this and answer the questions - all of the questions - that are included in these because these are the criteria that our independent review panels will be reviewing the applications.

You'll see as far as each application is 100 points. It's broken down into five areas. A point value is assigned to each area. And again we have quite specific questions that reviewers will look at to see if you are meeting the requirements.

Project relevance, current needs - just making sure you understand the community that you're serving and what you want to do there.

The approach - it's broken down very, very specific on the goals and objectives, work plan management, methods of assessing the problem. And then there's the budget that you have to have all years. Does it reflect the required direct service requirements? Do you have the match?

The project impact is the next section. It talks about outcomes, evaluations, dissemination, sustainability - very important including the sustainability plan in your project. And the organizational capacity - does the organization have clearly identified their capacity to carry out the proposed project and have the ability to do it? And very important is that they're not - that the applicant is not proposing itself as a conduit or pass through for funding another agency to lead the project. Organization and management - does the organization, demonstrate the commitment to lead the project?

So those are the highlights of the questions that are - applications need to be able to answer, and that the reviewers will be able to take out of their review process.

I've explained the review process - independent panels, three experts in the area of concern. And they will be convened. And they will each review them independently and convene and assign scores to each application. And then the reviews will be tallied and provided to the Assistant Secretary for Aging Administration for Community Living. And she will make the final decision.

Really the rest, is required reporting. What this is - since this is PPHF money, and there are special reporting requirements in addition to what at ACL

typically requires. Subcontracts are required to be reported. In an effort to be transparent they are - all of them must be reported. And then they will be put on the internet for review of the public.

The agency contact - I am the project officer. My name is Erin Long. I can be emailed at erin.long@acl.gov. And then we have the grants management specialist assigned to this is (Sherlonda Blue) she can be contacted at Sherlonda.blue@acl.hhs.gov.

There's a bunch - the other information and attachments. There are some definitions that we - of items that we use or terms that we use throughout the funding opportunity announcement. They're all included in the other - in the attachments to the FOA.

There are several application elements you need to pay attention to. It's very clear on what's required and what's not. And I'm not going to go through those one by one.

So operator, if you want to open the line up so that if people have questions they can ask them now. What I'll try to do is through these - whatever questions I get, I will create a frequently asked question as well as building off of one that we've had in the past. And then I will post it. And as I - over the course of the period where the proposals are being prepared, if I get questions I will then amend it so that everyone gets answers to the questions that individuals ask.

**THE QUESTION AND ANSWER PERIOD OF CALL HAS BEEN INCLUDED IN THE
FAQ DOCUMENT ASSOCIATED WITH THE ADI-SSS FOA**

Erin Long: So we're all done. Thank you everyone so much for listening in and asking great questions. Certainly if something comes up in - as you begin working on your proposals, you're welcome to ask any questions of me. I won't necessarily be able to answer you directly, but I will - the questions that I can answer, I will answer them and post them on the updated - an updated FAQ if that's appropriate.

I wish everyone that decides to go for this the very best of luck. And thank you for your attention to this issue. And look forward to implementing a great program. So thanks and good afternoon.

Coordinator: Thank you. This concludes today's conference. Participants may disconnect at this time. Thank you for joining today's conference.

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