APPENDIX 1--Format and Structure of Required Application Content

Format of the Application

Each application must include <u>all</u> contents described below, in the order indicated, and in conformance the following specifications:

- White paper only unless inserting colored paper to differentiate between sections of the application.

- Colored ink may be used on the cover of the application. Black ink is required for all other pages of the application.

- Use 8.5 x 11" pages (on one side only) with 1" margins (top, bottom and sides). Paper sizes other than 8.5 x 11" will not be accepted.

- Font not smaller than 12-point and an average character density not greater than 14 characters per inch.

- Abstract may be single-spaced but no more than one page.

- Double-space (no more than 3 lines per vertical inch).

- Paginate all pages of the narrative.

- Page limitations for the Project Narrative portion of the application*:

Page Limitation	Type of Grant
15	Respite for Adults
15	Respite for Children
15	Community-Based Treatment Alternatives for Children
30	Quality Assurance and Quality Improvement in Home and Community-Based Services
30	*Independence Plus* Initiative
40	Money Follows the Person Rebalancing Initiative
30	Community-Integrated Personal Assistance Services and Supports
40	National State-to-State Technical Assistance Program for Community Living
30	Technical Assistance for Consumer Task Forces
30	Family-to-Family Health Care Information and Education Centers

* The following items are <u>not</u> included in the Project Narrative portion of the application and, therefore, do not count toward the total page limit:
- Applicant's Title Page and Cover Letter;
- Standard Forms from the Application Forms Kit;
- Letters of Agreement and Support;
- Project Abstract;
- Budget Narrative/Justification; and
- Appendices.

SUBMITTING THE APPLICATION

<u>What</u> to Send
Applicants are required to submit:
1. An original application that includes the original signatures of approving officials;
2. Two photocopies of the application;
3. A 3 ¼" floppy disk (high density disk(s) that holds at least 1.44 megabytes) or a CD containing a complete copy of the application. Please label the disk with the name of the state, title of the project, and the type of grant for which you are applying; and
4. An electronic version of the application (all material included on the floppy disk or CD) via e-mail to Sona Stepp at sstepp@cms.hhs.gov. Applicants may include electronic attachments (i.e., letters of support) with the electronic version of the application that will be submitted via e-mail to CMS.

<u>Please,</u>

<u>Do Not</u>	<u>Do</u>
● Bind or staple applications	● Paper clip or rubber band your applications; or
	● Place applications in 3-ring binders; or
	● Insert applications into large, unsealed envelopes with a label on the outside of the envelope that clearly indicates the name of the state, title of the project, and type of grant for which you are applying.
● Include side, top or bottom tabs	● Insert a sheet of colored paper to differentiate the sections of the application. (Sheets of colored paper inserted into the application in lieu of tabs will not count toward the narrative's total page limit.)
● Use Microsoft Word XP	● Use Microsoft Word® (non-XP format); or
	● WordPerfect®; or
	● Microsoft Excel®

All application materials must be submitted by the due date. No materials will be accepted after the deadline.

Applications submitted by facsimile (fax) transmission will not be accepted.

When to Send the Application

All applications are due by the closing date listed in the "Timetable" section of this solicitation. Applications mailed through the U. S. Postal Services or a commercial delivery service will be considered "on time" if received by close of business on the closing date, or postmarked (first class mail) by the date specified and received within <u>five</u> business days. If express, certified, or registered mail is used, the applicant should obtain a legible dated mailing receipt from the U. S. Postal Service. Private metered postmarks are not acceptable as proof of timely mailings. Applicants will not receive official notification that their application has been received on time from CMS.

Applications that do not meet the above criteria will be considered late applications. Those submitting late applications will be notified that their applications were not considered in the competition and will be returned without review.

Where to Send the Application

All application forms and related materials (<u>except</u> for the electronic version of the application sent via e-mail to Sona Stepp) must be submitted to:

> Real Choice Systems Change Grants for Community Living
> Attn: Marian Webb
> Centers for Medicare & Medicaid Services
> OICS, AGG, Grants Management Staff
> Mail Stop: C2-21-15
> 7500 Security Boulevard
> Baltimore, Maryland 21244-1850

Questions regarding application forms and related materials may be directed to:
> Real Choice Systems Change Grants for Community Living
> Attn: Judy Norris
> Centers for Medicare & Medicaid Services
> OICS, AGG, Grants Management Staff
> Mail Stop: C2-21-15
> 7500 Security Boulevard
> Baltimore, Maryland 21244-1850
> (410) 786-5130
> E-mail: jnorris1@cms.hhs.gov

Required Contents

A complete proposal consists of the following materials organized in the sequence indicated. Please ensure that the project narrative is page-numbered. The sequence is:

- Applicant's Title Page and Cover Letter
- Standard Forms from the Application Forms Kit
- A letter of endorsement from the Governor, State Medicaid Director, or Agency administering a relevant section of the 1915(c) home and community-based waiver (if applicable)
- Project Abstract
- Project Narrative
- Budget Narrative/Justification

- Required Appendices
- Attachments (e.g., Letters of Agreement and Support)

Applicant's Title Page and Cover Letter

A letter from the applicant identifying the Agency serving as the lead organization, indicating the title of the project, the principle contact person, amount of funding requested, type of Real Choice Systems Change Grant proposal, and the names of all organizations and partners actively collaborating in the project. The letter should indicate that the submitting Agency has clear authority to oversee and coordinate the proposed activities and is capable of convening a suitable working group of all relevant partners.

Standard Forms from the Application Forms Kit

The following standard forms must be completed with an original signature and enclosed as part of the proposal.

Grant Application Kit

SF 424:	Application for Federal Assistance
SF 424A:	Budget Information
SF 424B:	Assurances--Non-Construction Programs
SF LLL:	Disclosure of Lobbying Activities

Biographical Sketches
Additional Assurances

You may obtain copies of these forms directly from the CMS Web site at:
http://www.cms.hhs.gov/researchers/priorities/grants.asp.

Note to Applicants: On Standard Form 424 (SF 424) "Application for Federal Assistance":
- In Item 11 (Descriptive Title of Applicant's Project), please state the specific type of Real Choice Systems Change Grant for Community Living for which you are applying (e.g., Respite for Adults, Respite for Children, *Independence Plus* Initiative, Money Follows the Person Rebalancing Initiative, etc.); and
- Item 16 (Review by State Executive Order 12372) does not apply to these grants; therefore, please check "No" to item 16b.

Letters of Endorsement and Support

If applicable, the grant application must include a letter of endorsement from the Governor, State Medicaid Director, or Agency administering a relevant section of the §1915(c) home and community-based waiver.

We advise all applicants to include additional letters of support from consumers and other key stakeholders, as such letters that give substantive support to the Agency's narrative application that describes the extent of partnering in the community and the involvement of consumers. These letters will not be counted toward the narrative's page limitation and should be included as attachments.

Project Abstract

The one-page abstract should serve as a succinct description of the proposed project and should include:

- The overall goals of the project;
- The total budget; and
- A description of how the grant will be used to develop or improve community-integrated services and the ultimate measurable outcomes and products of the endeavor.

Project Narrative

The project narrative should provide a concise and complete description of the proposed project. It should contain the information necessary for the review panelists to fully understand the proposed project. It should address the current infrastructure, use of grant funds, work products and timeline, and staffing.

The narrative of the application must not exceed the page limits for the specific type of grant under consideration. [See "Format of the Application" (above).] Please do not rely on Appendices to describe key details of your project, since they will not be used in the rating process (except for "Charting Personal Assistance Services" which applies only to C-PASS applicants. See Appendix 7 for additional information concerning C-PASS requirements).

Organize the grant application according to the general areas described below. Please tailor the information provided in each of the categories so that the information is directly relevant to the specific type of grant for which you are applying. The areas below correspond to the rating criteria against which requests for grant funding will be evaluated. Please refer to that section for the point value and further information about each of the categories within the review criteria. Below is a brief outline of the topic areas, followed by more specific discussion.

	Topic Area	Brief Summary
1.	Background and Problem Identification	Describe the State's community long-term support system. Identify the problems for which you believe the proposed project will be an answer.
2.	Project Description and Methodology	Describe what you would do, and how. Pay particular attention to the measurable outcomes you will achieve, especially the enduring systems improvements. It is worth examining the extent to which the problems identified in the first section (problem identification) will be addressed by the particular methods you are describing in the second section (methodology).
3.	Significance and Sustainability	How significant are the measurable outcomes likely to be? Measurable outcomes may be measured in terms of such factors as the type of change, the number of people who will benefit from the systems changes and/or the degree to which they may benefit.
4.	Formative Learning	Please describe the system you will use to monitor developments, learn from mistakes, and use experiences to improve the system in a timely and effective manner.
5.	Partnerships	Please describe the groups and organizations with which you will partner to accomplish significant systems changes.
6.	Budget Narrative/Justification and Resources	Please explain your budget and why this is a good investment of funds. Also, explain the financial or in-kind investments you and your partnering organizations are making to ensure that the project is both successful and significant.

The above categories are explained in more detail in the remarks that follow.

Background and Identification of the Problem
This section is composed of three parts. In this section the applicant sets a context for describing the problem that the grant funds will be used to address.

Background of the Current System:

Provide a general description of the state's characteristics, populations served, and service options under the applicable grant category. For example,

1. *Respite for Adults*—Furnish a general description of its community-based long-term care system, family support services, and existing respite services for adults.

2. *Respite for Children*—Provide a general description of its community-based long-term care system, family support services, and existing respite services for children.

3. *C-TAC*—Describe the current system of mental health services available to children in the state and current barriers to successful community-based mental health services.

4. *QA/QI in HCBS*—Furnish a general description of its community-based long-term care system and existing QA/QI in HCBS systems. Also, include an assessment of the strengths and weaknesses of their existing incident management system and information technology services that support their QA/QI in HCBS activities.

5. *Independence Plus Initiative*—Describe existing opportunities within the State for self-direction under the State's Medicaid benefit.

6. *Money Follows the Person Rebalancing Initiative*—Describe the needs of the proposed target group and the geographic area targeted, if any, in the project. Provide an analysis of existing Medicaid State Plan, HCBS waiver, and demonstration project services and supports that support the transition from institutional to community-based services.

7. *C-PASS*—Describe the state's current long-term service and support systems; home and community-based services; personal assistance services options, programs and policies (including who is served and how services are accessed), and who funds the services.

Analysis of Strengths and Weaknesses

Provide an analysis of the strengths and challenges of the current system, as relevant to the applicant grant category. For example,

1. *Respite for Adults*—Discuss barriers to performing a feasibility study and implementation plan and anticipated barriers to implementing an adult respite demonstration project in the State. Also, describe actions that may be used to implement a respite demonstration project, including: (a) any waiver amendments, new waivers, or State Plan amendments; (b) any regulations or policies that may need to be modified; and (c) any additions to or modifications of information systems, quality assurance and improvement systems, intake and assessment systems, and systems that support self-directed services and service budgets.

2. *Respite for Children*—Discuss barriers to performing a feasibility study and implementation plan and anticipated barriers to implementing a children's respite demonstration project in the State. Also, describe actions that may be used to implement a respite demonstration project, including: (a) any waiver amendments, new waivers, or State Plan amendments; (b) any regulations or policies that may need to be modified; and (c) any additions to or modifications of information systems, quality assurance and improvement systems, intake and assessment systems, and systems that support self-directed services and service budgets.

3. *C-TAC*—Discuss issues involved in planning a successful home and community-based mental health services waiver and describe a reasonable plan for gathering data to plan a successful demonstration.

4. *QA/QI in HCBS*—Discuss barriers to performing a feasibility study and implementation plan and (if appropriate) developing a request for proposal (RFP). Discuss any anticipated barriers to implementing a QA/QI in HCBS project in the State.
5. *Independence Plus Initiative*—Discuss barriers (and the plan to address those barriers) to introducing or expanding the principles of self-direction to targeted home and community-based services.

6. *Money Follows the Person Rebalancing Initiative*—Discuss barriers (and the plan to address those barriers) to performing a feasibility study and developing an implementation plan. Also, discuss anticipated barriers to implementing Money Follows the Person Rebalancing Initiative in the State. Applicants are strongly encouraged to consider utilizing, as part of the implementation plan, the Medicaid Statistical Information System (MSIS) to capture enrollment data and to track service utilization.

   Also, describe actions that may be used to implement a Money Follows the Person Rebalancing Initiative, including: (a) any waiver amendments, new waivers, or State Plan amendments; (b) any regulations or policies that may need to be modified; and (c) any additions to or modifications of information systems, quality assurance and improvement systems, intake and assessment systems, and systems that support self-directed services and service budgets.

7. *C-PASS*—Describe the state's capacity to support people of any age who have a disability of long-term illness to live in the most integrated community, in order to identify the challenges that need to be addressed under the applicable grant category.

Identification of the Problem:

Identify the "problem(s)" that you are intending to address.

Project Description and Methodology
In this section, the applicants describe all aspects of the proposed project: the goals to be achieved, how the proposed project will address identified problems, the work plan for completing the project, the linkages between this project and other projects, and key management staff for the project.

Goals/objectives of the program—Describe how the grant funds will be used to meet the goals of the grant program.

The methods through which the problem will be addressed—Describe how the applicant will utilize the grant funds to address the major problems identified in the background section.

C*oordination and linkages*—Describe how the application complements other components of the long-term care system, other funding sources supporting similar efforts, and a commitment from key partners and stakeholders.

> *QA/QI in HCBS*—Describe how the *HCBS Quality Framework* will be used in the design of its QA/QI in HCBS project. Also, describe what consumer satisfaction survey tools will be used in the project.

Work plan (with specific timelines and milestones)—Outline clearly what the applicant expects to achieve with the grant. Describe milestones and work products to be accomplished during the grant period. (Examples of work products include, among others, completed program designs, legislative initiatives or proposed technical assistance and training to providers.) The timetable for accomplishing the major tasks to be undertaken should include key dates relevant to the proposed project (e.g., State budget cycles and legislative sessions).

As a tool to assist applicants in developing their proposals and to facilitate our review panel process and future monitoring of grant activities, we recommend that applicants use the "Real Choice Systems Change Work Plan and Timeline" to formulate their work plans and timelines. (See Appendix 9.)

*Organization, Management, and Qualifications—D*escribe the project organization and staffing. Each application should include: A chart of the proposed management structure and description of how key project staff will report to the proposed project director, the Single State Medicaid Agency, and any interagency or community working groups.

Description of how children (or their families) or adults with disabilities or long-term illnesses will be involved in of program design, implementation, evaluation and/or reporting.

Description of the sub-contractors or partners to be involved in the grant and receiving funds, their management structure and organization, an outline of the specific tasks to be executed by the sub-contractor or partner and the reporting mechanisms that the State will require of each sub-contractor or partner.

Brief descriptions of the project director and key project personnel indicating their qualifications and prior experience for the project. <u>Brief</u> biographical sketches for the key project personnel should be provided as an attachment.

Formative Learning—Describe how the project will be monitored to ensure that the goals and timeline are being met, and importantly, how continuous quality improvement principles are built in the program design to ensure that feedback is incorporated in the project's ongoing operations.

*(a) Formative learning—D*escribe plans for monitoring and analyzing the progress and barriers encountered in the project over time.

*(b) Improving—D*escribe how ongoing feedback will be incorporated into the project's ongoing operations to improve the project.

Significance and Sustainability
In this section, the applicant must describe how the intended measurable outcomes of the project will create enduring change to the State's current system that will enable individuals to:

(1)   Live in the most integrated community setting appropriate to their individual support requirements and their preferences;
(2)   Exercise meaningful choices about their living environment, the providers of services they receive, the types of supports they use and the manner by which services are provided; and
(3)   Obtain quality services in a manner as consistent as possible with their community living preferences and priorities.

The applicant describes how the proposed project activities will result in enduring system change in at least one of the following areas: (a) access to services, (b) availability of services, (c) quality of services, and (d) value of services.

Partnerships
Describe any partnership with the disability and aging communities, service providers, State or local agencies, and other private entities. Describe how the applicant has meaningfully involved any or all of the aforesaid groups in the planning and development of the grant application and plans to continue their involvement in the project's implementation, monitoring, and evaluation activities.

Applicants may furnish endorsements or letters of support for the proposed project; however, these letters should be included as an attachment.

Budget Narrative/Justification and Resources
Provide a detailed breakdown of the aggregate numbers for the budget recorded on Standard Form 424 (SF 424) "Application for Federal Assistance," including allocations for each major set of activities or proposed tasks. The proposed budget should distinguish the proportion of grant funding designated for each grant activity. The budget must clearly identify what funds will be administered directly by the lead Agency and what will be subcontracted to other partners. Describe how the State will meet the matching funds requirement; the applicant must specifically identify the amount and source of funding to be used to meet the five percent (5%) non-financial recipient contribution that is identified in Item 15 (Estimated Funding) on SF 424. The designated lead Agency is solely responsible for the fiscal management of the project.

All grantees, except those only receiving awards for Feasibility Studies and Development Grants, will be required to attend one meeting per year in the Washington, D.C., or Baltimore, Maryland area sponsored by CMS for the benefit of Real Choice Systems Change Grantees. Therefore, these applicants' budgets must include funds for at least one person to attend a CMS-sponsored meeting in the Washington, D.C., or Baltimore, Maryland area in each year of the grant.

Required Appendices
Key Staff Qualifications: Include a brief biographical sketch or resume of key staff describing their qualifications.

Gubernatorial or Medicaid Endorsement: If an application is from an applicant that is not the Single State Medicaid Agency, a letter of endorsement from the Governor, State Medicaid Director, or Agency administering a relevant section of the 1915(c) home and community-based waiver must accompany the application; this requirement does not apply to applicants for the National State-to-State Technical Assistance Program for Community Living or the Technical Assistance for Consumer Task Forces Grants.

Applicants for the Family-to-Family Health Care Information and Education Center grants must include a letter of endorsement from the State Medicaid Director or the Governor

For Further Information Contact
Questions about these grant opportunities may be directed to:

> Mary R. Guy
> Centers for Medicare & Medicaid Services
> Center for Medicaid and State Operations
> DEHPG/DCSI
> Mail Stop: S2-14-26
> 7500 Security Blvd
> Baltimore, MD 21244-1850
> (410) 786-2772
> Fax: 410-786-9004
> E-mail address: RealChoiceFY03@cms.hhs.gov

Questions regarding application forms and related materials may be directed to:

> Real Choice Systems Change Grants for Community Living
> Attn: Judy Norris
> Centers for Medicare & Medicaid Services
> OICS, AGG, Grants Management Staff
> Mail Stop: C2-21-15
> 7500 Security Boulevard
> Baltimore, Maryland 21244-1850
> (410) 786-5130
> E-mail: jnorris1@cms.hhs.gov

Please complete and return (submission by facsimile preferred) by <u>June 16, 2003</u>, to:

Sona Stepp, Office Support Assistant
Centers for Medicare & Medicaid Services
CMSO/DEHPG/DCSI, Mail Stop: S2-14-26
7500 Security Boulevard, Baltimore, MD 21244-1850
Phone: 410-786-6815; Fax: 410-786-9004

1. Name of State: _____

2. Applicant agency: _____

3. Contact name and title:_____

4. Address:_____

5. Contact numbers: **Phone**: _____ **Fax**: _____

6. E-mail address: _____

7. Type of Real Choice Systems Change Grant for which you plan to apply. **A separate Notice of Intent to Apply should be submitted for each grant for which you plan to apply.***
    ☐ Respite for Adults
    ☐ Respite for Children
    ☐ Community-Based Treatment Alternatives for Children
    ☐ Money Follows the Person Rebalancing Initiative
    ☐ Quality Assurance and Quality Improvement in Home and Community-Based Services
    ☐ *Independence Plus* Initiative
    ☐ Community-Integrated Personal Assistance Services and Supports
    ☐ National State-to-State Technical Assistance Program for Community Living
    ☐ Technical Assistance for Consumer Task Forces
    ☐ Family-to-Family Health Care Information and Education Centers

8. Expected amount of request: $ _____

Please submit any questions that you would like to have answered by CMS before you submit your formal grant application to our e-mail address at: RealChoiceFY03@cms.hhs.gov.

*It is not mandatory for an applicant to submit a Notice of Intent to Apply; such submissions help us plan our review panels. Submission of a Notice of Intent to Apply does not bind the applicant to apply nor will it cause a proposal to be reviewed more favorably.

APPENDIX 3--Prohibited Uses of Grant Funds

Grant funds may <u>not</u> be used for any of the following:

♦ To provide direct services to individuals except as explicitly permitted under each grant solicitation. Direct services do not include expenses budgeted for consumer task force member participation in Real Choice Systems Change for Community Living Conferences or Technical Assistance Conferences sponsored by CMS or its national technical assistance provider.

♦ To match any other Federal funds.

♦ To provide services, equipment, or supports that are the legal responsibility of another party under Federal or State law (e.g., vocational rehabilitation or education services) or under any civil rights laws. Such legal responsibilities include, but are not limited to, modifications of a workplace or other reasonable accommodations that are a specific obligation of the employer or other party.

♦ To provide infrastructure for which Federal Medicaid matching funds are available at the 90/10 matching rate, such as certain information systems projects.

♦ To supplant existing State, local, or private funding of infrastructure or services such as staff salaries, etc.

♦ To be used for expenses that will not primarily benefit individuals of any age who have a disability or long-term illness.

♦ To be used for ongoing administrative expenses related to Medicaid services unless such administration is part of a well-defined test of alternate and improved methods focused specifically on personal assistance services that maximize consumer control.

♦ To be used for data processing software or hardware in excess of the personal computers required for staff devoted to the grant.

We will use the following review criteria to evaluate all applications for the Real Choice Systems Change Grants for Community Living, with the exceptions of the National State-to-State Technical Assistance Program for Community Living Grant, Technical Assistance for Consumer Task Forces Grant, and the Family-to-Family Health Care Information and Education Centers. Review criteria for those grant applications are described respectively in Appendices 10, 11 and 12, respectively.

The total score for the criteria below is 100 points.

1. Identification of Problems or System Issues (10 points)

A. Background and Identification of Problems

The application demonstrates a thorough understanding of the characteristics of the State's current population and service options under the applicable grant category.
1. **Respite for Adults**—Existing community-based long-term care system, family support services, respite services, and their funding sources.

2. **Respite for Children**— Existing community-based long-term care system, family support services, respite services, and their funding sources.

3. **C-TAC**—The current system of mental health services available to children in the state and current barriers to successful community-based mental health services.

4. **QA/QI in HCBS**—Its community-based long-term care system and existing QA/QI systems.

5. *Independence Plus* **Initiative**—Existing opportunities for self-direction under the State's Medicaid benefit.

6. **Money Follows the Person Rebalancing Initiative**—The existing Medicaid State Plan, HCBS waiver, and demonstration project services and supports that support the transition from institutional to community-based services.

7. **C-PASS**—The State's current personal assistance service options, programs, and policies and the current population utilizing personal assistance services and an analysis of the demand for those services.

B. Analysis of Strengths and Challenges

The application evidences an analysis of the strengths and challenges of the current system, as relevant to the applicant grant category.

1. **Respite for Adults**—The existing infrastructure and respite supports for the target group.

2. **Respite for Children**—The existing infrastructure and respite supports for the target group.

3. **C-TAC**—The issues involved in planning a successful home and community-based mental health services waiver.

4. *QA/QI in HCBS*—Barriers (and a plan to address those barriers) to performing a feasibility study, developing an implementation plan, and implementing a QA/QI in HCBS project, and utilizing the HCBS Quality Framework.

5. *Independence Plus* **Initiative**—Barriers (and a plan to address those barriers) to introducing or expanding the principles of self-direction to targeted home and community based services.

6. *Money Follows the Person Rebalancing Initiative*—Barriers (and a plan to address those barriers) to performing a feasibility study, developing an implementation plan, implementing a money follows the person rebalancing initiative in that State, and utilizing MSIS to capture enrollment data and to track service utilization.

7. **C-PASS -** The strengths and weaknesses of the State's current personal assistance services system and the issues and barriers to consumer-directed personal assistance service options.

C. Problem Analysis

The application evidences an identification, understanding, and analysis of the scope and nature of the specific problem(s) or gap(s) that the proposal is addressing.

2. Project Description and Methodology (35 points)

A. Goals/Objectives

1. The application evidences clear goals and objectives that relate in a meaningful way to the problem(s) identified above.

2. The application evidences goals and objectives that are reasonable and will be effective in accomplishing the purpose of the grant.

B. Methods of Effectively Addressing the Problem

1. The application clearly describes the methods that would be used to address the problem, address barriers, and reach the goals of the program.

2. The application evidences methods that are reasonable and activities relate to the objectives. The application inspires confidence that the goals of the proposal will be met.

3. If applying for a Feasibility Study and Development Grant, the applicant must describe actions it may consider to implement a demonstration project, including: (a) any waiver amendments, new waivers, or State Plan amendments; (b) any regulations or policies that may need to be modified; and (c) any additions to or modifications of information systems, quality assurance and improvement systems, and intake and assessment systems that will support a future demonstration project.

C. Coordination and Linkages

1. The application demonstrates that the initiatives proposed complement other components of the respective systems under the grant category. For example:

   C-PASS—An effective personal assistance services system (e.g., choice of providers, provide availability, and individualized prior authorization procedures).

2. The application evidences coordination with other funding sources supporting similar efforts.

3. The application reflects a commitment from partners and includes a description of their involvement and specific undertakings.

D. Work plan

The application includes a work plan that documents: goals and objectives; reasonable benchmarks, milestones, timeframes, measurable outcomes, and products; and identifies the responsible parties to accomplish the goals of the project (e.g., completion of a feasibility study and demonstration implementation plan for those applying for feasibility/research funds).

As a tool to assist applicants in developing their proposal and to facilitate our review panel process and future monitoring of grant activities, we recommend that applicants use the Real Choice Systems Change Work Plan and Timeline (see Appendix 9) to formulate their work plan.

E. Organization, Management and Qualifications

1. The application addresses any significant circumstances that would affect the ability of the applicant to recruit and hire staff for the project. The application identifies whether there are any current hiring freezes or other obstacles that would affect staffing and, if so, identifies methods by which such obstacles will be overcome (e.g., by making exceptions to general freezes, contracting out, etc.)

2. The application evidences that key project staff, stakeholders, and partners are qualified and possess the experience and skills to design, implement, and evaluate the program within the available time frames.

3. The application evidences that key project staff have direct professional experiences with individuals of any age who have a disability or long-term illness.

4. The application documents inclusion of persons with disabilities or long-term illness in significant roles (e.g., as governing board members, providers, staff, on-going advisors or consultants, etc.).

Significance and Sustainability (20 points)

A. Enduring Change:

The application evidences that, via the proposed program, the State seeks to implement enduring and effective systems of service delivery and relationships among stakeholders that will support people of relevant ages with a disability and/or long-term illness to:

1. Reside in the most integrated setting and exercise meaningful choice and control over where they reside;
2. Have access to community living and support services that are delivered in a manner that is consistent with the consumers' priorities and preferences and ensures continuity of service provision.

B. Assistance with Key Goals and Objectives:

The application evidences that the program goals and objectives will assist the State to create enduring systems change in at least one of the following areas: (a) access to services; (b) availability and adequacy of services; (c) quality of services; and (d) value of services, as described more fully in Appendix 5 Definitions.

C. Sustainability

The application evidences that the State has taken steps to ensure that changes in the system endure after the grant period.

Partnerships (15 points)

A. Consumer Partnerships: (7.5 points)

The application evidences a plan/design with details about the method(s) through which the State will meaningfully involve people with disabilities and long-term illness and their representatives in all stages of the problem analysis, planning, implementation, monitoring and evaluation activities.

B. Public/Private Partnerships: (7.5 points)

The application evidences a plan/design with details about the method(s) through which the State will meaningfully involve representatives of State and local level agencies, integrated community service providers, and other private entities in all stages of the problem analysis, planning, implementation, monitoring, and evaluation activities.

5. Budget Justification and Resources (20 points)

A. The application evidences a reasonable and detailed budget.

B. The application evidences budgeted costs that are reasonable in relation to the proposed objectives, design, and significance of achievements.

C. The application evidences that the budget follows the requirements stated in the program announcement and specifically does not use grant funds to supplant existing funds.

D. The budget includes at least a 5% recipient contribution in any combination of cash and non-cash contributions that totals at least 5% of the grant award (including all direct and indirect costs).

E. The application assures that grant funding will not be used to replace existing State or Federal funds.

Definitions as used in this solicitation are:

<u>Access to Services</u> means the extent to which we can make our long-term support systems simple, understandable, comprehensive, flexible and fair; the extent to which we can ensure that people who need help have the right information at the right time to make key life decisions, to manage their services, and to manage their conditions or disability for the most positive measurable outcomes possible; the extent to which we can ensure that people have timely access to needed services that are appropriate, effective, and user-responsive; and the extent to which we ensure that the formal service system promotes community participation and supports each individuals access to community resources and activities (such as access to libraries, employer worksites, houses of worship, community public transportation systems).

<u>Advance Planning Document (APD)</u> is the mechanism through which State agencies obtain prior Federal approval and financial participation in projects that support Federal programs. The term APD refers to a Planning APD, an Implementation APD, or to an Advance Planning Document Update. A complete definition of APD (45CFR95, pages 468-479) can be found at: http://www.acf.dhhs.gov/programs/oss/all_acf/part95.htm.

<u>Availability and Adequacy of Services</u> means the extent to which we can ensure that services are adequate in terms of the amount available, the type and scope of services, and the time period or frequency of services.

<u>Caregivers</u> are family members or other unpaid individuals who provide care.

Children with special health care needs are children who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally.

<u>Community integration</u> means that personal assistance services must be oriented to supporting each individual's efforts to live and participate fully in the community. Personal assistance services that do not fit this intent include services that are available primarily in congregate settings, not available outside the home, or do not facilitate an individual's efforts to get to a job site.

<u>Consumer direction</u> is a concept that rests on the premise that individuals with a disability should: (a) be able to make decisions about the care they receive; (b) have control over the nature of the services; and (c) determine who, when, and how those services are delivered. It also assumes that such care is predominantly non-medical, but consists of services and supports that allow individuals with disabilities to function as independently as possible. Consumer direction is not one strategy, but reflects a continuum of approaches based on the level of decision-making, control, and autonomy allowed in a particular situation. Consumer direction in this context is more broadly defined than self-direction, which might require person centered planning, individualized budgets, participant protections, fiscal/employer agent service, brokerage services, and a quality assurance and improvement plan.

Direct services are services that are furnished to an individual with a disability or long-term illness including personal care services. [Applicants for the Money Follows the Person Rebalancing Initiative Grant may also want to refer to the State Medicaid Director's letter of August 13, 2002 (SMDL #02-008) that furnishes clarification for using Medicaid funds for transition. This letter is available on the Web site at: http://www.cms.hhs.gov/states/letters/default.asp]

Feasibility study is a study that is directed at the objectives set out in the project definition stage. A feasibility study typically includes an analysis of: (a) project requirements and resources; (b) technology and equipment options and cost estimates; (c) economic and financial considerations, (d) cultural and social issues that might impact the project; (e) site location studies; (f) environmental considerations; (g) training requirements; and (h) preliminary schedules of work. In short, the feasibility study provides the information to support a request for project implementation funding.

Individual budget is the total dollar value of the services and supports, as specified in the plan of care, under the control and direction of the program participant.

Maximum consumer control means the opportunity to exercise choice over key aspects of personal assistance services commensurate with the consumer's preferences, willingness, and ability to exercise control and responsibility.

Money follows the person means that, within the long-term care system, funds for services and supports move with the person to the most appropriate and preferred setting.

Nonprofit Organization as defined at HHS GPD 1.02 is "[a] corporation or association whose profits may not lawfully accrue to the benefit of any private shareholder or individual."

Quality is the degree to which services and supports for individuals and populations increase the likelihood for desired health and quality of life measurable outcomes and are consistent with current professional knowledge. The goal of quality services and supports is to maximize the quality of life, functional independence, health and well being of the population.

Quality Assurance is an operative quality assessment system for HCBS services and supports that includes the following functions: system design, discovery, remediation, and systems improvement. A quality assessment system utilizes appropriate data sources to evaluate the quality of provided services.

Quality Framework for Home and Community-Based Services delineates the functions of quality (design, discovery, remedy, and improvement) and includes seven broad domains that encompass quality for HCBS waivers. The *HCBS Quality Framework* defines quality through the delineation of desired measurable outcomes for waiver participants across seven broad domains and 35 sub-domains. For more information, please see the August 29, 2002, State Medicaid Director's Letter; this letter is available at: http://cms.hhs.gov/medicaid/waivers/82902ltr.pdf.

Quality Improvement in a State's quality improvement system includes both compliance activities (activities designed to ensure that Federal, State, and local requirements are met) and quality-enhancing activities (activities that improve quality of life and/or functional independence).

<u>Quality of Services</u> means the extent to which we can ensure that services achieve the measurable outcomes desired and are provided in a manner that meets the consumers expectations and preferences. The extent to which we can ensure that their exists and effective Quality Assurance and Quality Improvement System in place that:

1) Obtains real world data in real time regarding consumer experiences with the service system;

2) Identifies problems in service delivery or service design in a timely manner;

3) Effectively ensures that data are used to make prompt corrections or improvements;

4) Transmits the relevant data to workers and those managers who will act on the information; and

5) Rewards continuous improvement in service quality and value at all levels.

<u>Respite</u> means personal care and supervision of an individual who requires and is receiving continuous care in a home or community setting, provided for a limited period in order to afford temporary relief to family members or other unpaid caregivers. Personal care and supervision in the context of this project may include the provision of necessary medical, physical, or behavioral supports.

<u>Utilization and Quality Control Peer Review Organization</u> as defined in §§1152-1154 of Title XIX the Social Security Act* reads as:

(1)(A) is composed of a substantial number of the licensed doctors of medicine and osteopathy engaged in the practice of medicine or surgery in the area and who are representative of the practicing physicians in the area, designated by the Secretary under section <u>1153</u>, with respect to which the entity shall perform services under this part, or (B) has available to it, by arrangement or otherwise, the services of a sufficient number of licensed doctors of medicine or osteopathy engaged in the practice of medicine or surgery in such area to assure that adequate peer review of the services provided by the various medical specialties and subspecialties can be assured;
(2) is able, in the judgment of the Secretary, to perform review functions required under section <u>1154</u> in a manner consistent with the efficient and effective administration of this part and to perform reviews of the pattern of quality of care in an area of medical practice where actual performance is measured against objective criteria which define acceptable and adequate practice; and (3) has at least one individual who is a representative of consumers on its governing body.

<u>Value</u> means to what extent we can ensure that investments in services yield the highest value possible. "We might think about this in terms of three dimensions:

1. <u>Service Value</u>: To what extent will our purchases yield the most outcome from the <u>service</u> for each dollar spent? This is often called "value-based purchasing" or "cost-effectiveness."
2. <u>Individual Value</u>: To what extent will our public purchases promote the health and wellbeing of individuals, and promote dignity, independence, individual responsibility and choice, and self-direction?

3. <u>Community Value</u>: To what extent will our public purchases support larger community capacity to enable people of any age and disability to live and participate in the community? To what extent will the formal or professional service system support informal caregiving by family, friends, and neighbors?" Coordinated Invitation to Apply for "Systems Change Grants for Community Living." Published May 17, 2001.

Examples of Ways That Grant Funds Might be Used Under the

Community-Integrated Personal Assistance Services and Supports Grant

Described below are possible uses of Community-Integrated Personal Assistance Services and Supports (C-PASS) Grant funds. Please note that when Medicaid or other Federal funds are used the applicable rules of that program will apply. The receipt of these funds does not confer a waiver of the applicable Federal laws and regulations regarding payment of providers, etc.

The examples below provide possible uses of grant funds and are not meant to denote preference for a particular activity. It is also not meant to limit the creativity of the applicant in using grant funds to address a particular problem. Additionally, Parts A and B (below) represent an organization of those activities and do not confer a preference for examples listed in one part versus another.

Part A: Examples of Building Blocks

The examples listed below are discrete activities that could be implemented that promote consumer choice and consumer control in personal assistance services.

1. *Database Infrastructure:* Create a system to track individual budgets and expenses under a consumer-directed system.

2. *Management of Personnel Tasks:* Create mechanisms to assist consumers with administration of personnel tasks (e.g., tax withholding, worker's compensation, criminal record checks, and health insurance).

3. *Recruitment and Management of Personal Assistance Services:* Provide training to consumers who will be directing their personal assistance services in recruiting and supervising workers, hiring and firing workers, and understanding fiscal and legal responsibilities as an employer of record.

4. *Consumer Education and Support:* Identify the knowledge and skills required for meaningful and effective consumer-directed service planning and delivery. Develop and provide training and educational forums that assist consumers in self-directing their personal assistance services including, for example, interviewing, supervision, and assessing one's own personal assistance needs.

5. *Provider Qualifications:* Create mechanisms to streamline the process of qualifying individuals who have been identified by the consumer as capable and interested in furnishing home and community-based services and simplifying payments to such individuals.

6. *Provider Training and Technical Assistance:* Develop curricula and training programs to assist provider agencies to improve consumer input and control even when the consumer is not functioning as the employer. Provide technical assistance to such provider agencies to advance the concepts of dignity, choice, and participation in the community. Provide technical assistance to provider agencies in listening to consumers, designing effective

feedback mechanisms, and supporting workers in their learning, growth and development in providing personal assistance services. Assist provider organizations in fostering a culture of respect and systematic learning from the individuals they serve.

7. *Job Bank:* Develop job banks to facilitate match-ups between workers seeking jobs and consumers seeking to hire consumer-directed personal assistants. Conduct certain kinds of pre-employment background checks (such as immigration status or criminal background checks).

8. *Human Resources Support:* Assist consumers in carrying out the personnel tasks associated with self-directing personal assistance services including tax withholding, worker's compensation, criminal record checks, etc. and to create infrastructure that provides this capacity statewide.

9. *Training and Technical Assistance.* Provide training and technical assistance, directly or through a public or private entity for individuals with disabilities or long-term illness, and, as appropriate, their representatives, personal assistants, and other personnel (including professionals, paraprofessionals, volunteers, and other members of the community).

10. *Self-advocacy Development:* Train or mentor individuals in advocating for themselves in accessing, planning, or receiving quality personal assistance services.

11. *Back-up Support:* Create mechanisms whereby consumers are able to receive personal assistance services from back-up workers should a scheduled worker become unavailable.

12. *Paraprofessional Staff Recruitment, Retention and Training Efforts:* Strengthen the availability of personal assistants through efforts to recruit, train, and retain paraprofessionals as personal assistants.

13. *Risk Management:* Implement operating procedures and develop systems that allow and enable consumers to exercise individual choice without exposing them to undue liability or risk.

14. *Nursing Delegation:* Strengthen ability to delegate certain tasks to personal assistants, family members, and the consumer while maintaining conformity with the State's Nurse Practice Act.

15. *Urgent Response Systems*: Develop a response system to urgent care needs so that consumers can receive information, advice, or crisis supports and services.

Part B: Model Development and Demonstrations

The examples listed below will likely include one or more of the discrete activities listed in Part A.

1. *Developing Consumer-Directed Services:* Identify, develop, and implement strategies for modifying policies, practices, and procedures that:

- ❖ Unnecessarily restrict the consumer's options in the provision of personal assistance and supports;
- ❖ Promote individualized, consumer-directed planning, and service provision;
- ❖ Maximize the opportunities for community participation and ensure the most integrated community living setting possible; and
- ❖ Support the exercise of personal responsibility.

2. ***Demonstration***: Conduct, on a time-limited basis, the demonstration of new and effective approaches to accomplishing the purpose of the grant ensuring maximum control by consumers to select and manage personal assistance services.

3. ***Waiver Analysis***: Determine how effective the home and community-based waiver(s) is in fostering consumer-directed services and developing solutions as needed including developing new §1915(b) and/or §1915(c) waivers.

4. ***Individual Budgeting***: Analyze how to structure and implement individual budgeting processes.

5. ***Support Brokerage:*** Redesign case management services to include support brokerage. Support brokerage might include assisting individuals in developing a person-centered plan, identifying needs and services, and purchasing those services or supports.

6. ***Self-Direction under a Capitated Program:*** Enhance self-direction under an existing managed care program.

7. ***Consumer-Directed Providers:*** Create consumer-directed service delivery approaches such as personal assistance cooperatives, peer-counseling supports, micro-enterprises, and similar ventures that are owned and controlled by people with disabilities, families of children with disabilities, and community services workers.

8. ***Community Living Specialist:*** Create a cadre of paraprofessionals with and without disabilities to help persons identify and receive necessary services and supports to transition into and/or continue to live in their own communities.

9. ***Coherent and Timely Access***: Design, demonstrate, implement, or evaluate a process to ensure timely and effective personal assistance services to individuals who may be directing his or her own service provision including the following:

- ❖ Nursing services;
- ❖ Crisis intervention services, including a back-up worker registry; and
- ❖ Effective complaint and grievance to respond to conflicts or problems.

**Charts For Describing the Current System of Providing Personal Assistance and Supports
(To be completed by applicants for the C-PASS grant only)**

The following two charts represent an overview of the information we are requesting from C-PASS applicants regarding currently available personal assistance services. While completion of these charts is not required, we suggest using them as a tool to organize personal assistance service information and delineate the extent to which consumer-directed supports and services are available to individuals.

To complete the chart, respond to the questions or information requested in the left-hand column. Answer in the format provided in the parentheses (e.g., number, yes or no, further description, etc.) Attach additional pages if there is insufficient space in the chart. For those circumstances that do not apply (e.g., if a State does not offer personal assistance services in the Medicaid State plan), answer "N/A".

Chart 1 for C-PASS - Overview of Current Personal Assistance Services

	Program ♦ Medicaid ♦ State-Funded ♦ Title XX ♦ Other	Medicaid State Plan	Medicaid Home & Community-Based Waivers (For states with more than one waiver additional columns are provided)			Medicaid §1115 Demonstration	State Funded	Other (List)	Other (List)
1	Title of Service Provided (e.g., home health, personal care, etc.)								
2	Are personal assistance services available under the programs? (Yes/No)								
3	Are services available statewide? (Yes/No)								
4	Number of individuals receiving personal assistance services (Number)								
5	Any age or type of disability restrictions associated with receiving these services? (Yes/No and Describe)								
6	Can services be provided outside the home? If yes, where? (Yes/No and Describe)								

7	What, if any, limits are there on the number of hours that this service can be received? (Describe)								

Chart 2 for C-PASS - Availability of Consumer-Directed Personal Assistance Services

	Program ♦ Medicaid ♦ State-Funded ♦ Title XX ♦ Other	Medicaid State Plan	Medicaid Home & Community-Based Waivers (For states with more than one waiver additional columns are provided)			Medicaid §1115 Demonstration	State Funded	Other (List)	Other (List)
1	Under what, if any, circumstances can an individual direct his/her personal assistant(s) services? (Describe)								
2	Can the consumer hire his/her personal assistants? (Yes/No and Describe)								
3	Can the consumer directly pay his/her personal assistant(s)? (Yes/No and Describe)	N/A	N/A	N/A	N/A				
4	Can the consumer conduct the personal assistant's training? (Yes/No and Describe)								
5	Can the consumer terminate the personal assistant's employment? (Yes/No and Describe)								

6	How many individuals are currently enrolled in a consumer-directed personal assistance services option? (Number)							

Technical Assistance Activities	Respite for Adults	Respite for Children	C-TAC	QA/QI in HCBS	Independence Plus Initiative	Money Follows the Person Rebalancing Initiative	C-PASS	Technical Assistance for Consumer Task Forces	Family-to-Family Health Care Information and Education Centers
Information dissemination	X	X	X	X	X	X	X	X	X
Background and issues papers	X	X	X	X		X			
Model demonstration proposal	X	X	X			X			
Facilitating state-to-state communication	X	X	X	X	X	X	X	X	X
Grantee meetings	1	1	1	3	3	2	3		
Clearinghouse	X	X	X	X	X	X	X	X	
Technical assistance to individual grantees	X	X	X	X	X	X	X	X	
Model APD/RFP				X	X		X		
Model of self-directed services							X		
Synthesize feasibility studies	X	X	X						
Coordinate scheduling and delivery of TA activities with CMS and other HCBS TA providers.	X	X	X	X	X	X	X	X	X
Collaborate on annual conference (may be subcontracted)	X	X	X	X	X	X	X	X	X

APPENDIX 9—Real Choice Systems Change: Work Plan And Timeline

The grant application must include a project work plan and timeline. All of the project's goals must be included in the work plan. The completed work plan will not be counted toward the 40 page narrative limitation. The table headings are explained below to guide you in completing the work plan and timeline.

<u>Table Headings</u>

Goal(s): What systems changes are you trying to achieve (e.g., create a self-directed option in current waiver program)?

Activity: What you will do to achieve the stated goal(s)? (There may be multiple activities for more than one goal.)

Specific Tasks: What are the specific tasks that need to be accomplished for each activity?

Lead Person: Who is responsible for making sure that the activity is completed (e.g., project director or subcontractor)? Identify the primary person by name, if possible, with responsibility for the specific activity.

Timeline: What are the dates for starting and completing the activity? Please specify by quarters (e.g., 1st Quarter, 2nd - 5th Quarter), the beginning and the anticipated completion dates of the activity.

Measurable Outcome(s): What specific measurable changes will be made (e.g., policy changes to permit a self-directed option and establish a fiscal intermediary program)?

Products: What tangible products will you produce (e.g., a handbook or web site on long term supports)?

Type of Grant:

State:

Organization:

Goal(s):															
Measurable Outcome(s):															
Major Activities	**Specific Tasks**	**Lead Person**	**Time Line (Start and End Date by Quarter)**												**Products**
			1	2	3	4	5	6	7	8	9	10	11	12	
1.															
2.															
3.															

APPENDIX 10--Review Criteria for the National State-to-State Technical Assistance Program for Community Living Grant

We will use the following review criteria to evaluate applications for the National State-to-State Technical Assistance Program for Community Living Grants. Review criteria for all other grant applications are described in Appendices 4, 11 and 12. The total score for all of the criteria is 100 points. Throughout these criteria we place emphasis on the ability to provide practical technical assistance that can significantly aid states in the real-world challenges of designing and implementing system improvements. The criteria are summarized in the chart below and further described in the sections that follow:

Topic Area	Brief Summary
1. **Back ground and Prior Experience**	Explain past experiences and capabilities. Explain why such experiences and capabilities will inspire confidence that grantee will be highly successful.
2. **Project Description, Methodology and Work plan**	Describe what you will do and how. Describe the activities to be performed, timeline and work plan, and measurable outcomes you will achieve. Discuss how these activities will promote long-term (enduring) improvements in systems infrastructure.
3. **Significance**	How significant are the measurable outcomes and products likely to be? Measurable outcomes and products may be measured in terms of such factors as the type of assistance that can be provided, the types of systems change that might result, the number of people who will benefit from the systems changes and/or the degree to which they may benefit.
4. **Formative Learning**	Describe the system you will use to monitor developments, learn from successes as well as mistakes, and use the experiences to improve the system in a timely and effective manner.
5. **Collaboration, Agreements and Capacity**	Describe the groups and organizations with which you will partner to facilitate system improvements in community services for children and adults of any age.
6. **Budget Narrative/Justification and Resources**	Explain your budget and discuss the appropriateness of the allocations. Also explain the financial or in-kind investments you and your partnering organizations are making to ensure that the project is both successful and significant.

1.   Background and Prior Experience (15 points)

a.   Prior Involvement/Experience (10 points)—The extent to which--

- The application demonstrates the applicant's significant practical experience in working with states and public and private organizations in developing or improving systems for community living for people of any age with a disability or long-term illness.

- The application evidences an understanding of the methods and strategies for providing technical assistance and training to various national, State and local organizations.

- Prior experience inspires confidence in the ability of the applicant to provide immediately useful, practical assistance to the target audiences of this grant solicitation.

b.   Assessment of Strengths and Challenges in Current System (5 points)—The extent to which the application evidences--

- A cogent analysis of the strengths and weaknesses of the current long-term services and support systems for community living including the strengths and weaknesses of the current system for accessing needed expertise in a timely and effective manner.

- An understanding of the issues and barriers to community living.

2.   Project Description and Methodology (30 points)

a.   Goals/Objectives—The extent to which the application evidences goals and objectives that --
- Address the weaknesses, issues, and barriers described above.

- Are both significant and reasonable and will be effective in accomplishing the purpose of the grant (i.e., to maximize community living opportunities and full participation for people of any age with disability or long-term illness).

b.   Methods of Providing Assistance to states and grantee Organizations—The extent to which the application--

- Evidences provision of practical training, technical assistance, information collection and dissemination, resource development and policy feedback in all of the technical areas of this grant solicitation.

- Clearly describes logically coherent methods that would be used to provide technical assistance and training to states, grantee organizations, and others.

- Evidences methods that inspire confidence that the goals of the proposal will be met through a description of planned activities, timeframes, and projected results.

- Demonstrates a method of applying appropriate staff or contract expertise to ensure that effective technical assistance will be made available for each of the Real Choice Systems Change for Community Living Grantees.

c.   Coordination and Linkages—The extent to which the--
- Application evidences:
  o Coordination with other funding sources and consumer and professional associations engaging in similar efforts; and
  o Sufficient linkages with subcontractors or partners whom possess the knowledge, skills and expertise to assist in the project.

- Talent and expertise of individuals with a disability or long-term illness will be used effectively in the provision of technical assistance activities (e.g., mentoring, etc.).

d.   Work Plan--The extent to which the application includes a work plan that documents reasonable and significant benchmarks, milestones, and timeframes and identifies the responsible parties to accomplish the goals of the project. As a tool to assist applicants in developing their proposal and to facilitate our review panel process and future monitoring of grant activities we recommend that applicants use the Real Choice Systems Change Work Plan and Timeline (see Appendix 9) to formulate their Work Plan.

e.   Organization, Management, and Qualifications—The extent to which the application--

- Addresses any significant circumstance(s) that would affect the ability of the applicant to recruit and hire staff for the project and/or subcontract with other entities as deemed necessary.

- Evidences that key staff, stakeholders and partners (direct and in-direct subcontractors) are qualified and possess the experience and skills to design, implement and evaluate the proposed project within the available time frames.

- Evidences that key project staff have professional experiences with people of any age with a disability or long-term illness.

- Evidences that project staff have experience in providing technical assistance, training, and information collection, analysis, and dissemination.

- Addresses the ability of the applicant to utilize and interact with various forms of information technology.

3. Significance (20 points)—The extent to which the--

- Goals and objectives specified in the application will assist states, grantee organizations, and Federal partners in the goal of maximizing opportunities for community living for people of any age with a disability or long-term illness.

- Application describes a project that will provide considerable assistance to states, grantee organizations, and others through the scope and breadth of proposed activities as measured by the extent or range of project activities, the numbers served, the types of services available, and the comprehensiveness of the proposed project.

4. Formative Learning (10 points)—The extent to which the application--

- Has methods of information gathering, analysis, and evaluation that are feasible and relevant to the goals, objectives, and measurable outcomes of the proposed project. The extent to which the applicant is likely to gain timely insight into systems change strategies that work and the types of technical assistance that have the most impact.

- Incorporates feedback from the project into ongoing operations.

5. Collaboration, Agreements, and Capacity (15 points)—The extent to which the application--

- Evidences meaningful involvement of states and grantee organizations' staff in all stages of the analysis, planning, implementation, and evaluation activities.

- Evidences meaningful involvement of key constituencies in the design implementation and evaluation of the project activities.

- Promotes valued social and economic roles for people of any age with a disability or long-term illness by including their talents and expertise in the project (e.g., governing board members, consultants, staff, mentors, peer counselors, trainers, etc.).

- Promotes partnerships with organizations representing people of any age with a disability or long-term illness or their families.

- Describes partnerships with public and private organizations that possess expertise in working with people with a disability or long-term illness and developing community living opportunities.

6. Budget Narrative/Justification and Resources (10 points)

The extent to which the proposed budget is reasonable in relation to the proposed objectives, design, and significance of the achievements.

We will use the following review criteria to evaluate all applications for the Technical Assistance to Consumer Task Forces Grant.   Review criteria for other grant applications are described in Appendices 4, 10, and 12. Throughout these criteria we place emphasis on the ability to provide practical technical assistance that can significantly aid consumer task forces in the real-world challenges of designing and implementing system improvements. The total score for all of the criteria is 100 points.   The criteria are summarized in the chart below and further described in the sections that follow:

Topic Area	Brief Summary
1. **Back ground and Prior Experience**	Explain past experiences and capabilities. Explain why such experiences and capabilities will inspire confidence that grantee will be highly successful.
2. **Project Description, Methodology and Work plan**	Describe what you will do and how. Describe the activities to be performed, timeline and work plan, and measurable outcomes you will achieve. Discuss how these activities will promote the efforts of consumer task forces to facilitate long-term (enduring) improvements in systems infrastructure.
3. **Significance**	How significant are the measurable outcomes and products likely to be? Measurable outcomes and products may be measured in terms of such factors as the type of assistance that can be provided, the types of systems change that might result, the number of people who will benefit from the systems changes and/or the degree to which they may benefit.
4. **Formative Learning**	Describe the system you will use to monitor developments, learn from successes as well as mistakes, and use the experiences to improve the system in a timely and effective manner.
5. **Collaboration, Agreements and Capacity**	Describe the groups and organizations with which you will partner to facilitate consumer involvement in system improvements in community services for children and adults of any age.
6. **Budget Narrative/Justification and Resources**	Explain your budget and discuss the appropriateness of the allocations. Also explain the financial or in-kind investments you and your partnering organizations are making to ensure that the project is both successful and significant.

1.   Background and Prior Experience (15 points)

a.   Prior Involvement/Experience (10 points)—The extent to which--

- The application demonstrates the applicant's significant practical experience in working with consumers, states, and public and private organizations in developing or improving systems for community living for people of any age with a disability or long-term illness.

- The application evidences an understanding of the methods and strategies for providing technical assistance and training to various national, State and local organizations.

- Prior experience inspires confidence in the ability of the applicant to provide immediately useful, practical assistance to the target audiences of this grant solicitation.

b.   Assessment of Strengths and Challenges in Current System (5 points)—The extent to which the application evidences--

- A cogent analysis of the strengths and weaknesses of the current long-term services and support systems for community living including—
  - The strengths and weaknesses of the current system for accessing needed expertise in a timely and effective manner; and
  - The current role of consumer task forces in these systems.

- An understanding of the issues and barriers to community living.

2.   Project Description and Methodology (30 points)

a.   Goals/Objectives—The extent to which the application evidences goals and objectives that --
- Address the weaknesses, issues, and barriers described above.

- Are both significant and reasonable and will be effective in accomplishing the purpose of the grant (i.e., to maximize community living opportunities and full participation for people of any age with disability or long-term illness).

b.   Methods of Providing Assistance to consumer task forces, Real Choice Systems Change Grantees, and others—The extent to which the application--

- Evidences provision of practical training, technical assistance, information collection and dissemination, resource development and policy feedback in all of the technical areas of this grant solicitation.

- Clearly describes logically coherent methods that would be used to provide technical assistance and training to consumer task forces, states, Real Choice Systems Change Grantees, and others.

- Evidences methods that inspire confidence that the goals of the proposal will be met through a description of planned activities, timeframes, and projected results.

- Demonstrates a method of applying appropriate staff or contract expertise to ensure that effective technical assistance will be made available for each of the Real Choice Systems Change for Community Living Grantees.

c.   Coordination and Linkages—The extent to which the--

- Application evidences:
  - Coordination with other funding sources and consumer and professional associations engaging in similar efforts; and
  - Sufficient linkages with subcontractors or partners whom possess the knowledge, skills and expertise to assist in the project.

- Talent and expertise of individuals with a disability or long-term illness will be used effectively in the provision of technical assistance activities (e.g. training, mentoring, etc.).

d.   Work plan--The extent to which the application includes a work plan that documents reasonable and significant benchmarks, milestones, and timeframes and identifies the responsible parties to accomplish the goals of the project.

e.   Organization, Management, and Qualifications—The extent to which the application--

- Addresses any significant circumstance(s) that would affect the ability of the applicant to recruit and hire staff for the project and/or subcontract with other entities as deemed necessary.

- Evidences that key staff, stakeholders and partners (direct and in-direct subcontractors) are qualified and possess the experience and skills to design, implement and evaluate the proposed project within the available time frames.

- Evidences that key project staff have professional experiences with people of any age with a disability or long-term illness.

- Evidences that project staff have experience in providing technical assistance, training, and information collection, analysis, and dissemination.

- Addresses the ability of the applicant to utilize and interact with various forms of information technology.

3. Significance (20 points)—The extent to which the--

- Goals and objectives specified in the application will assist consumer task forces, states, Real Choice Systems Change Grantees, Federal partners, and others in the goal of maximizing opportunities for community living for people of any age with a disability or long-term illness.

- Application describes a project that will provide considerable assistance to consumer task forces, states, Real Choice Systems Change Grantees, and others through the scope and breadth of proposed activities as measured by the extent or range of project activities, the numbers served, the types of services available, and the comprehensiveness of the proposed project.

4. Formative Learning (10 points)—The extent to which the application--

- Has methods of information gathering, analysis, and evaluation that are feasible and relevant to the goals, objectives, and measurable outcomes of the proposed project. The extent to which the applicant is likely to gain timely insight into systems change strategies that work and the types of technical assistance that have the most impact.

- Incorporates feedback from the project into ongoing operations.

5. Collaboration, Agreements, and Capacity (15 points)—The extent to which the application--

- Evidences meaningful involvement of consumer task forces, states, and Real Choice Systems Change Grantees in all stages of the analysis, planning, implementation, and evaluation activities.

- Evidences meaningful involvement of key constituencies in the design implementation and evaluation of the project activities.

- Promotes valued social and economic roles for people of any age with a disability or long-term illness by including their talents and expertise in the project (e.g., governing board members, consultants, staff, mentors, peer counselors, trainers, etc.).

- Promotes partnerships with organizations representing people of any age with a disability or long-term illness or their families.

- Describes partnerships with public and private organizations that possess expertise in working with people with a disability or long-term illness and developing community living opportunities.

6. Budget Narrative/Justification and Resources (10 points)

The extent to which the proposed budget is reasonable in relation to the proposed objectives, design, and significance of the achievements.

APPENDIX 12—Review Criteria for the Family-to-Family Health Care Information and Education Center Grants

We will use the following review criteria to evaluate all applications for the Family-to-Family Health Care Information and Education Center Grants.   Review criteria for all other grant applications are described in Appendices 4, 10 and 11. Throughout these criteria we place emphasis on the ability to provide practical technical assistance that can significantly aid families in the real-world challenges of designing and implementing system improvements. The total score for all of the criteria is 100 points. The criteria are summarized in the chart below and further described in the sections that follow:

Topic Area	Brief Summary
1. **Back ground and Prior Experience**	Explain past experiences and capabilities. Explain why such experiences and capabilities will inspire confidence that grantee will be highly successful.
2. **Project Description, Methodology and Work plan**	Describe what you will do and how. Describe the activities to be performed, timeline and work plan, and measurable outcomes you will achieve. Discuss how these activities will promote long-term (enduring) improvements in systems infrastructure.
3. **Significance**	How significant are the measurable outcomes and products likely to be? Measurable outcomes and products may be measured in terms of such factors as the type of assistance that can be provided, the types of systems change that might result, the number of people who will benefit from the systems changes and/or the degree to which they may benefit.
4. **Formative Learning**	Describe the system you will use to monitor developments, learn from successes as well as mistakes, and use the experiences to improve the system in a timely and effective manner.
5. **Collaboration, Agreements and Capacity**	Describe the groups and organizations with which you will partner to facilitate system improvements in community services for children with special health care needs.
6. **Budget Narrative/Justification and Resources**	Explain your budget and discuss the appropriateness of the allocations. Also explain the financial or in-kind investments you and your partnering organizations are making to ensure that the project is both successful and significant.

1.   Background and Prior Experience (15 points)

a.   Prior Involvement/Experience (10 points)—The extent to which--

- The application demonstrates the applicant's significant practical experience in working with public and private organizations in developing or improving systems for community living by increasing access to information and providing education and training opportunities to families with children with special health care needs.

- The application evidences an understanding of the methods and strategies for providing technical assistance and training to various organizations.

- Prior experience inspires confidence in the ability of the applicant to provide immediately useful, practical assistance to the target audiences of this grant solicitation.

b.   Assessment of Strengths and Challenges in Current System (5 points)—The extent to which the application evidences--

- A cogent analysis of the strengths and weaknesses of the current long-term services and support systems for families with children with special health care needs. Highlight the need for and use of current programs to improve access to information and education for families. Please include the strengths and weaknesses of the current system for accessing needed expertise in a timely and effective manner.

- An understanding of the issues and barriers to community living families face.

2.   Project Description and Methodology (30 points)

a.   Goals/Objectives—The extent to which the application evidences goals and objectives that--

- Address the weaknesses, issues, and barriers described above. In particular, focus on the most under-served families and the barriers they face.

- Are both significant and reasonable and will be effective in accomplishing the purpose of the grant (i.e., through the creation of Family-to-Family Health Care Information and Education Centers and community living opportunities, and maximization of participation by families with children with special health care needs).

b.   Methods of Providing Assistance to other states and grantee organizations—The extent to which the application--

- Evidences provision of practical training, technical assistance, information collection and dissemination, resource development and policy feedback in all of the technical areas of this grant solicitation.

- Clearly describes logically coherent methods that would be used to provide technical assistance and training to states, grantee organizations, and others.

- Evidences methods that inspire confidence that the goals of the proposal will be met through a description of planned activities, timeframes, and projected results.

- Demonstrates a method of applying appropriate staff or contract expertise to ensure that effective technical assistance will be made available for states and grantee organizations.

c.   Coordination and Linkages—The extent to which the application evidences:

- Coordination with other funding sources and consumer and professional associations engaging in similar efforts; and
- Sufficient linkages with subcontractors or partners whom possess the knowledge, skills and expertise to assist in the project.
- Talent and expertise of families with children with special health care needs will be used effectively in the provision of technical assistance activities (e.g. training, mentoring, etc.).

d.   Work plan--The extent to which the application includes a work plan that documents reasonable and significant benchmarks, milestones, and timeframes and identifies the responsible parties to accomplish the goals of the project.

e.   Organization, Management, and Qualifications—The extent to which the application--

- Addresses any significant circumstance(s) that would limit the ability of the applicant to recruit and hire staff for the project and/or subcontract with other entities as deemed necessary.

- Evidences that key staff, stakeholders and partners (direct and in-direct subcontractors) are qualified and possess the experience and skills to design, implement and evaluate the proposed project within the available time frames.

- Evidences that key project staff have professional experiences with families with children with special health care needs.

- Evidences that project staff have experience in providing technical assistance, training, and information collection, analysis, and dissemination.

- Addresses the ability of the applicant to utilize and interact with various forms of information technology.

3. Significance (20 points)—The extent to which the--

- Goals and objectives specified in the application will assist grantee organizations in the goal of maximizing opportunities for families with children with special health care needs to improve access to community living and consumer satisfaction.

- Application describes a project that will provide considerable assistance to grantee organizations, and others through the scope and breadth of proposed activities as measured by the extent or range of project activities, the numbers served, the types of services available, and the comprehensiveness of the proposed project.

4. Formative Learning (10 points)—The extent to which the application--

- Has methods of information gathering, analysis, and evaluation that are feasible and relevant to the goals, objectives, and measurable outcomes of the proposed project. The extent to which the applicant is likely to gain timely insight into systems change strategies that work and the types of technical assistance that have the most impact.

- Incorporates feedback from the project into ongoing operations.

6. Collaboration, Agreements, and Capacity (15 points)—The extent to which the application—

- Promotes valued social and economic roles for people of any age with a disability or long-term illness and their families by including their talents and expertise in the project (e.g., governing board members, consultants, staff, mentors, peer counselors, trainers, etc.)

- Evidences meaningful involvement of grantee organizations' staff in all stages of the analysis, planning, implementation, and evaluation activities.

- Evidences meaningful involvement of key constituencies in the design implementation and evaluation of the project activities.

- Promotes partnerships with organizations representing families with children with special health care needs.

6.   Budget Narrative/Justification and Resources (10 points)--The extent to which the proposed budget is reasonable in relation to the proposed objectives, design, and significance of the achievements.