

**State of Nevada**  
**Aging and Disability Services Division**

Notice of Funding Opportunity

**Communication Access Service Centers**

Applications Due: January 29, 2021

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## State of Nevada

### Aging and Disability Services Division

<b>Funding Opportunity Title:</b>	Communication Access Service Centers
<b>Project Period:</b>	July 1, 2021 – June 30, 2023
<b>Budget Period (1<sup>st</sup> Year):</b>	July 1, 2021 – June 30, 2022
<b>Due Date for Applications:</b>	January 29, 2021
<b>Date for <a href="#">Informational Meetings</a>:</b>	January 6, 2021

## Funding Opportunity Description

### Background

The Aging and Disability Services Division (ADSD) is seeking partner organizations to provide services to the deaf, hard of hearing and speech-impaired community per NRS 427A.797.

This funding opportunity is in line with the ADSD mission:

*To ensure the provision of effective supports and services to meet the needs of individuals and families, helping them lead independent, meaningful and dignified lives.*

Telecommunication Devices for the Deaf (TDD) Surcharge is imposed on every phone line in the state of Nevada to fund the Communication Access Services (CAS) program, administered by ADSD. Per NRS, the surcharge is used to provide the following services to the deaf, hard of hearing and speech-impaired community:

- State Interpreter/Mentorship Program
- Interpreter Registry
- Relay Nevada
- Access to Services
- Telecommunications Equipment & Assistive Technology Distribution
- Language Acquisition
- Hearing Aid Program for Children

ADSD is aware that the deaf, hard of hearing and speech impaired community throughout Nevada faces several challenges. Most notably, deaf individuals note a shortage of trained, qualified interpreters available to them. This rings true throughout Nevada, but is particularly challenging in rural areas, in medical settings, and the school system. ADSD administers the State Interpreter/Mentorship program through state staff, and this Mentorship Program for Interpreters seeks to address this challenge through peer support and mentoring to increase registered interpreter's skill level.

In addition to administering the State Interpreter/Mentorship program, ADSD administers the Interpreter Registry through state staff. The Relay Nevada service is provided through a contract, currently with T-Mobile, and the three services specifically related this this NOFO,

Access to Services, Language Acquisition, and Telecommunications Equipment and Assistive Technology Distribution services, have been provided through a community partner.

Historically, ADSD has established a single subaward to provide Access to Services, Language Acquisition, and Telecommunications Equipment and Assistive Technology Distribution in a one-stop center for statewide coverage. While this model has helped to centralize services for the community, it has also created unintentional barriers for the deaf, hard of hearing and speech impaired community. As a result, ADSD seeks to diversify services across the state and to develop a network of partners to support this community.

### Current Challenges

This Notice of Funding Opportunity seeks to specifically address the following challenges:

#### Gaps in Services

Due to interpreter challenges, an insufficient provider network, and different language development needs, the deaf, hard of hearing, and speech impaired community often has a lack of access to basic services available to the hearing population. For example, an individual who is deaf whose primary language is American Sign Language may not be able to access social service programs that can help support their goals and needs. They may also face challenges in accessing basic education services, employment opportunities or even healthcare. This individual may need support to know what services are available to them, how to access them, learn how to self-advocate, and in some instances may need ongoing support until their needs are met.

On top of this, Nevada has 17 counties, 15 of which are considered rural or frontier. Historically, the services included in this announcement have been concentrated in Clark and Washoe counties, the two urban counties in Nevada. While this is where the majority of the population resides, it has left many individuals in rural communities without access to any services. In a 2019 townhall in Elko, individuals expressed concerns about being disconnected from services, not being able to access appropriate healthcare, and severe deficiencies in educational support for children who are deaf or hard of hearing.

#### Language Development

For children who are born deaf or hard of hearing, language development, particularly in early childhood is critical for their long-term success. The Communication Access Services program has historically focused on deaf mentoring and American Sign Language learning, although there are a variety of language development choices for families to choose for their child. It is important for families to not only discover options for language development, but also to have ongoing support as their child's language develops.

The community has expressed needs to receive support for their children that is based on their choices and not just focused on American Sign Language. Language development for children must be multi-modal and include role modeling, social learning, and an introduction into deaf culture. It must also support families in developing language that helps them to communicate with their child.

For many families, children, and even adults who are late deafened, learning American Sign Language is a critical component of language development. While families may choose a bi-lingual approach, or an adult may already have developed English as their language, American Sign Language (ASL) can provide a secondary mode of communication and expose individuals to peers that can help support their social development and sense of community. American Sign Language curriculum is taught at few colleges in Nevada; however, these are not typically geared towards families. Community-based ASL classes for families and individuals who wish to learn sign language provide the opportunity to learn ASL, but also offer the opportunity to meet others in the community and thus develop a network of peer support.

### Limited Resources

The National Institute of Health estimates approximately 15% of the adult population over the age of 18 is deaf or hard of hearing. In Nevada, this translates to approximately 433,000 individuals across the state and funding is not keeping pace to support the communication access needs for this population. The only funding directly targeted to the deaf, hard of hearing, and speech impaired community comes from the Telecommunications Devices for the Deaf (TDD) surcharge. Although similar services currently are available throughout the state from other funding streams, Nevada is experiencing a lack of awareness, training, and providers to support this specific community.

These limitations have significantly affected the community services available through competitive subawards. Many areas do not have a sufficient provider base to serve individuals. Local governments can often be the only available provider and they are under-resourced or limited in service options. Additionally, in many communities, volunteers could be a potential solution to meet the needs of deaf, hard of hearing and speech impaired community, but recruitment efforts need to be supported to attract volunteers.

### Coordination of Services

Community providers are working to partner across services; however, when asked to describe partnerships they are often referral based. In recent years, ADSD has facilitated townhall meetings and focus group workshops that allow for more targeted coordination of services, yet partners continue to focus on referral-based partnerships. Additionally, conversations with providers, facilitated townhall meetings, and focus group workshops that allow for more targeted coordination of services alike, continue to cite “removing communication barriers” as one of the top needs in accessing services.

Nevada needs to develop a network of support for the deaf, hard of hearing, and speech impaired community that includes members of the community as well as the hearing community. Coordinating services across a network of providers will elevate awareness, access, and support available to this community.

### Funding Description

Funding for this opportunity comes from the Telecommunication Devices for the Deaf (TDD) surcharge collected by the Public Utilities Commission.

Per NRS 427A.797 services to be funded under this opportunity include:

- Language Acquisition Services
- Access to Education, Employment, Health and Social Services
- Telecommunications Equipment and Assistive Technology Distribution Program
- Hearing Aid Program for children under age 13 (NRS 427A.610)

ADSD anticipates awarding approximately \$1.6 million dollars through this announcement for year one of the two-year project period. Budgetary support for subrecipients in the second year will depend upon the overall availability of funds, program performance, program reporting, and service priorities established by the Division.

### Eligible Applicants

Non-profits, public agencies and for-profit businesses may apply if interested in providing services outlined in this funding opportunity.

All applicants must be in good standing with the State of Nevada and the Federal Government. If an applicant has not responded to any audit finding from the Aging and Disability Services Division (ADSD) or the Department of Health and Human Services, their application may not be considered for funding.

### Informational Meetings

ADSD will hold one informational meeting for interested applicants and organizations. Attendance is voluntary but encouraged.

- **Meeting Date:** Wednesday, January 6, 2021
- **Meeting Time:** 1:00 pm to 3:00 pm
- **Webinar Link:** <https://zoom.us/j/93401316776>
- **Call-In Option:** 1-669-900-6833; Meeting ID: 934 0131 6776

Presentation materials will be posted with Q&A at [http://adsd.nv.gov/Programs/Grant/Notices\\_of\\_Funding\\_Opportunities/](http://adsd.nv.gov/Programs/Grant/Notices_of_Funding_Opportunities/) by close of business on Monday, January 11, 2021.

ASL Interpreters and CART transcription will be available. If you require other specific accommodations, please contact Wendy Thornley at [wthornley@adsd.nv.gov](mailto:wthornley@adsd.nv.gov).

### Applicant Assistance

The Nevada Grants Office is available to provide pre-award assistance to applicants including but not limited to application project management and application reviews. More information about their services and contact information is available at: <http://grant.nv.gov/>.

## Award Information

### Service Categories

The Aging and Disability Services Division has defined four (4) service categories. The service categories are defined based on the NRS and could include more than one service.

Applicants must submit *a separate application for each service category* they wish to apply for in this Notice of Funding Opportunity. Each category of service has a specific amount of funding allocated based on priorities set by NRS and community need. Finally, each category has an appendix with specific instructions for applications for services within the category.

**NOTE:** Click on the name of the category to be routed to that appendix item.

#### [Language Acquisition](#)

This service provides deaf coaching to children and families to help in language development. This category also includes the provision of instructional services to help families and individuals learn American Sign Language.

#### [Access to Services](#)

This service focuses on assisting people who are deaf, hard of hearing and speech-impaired to access services, specifically employment, education, health and social services. Services can be provided to adults and/or to families.

#### [Telecommunications Equipment and Assistive Technology](#)

This service focuses on distributing telecommunications equipment, such as a CapTel phone and other assistive technology to support individuals in accessing telecommunication systems. This category includes the distribution of equipment and assistive technology, as well as training on the use of telecommunications and assistive technology.

#### [Hearing Aid Program](#)

These services focus on providing hearing aids to eligible children under the age of 13 and are contingent on any remaining funding available.

### Subrecipient Responsibilities

These awards are competitive, and applications will be evaluated, in part, on the applicants' stated plan of action and their demonstrated capacity to begin effectively and expeditiously implementing their subaward activities within sixty days of their subaward project period. The subaward is an agreement between the applicant and the Aging and Disability Services Division (ADSD).

The subaward recipient agrees to the responsibilities outlined below:

- *ADSD General Service Specifications* provide program standards for all funded programs, unless noted as exempt in the Notice of Subaward (NOSA):  
<http://adsd.nv.gov/uploadedFiles/adsdnvgov/content/Programs/Grant/ServSpecs/GeneralServiceSpecifications-AllSubawardsFY21.pdf>
- The Communication Access Service Centers also have service-specific specifications that must be followed. These service specifications are currently under review and will

be revised, with guidance provided to subrecipients, as needed:

<http://adsd.nv.gov/uploadedFiles/adsdnv.gov/content/Programs/Grant/ServSpecs/CAS.pdf>

- *Requirements and Procedures for Grant Programs (RPGPs)* are statements of ADSD policy that ensure fiscal compliance with statutes, regulations, and/or rules:  
<http://adsd.nv.gov/uploadedFiles/agingnv.gov/content/Programs/Grant/FiscalRequirements.pdf>
- *Reporting Schedule* includes monthly Requests for Reimbursement and Quarterly Programmatic Reports. Other reports may be required depending on the service category:  
<http://adsd.nv.gov/uploadedFiles/adsdnv.gov/content/Programs/Grant/Reporting/ReportingSchedule.pdf>
  - All programs are required to report client demographic and monthly program service data as defined by ADSD.
  - Programs that utilize volunteers must maintain insurance, including, but not limited to worker's compensation insurance for those individuals. With proper paperwork, ADSD can include volunteers of funded programs in the state's workers compensation coverage at no cost to the subrecipient. Insurance requirements are listed in the General Service Specifications (Appendix B) at <http://adsd.nv.gov/uploadedFiles/adsdnv.gov/content/Programs/Grant/ServSpecs/GeneralServiceSpecifications.pdf>.
  - Failure to comply with reporting requirements can place a subrecipient's funding in jeopardy.
- Programs awarded funding must provide any requested revisions to ADSD by March 15, 2021. A NOSA cannot be issued without requested revisions.
- The application and NOSA must be signed by the head of the agency. ADSD must have a letter on file authorizing the signer if it is not the head of the non-profit board, for-profit agency, or public entity, depending on the type of organization.
- The Request for Reimbursement (RFR) form must be submitted in accordance with the Reporting Schedule, including all required backup documentation.
- All subrecipients must be registered with the State of Nevada and must have a vendor number. Vendor Registration Forms are available at <http://controller.nv.gov>.
- If a subrecipient address changes, the subrecipient must submit a Vendor Information Update and/or Additional Remittance Form to the State's Controller's office. ADSD must be notified of address changes to avoid any delay in receiving funds.
- All subrecipients must have a Dun & Bradstreet Data Universal Numbering System (DUNS) number: <https://www.dnb.com/duns-number.html>
- All subrecipients must have an Employer Identification Number (EIN) or Federal Tax Identification Number.



ADSD staff agrees to the responsibilities outlined below:

- ADSD team members will provide reporting instructions to all subrecipients.
- All subrecipients will be assigned a Grants and Projects Specialist (GPS) who is available to aid with aspects of subaward management, service-specific technical assistance, and program development. Fiscal Auditors are available to address questions regarding fiscal matters.
  - These services also have an assigned Program Manager to provide program specific technical assistance.
- The assigned GPS will contact subrecipients regarding requested revisions before a Notice of Subaward (NOSA) can be issued.
- NOSAs will be distributed to funded programs in late March, or as soon as possible pending receipt of requested revisions.
  - The Request for Reimbursement file will be distributed with the NOSA. Reimbursement requests must be submitted monthly.
- Programs will be assessed to evaluate fiscal accountability, progress towards achieving program goals, objectives, projected outcomes, client satisfaction, and adherence to all regulations, statues, and/or rules. Programmatic and fiscal monitoring will be scheduled in accordance with Department of Health and Human Services (DHHS) policies.

### Cost Sharing or Matching

Matching funds are required for all subawards. The match required is 15% of the ADSD-requested funding. Match can be cash or in-kind. Program income cannot be used as match.

Examples of cash match include other funding sources to support this service. An example of in-kind match would be volunteer time. See page 16 and the *Requirement and Procedures for Grant Programs* for additional information regarding match.

### Application and Submission Information

Applicants must submit a separate application for each service category they wish to apply for under this Notice of Funding Opportunity.

### Division Contacts

General program/service questions and technical assistance on the required forms, beyond instructions provided in this document, can be directed to ADSD Grants Management at [ADSDGrants@adsd.nv.gov](mailto:ADSDGrants@adsd.nv.gov).

Questions and answers that are helpful for all applicants will be posted online at [http://adsd.nv.gov/Programs/Grant/Notices\\_of\\_Funding\\_Opportunities/](http://adsd.nv.gov/Programs/Grant/Notices_of_Funding_Opportunities/) as received, through January 22, 2021.

## Application Forms and Submission Information

Three (3) files are to be used when completing the subaward application. The submitted PDF application must have all elements of these files included:

1. MS Excel File: ADSD Subaward Application – CAS FY22 Part 1
  2. MS Word File: ADSD Subaward Application – CAS FY22 Part 2
  3. PDF File: DHHS Subrecipient Questionnaire
- Optional fourth file: Early Project Period Addendum
  - Additionally, applicants must submit attachments as request within the [Application Checklist](#). Attachments are categorized by “mandatory,” “optional” or “if applicable.”

**Deadline:** Friday, January 29, 2021 (by 11:59 pm, PST)

- Applications must be emailed to [ADSDGrants@adsd.nv.gov](mailto:ADSDGrants@adsd.nv.gov) AND [kmartin@adsd.nv.gov](mailto:kmartin@adsd.nv.gov).

## Application Review Information

### Application Screening

- Each application will undergo an initial review for completeness and adherence to instructions. Applications that do not meet all requirements will not be accepted for funding consideration. Applicants with rejected applications will receive written notification in February 2021.
- Rejected applicants may appeal this decision, in writing, to the ADSD Administrator in Carson City. The request for review must be received within five working days from the notification of non-acceptance.
- The Administrator, or designee, will notify the applicant of the Administrator’s decision, in writing, within ten working days of receiving the applicant’s appeal.
- The Administrator’s decision is final. There will be no additional appeal process.

### Review and Selection Process

After application screening, the ADSD staff and independent reviewers will review all applications for each service and make initial funding recommendations based on scoring criteria in the following section.

For service categories, funding is allocated regionally, based on NRS and community need. See the appendix for each service category for regional allocations.

Funding decisions will be made by the Administrator based on application scores, funding availability and regional allocations. Reporting and compliance history of previous or current subrecipients will also be considered.

ADSD may negotiate with or seek additional information from applicants before decisions are made.

The Administrator’s decision is final.

## Early Project Period (optional)

Applicants may choose to start their projects April 1, 2021, if they have the capacity to do so. ADSD will award funding for this early Project Period based on the submitted 12-month budget of the application. If an applicant chooses to start their project on April 1, they must submit the optional “Early Project Period Addendum” with their application.

## Scoring Criteria

Competitive applications will be scored according to the following matrix (50-point total):

1. Service area, outreach plans and proposed service delivery to target populations (10 points plus 5 bonus points).
  - Items are not defined/described and are unrelated to the proposed service – Score 0 points
  - Items are all poorly or partially defined/described and/or mostly unrelated to the proposed service – Score between 1 and 4 points
  - Items are mostly defined/described, with some areas lacking, and/or partially unrelated to the proposed service – Score between 5 and 6 points
  - Items are satisfactorily defined/described and mostly related to the proposed service – Score between 7 and 9 points
  - Items are thoroughly defined/described and undoubtedly related to the proposed service – Score 10 points
  - Bonus – Rural/frontier, or underserved or unserved service areas – Score 5 bonus points
2. Applicant’s capacity to provide the service, its experience and existing or proposed partnerships (10 points).
  - No experience and lack of capacity and partnerships – Score 0 points
  - Some experience, but lack of capacity and/or partnerships (or vice versa) – Score between 1 and 5 points
  - Good experience, but lack of capacity and/or partnerships (or vice versa) – Score between 6 and 9 points
  - Exceptional experience, capacity and existing partnerships, with plans to seek new partnerships – Score 10 points
3. Other funding, sustainability goals, and reasonableness of cost per client, unit of service and program expenses (10 points).
  - No other funding or sustainability goals; unreasonable cost per client, unit of service and program expenses – Score 0 points
  - Limited other funding and/or sustainability goals; slightly unreasonable cost per client, unit of service and program expenses with poor expense justification – Score between 1 and 4 points

- Satisfactory other funding and/or sustainability goals; slightly unreasonable cost per client, unit of service and program expenses with poor expense justification (or vice versa) – Score between 5 and 6 points
  - Satisfactory other funding and/or sustainability goals; mostly reasonable cost per client, unit of service and program expenses and justification – Score between 7 and 9 points
  - Abundant other funding and/or sustainability goals; all costs are reasonable and justified – Score 10 points
4. Relevance, achievability and impact of the proposed goals and objectives, as well as evaluation of outcomes (10 points).
- Goals, objectives and evaluation of outcomes are not related to the program, unachievable and do not show impact – Score 0 points
  - Goals, objectives and evaluation of outcomes are slightly related to the program, achievable and impactful – Score between 1 and 4 points
  - Goals, objectives and evaluation of outcomes are mostly related to the program, achievable and impactful – Score between 5 and 6 points
  - Goals, objectives and evaluation of outcomes are adequately related to the program, achievable and impactful – Score between 7 and 9 points
  - Goals, objectives and evaluation of outcomes are strongly related to the program, achievable and impactful – Score 10 points
5. Adherence to application instructions and accurate completion of forms (5 points).
- Instructions not followed and forms not complete – Score 0 points
  - Some instructions followed and some forms not complete – Score between 1 and 2
  - Most instructions followed and forms are complete – Score between 3 and 4
  - All instructions followed and forms are complete – Score 5 points

### Anticipated Announcement Award Date

Subaward decisions will be announced via email in late-February. Requested application revisions must be received and approved by ADSD timely in order to issue a Notice of Subaward.

Notices of Subawards will be distributed upon receipt of requested subrecipient revisions, as applicable.

### Subrecipient Training

ADSD will make training available to all subrecipients prior to the beginning of the fiscal year. This training will include the Request for Reimbursement process and other reporting requirements.

Additionally, if services/clients will need to be transferred from one subrecipient to another, the ADSD team will work with both subrecipients to develop a transition plan.

## Form Instructions

### Application Format

The application **MUST** conform to the following requirements in order to be considered for funding:

- Applications must be computer-generated.
- The application must be concise. Do not include cover sheets, cover letters, unsolicited attachments or application instruction pages, as they will be included in the page limit. Specific page limits are listed next to page names below. **If no page limit is listed, the document is one (1) page.**
- Applications are expected to be free of spelling and grammatical errors.
- Use black, 12-point Arial font in the application's Word file. In the Excel file, use the pre-set font settings.
- The application must be submitted on Division forms. The application must be the ADSD Competitive Subaward Application – CAS, FY22 version (as shown in the application's footer).
- Submitted applications must be on white, 8 ½ x 11 size paper, assembled according to the instructions on the [Application Checklist](#) and saved as a PDF document. Applicants who are not able to submit one file may follow the instructions on the [Application Checklist](#) to submit the application in sections.

### Form Instructions

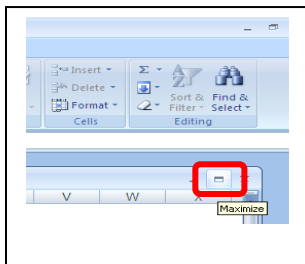
The **Excel** file contains the following forms, in order:

- Applicant Information
- Budget Narrative, 10-page limit
- Budget Summary

To access each form in Excel, click on the corresponding tab at the bottom of the page/workbook as shown here:



If you do not see the tabs at the bottom of the page, maximize the screen by clicking the button on the right side of the screen, as shown here:



**PLEASE NOTE:** Do not utilize multiple copies of the Excel file to create your application; there are formulas that carry from page-to-page. For best results, complete each tab of the workbook in order. Additionally, do not paste information from past applications, as it might cause problems with the formulas. This will ensure that invalid error messages are not shown on the application and linked boxes will have a value.

The **Word** file contains the following forms, in order:

- Project Narrative, 5 or 10-page limit depending on service (see Appendices)
- Organizational Standards and Applicant Questionnaire, 3-page limit
- Goals and Objectives, 3-page limit

The **Subrecipient Questionnaire** (PDF file) is pre-set at 6 pages. Provide an answer to each question.

The optional **Early Project Period Addendum** is limited to 1 page.

### Excel File Instructions

#### APPLICANT INFORMATION


Box #	Instructions
1	Check the box next to the type of application. If the application is for a subaward that is currently funded by ADSD, enter the award number, which can be found on the NOSA as the Agency Ref # in the top right corner.
2	No action required. The amount requested will auto-fill once the Budget Narrative is complete.
3	Select the agency's organization type.
4	Enter Subrecipient and Program information, as requested on the form. Complete both sections. <i>Subrecipients</i> are entities that are responsible for the funds awarded. Additional information on Subrecipients (grantees) is in <u>RPGPs</u> . <i>Programs</i> are entities that provide service delivery under the subaward. The subrecipient contact and program director must not be the same person for accountability purposes. <b>For non-profit organizations, the Subrecipient contact must be the President of the Board of Directors, even if another person has been delegated as an authorized signatory.</b> Enter the agency's State Vendor number, if one exists, and the address associated with the number if it is different than the Subrecipient address. Enter the agency's Employer Identification Number (EIN) or Federal Tax Identification Number. Enter the agency's Data Universal Numbering System (DUNS) Number. All DUNS numbers are 9 digits. To request, look-up or make changes to a DUNS number, go to <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a> .
5	No action required. The funding source has been pre-entered.

6	Choose the type of service for which you are applying. There is one service allowed per application.
7	List the program's service area(s) for the proposed service. You may list specific cities and/or towns, or describe a larger area (e.g., 15-mile radius around Winnemucca; Statewide except for Clark County; etc.). If you list a county, and not specific cities and/or towns, the program will be expected to serve the entire county. This also applies to subawards that enter "statewide" in this section without exclusions listed.
8	List the populations that the agency will target for the proposed service. You may list more than one population-type per line, if needed.
9	No action required. The type of subaward has been chosen (categorical).
10	List the components of the proposed service that will be ADSD-funded. You may list more than one component per line, if needed.
11	Read the statement. Enter the name and title of the agency's authorized representative. Once the authorized representative has reviewed the completed application package, he/she will sign and date the Applicant Information form. By signing the forms, the representative is stating that he/she has approval from the Subrecipient to sign the forms and verified accuracy of the information within the entire application. <i>ADSD must have on file an official letter authorizing the signer if that person is not the head of the nonprofit board, for-profit agency or public entity, depending on the type of organization.</i>

## BUDGET NARRATIVE

The applicant name, subaward and service type will auto-fill from information entered on the Applicant Information page.

Describe program expenses requested from ADSD in the budget categories included in the Budget Narrative using the descriptions below as a guide to describe each category of expense. Be sure to provide a detailed response, explain how each expense is related to the proposed project and identify any one-time costs. Provide calculations where requested and follow the examples. Utilize the RPGPs for rules and regulations on allowable expenses.

**THIS TAB IS NOT PROTECTED.** Do not delete formulas. Ensure text in each row is visible; expand rows as needed (go to numbered rows on the left side of worksheet and drag the bottom line of the row down when you see your cursor change to , or right click on the row number and choose Row Height to enter a height). Each section has additional rows that you may unhide to utilize. Contact ADSD if you need assistance.

**PERSONNEL:** Line A: List *program* and *administrative* staff (Name, Title, PCN) that will provide **direct** service under the proposed services and the associated costs to be charged to the subaward, using the column headers as guides. Costs associated with administrative staff providing **indirect** services may only be included in this section in fixed-fee proposals; otherwise, the expenses may be included as part of the indirect/administrative expense percentage at the end of the Budget Narrative. Place an asterisk (\*) beside all new positions. If



your agency does not have a Position Control Number (PCN) system, one must be developed to identify each position. Line B, for each position listed: List the fringe benefits provided (FICA, Medicare, vacation, state industrial insurance, unemployment insurance, etc.). Briefly describe the position's duties as they relate to the funding and program objective.

**TRAVEL/TRAINING:** Identify in-state and out-of-state travel to be completed during the budget period. The red writing must be replaced with actual trip information, such as the name of a conference, location, etc. Complete the trip expenses and enter justification. If multiple trips are proposed, copy and paste another in-state or out-of-state section into the narrative as stated on the form. Utilize <https://www.gsa.gov> for mileage, per diem and lodging. If lodging exceeds the GSA rate, provide an explanation in the Justification section.

If requesting general in-state mileage for operational purposes, enter the cost in the mileage section *below* "In-State Travel," provide an explanation of the cost calculation and the reason for travel.

**OPERATING:** Include SPECIFIC facility and vehicle costs associated with the proposed program (not the agency as a whole), such as rent, maintenance expenses, insurance (split by type), fuel, as well as utilities such as power, water and communications (phone/internet). Also list tangible and expendable personal property such as office supplies, program supplies, necessary software, postage, etc. Provide a calculation for each line.

**EQUIPMENT:** List equipment to purchase or lease, which cost \$5,000 or more (per item), and justify these expenditures. Also list any computers or computer-related equipment to be purchased regardless of cost. Equipment items that cost less than \$5,000 should be listed under Operating. Justify the need for these items. There is no guarantee that ADSD will have funds available for equipment.

**CONTRACTUAL/CONSULTANT SERVICES:** Explain the need and/or purpose for the contractual and/or consultant service. Identify and justify these costs. Only include costs for which there is a written contract or agreement that can be presented to ADSD, if requested.

**OTHER:** Identify and justify all other expenditures that cannot be identified within another category. These costs may include any relevant expenditure associated with the project. These costs are to be included only if they are associated exclusively with this program. If they are associated with multiple sources of funding, the costs are to be included in Administrative Expenses. Follow the example on the form.

**ADMINISTRATIVE EXPENSES:** Administrative expenses are to be used to help cover expenses that are not easily assignable to a specific program or unit within an organization. These costs are associated with depreciation and use allowances, facility operation and maintenance, general administrative expenses such as accounting, payroll, legal and data processing, and any personnel not providing direct services to the project. If requested, the expenses are limited to the maximum rate listed, depending on the funding source. Once a funding source is assigned to an approved subaward, the allowable rate will apply, and a



budget revision may be required if excess expenses are included. Administrative expenses do not apply to equipment or fixed-fee subawards or portions of subawards. Reference the Requirements and Procedures for Grant Programs (RPGPs) GR - 20\*. Modified Direct Costs (rate of 10%) must be based upon expenses as outlined within the RPGPs.

## BUDGET SUMMARY

The applicant name, subaward and service type will auto-fill from information entered on the Applicant Information page.

This page offers a summary of the subaward budget, match and other funding. Information entered into the Budget Narrative tab will populate the *ADSD Funds* column. Applicants will input funding information in the orange cells.

**Matching Funds Requirements:** 15% of the ADSD requested amount. The required match will calculate automatically. Break out match into the budget expense categories to show where it will be applied.

In the columns after Match, enter any other funding that will be used to support the proposed service. Enter the name of the funding source where indicated, whether the funding is pending or secured, and the amount to be used towards the program. Then, break out the funding into the budget expense categories.

Ensure all boxes on row 21 are zero as stated in the row header.

Add comments to box B, if needed.

Identify sources of match in box C and indicate whether it is pending or secured. Match can be non-federal cash or in-kind.

- In-kind match is the value of any real property, equipment, goods, or services contributed to a funded program that would have been considered eligible expenses within the program's budget for the funded service.
  - FEMA provides a helpful resource for determining in-kind match at [https://www.fema.gov/media-library-data/20130726-1758-25045-4813/inkind\\_contribution.pdf](https://www.fema.gov/media-library-data/20130726-1758-25045-4813/inkind_contribution.pdf).

List potential/estimated amounts and sources of program income, such as client donations, in box D. If your program has a sliding fee scale or cost-sharing procedure, indicate how the program will manage the process according to the RPGPs.

## Program Income

1. Client service donations may not be used as match but may be solicited for all services. Solicitation must be non-coercive. The donation process must be confidential.

2. Cost sharing means contributions made to a program based on a sliding-fee scale. The Division's Cost Sharing Policy can be found on pages 73-75 of the RPGPs: <http://adsd.nv.gov/uploadedFiles/agingnv.gov/content/Programs/Grant/FiscalRequirements.pdf>.

### Word File Instructions

#### PROJECT NARRATIVE

See Appendices for specific guidance, by category.

#### ORGANIZATIONAL STANDARDS and APPLICANT QUESTIONNAIRE

Read the form and respond accordingly.

On question 3, choose the organizational structure of the agency and identify the governing body or ownership as applicable to the selection. Non-profit agencies must verify information for their board of directors.

If the program will use volunteers, please review required insurance information in [Subrecipient Responsibilities](#).

Page Limit: 3 pages.

#### GOALS AND OBJECTIVES

Describe the top two goals and related major objectives, activities, due dates, staff responsibilities and documentation for this project. Multiple objectives may be included within a row if there are not enough rows to meet your needs. Goal 3 has been added by ADSD for completion by the applicant; additional objectives and activities may be added to Goal 3 if they fit under the Quality Improvement and Effectiveness category. Information from this section may be directly added to the NOSA Scope of Work at ADSD's discretion.

Within each of the yellow lines, there is a field that will allow you to press Enter/Return to add spaces for formatting purposes, i.e. to move a goal onto its own page, if desired.

Page Limit: 3 pages.

#### EARLY PROJECT PERIOD ADDENDUM

*This form is optional.* If your agency would like to begin the project/budget period on April 1, 2021, instead of July 1, 2021, this addendum must accompany your application. You may also specify another start date for consideration.

In the addendum, you will describe your goals, objectives and timeline for the early project period, with the end goal of providing services to the community on or before the July 1st standard project period.

## APPLICATION CHECKLIST

If you are submitting one PDF file (preferred), assemble the application in the order shown below. You may also submit a PDF for each of the three files (Part 1, Part 2, Subrecipient Questionnaire) and the attachments.

If any of the following items are incomplete or missing, the application will be rejected:

- Applicant Information (Excel Document)
- Budget Narrative (Excel Document)
- Budget Summary (Excel Document)
- Project Narrative (Word Document)
- Organizational Standards and Applicant Questionnaire (Word Document)
- Goals and Objectives (Word Document)
- Subrecipient Questionnaire (PDF Document)

Attachments – If included, will not count towards page limit.

- Early Project Period Addendum (*optional for all services*)
- Resumes and Letters of Commitment (*optional for all services*)
- Contracts or Memorandums of Understanding (*if applicable to the program/service*)
- Official letter authorizing a person other than the head of the nonprofit board, for-profit agency or public entity (depending on the type of organization) to sign the application and/or subaward documents (*if applicable*).

## Appendix 1 – Language Acquisition

### Background

Language acquisition focuses on assisting children who are deaf, hard of hearing and speech-impaired to develop language to avoid language deprivation. There are many modes of language development for children who are deaf or hard of hearing. Each family chooses the mode of language development based on their preferences. Language development for children must be multi-modal and include role modeling, social learning, and an introduction into deaf culture. It must also support families in developing language that helps them to communicate with their child.

Applicants must describe how they will provide all services in this category in their proposals.

### Services to be Provided by Subrecipients

- *American Sign Language (ASL) Classes* –group classes available to children who are deaf, adults who are late deafened, and their families.
- *Deaf Coaching* – focuses on supporting children, age 0-21, and their families in language development of their choice. This service includes role modeling, socialization, and other activities that support language development. Deaf coaching is done by a deaf individual.

### Funding Source

Funding for these services is allocated from the Nevada TDD Surcharge.

### Funding Availability

Available funding for this service category is approximately \$496,000 statewide per year. The funding amount and number of awards will be determined based on regional allocations, competitive scoring, and administrator decision. Funding is allocated to each region based on population and density. There may be more than one subaward per region. Applicants may also propose to serve more than one region but must provide services in all counties in the selected regions.

Applicants may request more or less funding allocated to each service region, however funding requested above the published regional allocation must be explained in the Project Narrative. Funding above the regional allocations will be dependent on final funding amounts available.

### Regional Allocation

Region	Counties to be Served	Total Allocation
South	Clark, Lincoln, Nye, and Esmeralda	\$252,740
North	Carson, Washoe, Douglas, Storey, and Lyon	\$102,920
Rural	Elko, Eureka, Humboldt, Lander, Lyon, Mineral, Pershing, and White Pine	\$141,279

## Project Narrative Instructions

Provide detailed, but concise responses to each section of the project narrative using guidance below and throughout this document. Page Limit: 10 pages

### *A. Target Population, Service Area and Targeting Plan*

Describe your proposed service area, including opportunities and challenges unique to the service area. Include information regarding the organization's existing efforts in this service area or how the organization will expand if it is a new service area.

Identify efforts to target children who are deaf, hard of hearing and speech-impaired and their families, including their caretakers or guardians. Discuss the total population and percentage of children who are deaf, hard of hearing and speech-impaired.

Describe your organization's planned strategies for outreach activities to promote awareness and visibility of the program in your proposed service area. Include innovative ways to promote quality services to an increasing number of children who are deaf, hard of hearing and speech impaired and their families, caretakers or guardians. Explain how you will schedule, implement, and monitor client recruitment or outreach activities and document outcomes.

### *B. Proposed Intervention*

Describe clearly and concisely, how your organization plans to carry out the requirements of this service. Include a description of specific activities planned, any anticipated challenges and how the organization plans to overcome these challenges. Also, include anticipated technical assistance needs.

Include a proposed plan to recruit, train, and retain a diverse and effective workforce that includes volunteers, paid staff, and partnerships to help meet performance goals.

### *C. Organizational Capacity and Partnerships*

Describe your organization's capability to perform the proposed service. Include past experiences or anticipated increased capacity as a result of this funding. Describe the specific responsibilities of key staff under this service, the facilities, and other resources in place to support this service. Resumes or vitae may be included as attachments to the application for key staff whose responsibilities are described. These do not count towards the application page limit.

Identify key partnerships and describe in detail how they will help to coordinate services for children who are deaf, hard of hearing and speech-impaired and their families, caretakers or guardians in the proposed service area. Include partnerships with government entities, as well as other community partners that will help serve the specified population and accommodate those with additional disabilities (vision impairment, reading and writing limitations, developmental disability, etc.) and language barriers. Letters of Commitment can be attached and do not count towards the application page limit.

#### *D. Cost-Effectiveness and Sustainability*

Describe resources outside ADSD funding to be used to support this service. How will these resources be used to enhance services? Include a description of sources of match and efforts to expand services throughout the proposed service area.

Describe other efforts to deliver this service efficiently, including but not limited to volunteer services. Provide information about any contractual organization(s) that will have a significant role in implementing and achieving outcomes.

#### *E. Evaluation*

Describe the methods, techniques, and tools that will be used to measure outcomes and effectiveness of proposed services. Identify key outputs (i.e. number of people attending ASL classes, number of children receiving deaf coaching, etc) within the service area.

Include at least 2 anticipated outcomes as a result of this service for the target populations. Outcomes should describe the anticipated impact of the services under this category.

#### Resources

- [LEAD-K](#)
- [SKI-HI](#)
- [Deaf Coaching](#)
- [Hands and Voices](#)
- [Early Intervention Programs](#)

## Appendix 2 – Access to Services

### Background

Access to services focuses on supporting individuals in identifying and obtaining services, specifically employment, education, health and social services. The Aging and Disability Services Division (ADSD) has worked with community partners and other State of Nevada agencies to transform the way individuals access services through a coordinated no wrong door network approach. These efforts include increasing awareness of services available, supporting individuals in navigating resources, and exploring options to help people reach their goals. Collectively, these efforts help to increase access services.

Within the community, collaborations among community partners and providers supports individuals in knowing their options and accessing services to meet their goals. Additionally, for some individuals case management is necessary to monitor and follow up on services specified in the individual's plan, ensuring the individual has been able to access the needed services in accordance with their plan, and that the individual has the information to access other services if their needs change.

Access to services can vary greatly for children and families, versus adults. Family support focuses on identifying language development preferences, educational support, youth transition services, and parent peer support. Adult support focuses on health, employment, and other social services.

Applicants may choose to apply to provide both family support and adult support, or applicants may choose to apply to provide support to only one of these two populations.

### Funding Source

Funding for these services is allocated from the Nevada TDD Surcharge.

### Services to be Provided by Subrecipients

Regardless of the population served, applicants must describe how they will provide both of the following services to the target population.

- *Resource and Service Navigation* – a service that offers person-centered counseling that helps individuals to identify needs and goals, explore their options and develop a plan to meet their needs. This service helps individuals navigate service systems while considering the resources available to them. A typical caseload for this service is 80:1.
- *Case Management* – a service that helps individuals maintain services and supports. While Resource and Service Navigation is offered to every individual accessing services, case management services are targeted to individuals who have a higher level of need to monitor and follow-up on services specified in the individual's plan, ensuring that the individual is able to access the services, and the services are being provided in accordance with the individual's plan. A typical caseload for this service is 50:1.

## Funding Availability

Available funding for this service category is approximately \$580,000 statewide per year. The funding amount and number of awards will be determined based on regional allocations, competitive scoring, and administrator decision. Funding is allocated to each region based on population and density. There may be more than one subaward per region. Applicants may also propose to serve more than one region but must provide services in all counties in the selected regions.

Applicants may request more or less funding allocated to each service region, however funding requested above the published regional allocation must be explained in the Project Narrative. Funding above the regional allocations will be dependent on final funding amounts available.

## Regional Allocation

Region	Counties to be Served	Family Support Allocation	Adult Support Allocation	Total Allocation
South	Clark, Lincoln, Nye, and Esmeralda	\$120,425	\$180,635	\$301,060
North	Carson, Washoe, Douglas, Storey, and Lyon	\$47,080	\$70,620	\$117,700
Rural	Elko, Eureka, Humboldt, Lander, Lyon, Mineral, Pershing, and White Pine	\$64,400	\$96,600	\$161,000

## Project Narrative Instructions

Provide detailed but concise responses to each section of the project narrative using guidance below and throughout this document. Page Limit: 10 pages

### A. Target Population, Service Area and Targeting Plan

Describe the proposed service area, including opportunities and challenges unique to the service area. Include information regarding the organization's existing efforts in this service area or how the organization will expand if it is a new service area.

Describe the population(s) to be served, specifically any underserved populations. Identify any barriers that may prevent service delivery and how you will overcome those barriers. Identify methods to be used and/or experience serving the target population.

Describe your organization's planned strategies for outreach activities to promote awareness and visibility of the program in your proposed service area. Include innovative ways to promote quality services for individuals who are deaf, hard of hearing and speech impaired. Explain how you will schedule, implement, and monitor outreach activities and document outcomes.

### B. Proposed Intervention



Describe clearly and concisely, how your organization plans to carry out the requirements of this service. Include specific types of assistance to be provided including priorities based on the needs of the proposed service area. Include a description of specific activities planned, any anticipated challenges and how the organization plans to overcome those challenges. Also describe any anticipated technical assistance needs.

Include a proposed plan to recruit, train, and retain a diverse and effective workforce that includes volunteers, paid staff, and partnerships to help meet performance goals.

### *C. Organizational Capacity and Partnerships*

Describe the organization's capacity to perform the proposed service. Include past experiences or anticipated increased capacity as a result of this funding. Describe the professional staff and specific responsibilities under this service as well as the facilities and other resources in place to support this service. Resumes or vitae may be included as attachments to the application for key staff whose responsibilities are described. These do not count towards the application page limit.

Identify key partnerships and describe in detail how they will help to coordinate services for people who are deaf, hard of hearing and/or speech-impaired in the service area. Include partnerships with government entities as well as other community partners that will help serve the specified population and accommodate those with additional disabilities (vision impaired, reading and writing limitations, developmental disability, etc) and language barriers. Letters of Commitment can be attached and do not count towards the application page limit.

### *D. Cost-Effectiveness and Sustainability*

Describe resources outside ADSD funding to be used to support this service. How will these resources be used to enhance services? Include a description of sources of match and efforts to expand services throughout the proposed service area.

Describe other efforts to deliver this service efficiently, including but not limited to volunteer services. Provide information about any contractual organization(s) that will have a significant role in implementing and achieving outcomes.

### *E. Evaluation*

Describe the methods, techniques, and tools that will be used to measure outcomes and effectiveness of proposed service. Identify key outputs (i.e. number of people who will receive resource and service navigation, number of people who will receive case management, etc) within the service area.

Include at least 2 anticipated outcomes as a result of this service for the target populations. Outcomes should describe the anticipated impact of the services under this category.

## Resources

The following resources provide more information about Access to Services:

- [ADSD Subrecipient Resources](#)
- [Communication Access Services \(CAS\) website](#)
- Nevada Revised Statute (NRS) [427A.797](#)
- [No Wrong Door – Administration for Community Living](#)

## Appendix 3 – Telecommunications Equipment and Assistive Technology

### Background

Telecommunications devices and assistive technology assists people who are deaf, hard of hearing and speech-impaired to communicate independently using specialized telecommunications equipment. These technologies not only assist individuals in making phone calls, but also alert individuals to incoming calls. In addition to telecommunications equipment, individuals who are deaf, hard of hearing, or speech impaired may benefit from other assistive technology that supports their communication needs. While there is a variety of assistive technology that can assist a person who is deaf or hard of hearing in their activities of daily living, this funding is intended to provide equipment and assistive technology that supports communication for this population.

This service category helps individuals identify various specialized technologies to meet their communication needs, distributes equipment and assistive technology to individuals, and provides training, as necessary, on the use of the distributed equipment and technology.

The services within this category are a priority of the TDD surcharge and are available to all individuals who are deaf, hard of hearing, or speech impaired in Nevada.

### Services to be Provided by Subrecipients

- Distribution – assist individuals identify appropriate equipment and technology to meet their communication needs. Distributes identified equipment and technology to the individual.
- Training – provides individual and group training to maximize utilization of equipment and technology.

### Funding Source

Funding for these services is allocated from the Nevada TDD Surcharge.

### Funding Availability

Available funding for this service category is approximately \$580,000 statewide per year. The funding amount and number of awards will be determined based on regional allocations, competitive scoring, and administrator decision. Funding is allocated to each region based on population and density. There may be more than one subaward per region. Applicants may also propose to serve more than one region but must provide services in all counties in the selected regions.

Applicants may request more or less funding allocated to each service region, however funding requested above the published regional allocation must be explained in the Project Narrative. Funding above the regional allocations will be dependent on final funding amounts available.

## Regional Allocation

Region	Counties to be Served	Total Allocation
South	Clark, Lincoln, Nye, and Esmeralda	\$301,060
North	Carson, Washoe, Douglas, Storey, and Lyon	\$117,700
Rural	Elko, Eureka, Humboldt, Lander, Lyon, Mineral, Pershing, and White Pine	\$161,000

## Project Narrative Instructions

Provide detailed, but concise responses to each section of the project narrative using guidance below and throughout this document. Page Limit: 10 pages

### *A. Target Population, Service Area and Targeting Plan*

Describe the proposed service area, including opportunities and challenges unique to the service area. Include information regarding the organization's existing efforts in this service area or how the organization will expand if it is a new service area.

Describe the population(s) to be served, specifically any underserved populations. Identify any barriers that may prevent service delivery and how you will overcome those barriers. Identify methods to be used and/or experience serving the target population.

Describe your organization's planned strategies for outreach activities to promote awareness and visibility of the program to increase access to communication. Include innovative ways to promote quality services for individuals who are deaf, hard of hearing and speech impaired. Explain how you will schedule, implement, and monitor outreach activities and document outcomes.

### *B. Proposed Intervention*

Describe clearly and concisely, how your organization plans to carry out the requirements of this service. Include specific types of assistance to be provided including priorities based on the needs of the proposed service area. Include a description of specific activities planned, any anticipated challenges and how the organization plans to overcome those challenges. Also describe any anticipated technical assistance needs.

Include a proposed plan to recruit, train, and retain a diverse and effective workforce that includes volunteers, paid staff, and partnerships to help meet performance goals. Describe innovative approaches to be used to increase access to telecommunications equipment and assistive technology.

### *C. Organizational Capacity and Partnerships*

Describe the organization's capacity to perform the proposed service. Include past experiences or anticipated increased capacity as a result of this funding. Describe the professional staff and specific responsibilities under this service as well as the facilities and

other resources in place to support this service. Resumes or vitae may be included as attachments to the application for key staff whose responsibilities are described. These do not count towards the application page limit.

Identify key partnerships and describe in detail how they will help to coordinate services for people who are deaf, hard of hearing and/or speech-impaired in the service area. Include partnerships with government entities as well as other community partners that will help serve the specified population and accommodate those with additional disabilities (vision impaired, reading and writing limitations, developmental disability, etc) and language barriers. Letters of Commitment can be attached and do not count towards the application page limit.

#### *D. Cost-Effectiveness and Sustainability*

Describe resources outside ADSD funding to be used to support this service. How will these resources be used to enhance services? Include a description of sources of match and efforts to expand services throughout the proposed service area.

Describe other efforts to deliver this service efficiently, including but not limited to volunteer services. Provide information about any contractual organization(s) that will have a significant role in implementing and achieving outcomes.

#### *E. Evaluation*

Describe the methods, techniques, and tools that will be used to measure outcomes and effectiveness of proposed service. Identify key outputs (i.e. number of people who will receive resource and service navigation, number of people who will receive case management, etc) within the service area.

Include at least 2 anticipated outcomes as a result of this service for the target populations. Outcomes should describe the anticipated impact of the services under this category.

#### Resources

- [Relay Nevada](#)
- [TEDPA – Telecommunications Equipment Distribution Program](#)
- [NASRA](#) – National Association for State Relay Administration

## Appendix 4 – Hearing Aid Program

### Background

Hearing aids assist people who are deaf or hard of hearing to amplify their ability to hear. Hearing aids can be a critical part of a child’s language development if a family chooses that path. Hearing aids are expensive and can be difficult to obtain without access to adequate healthcare coverage. In the 80<sup>th</sup> Session of the Nevada Legislature (2019), a new hearing aid program was introduced, targeting children under the age of 13, whose family income is less than 400% of the Federal Poverty Level, and who do not have access to affordable health insurance. This program allows qualified children to obtain hearing aids at no cost.

### Services to be Provided by Subrecipients

- Hearing Aid Purchase per NRS 427A.610

### Funding Source and Availability

Funding for these services is allocated from the Nevada TDD Surcharge. Per NRS 427A.797 this service will be funded only if funds are available.

### Project Narrative Instructions

Provide detailed, but concise responses to each section of the project narrative using guidance below and throughout this document. Page Limit: 5 pages

#### *A. Target Population, Service Area and Targeting Plan*

Describe the proposed service area, including unique needs of the population in the service area. Include information regarding the organization’s existing efforts in this service area or how the organization will expand if it is a new service area.

Describe the population(s) to be served, specifically any underserved populations. Identify methods to reach the population(s) to be served. Identify any barriers that may prevent service delivery.

Describe organization’s targeting plan. Include information on how the organization plans to communicate and collaborate with civic, minority organizations, as well as other service providers and partners, to maximize services for the target population.

#### *B. Proposed Intervention*

Describe clearly and concisely, how your organization plans to carry out the proposed service. Include a description of specific activities planned, and any anticipated challenges and how your organization plans to overcome these challenges. Also include any anticipated technical assistance needs. Include specific types of assistance to be provided including priorities based on the needs of the proposed service area.

### *C. Organizational Capacity and Partnerships*

Describe the organization's capacity to perform the proposed services. Include past experiences or anticipated increased capacity as a result of possible funding. Describe the professional staff and specific responsibilities under this service and the facilities and other resources in place to support this service. Describe how training and ongoing communication will be used to develop and maintain a well-trained, competent workforce consisting of paid staff, volunteers, and community partners.

Identify key partnerships and describe in detail how they will enhance services under this program. Include partnerships with government entities, as well as other community partners. Letters of Commitment can be attached and do not count towards the application page limit.

### *D. Cost-Effectiveness and Sustainability*

Describe resources outside ADSD funding to be used to support this service. How will these resources be used to enhance services?

Describe other efforts to deliver this service efficiently, including but not limited to volunteer services. Provide information about any contractual organization(s) that will have a significant role in implementing and achieving outcomes.

### *E. Evaluation*

Describe the methods, techniques, and tools that will be used to measure outcomes and effectiveness of proposed service. Identify key outputs (i.e. number of children who will receive a hearing aid)

Include at least 1 anticipated outcome as a result of this service for the target population.