# State of Nevada Aging and Disability Services Division

# Notice of Funding Opportunity **Nutrition Services for Older Adults**

Congregate Meal and Home-Delivered Meal Services

*Funding Opportunity Number*: *ADSD-Nutrition2026-C* **Applications Due**: August 15, 2025

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#### State of Nevada

#### Aging and Disability Services Division

Funding Opportunity Title:	Nutrition Services for Older Adults
Funding Opportunity Number:	ADSD-Nutrition2026-C
Project Period:	October 1, 2025 – September 30, 2027
Budget Period:	October 1, 2025 – September 30, 2026
Due Date for Applications:	August 15, 2025

# Funding Opportunity Description

#### Background

The Aging and Disability Services Division (ADSD) is seeking partner organizations to provide congregate and home-delivered meal services to older adults in Nevada through funding from the Older Americans Act (OAA) and Nevada State General Funds. This Notice of Funding Opportunity (NOFO) establishes the requirements an applicant must meet to be considered for funding. The Older Americans Act-establishes the framework for funding allocations to states to support services for older adults, age 60 or older. You may visit <a href="https://www.acl.gov/about-acl/authorizing-statutes/older-americans-act">https://www.acl.gov/about-acl/authorizing-statutes/older-americans-act</a> for more information about the Older Americans Act.

The Older Americans Act authorizes nutrition services under Title III-C to promote the health and well-being of older adults. According to the Administration for Community Living (ACL), the services should address:

- Hunger, food insecurity, and malnutrition in older adults.
- Socialization of older adults.
- Promotion of health and well-being of older adults.

Meals are provided to older adults in congregate settings or through the provision of homedelivered meals. In addition to meals, services that are incorporated in these programs include nutrition counseling, education, and assessment.

There is a recognized need for nutrition programs to modernize services to increase participation and health outcomes for older adults. The Administration on Aging (AOA) within the ACL has been funding innovation projects since 2017. In addition, nationally, programs are looking at new service delivery models such as pop-up congregate sites, restaurant vouchers, and other innovations to meet desired program outcomes.

#### **Current Challenges**

During the COVID-19 pandemic, home-delivered meal programs became a cornerstone service for older adults who were socially distancing. As congregate meal programs shut down for the health and well-being of participants, the home-delivered meal programs saw demand rise dramatically. In addition, the pandemic and social distancing measures forced many older adults, who had not previously considered this service, to seek home-delivered meals. As Nevada programs and businesses reopen, nutrition services will continue to play a vital role for older adults' health and well-being, whether they are in a congregate setting or home-delivered.

#### Social Isolation

Based on data in the Nevada 2021 Elders Count report, approximately 14% of all individuals aged 65 and older in Nevada live alone. The COVID-19 pandemic highlighted the importance of congregate meals to help address social needs of older adults. Many providers had to look at new and innovative ways to provide socialization in a digital or socially distanced manner. Socialization is critical to many older adults' mental health, daily functioning, and overall health. For these individuals, the congregate meal programs helped to meet that need by not only providing a meal but also offering opportunities for additional activities.

At the same time, as more of the Baby Boomer generation has aged into service eligibility, many congregate sites have started to see decreases in census, with this generation not wanting to participate in the traditional congregate programs. While the long-term effects are not yet known for this new generation, there is a recognized need to modernize traditional nutrition programs to reach this younger generation of older adults.

Likewise, the rate of suicide among older adults is significantly higher in Nevada, compared to the U.S. rate. Additionally, based on data in the Elders Count Nevada 2021 report, there is a significant decline in the number of people aged 65 and older who seek mental health services. The cause for this decline cannot be pinpointed but coupled with the higher rate of suicide among older adults, highlights the critical need for social support inherent in both congregate and home delivered meals. With limited funding and increasing costs, nutrition providers must seek innovative, new service delivery models to offer socialization opportunities for older Nevadans.

#### Nutrition and Health

Since 2017, the ACL has been looking at innovations to not only address socialization and meal needs, but also to improve health outcomes. In Nevada, heart disease and other chronic conditions continue to be the leading causes of death. Increasing education and access to programs aimed at supporting healthy aging and management of chronic health conditions is a critical role of nutrition programs. Across the nation, nutrition programs and community providers are looking at ways to collaborate not only to increase enrollment in nutrition services, but also to increase participation in chronic disease management programs.

As a result of limited resources and gaps in services, nutrition education has significantly declined, despite the value to participants in nutrition programs. As Nevada focuses on programming that is centered on health in aging, greater emphasis on education and health support is necessary to improve health outcomes for older adults.

#### Food Insecurity

Based on data available from the Nevada Office of Food Security, the Baby Boomer generation is the most food insecure population in the United States. Food insecurity is especially prevalent among older Nevadans, and the state is prioritizing efforts to address this concern. The Office of Food Security identifies poor health conditions, lack of reliable social support and transportation, low fixed incomes, and functional limitations to obtain and prepare food as primary causes of food insecurity among older adults. These nutrition programs are critical to helping to address food insecurity and health outcomes for older Nevadans.

#### **Funding Description**

Funding for this opportunity comes from Title III-C of the OAA and Nevada State General Funds. ADSD anticipates the availability of approximately \$2.4 million for congregate meal services and \$9.3 million for home-delivered meal services in competitive year-one (October 1, 2025 through September 30, 2026) of the two-year project period. Budgetary support for subrecipients in the non-competitive second year (October 1, 2026 through September 30, 2027) will depend upon the overall availability of funds, program performance, program reporting, and service priorities established by the Division.

ADSD may be able to assist with and provide funding for the establishment of new meal services. Priority will be given to new programs serving the Las Vegas Valley and rural Nevada.

Nutrition programs are typically awarded on a fixed-fee basis. This means subrecipients are reimbursed based on an established rate for the meal service. The current meal rates are \$3.40 for congregate meals and \$3.90 for home-delivered meals.

Some nutrition programs are awarded funds on a categorical basis. This option is typically approved for small, rural programs. These programs submit their line-item budget without being tied to the fixed rate per meal for reimbursement; however, each line item/expense is closely inspected to ensure expenses are reasonable, necessary, and allowable for the service provided.

#### **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.

Meals must be prepared in a commercial kitchen that has a current food establishment permit. Kitchens must be inspected by the local health authority on a regular basis, receive an acceptable grade, and remedy demerits immediately, as applicable.

#### Applicant Assistance

The Nevada Governor's Office of Federal Assistance (formerly 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: <u>http://ofa.nv.gov</u>.

#### Resources

The following resources provide more information about Older Adult Nutrition Services:

- Nutrition Services | ACL Administration for Community Living
- Innovations in Nutrition Programs | ACL
- Nevada ADSD III-C Nutrition Regulations and Resources (nv.gov)
- <u>Nevada ADSD Nutrition Service Specifications</u>
- <u>Nevada Office of Food Security | Hunger among Older Nevadans Report</u>
- Elders Count Nevada 2021 Report

## **Informational Meeting**

ADSD will host an optional, virtual Applicant Informational Meeting on Tuesday, July 29, 2025, at 2:00pm PT. The meeting will be held via Microsoft Teams. No registration or reservation is needed. For additional information or **to request accommodations**, please email <u>ADSDGrants@adsd.nv.gov</u> no later than Wednesday, July 23, 2025.

Click Here to Join Meeting Meeting ID: 217 929 926 774 7 Passcode: F6Yp2zg6

Or call in (audio only): <u>+1 775-321-6111,,838112578#</u> Phone Conference ID: 838 112 578#

## Award Information

#### Service Types and Priorities

This Notice of Funding Opportunity is seeking applications to provide two services:

- Congregate Meals
- Home-Delivered Meals

Applicants may apply to provide both services but must submit a separate application for each service they wish to provide.

Based on the current challenges and needs of Older Adults in Nevada, ADSD is also prioritizing applications that offer an emphasis on nutrition education.

#### Subrecipient Responsibilities

These awards are competitive, and applications will be evaluated, in part, on the 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 Nevada Aging and Disability Services Division.

#### The subaward recipient agrees to the responsibilities outlined below:

In addition to the Applicant Certifications included in the ADSD Subaward Application form, the following conditions apply for funded projects.

- Programs awarded funding must provide any requested revisions to ADSD by the date indicated in the notification email. A Notice of Subaward (NOSA) cannot be issued by ADSD without requested revisions.
- The Authorized Organizational Representative (AOR) is the head of agency and is defined as the president or chair of the Board of Directors for a non-profit organization, the owner of for-profit business, the chair of the Board of County Commissioners, or the division head of a governmental entity. The AOR must be listed on and sign the application for funding. Only the AOR has the authority to sign and submit grant applications.
  - The Agency's AOR may list up to two (2) additional Authorized Signers on the application, indicating authorized representatives who are able to sign subaward documents such as the NOSA.
  - Changes to the AOR and/or Authorized Signers must be submitted in writing by the Agency's AOR. A signed, dated, letter should be submitted to: <u>ADSDGrants@adsd.nv.gov</u>.
- If a subaward recipient's address changes, the subaward recipient must submit a Vendor Information Update and/or Additional Remittance Form to the Nevada State Controller's office. ADSD must be notified of address changes to avoid any delay in receiving funds. <u>https://controller.nv.gov/Vendor/VendorServices/</u>
- All subaward recipients must have a Unique Entity ID (UEI) Number.
- All subaward recipients must have an Employer Identification Number (EIN) or Federal Tax Identification Number.
- All subaward recipients must be registered on <u>SAM.gov</u> in the System for Award Management, the official U.S. government website for doing business with the federal government.

 All subaward recipients must comply with ADSD's General Service Specifications (<u>ADSD General Service Specifications</u>) and the Service-Specific Specifications for Nutrition (<u>Nutrition Service Specifications</u>).

#### ADSD staff agrees to the responsibilities outlined below:

- ADSD team members will provide reporting instructions to all subaward recipients.
- All subaward recipients will be assigned a Program Coordinator (PC) who is available to aid with aspects of subaward management, program-specific technical assistance, and program development. Fiscal Auditors are available to address questions regarding fiscal matters.
- The assigned PC will contact subaward recipients regarding requested revisions before a Notice of Subaward (NOSA) can be issued.
- NOSAs will be distributed to funded programs in September 2025, or as soon as possible pending receipt of requested revisions.
  - The Request for Reimbursement (RFR) file will be distributed with the NOSA.
- Programs will be assessed to evaluate fiscal accountability; progress towards achieving program goals, objectives, and 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 ADSDawarded funding. Match can be cash or in-kind. Program income cannot be used as match. Federal funds cannot be used as match for federal funds.

Examples of cash match include other funding sources to support this service. An example of in-kind match is volunteer time. See 'Matching Funds Requirements' in the Budget Summary section below as well as in the Nevada DHHS *Grant Instructions and Requirements (GIRS)* for additional information regarding match <u>Grant Instructions and Requirements revised January 2025 (nv.gov)</u>.

# Application and Submission Information

#### **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 <u>ADSDGrants@adsd.nv.gov.</u>

Questions and answers that are helpful for all applicants will be posted online at <a href="http://adsd.nv.gov/Programs/Grant/Notices">http://adsd.nv.gov/Programs/Grant/Notices</a> of Funding Opportunities/.

#### Application Forms and Submission Information

Three (3) separate files listed below are needed to complete the subaward application. The submitted application must have all parts of the three files submitted.

- 1. ADSD Competitive Subaward Application (Word)
- 2. ADSD Subaward Budget Template (Excel)
- 3. ADSD Work Plan Template (Word)
- Additionally, applicants must submit attachments as requested in the <u>Application</u> <u>Checklist</u>. Attachments are categorized as "required," "optional," or "if applicable."

Deadline: Friday, August 15, 2025 (by 11:59 pm, PT)

#### > Applications must be emailed to <u>ADSDGrants@adsd.nv.gov</u>.

## **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 no later than September 2025.
- Rejected applicants may appeal this decision, in writing, to the ADSD Administrator. The request for review must be received within five working days of the notification of non-acceptance.
- The ADSD 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 ADSD Administrator's decision is final. There is no additional appeal process.

#### **Review and Selection Process**

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

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

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

The ADSD Administrator's funding decision is final.

#### Scoring Criteria

Competitive applications will be scored according to the following matrix (50-point total) based on all application components:

#### 1. Project Relevance, Current Need, and Priority Populations (up to 10 points)

- The applicant clearly identifies the proposed project, project relevance, as well as the unmet needs and service gaps that will be addressed by the applicant's project.
- The targeting plan is well defined and expands awareness and access to the service.
- The applicant identifies priority populations to be served. Priority is given to underserved and the most vulnerable populations which may include individuals who are frail, homebound, isolated, low-income, a minority, and/or living in rural or frontier areas.
- The applicant describes anticipated barriers and plans to address barriers.

#### 2. Capacity and Approach (up to 15 points)

- The applicant clearly describes the proposed project, including their approach and specific activities to be completed. Activities to reach priority populations are included.
- The applicant demonstrates their experience and ability to complete the proposed project.
- The applicant identifies and defines the role of key staff, partnerships, and other resources that will have a significant role in completing project activities.
- The project describes new or innovative approaches that will help expand their capacity to increase access to the service.

#### 3. Cost Effectiveness and Sustainability (up to 10 points)

- The submitted budget is complete and the applicant's projected costs are reasonable.
- There are other funding sources identified to help support the project.
- The level of funding requested is explained and justified within the proposal.
- The applicant demonstrates cost-effectiveness and financial accountability.
- Projected costs are relevant to project activities.

#### 4. Project Impact (up to 10 points)

- Project goals, objectives, and intended outcomes are clearly stated.
- The applicant describes methods of documenting and evaluating project effectiveness, quality of service delivery, and impact on target populations.
- Goals and objectives are relevant to the intent of funding and address identified gaps and needs.
- Goals and objectives support activities that help improve access to services and promote program awareness.
- The goals, objectives, and activities of the project have an established timeline that is reasonable.

# 5. Adherence to application instructions and accurate completion of forms (up to 5 points).

- The applicant followed the instructions. Required forms/sections were completed accurately and completely.
- Responses are detailed and concise.

#### Anticipated Announcement Award Date

Subaward decisions will be announced via email in mid-September 2025. Requested application revisions must be received and approved by ADSD in a timely manner for ADSD to issue a Notice of Subaward (NOSA). The NOSA will be distributed upon receipt of all required subrecipient revisions, as applicable.

#### Subrecipient Training

ADSD will make training available to all subaward recipients within the first quarter of the project period. This training will include the Request for Reimbursement (RFR) 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 subaward recipients to develop a transition plan.

## Form Instructions

#### Application Format

All Applications MUST conform to the following requirements to be considered for funding:

- Applications must be computer-generated on the ADSD Application Forms. Three files are required for all competitive applications:
  - 1. ADSD Subaward Application Competitive including the Project Narrative (Word, submitted as PDF)
  - 2. ADSD Subaward Budget Template (Excel, submitted as Excel)
  - 3. ADSD Work Plan (Word, submitted as Word)
- The application must be concise and no more than 15 pages (excluding attachments). 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 the page names below.
- Applications are expected to be free of spelling and grammatical errors. All application forms have pre-set formatting including fonts, line spacing, and margins.
- Submitted applications must be on digital white, 8 ½ x 11 size paper and assembled according to the instructions on the <u>Application Checklist</u>.
- All applicable sections of the Subaward Application must be signed and dated.
- Applications must be submitted via email to <u>ADSDGrants@adsd.nv.gov</u>.

#### ADSD Subaward Application – Word Document

#### A. Applicant Organization Information

This section captures information regarding the Applicant Organization. The Applicant Organization is the named subrecipient on the Notice of Subaward and is responsible for the funds awarded. All information in this section must match exactly what is on record with the

# Nevada Controller's office. Failure to provide correct information in this section will prevent ADSD from making payments to the subrecipient if funding is approved.

The Authorized Organizational Representative (AOR) is the individual authorized to submit an application on behalf the organization and who is responsible for the organization's compliance with the terms and conditions of subawards, including compliance with state and federal laws and regulations. The AOR is the head of agency and is defined as the president or chair of the Board of Directors for a non-profit organization, the owner of for-profit business, the chair of the Board of County Commissioners, or the division head of a governmental entity. The AOR must be listed on and sign the application for funding. Only the AOR has the authority to sign and submit grant applications.

- Applications must be signed by the Agency's AOR.
  - The Agency's AOR may list up to two (2) additional Authorized Signers on the application, indicating authorized representatives who are approved to sign subaward documents such as the NOSA.
- Changes to the AOR and/or Authorized Signers must be submitted in writing by the Agency's AOR. A signed, dated letter should be submitted to <u>ADSDGrants@adsd.nv.gov</u>.
- The Fiscal Officer is the point of contact for any concerns regarding the budget, requests for reimbursement, and annual audits.

#### B. Project Information

This section is for project specific information including the service category, proposed service, and physical address of the project. This section should also list the Project Director assigned as the manager/coordinator/lead for this project. The Project Director is the day-to-day contact for the ADSD Program Coordinator.

#### C. Applicant Certifications

These are required certifications for all applicants, acknowledging the information contained with the application is true and correct.

#### D. General Provisions and Assurances

This section lists the general provisions and assurances associated with the ADSD Notice of Funding Opportunity. If approved for funding, these assurances are superseded by the Assurances that are included in the formal Notice of Subaward.

#### **Project Narrative**

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

The project narrative is the main description of the proposed project and includes five sections:

- Challenges and Needs
- Proposed Intervention
- Organizational Capacity & Partnerships

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- Cost-Effectiveness & Sustainability
- Outcomes and Evaluation

#### **Challenges and Needs**

Describe, in both quantitative and qualitative terms, the nature and scope of the particular problem(s), challenge(s), need(s), and/or issue(s) the proposed intervention is designed to address. Include how the project will potentially impact older adults, individuals with disabilities, family members and caregivers, and include information about current gaps in services. Identify marginalized and traditionally underserved populations within the proposed service area as well as challenges to serving these populations.

#### **Proposed Intervention**

Describe clearly and concisely how your organization plans to carry out this service. Include a detailed description of specific activities planned that address the challenges and needs identified above, how your organization will overcome these challenges, and if the proposed intervention will target and serve historically underserved populations.

Describe the proposed service area and target population(s) to be served through this project. Provide details of new and innovative strategies (services and outreach activities) that will be used, including information regarding your organization's existing efforts, lessons learned, service gaps, and any statistical information to support proposed intervention(s).

Identify any anticipated technical assistance needs. Include specific types of assistance to be provided based on the needs of the proposed service area.

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

Discuss the anticipated impact of proposed intervention strategies.

Describe strategies that will be used to reach the population(s) to be served. Identify any barriers that may prevent service delivery.

#### **Organizational Capacity and Partnerships**

Describe the organization's capacity to perform the proposed intervention(s). Include past experiences and/or anticipated increased capacity as a result of this funding. Identify the professional staff and their specific responsibilities under this project, as well as the facilities and other resources in place to support project activities. 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. Resumes of professional staff can be included.

Identify key partnerships and describe in detail how they will enhance coordination of services under this project. 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.

Describe existing and planned efforts to collaborate with community, county, regional, or statewide organizations to meet project goals, enhance service delivery, increase outreach, and/or implement proposed intervention(s).

Discuss technological capacity to obtain and provide training, deliver services, perform outreach, capture and report data, and achieve program objectives.

#### **Cost-Effectiveness and Sustainability**

Describe resources outside ADSD funding to be used to support this project. How will these resources be used to enhance service delivery and/or outreach? Provide a thorough justification for the level of funding requested from ADSD in this application. If an increase or decrease was requested for a current subaward, fully address the reason for the request.

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

Discuss the impact upon the proposed service area should this project not be funded. Describe plans to maintain cost-effectiveness and to support a model that is sustainable and replicable.

#### **Outcomes and Evaluation**

List measurable outcomes and describe the methods, techniques, and tools that will be used to measure desired outcomes and the effectiveness of proposed intervention(s). Include at least 2 anticipated outcomes, based on this project's proposed intervention(s) that will directly impact target populations. Outcomes should link to project priorities and activities provided in the proposed intervention section. Although output (such as number of clients served, number of training sessions, number of outreach events) should be discussed in this area, measurable outcomes and output are not the same.

Describe the techniques and tools to be used to determine the effectiveness, efficiency, quality, and/or success of project activities. Also, describe plans for evaluating the success of reaching project goals and achieving desired outcomes.

#### ADSD Subaward Budget Template – Excel File

This file is required for all ADSD Subawards, regardless of type. For additional guidance on budgets, applicants should refer to the <u>Grant Instructions and Requirements (DHHS)</u> and the <u>Requirements and Procedures for Grant Programs (ADSD)</u> for rules and regulations on allowable expenses.

The Excel file has formatting that is accessible to all users. While adding information to the Excel file, you may format the cells and rows as needed to fit your text.

There are 2 forms in this workbook: Budget Narrative and Budget Summary. Each form is a separate worksheet (tab) at the bottom of the page/workbook. If you do not see the tabs at the bottom of the page, maximize the screen by clicking the button on the top right side of the screen that looks like a little window.

**PLEASE NOTE**: Do not use multiple copies of the Excel file to create your application. The Excel file has formulas that carry between the tabs. For best results, complete each tab of the workbook in order. Additionally, do not paste information from past applications, as it can cause problems with the formulas. This will ensure that "invalid error" messages are not shown on the application and that linked cells will have a value.

Submit the Excel file as an Excel file; do not convert this file into a PDF for submission.

#### **Budget Narrative Tab**

Enter the applicant's name and service type at the top of the 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 they are requested and follow the examples.

**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 **1**, or right click on the row number and choose Row Height to enter a height). Each section has additional rows that you may unhide for additional data entry. Contact ADSD if you need assistance.

<u>PERSONNEL: Line A</u>: 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. The PCN is linked to the position, not the person. 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.

<u>TRAVEL/TRAINING:</u> 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 a justification. If multiple trips ADSD Competitive Subaward NOFO, Nutrition Services | FY2026 Page 15 of 18

are proposed, copy and paste another in-state or out-of-state section into the narrative as stated on the form. Utilize <u>https://www.gsa.gov</u> 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," and provide an explanation of the cost calculation and the reason for travel.

<u>OPERATING</u>: 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.

<u>EQUIPMENT</u>: List equipment to purchase or lease, which costs \$10,000 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 \$10,000 should be listed under Operating. Justify the need for these items. There is no guarantee that ADSD will have funds available for equipment.

<u>CONTRACTUAL/CONSULTANT SERVICES</u>: 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.

<u>OTHER:</u> 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/INDIRECT EXPENSES or FEDERAL INDIRECT COST RATE (FICR):

Administrative/Indirect expenses and FICR are to be used to help cover expenses that are not easily assigned 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 and existence of a FICR letter. 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/Indirect 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 15%) must be based upon expenses as outlined within the RPGPs. The FICR amount must be based upon allowed expenses per your organization's current FICR letter. Attach a copy of your FICR letter to the application, as applicable.

#### Budget Summary Tab

The applicant's name and service type will auto-fill from information entered at the top of the Budget Narrative tab. This page offers a summary of the subaward budget, match, and other funding. Information entered on the Budget Narrative tab will auto-populate the *ADSD Funds* column. Applicants will input funding information into the orange cells.

**Matching Funds Requirements:** Identify if the required match is Secured or Pending by using the drop-down window in cell C7. The required match is 15% of the ADSD requested amount. The required match will calculate automatically. Break out the required Match into the budget expense categories in that column 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. Format the row as needed to include all text.

Identify sources of match in box C (format as needed) 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.

List potential/estimated amounts and sources of program income, such as client donations, in box D (format as needed). 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 must be solicited for all services. Solicitation must be non-coercive. The donation process must be confidential and voluntary.

2. Cost sharing means contributions that are 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: <u>http://adsd.nv.gov/uploadedFiles/agingnvgov/content/Programs/Grant/FiscalRequirements.pdf</u>

#### ADSD Work Plan - Word Document

The ADSD Work Plan should be reflective of and consistent with the goals and Project Narrative and Budget.

Fill in the project's overall goals related to Outreach (Goal 1) and Service Delivery (Goal 2). If there are additional goals for this project, add under "Goal 3."

For each goal, list relevant objectives, activities, and strategies to be implemented to achieve objectives. Identify timeframes involved (including start and end dates) under "Timeline." Under

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"Evaluation Tool" list relevant tools, techniques, systems, and/or methods that will be used to collect, report, and measure outputs and outcomes. Finally, document projected output and expected outcomes based on activities and strategies to be implemented.

#### Application Checklist

If any of the following items are incomplete or missing, the application will be rejected. If the application is not received by the date requested (including all revisions), funding may be delayed or may not be awarded. Applicants must submit the three files listed below in the formats listed below.

#### A complete application submission includes three files:

	1. ADSD Subaward Application – Competitive (submit as a PDF Document)
	including the Project Narrative (same PDF Document)
	2. <u>Budget Narrative</u> (submit as an Excel File)
	including the <u>Budget Summary</u> (same Excel File)
	3. <u>ADSD Work Plan</u> (submit as a Word Document)
Attach	nments – If included, will not count towards the page limit.
	Proof of Nevada 211 Listing - Agency and Service(s) ( <i>required upon funding approval</i> )

- Sliding-Fee Scale/Cost Sharing Policy (*required if applicant uses it for the service*)
- Client donation policy (*required per the Grant Instructions*)
- Resumes for Project Director and Key Personnel (optional, but encouraged)
- Letters of Commitment/Support (optional, but encouraged)
- Contracts or Memorandums of Understanding (*if applicable to the program/service*)
- Most recent Health Department Inspection Report (*required upon funding approval*)

\*The ADSD Subaward Application – Competitive and all attachments must be submitted via email to <u>ADSDGrants@adsd.nv.gov</u>.