



**New York State
Developmental Disabilities
Planning Council**

***Funding
Announcement***

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Notice of Availability of Federal Funds and Requests for Proposals by the
New York State Developmental Disabilities Planning Council (DDPC)

Nurse Practitioner and Physician Assistant Training and Evaluation Initiative

Timelines for This Request for Proposal

RFP Release Date	January 6, 2012
Letter of Intent	January 27, 2012
Closing Date for Questions	February 8, 2012
Questions Posted By	February 10, 2012
Proposal Due Date	February 17, 2012
Award Announcement	June 4, 2012
Tentative Contract Start Date	August 1, 2012

- Fund *FOUR* demonstration grants to implement the **Partners in Health Education for People with Disabilities** curriculum within New York State Nurse Practitioner and Physician Assistant Training Programs.
- Fund *ONE* **Technical Assistance and Evaluation Grant** to provide support, technical assistance, and evaluation of the above demonstration projects

Intent of Proposal - Why is the DDPC Making This Investment?

The DDPC is announcing the availability of funding to launch four demonstration grants, up to \$50,250 per grant for 15 months to pilot, evaluate, and infuse a training curriculum entitled “**Partners in Health Education for People with Disabilities,**” (PHEPD) into two existing Nurse Practitioner (NP) and two Physician Assistant (PA) Training Programs.

- The initial 3 months of the 15-month grant cycle will focus on program planning and development while the remaining 12 months will be spent on implementation and evaluation.
- Based on the success of the initial 15 months of the project and available appropriations, grant funding for \$40,250 per grant per year may be available for two subsequent 12-month cycles.
- The **PHEPD** training curriculum is designed to build capacity, educate, and empower NPs and PAs to deliver quality health care to people with developmental disabilities.

Additionally, one **Technical Assistance and Evaluation Grant** for up to \$50,250 for 15 months will be awarded to evaluate and provide technical assistance to the selected grantees who will be implementing the “**Partners in Health Education for People with Disabilities**” curriculum.

- Based upon the success of the initial 15 months of the project and available appropriations, grant funding for \$40,250 per year, and may be available for two subsequent 12-month cycles.
- DDPC funds will support one evaluation grant to assess implementation and piloting of the training initiative for nurse practitioners and physician assistants. The goal is to demonstrate the most effective approaches and curriculum components and to institutionalize these training components within Nurse Practitioners and Physician Assistant Training programs within New York State.

Should a suitable Technical Assistance and Evaluation applicant not be selected DDPC reserves the right to award one additional Partners in Health Education for People with Disabilities grant to a nurse practitioner or physician assistant training program.

Background

A review of literature and statistics suggests that people with disabilities account for approximately 54 million people in the United States. Within this estimate, about *7 to 8 million or 3 percent* of the population, have an Intellectual Disability (ID) or Developmental Disability (DD).¹ Studies show that these individuals experience lower rates of preventive health care and higher rates of comorbid, chronic conditions and secondary conditions.²

Research identifies an increasing shortage of health care specialists who are comfortable and skilled in treating people with ID/DD.³ This shortage will have higher levels of impact in inner-city and rural areas.⁴ The overall effect is a group of well-meaning but ill-prepared professionals who report feeling apprehensive about treating individuals with developmental disabilities.

In 2005, the New York State Developmental Disabilities Planning Council (DDPC) launched a multi-year training initiative called “**Parent Partners in Health Education**” (PPHE). PPHE was designed to help medical residents enhance their understanding of individuals with developmental disabilities and the impact on families and caregivers. The PPHE curriculum was first developed by the University Of Illinois College Of Medicine and funded by the Illinois Council on Developmental Disabilities. Over the span of five years, DDPC customized the PPHE curriculum and training design to meet New York training needs and professional capacity gaps and developed “**Partners in Health Education for People with Disabilities**” (PHEPD).

Nurse practitioners (NPs) and Physicians Assistants (PAs) play an increasingly vital role in providing health care to people with various needs and yet they report receiving limited professional education and/or training about the health care of people with developmental disabilities.⁵ Studies found that training in communication and interaction strategies specific to people with ID/DD for NPs and PAs was limited.⁶

The intent of this new training and professional development initiative is to enhance the knowledge and skill of nurse practitioners and physician assistants to provide quality health services to children and adults with developmental disabilities.

Nurse Practitioners and Physician Assistants are required to develop professional competencies in areas including but not limited to Medical Knowledge, Interpersonal and Communication Skills and, Patient Care⁷. PHEPD will assist Nurse Practitioners and Physician Assistants to meet several of their core competencies as well as to:

- Assess the impact of family, community, environment, home, economic, work, and school environments on an individual’s health status;
- Recognize the impact of disabilities and related demands on family, parenting, relationships, and finances;⁸
- Learn to collaborate with all caregivers;⁹
- Provide patient-centered care which recognizes cultural diversity and the patient or designee as a full partner in decision-making; and
- Establish relationships with the person /patient that are characterized by mutual respect, empathy, and collaboration.¹⁰

Alignment of Core Competencies and PHEPD

Descriptions of the PHEPD components can be found in the Implementation and Training Design section.

Nurse Practitioner Core Competencies	Partners in Health Education for People with Disabilities
Scientific Foundation Competencies	Home Visits and Interviews
	Community Agency Visits
	Community medicine and/or case presentations
Practice Inquiry Competencies	Home Visits and Interviews

	Community Agency Visits
	Clinical Experiences
Technology and Information Literacy Competencies	Home Visits and Interviews
	Community Agency Visits
	Clinical Experiences
Independent Practice Competencies	Clinical Experiences
	Home Visits and Interviews

Physician Assistant Core Competencies	Partners in Health Education for People with Disabilities
Medical Knowledge	Clinical Experiences
Interpersonal & communication skills	Home Visits and Interviews
	Community Agency Visits
	Community medicine and/or case presentations
Patient care	Home Visits and Interviews
	Clinical Experiences
	Clinical Experiences
Professionalism	Didactic Lectures
	Home Visits and Interviews
	Community medicine and/or Case Presentations
Systems-based practice	Community Agency Visits

Project Description- What is DDPC Seeking to Achieve?

Partners in Health Education for People with Disabilities Training Grant

DDPC is seeking to implement, pilot, evaluate, and infuse effective training components from **Partners in Health Education for People with Disabilities** into existing NP and PA programs.

Existing training requirements for Nurse Practitioners and Physician Assistants include:

Nurse Practitioners:

37 Nurse Practitioner programs in New York State offer master's degrees and advanced certificates. Nurse Practitioner specialties include Acute Care, Adult Health, College Health, Community Health, Family Health, Gerontology, Holistic Nursing, Neonatology, OB/GYN, Oncology, Palliative Care, Pediatric, Perinatology, Psychiatric, School Health, and Women's Health. A Nurse Practitioner student can complete clinical rotations in various locations including private practice offices and hospital clinics. It would be possible to infuse **PHEPD** into program for Nurse Practitioners since the master's coursework and clinical rotations provide an existing structure. The existing Nurse Practitioner curriculum does not offer formal didactic or other training related to developmental or other disabilities.

Physician Assistants:

There are 19 physician assistant (PA) programs in New York. Training requires at least 32 semester hours of classroom work and 40 weeks (1,600 clock hours) of supervised clinical training. The clinical role of a PA includes primary and specialty care in medical and surgical settings. Physician Assistants practice under the supervision of a physician (M.D. or D.O) in varied settings including private medical offices, hospitals, clinics and community health centers. Most PA programs allow students to choose two electives lasting for 2 or 4 weeks, which offers an opportunity to infuse **PHEPD**. In addition, didactic lectures and rotations in Pediatrics, OB/GYN, and Geriatrics may provide some additional experience. The curriculum may also fit in the Counseling for Preventive Medicine rotation that covers physical and intellectual disabilities and communication strategies.

Implementation and Training Design

Each component is designed to help participants gain a greater understanding of disability issues through engaging and collaborating with individuals with developmental disabilities, families and caregivers and the community organizations. The core features of the project are a series home and community visits where training participants interact with people with disabilities and their caregivers in non-medical and non-clinical settings.

Selected applicants are required to use the **PHEPD** curriculum and implement the **MANDATORY** components during year one of the grant. The curriculum may be modified in years two and three based on lessons learned from the initial year of funding.

The mandatory components of **Partners in Health Education for People with Disabilities** include:

Home Visits and Interviews, (at least 2)

Each NP and PA will partner with a person with a developmental disability and/or their family to visit and interview, preferably at the individual's home. From the interview(s), NPs and PAs will learn about experiences with disability, how the disability affects home and community life, resources that have been beneficial, and gain an understanding of what individuals with disabilities and caregivers want and need from the medical community.

Community Agency Visits, (at least 2)

After meeting with the individual with a disability and caregivers, each NP and PA will accompany the individual or caregiver to at least two Community Agency visits, which may include therapies, educational or school meetings, community rehabilitation settings or any community agency that serves the individual with a disability.

Didactic Lectures, (at least 4)

Required Lectures include:

- a) Organizational session to review project components and requirements;

- b) Assessment of Developmental Disabilities in Primary Care and using developmental assessment tools such as The Modified Checklist for Autism in Toddlers (M-CHAT);
- c) Legal Aspects and Accessing Services for Individuals with Disabilities;
- d) Doctor-Patient-Family Communication , and

Other topics such as Pharmacology and Psychopharmacology are also strongly suggested.

Clinical Experiences, (ongoing)

Clinical experiences are designed to ensure interaction between the health care provider and the person with developmental disabilities in clinic, office, or hospital settings.

Community Medicine and/or Case Presentations, (at least 1)

After completing a home visit and a community agency visit, NPs and PAs will develop Community Medicine or Case Presentations. This consists of presenting and sharing information on the background of the individual with a disability and the role of involved community agencies.

Small Group Discussions, (at least 1)

Discussion sessions will provide a forum for informal peer-to-peer exchange about home visits, clinical encounters or other PHEPD experiences.

Personal Reflections, (as assigned by supervising medical staff)

Personal reflections will involve keeping logs of the educational experience, contacts with the individual with a disability, their caregivers, and providers as well as noting personal reactions and practice implications.

Evaluation, (ongoing)

Selected grantees will be required to work with the PHEPD evaluator to conduct ongoing qualitative and quantitative evaluations of the initiative to ascertain project implementation success and barriers as well as student's knowledge of disability issues.

Expected Outcomes

Aligning with existing professional core competencies for NPs and PAs, **DDPC** is seeking to:

- Expand knowledge and sensitivity about individuals with developmental disabilities,
- Expand knowledge about resources and service systems,
- Increase experiential, clinical, or practice-based learning about the needs of people with disabilities and their caregivers; and
- Increase overall systems capacity to serve individuals with disabilities and their caregivers.

Through piloting of this initiative and scaling up process, DDPC hopes to show:

1. Improvements in patient care for people with developmental disabilities. Patient care includes age appropriate assessment, evaluation, and condition management;

2. Increases in NP and PA sensitivity and awareness of day to day issues for people with disabilities, and responsiveness to individual and caregiver needs and disability related implications;
3. Increases in NP and PA understanding of legal and regulatory requirements, as well as the appropriate role of the NP or PA;
4. Increases in the ability of the NP and PA to interact with different types of medical, disability, and other community service systems;
5. Improved general knowledge of medical and non-medical supports, within the community to address multiple life domains, including but not limited to education, employment, day-habilitation options, etc.;
6. Improvements in the ability of NPs and PAs to provide linkages to support systems and resources for people with disabilities and their caregivers;¹¹
7. Improvements in the ability of NPs and PAs to make appropriate referrals to other health care professionals and community resources for individuals and families;¹² and
8. Improvements in interpersonal & communication skills for NPs and PAs that result in effective communication information exchange with people with disabilities, their caregivers, and general health care system.¹³

Desired Long Term Outcomes:

- DDPC would like to demonstrate that a Disabilities Specialty focus could be one of many viable specialties such as Neonatal, Pediatric, Adult, Gerontological, Women’s Health or Family Health Practices to encompass the life spectrum of individuals with developmental disabilities.
- DDPC would like to demonstrate and document positive changes in training and practice protocols that integrate people with disabilities as part of serving diverse patient populations.

Eligible Applicants:

For the purposes of this grant, eligible applicants include one of the following:

- New York State Based Nurse Practitioner Training Programs;
- New York State Based Physician Assistant Training Programs;

Technical Assistance and Evaluation Grant

DDPC is seeking to fund one organization to provide technical assistance, sustainability planning, and overall evaluation of the four **PHEPD** Training grantees. DDPC is seeking to demonstrate the effectiveness and viability of the training model on NP and PA programs within New York State.

The selected grantee will be required to complete quantitative and qualitative data collection and general evaluation requirements including but not limited to administering pretests, posttests, lecture and case presentation evaluations, individual and caregiver evaluations, and an end of the year NP or PA evaluation. **Existing evaluation tools will be required for year one with potential modification based on lessons learned in subsequent years.** Qualitative data will

consist of tools designed to assess attitudes and opinions on the pretest and posttest, student reflections, and feedback about the program.

Additionally, the selected grantee will:

- Establish ongoing relationships with selected nurse practitioner and/or physician assistant training programs to oversee the development and implementation of their projects;
- Provide ongoing one-to-one and/or group assistance;
- Provide linkages and communication between and among the projects to share information, problem solve, developed curriculum and materials;
- The Technical Assistance Grantee will conduct a comprehensive evaluation at the conclusion of the initial 15 month cycle, for each program focusing on strengths and barriers encountered in program development and implementation. In addition the evaluation will address necessary changes that need to be implemented in year two, lessons learned during project implementation, and identifying potential replicable strategies that can be shared with other programs;
- Work with the grantees will include the development of tools to collect required data for the cumulative evaluation, provide training on data collection, and establish data collection timeframes;
- Identify, compile and disseminate best practice models suitable for statewide application; and
- Provide support to all funded grantees to collect data for an annual and cumulative project evaluation.

Eligible Applicants:

Eligible applicants should have considerable expertise and experience in developing and evaluating training program in the areas of health care and/or individuals with disabilities or their caregivers.

Proposals that demonstrate collaboration between community-based human services or advocacy organizations and health care organizations, either as co-applicants or as sub-contractors will be awarded an additional two points at the third-level review.

For the purposes of this grant, eligible applicants may include but are not limited to:

- Public or private institutions such as universities or colleges;
- Statewide/national health care associations/organizations;
- Associations of community based organizations;
- Non-profit organizations;
- Community-based human services or advocacy organizations;
- Disability service providers; and
- Partnerships of any of the above.

All Applicants

Instructions for Completing This Request for Proposal

Answer all questions in the order in which the instructions are presented. All questions must be answered succinctly and provide a clear understanding of the proposed plan for implementation, including timelines and expected outcomes. Applicants will be judged on the information presented. *Please do not submit any information that was not specifically requested.*

The entire application must not exceed twelve pages and must include:

- Cover letter signed by the Chief Executive/Operating Officer of the organization;
- One-page Proposal Summary;
- Up to seven pages of Project Narrative;
- One completed DDPC Budget Form (attached or available from the DDPC Program Planner);
- One or two-page Budget Justification.

All documents should be typed using one of the four fonts: Palatino, Georgia, Arial and Times New Roman and contain a font size of 11 or larger. A smaller font size is allowed for figures, graphs, diagrams, charts, tables, figure legends, and footnotes, but the allowable fonts must still be used, and the text must be legible (in most cases, we suggest that you do not use a font size smaller than 9). We suggest the font Georgia for these sections, as it is the most legible at a smaller size.

Proposal Application

Partners in Health Education for People with Disabilities Training Grants

I. Proposal Summary - Provide a one-page summary of your proposal which includes: identification of the requesting agency; agency/fiscal intermediary name and address; contact person, telephone, fax and email; project title; amount of funding requested; and a few brief paragraphs describing the proposed project and how this proposal is consistent with and a match to the mission of your organization.

II. Proposal Narrative - Provide a complete but succinct description of the following:

A. Plan of Action [4 points each for a total of 40 points]

- Provide a description, timeframes and targets for how each of the **PHEPD** curriculum components will be implemented.
 - Home Visits and Parent/Caregiver Interviews,
 - Community Agency Visits and Interviews,
 - Didactic Lectures,
 - Community Medicine and/or Case Presentations,

- Clinical Experiences,
- Small Group Discussions,
- Personal Reflections,
- Evaluation
- Describe how you will recruit people with developmental disabilities, caregivers and community providers to participate in the project.
- Describe how you will identify nurse practitioners, and/or physician assistant students to participant in the project.
- Identify the number and percentage of the total population of nurse practitioner and/or physician assistant student who will be involved in the project.
- Describe how you will ensure that all key curriculum elements will be implemented and monitored for system change implications.
- Describe the expected project outcomes including minimum targets (e.g. training numbers).
- Describe how you will demonstrate the achievement of expected outcomes.
- Describe how you will collaborate and partner with other systems and/or stakeholders.
- Describe specific timelines for implementation and completion of essential project activities, including detailed and specific performance milestones. (Please put into a table/chart or logic model format). For additional information on logic models, see <http://www.uwex.edu/ces/pdande/evaluation/evallogicmodel.html>
- Outline what specific products and information will be available at each phase of the project.

B. Evaluation, Dissemination and Sustainability [5 points each for a total of 20 points]

- Describe the method, criteria and frequency you will use for evaluating the impact and effectiveness of this initiative.
- Describe how you will evaluate the satisfaction of all project customers and stakeholders.
- Describe your organizational commitment to the project and the sustainability plan that will ensure this initiative, or the benefits of this initiative, are maintained beyond the receipt of DDPC grant funds. **Details beyond seeking outside grant sources should be outlined.**
- Describe any proposed project products (e.g. training modules, developed resources, etc.) that will demonstrate the impact of your project and/or lessons learned (including presentations of project findings or outcomes) and your organizational plan to disseminate such products or findings to others.

C. Applicant Capability, Personnel, and Resources [4 points each for a total of 20 points]

- Provide a description of the lead person(s) responsible for project implementation and what experience or expertise do they bring to ensure the successful implementation of this initiative. In the event of their absence, include who will function as back up to this lead person and what experience or expertise do they bring to ensure the successful implementation of this initiative.
- Describe your organization's experience or expertise related to health care for individuals with developmental disabilities.
- Describe your organizational experience and expertise in collaborating with other community-based organizations in similar training initiatives.

- Describe your organizations long-term commitment to infuse content on individuals with developmental disabilities into your training program. Also, indicate how this work assists you to meet your organizational mission.
- Provide a listing of organizations committed to participate in and support this project. Describe the various roles these organizations will play in project development and implementation.
- If using contracted services or subcontractors, the applicant describes their roles and responsibilities. **(Note, no points will be added or deducted for this information.)**

III. Proposal Budget and Cost [5 points each for a total of 20 points]*

Grant applications will also be evaluated and rated on the basis of budgetary reasonableness, which includes budget plans that are consistent with the proposed action plan; reasonable administrative costs (**total administration and indirect should not exceed 10% of DDPC share**); justification for each requested budget line; clear identification and percentage of matching funds, cost benefit and highest potential for successful outcomes (reasonableness of cost).

- The budget for the proposed project must be consistent with the intent of the RFP.
- The budget narrative must include an explanation for each budget line and relate the budget amount to the plan of action and expected results.
- The budget must include the required matching funds necessary for implementing the project
- Describe how the agency will monitor project expenditures. What are the fiscal controls and/or process that will be used to ensure that the project stays within each budget line and overall budget?

*Applicants should copy/paste the attached DDPC Budget form or request a budget form directly from the DDPC in MS-Word format. Complete the attached budget form and return with the proposal. **Please note that applicants should submit a 15-month budget. The initial three month should focus on project planning and development and the remaining 12 months on implementation and evaluation.** If there will be expected differences for subsequent year budgets, please note in the budget narrative.

Technical Assistance and Evaluation Grant

I. Proposal Summary - Provide a one-page summary of your proposal which includes: identification of the requesting agency; agency/fiscal intermediary name and address; contact person, telephone, fax and email; project title; amount of funding requested; and a few brief paragraphs describing the proposed project and how this proposal is consistent with and a match to the mission of your organization.

II. Proposal Narrative - Provide a complete but succinct description of the following:

A. Plan of Action [4 points each for a total of 40 points]

- Describe your plan that shows how you will carry out the technical assistance and evaluation of each of the selected the **Partners in Health Education for People with Disabilities** grantees.
- Detail your plan to provide technical assistance and evaluation to sites located throughout New York State.
- Detail the current linkages you have between disability groups and/or the medical community.
- Explain how you will provide individualized direct assistance and support to the selected sites. The description should include how you intend to facilitate information sharing among the projects.
- Describe the methods you will use to collect data and evaluative information from the selected projects.
- Describe your plan for engaging key stakeholders such as the Nurse Practitioner's Association of NYS and the New York State Society of Physician Assistants related to long-term sustainability.
- Provide details for how you will identify, compile and disseminate best practice models applicable for statewide application.
- Describe specific timelines for implementation and completion of essential project activities, including performance milestones wherever possible.
- What specific products and information will be available at each phase of the project?
- Describe plans for dissemination of project products or findings.

B. Evaluation, Dissemination and Sustainability [5 points each for a total of 20 points]

- Describe the method, criteria and frequency you will use for evaluating the impact and effectiveness of this initiative.
- Describe how you will evaluate the satisfaction of all project customers and stakeholders.
- Describe your organizational commitment to the project and the sustainability plan that will ensure this initiative, or the benefits of this initiative, are maintained beyond the receipt of DDPC grant funds. **Details beyond seeking outside grant sources should be outlined.**
- Describe any proposed project products (e.g. training modules, developed resources, etc.) that will demonstrate the impact of your project and/or lessons learned (including presentations of project findings or outcomes) and your organizational plan to disseminate such products or findings to others.

C. Applicant Capability, Personnel, and Resources [4 points each for a total of 20 points]

- Provide a description of the lead person(s) responsible for project implementation and what experience or expertise do they bring to ensure the successful implementation of this initiative. In the event of their absence, include who will function as back up to this lead person and what experience or expertise do they bring to ensure the successful implementation of this initiative.
- Describe your organization's experience or expertise related to evaluating training programs. Describe any particular evaluation experience related to training programs focused on health care and/or individuals with developmental disabilities.

- Describe your organizational experience and expertise in collaborating with other community-based organizations in similar training initiatives.
- What is your organizations long-term commitment to support sustainability of this initiative and related activities? Also, indicate how this work assists you to meet your organizational mission.
- Provide a listing of organizations committed to participate in and support this project. Describe the various roles these organizations will play in project development and implementation.

III. Proposal Budget and Cost [5 points each for a total of 20 points]*

Grant applications will also be evaluated and rated on the basis of budgetary reasonableness, which includes budget plans that are consistent with the proposed action plan; reasonable administrative costs (**total administration and indirect should not exceed 10% of DDPC share**); justification for each requested budget line; clear identification and percentage of matching funds, cost benefit and highest potential for successful outcomes (reasonableness of cost).

- The budget for the proposed project must be consistent with the intent of the RFP.
- The budget narrative must include an explanation for each budget line and relate the budget amount to the plan of action and expected results.
- The budget must include the required matching funds necessary for implementing the project.
- Describe how the agency will monitor project expenditures. What are the fiscal controls and/or process that will be used to ensure that the project stays within each budget line and overall budget?

*Applicants should copy/paste the attached DDPC Budget form or request a budget form directly from the DDPC in MS-Word format. Complete the attached budget form and return with the proposal. **Please note that applicants should submit a 15-month budget. The initial three month should focus on project planning and development and the remaining 12 months on implementation and evaluation....** If there will be expected differences for subsequent year budgets, please note in the budget narrative.

All Applicants

The Request for Proposal Review Process

The DDPC will conduct a three-level review process for all submitted proposals:

- Level 1 Review - The first level entails a Pass/Fail DDPC Staff Review of the submitted proposals to ensure that the application is responsive to the conditions set forth in the RFP. **The DDPC will reject any applications that do not clearly and specifically address the purposes of this funding opportunity and/or fail to meet any one of the following criteria:**
 - Letter of Intent was received within specified timeframe.
 - Applicant is an eligible entity as specified within the RFP.

- The proposal is focused on the population specified within the RFP.
 - The proposal was submitted within the designated timeframes.
 - The proposal was submitted consistent with the format requested by the DDPC? (i.e. # of copies, format, signatures, etc.).
 - The applicant included a budget and justification.
- Level II Review - The second level consists of a scored comprehensive proposal review that involves a thorough review of the submitted proposal specifically related to the project work plan, evaluation, organizational capability, commitment of partners, value of products and dissemination, overall strength of sustainability plan, and the budget and corresponding budget narrative. The proposal review and rating will be conducted using the criteria stated in this DDPC Funding Announcement, and the DDPC reserves the right to conduct follow-up activities and discussions with applicants to clarify information in the submitted proposal. To comprise the review team, the DDPC will typically use staff, council members, and peer/field expertise in the RFP topic area. No applicant with an aggregate reviewer score averaging less than 80 points in the second-stage review will be considered for third-level review or funding.
 - Level III Review - All proposals scoring 80 points or above will be subjected to a third-level Panel Review conducted by the appropriate DDPC Standing Committee and/or a DDPC designated review panel. The third level review may add 1 additional point for exceeding RFP expectations for each of the following criteria:
 - a) Fidelity to RFP Concept;
 - b) Collaboration between disabilities related organizations and health care organizations
 - c) Sustainability of project

The final total score will be the cumulative total of second and third-level reviews, with the RFP awards going to the two highest scoring Nurse Practitioner and two highest rated Physician Assistant training programs. The Technical Assistance and Evaluation grant will be awarded to the highest rated proposal. The third level reviews will also be used to resolve any scoring ties that occur at level two reviews.

Awarding of DDPC Grants & DDPC Reserved Rights

The DDPC Standing Committee will recommend the highest ranked proposal(s) that ***fully meet the intent of the RFP*** as set forth by the DDPC. After reviewing proposals as outlined above, recommended awardees must be approved by the DDPC Executive Committee and by the Developmental Disabilities Planning Council. All costs associated with responding to this RFP are entirely the responsibility of the applicant. The contract process and final contracts are subject to the approval of the Office of State Comptroller (OSC). Upon such OSC approval, the grant process will begin, and all terms of the contract become public information.

As part of the grant award process, the grantee and DDPC will establish a mutually agreed upon final budget, Performance Agreement and Performance Indicators, which become the contract deliverables. Additionally, DDPC will require the use of a logic model for year one planning

purposes and implementation of the final evaluation for the initiative. For multiple year contracts, these deliverables will be negotiated annually.

The DDPC reserves the right to:

- Reject any applications that do not meet the intent of this RFP;
- Change any of the scheduled dates stated in the RFP;
- Reserves the right to cancel or reissue the RFP;
- Seek clarifications at any time during the procurement process including correction of arithmetic, or other apparent errors for the purposes of assuring full and complete understanding of the proposal;
- Award less than the designated number of grant awards as set forth within the RFP;
- Negotiate with applicants regarding Performance Agreements, Performance Indicators, Budget line levels and other issues raised within the RFP review to achieve maximum impact from the grant award and serve the best interests of New York State, and
- If unable to negotiate the contract with the selected applicants within 60 days, the DDPC may begin contract negotiations with the next highest scoring qualified applicant(s).

All materials submitted in response to this request become the property of the NYS DDPC. Selection or rejection of a response does not affect this right. All proposals submitted will be retained by the NYS DDPC and not returned to proposers.

Funding and Matching Requirements

DDPC funds are intended to minimize gaps in service and to increase the independence, productivity, integration, and inclusion into the community of individuals with developmental disabilities and their families. These funds may not be used for activities that duplicate or supplant what is already available or required under existing laws and/or the issuance of this request for proposals does not obligate the DDPC to award grants.

Applicant agencies must supply at least thirty percent (30%) of the total cost of the project. Match may be derived from state, local, agency, and/or private sources in the form of cash or in-kind contributions, such as staff time, fringe benefits, supplies, equipment, travel, rent, indirect costs, or other project-related expenses. Other federal funds may not be used for grantee match.

For this RFP, the 30% match requirements is \$21,536

Grant Match Calculation

\$ 50,250 DDPC Grant Award
<u>÷ 0.7</u>
\$ 71,786 DDPC plus Match
<u>- \$ 50,250 DDPC Grant Award</u>
\$ 21,536 Grantee Match

There are two exceptions to the 30% match requirement.

- If the total annual budget of the organization is less than \$4 million per year, the required match may only be 25%.
- In addition, if the project is providing services within a federally designated poverty area, the match may be reduced to ten percent (10%).
- It will be the responsibility of the applicant to document either type of request for a reduced grantee match. Information about federally designated poverty levels by census tract can be located at www.factfinder.census.gov. For additional information on DDPC Matching Requirements, as well as technical assistance in using the www.factfinder.census.gov web page, go to the RFP site at www.ddpc.state.ny.us.

Please note that Federal funds may not be used for any project matching funding nor may they be used for lobbying activities.

Responsibilities: Confidentiality of Information & Publication Rights

Grantee and DDPC responsibilities are noted on the Quality Assurance attachment, and will include quarterly fiscal and programmatic reporting on milestones agreed upon in the approved Performance Agreement and Performance Indicators. Successful applicants will also be required to agree to:

- *Rights in Data* – The DDPC will remain owner of data and records provided as part of this project, and the grantee shall not use the DDPC data, records and reports for any purpose other than the conduct of this project without the consent of the DDPC. Although (selected grantees / contractors are encouraged to copyright materials, DDPC retains the right to utilize such all produced materials for its own purpose.” (e.g. Right to use, distribute copies to the public). Any publication that is created by a contractor under a contract with the DDPC must acknowledge the funding support of the DDPC. For example, a statement in a publication that “The publication of this pamphlet is supported by funds from the New York State Developmental Disabilities Planning Council” must be included. Any publication must also state that “The opinions, results, findings and/or interpretation of data contained therein are the responsibility of the contractor and do not necessarily represent the opinions, interpretation or policy of the new York State Developmental Disabilities Planning Council.”
- *Ownership of Work Product* – Materials and documents produced by the grantee in the fulfillment of its obligations under this DDPC contract become the property of the DDPC, unless prior arrangements have been made with respect to specific documents, whether or not performance under the contract is completed or terminated prior to completion. **All** products or reports disseminated must credit the DDPC as source of project work and original funding.
- *Product Distribution* – The grantee may not utilize any information obtained via DDPC contact, including those products developed because of the grant but completed after the completion of grant funding, in any public medium (internet, radio, television, newspaper, journal, book, policy paper, public presentation, etc.) without the prior approval of the DDPC. Contractors bear the responsibility to uphold these standards and to require compliance by employees and/or subcontractors. Grantees may set fees to recoup the costs of production and distribution of all grant products.

- *Confidentiality* – The grantee shall treat all information, including but not limited to, information pertaining to service recipients and providers, obtained by the grantee through its performance under the DDPC contract, as strictly confidential. Grantees shall not disseminate any information except as necessary to the proper discharge of its obligations under contract with the DDPC.

Technology Purchasing Guidelines for DDPC Grantees

The NYS Developmental Disabilities Planning Council has implemented spending guidelines with respect to the purchase of technology-related equipment by organizations that receive DDPC grants.

Technology Purchases

It is foreseeable that a situation may arise wherein a grantee must expend grant funds on technology equipment in order to fulfill their contractual obligations to the DDPC. The DDPC will review and must approve all technology purchases as part of the overall budget.

Spending Limits

Grantees may not expend granted funds over the limits set for a particular category of equipment (see Technology Cost Limits Table below). Spending allowances are adjusted to reflect only the length of grant-related service for purchased equipment, for example:

A grantee needs a laptop computer in order to complete a two-year grant. Following spending guidelines, the grantee finds a unit for \$550 (see cost limit table below).

Because the life of a laptop computer is four years, and the grantee will use the device for only two years in the administration of the grant, the grantee is only entitled to charge half of the purchase cost to the grant.

The following formula calculates how much the grantee can charge to the grant:

Total Cost of Equipment:	\$550
Percent attrib. to Grant:	50%
Expenditure Allowance:	\$275

Cost Limits by Technology Category

Category	Spending Limit	Length of Service
Desktop PC	\$550	4 years
Laptop PC	\$550	4 years
LCD Projector	\$600	6 years
Desktop Printer	\$300	4 years

Requests for any exemptions to these grant policies must be made in writing to the Public Information Officer, NYS-DDPC, 99 Washington Avenue, Suite 1230, Albany, NY 12210.

Assurances

Each recipient of a developmental disabilities assistance grant will be required to assure certain provisions required by both Federal and State laws. These include, but are not limited to assurances of non-discrimination and affirmative action in hiring and service provision; assurances of compliance with accessibility requirements; and health standards for appropriate and quality services for persons with developmental disabilities. Upon approval of a grant, these assurances will be included in the formal contract between the grantee and the DDPC.

RFP Questions and Technical Assistance

Questions regarding this specific Request for Proposal must be submitted by mail to the DDPC Program Planner noted below or by email by no later than February 8, 2012. All submitted questions should be identified as either Program or Fiscal related. A Questions and Answers summary will be posted to <http://www.ddpcb2b.com/rfp/default.aspx> and applicants are encouraged to go to that website first to see if their questions have already been addressed prior to the submission of such questions.

Submittal Deadlines

All interested applicants must electronically submit a one-page Letter of Intent by January 27, 2012 to Robin.Hickey@ddpc.ny.gov . A letter of intent is required to assist the DDPC in identifying the interest and potential applicant pool for this grant. Upon receipt of the Letter of Intent, all applicants will receive an email containing the Partners in Health Education for People with Disabilities curriculum. Supporting and supplemental documents and tools will only be made available to the awarded grantees.

All final grant applications must be delivered to the DDPC office by close of business (5:00pm) on February 17, 2012. No applications will be accepted after this deadline. By this deadline date, the applicant must deliver an *original* completed and signed application package, 4 hard copies and an electronic copy on CD, flash drive or other removable storage media (Word or PDF format) to the attention of:

**Sheila M. Carey, Executive Director
NYS Developmental Disabilities Planning Council
99 Washington Avenue, Suite 1230
Albany, NY 12210**
Attn: Nurse Practitioner and Physician Assistant Initiative

For More Information Contact – Robin D. Hickey, DDPC Program Planner at 1-800-395-3372 (NYS only TDD/TDY), by Fax at 518-402-3505, or by email at robin.hickey@ddpc.ny.gov or at the address noted above.

Definitions for Purposes of This Request-For-Proposal

“The term **“Developmental Disabilities”** means a severe, chronic disability of an individual that: (A) is attributable to a mental or physical impairment or combination of mental or physical impairments; (B) is manifested before the individual attains age twenty-two; (C) is likely to continue indefinitely; (D) results in substantial functional limitations in three or more of the following areas of life activity; self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency; and (E) reflects the individual’s need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated” (PL 106-402).

“Advocacy activities” – Active support of policies and practices that promote self-determination and inclusion in the community and workforce for individuals with developmental disabilities and their families.

“Capacity Building activities” – A system for sustaining and expanding the successful delivery of services, supports and other assistance to individuals with developmental disabilities.

“Systemic Change activities” – Sustainable, transferable and replicable change in some aspect of service or support availability, design or delivery that promotes positive or meaningful outcomes for individuals with developmental disabilities and their families.

“Sustainability Plan” – The applicant’s plan to continue the goals, services, supports or other intended activity of the RFP beyond the end date of DDPC funding. The Sustainability Plan should be focused on continuance of intent, activities and outcomes through any combination of strategies, actions and resources.

“Scaling-up” - The process of reaching larger numbers of a target audience by systematizing effective programs.

NYS Developmental Disabilities Planning Council – RFP Proposed Project One Year Budget

BUDGET (Submit as last page) Proposed Budget Period: From _____ To _____

Please fill in dollar amounts in the budget categories that are appropriate to the activities of your project. **TOTAL PROGRAM COST** must equal the sum of the matching share (cash and/or in-kind) plus the DDPC funds required. Include in the Proposal Application a brief narrative for each category for which DDPC funds are requested.

BUDGET CATEGORY	TOTAL PROGRAM COST	DDPC FUNDS REQUIRED	MATCHING SHARE	
			CASH	IN-KIND
Personal Service (Position/rate/salary) 1. 2. 3.				
Employee Fringe Benefits Total Rate _____% Includes:				
Staff Travel				
Contracted or Consultant Services (Specify: type, level & rate)				
Equipment (specify)				
Supplies a. Office Supplies b. Program Supplies				
Rent/Utilities (Specify)				
Miscellaneous a. b. c.				
Indirect Costs (DDPC share cannot exceed 10% of total funding request)				
TOTAL				

NYS Developmental Disabilities Planning Council Quality Assurance Responsibilities

Outlines DDPC and Grantee responsibilities that will foster successful project outcomes.

DDPC Assurances

DDPC will work collaboratively with selected grantees to achieve the following:

- Developing realistic work plans, milestones and outcome targets;
- Ensuring the targets are related to the scope of the initiative;
- Tracking the progress and outcomes of grants to determine whether technical assistance is needed;
- Sending reminders about when required reporting and documentation is due;
- Assisting grantees in developing key partnerships and project support through cluster group assistance;
- Working with grantees and potential funders on continuation funding issues; and
- Assisting grantee to disseminate project lessons, products, lessons learned and replication information.

DDPC Expectations of Selected Grantee

Selected grantees will work with DDPC staff to achieve the following:

- Identifying a key individuals who are committed to the project, including programmatic and fiscal staff to ensure timely completion of all required reporting and documentation;
- Developing a contingency plan in the absence of key individual(s) noted above.
- Completing all expected grant deliverables in a timely manner.
- Ensuring the completion, tracking and documentation of performance outcomes and working with DDPC to problem solve and meet performance goals.
- Establishing key partnerships and collaborations at, before, and subsequent to the proposal development and implementation stages.
- Exploring and implementing a sustainability plan to support the project beyond DDPC funding.

Footnotes

¹ President's Committee for People with Intellectual Disabilities. (2013). About the committee. Retrieved from http://www.acf.hhs.gov/programs/pcpid/pcpid_about.html

² Ouellette-Kuntz, H. (2005). Understanding health disparities and inequalities faced by individuals with intellectual disabilities [Electronic version]. *Journal of Applied Research in Intellectual Disabilities*, 18, 113-121.

³ Krahn, G. L., Hammond, L., & Turner, A. (2006). A cascade of disparities: Health and health care access for people with intellectual disabilities [Electronic version]. *Mental Retardation and Developmental Disabilities Research Reviews*, 12, 70-82.

Lewis, M., Lewis, C., Leake, B., King, B., & Lindemann, R. (2002). The quality of health care for adults with developmental disabilities [Electronic version]. *Public Health Reports*, 117, 174-184.

⁴ Ward, Rolanda L.; Amanda Nichols.; Ruth Freedman. "Uncovering health care inequalities among adults with intellectual and developmental disabilities.(Report)." *Health and Social Work*. National Association of Social Workers. 2010.

⁵ Iezzoni, L. I., Killeen, M. B., & O'Day, B. L. (2006). Rural residents with disabilities confront substantial barriers to obtaining primary care. *Health Services Research*, 41, 1258-1275.

⁶ Morrison EH, George V, Mosqueda L: Primary care for adults with physical disabilities: perceptions from consumer and provider focus groups. *Family Medicine* 2008, 40(9):645-651

Hahn JE, Willis MA. Multimedia web-based courseware in intellectual and developmental disabilities nursing: From concept to development. *International Journal of Nursing in Intellectual Disabilities*, 2004; 1(1):3.

Hahn JE. Addressing the needs for education: curriculum development for nurses about intellectual and developmental disabilities. *Nurs Clin North Am.*, 2003, Jun; 38(2):185 – 204.

⁷ Melville, C.A. et al. (2005) Enhancing primary health care services for adults with intellectual disabilities. *Journal of Intellectual Disability Research*, 49 (3). pp. 190-198.

⁸ National Commission on Certification of Physician Assistants (NCCPA)

http://www.nccpa.net/PAC/Competencies_home.aspx

⁹ American Academy of Nurse Practitioners Certification Program. (2000). Domains and knowledge areas for adult and family nurse practitioners national certification examinations. Washington, DC: Author.

American Academy of Nurse Practitioners Certification Program. (2000). Family nurse practitioner competencies. Washington DC: Author.

¹⁰ American Academy of Nurse Practitioners Certification Program. (2000). Domains and knowledge areas for adult and family nurse practitioners national certification examinations. Washington, DC: Author.

American Academy of Nurse Practitioners Certification Program. (2000). Family nurse practitioner competencies. Washington DC: Author.

¹¹ American Academy of Nurse Practitioners Certification Program. (2000). Domains and knowledge areas for adult and family nurse practitioners national certification examinations. Washington, DC: Author.

¹² U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Professions, Division of Nursing. (2002). Nurse practitioner primary care competencies in specialty areas: Adult, family, gerontological, pediatric, and women's health Rockville, MD: Author.

¹³ U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Professions, Division of Nursing. (2002). Nurse practitioner primary care competencies in specialty areas: Adult, family, gerontological, pediatric, and women's health Rockville, MD: Author.

¹⁴ U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Professions, Division of Nursing. (2002). Nurse practitioner primary care competencies in specialty areas: Adult, family, gerontological, pediatric, and women's health Rockville, MD: Author.