

Michigan Department of Health and Human Services  
Bureau of Grants and Purchasing  
**GRANT REQUEST FOR PROPOSAL (RFP)**

Total Available	\$4,000,000	Estimated Number of Awards	<b>20</b>	RFP Number:	<b>NFEP2-2020</b>
Maximum Award:	\$750,000/year	Minimum Award	\$5,000/year	Department Bureau:	<b>Medicaid Long Term Care Services &amp; Support</b>
Application Due Date: <b>November 15, 2019 at 3:00 p.m.</b>				Funding Source	<b>Civil Monetary Penalty (CMP) Funds</b>
				CFDA#:	<b>N/A</b>
Anticipated Begin and End Dates: <b>April 1, 2020</b>			through	<b>March 30, 2023</b>	

**Proposal Submission**

To gain access to the application and complete entry and submission, a step-by-step instruction manual is available for your use. Visit the MI E-Grants website at <https://egrans-mi.com/mdhhs>, and click the link "About EGrAMS" on the left-side panel to access the manual.

Geographic Area: **Statewide**

Title: **Nursing Facility Enrichment Competitive Fall Grant Program - 2020**

**Disqualifying Criteria:**

The applicant will be disqualified, and the application will not be reviewed if there is failure to:

- Submit a complete application, and a completed 12-month budget if required in the RFP, to the EGrAMS website on or before the bid closing date and time specified.
- Stay at or below the maximum award amount per agreement year, if provided.

Applications from applicants who are current state of Michigan employees are also disqualified and will not be reviewed.

**Pre-Application Conference:**

October 18, 2019, from 10:00 a.m. to 12:00 p.m.; see Section II, 2.d for details.

**Additional Information (e.g., applicant eligibility criteria):**

MDHHS encourages the following entities to apply: hospitals and health care organizations, academic institutions, nursing facilities, nonprofit organizations, private businesses, Native American tribal organizations and other organizations able to plan, implement and evaluate projects, programs, process, systems improvements designed to protect or improve quality of life and care for residents of nursing facilities. Organizations that are not nursing facilities and organizations from states other than Michigan are required to demonstrate partnerships with specific nursing facilities in Michigan for proposed projects by submitting letters of agreement from nursing facilities that state they have entered into a working relationship to participate with the applicant in the proposed project.

**Authority:** P.A. 2080 of 1939.  
**Completion:** Mandatory.  
**Penalty:** Agreement Invalid

The Michigan Department of Health & Human Services (MDHHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a MDHHS office in your area.

## **Table of Contents**

This Request for Proposal (RFP) provides interested applicants with sufficient information to prepare and submit applications for consideration by the Michigan Department of Health and Human Services (MDHHS) and contains the following sections:

Section I .....	Request for Proposal Policy
Section II .....	Grant Program Specifications
Section III .....	Evaluation Criteria

## Section I

### REQUEST FOR PROPOSAL POLICY

#### 1. RFP Timeline and Deadlines

Application Opens and Press Release	October 14, 2019
Pre-application conference	October 18, 2019
Deadline for submitting questions regarding the grant application	November 1, 2019
Q & A Posted on MI E-Grants	November 5, 2019
Agency EGrAMS registration, agency profile and project director request deadline to gain access to Application	November 7, 2019
Grant application deadline @ 3pm	November 15, 2019
Notification of initial MDHHS determination	November 29, 2019

#### 2. Application and Submission Information

##### a. Application Guide

Applicants are responsible for reading and complying with this RFP and Competitive Application Instructions, which can be found by visiting the MI E-Grants website at <http://egrans-mi.com/mdhhs> under 'About EGrAMS'.

##### b. EGrAMS Registration

Applicants are responsible to visit the EGrAMS website to create a user profile and submit a Project Director Request.

1) Registering an agency and creating a user profile through the EGrAMS PORTAL at <http://egrans-mi.com/portal>.

- Applicants **NEW** to EGrAMS must register their agency on or before **November 7, 2019** by going to the EGrAMS portal website.
  - a) Applicants must also have a DUNS number.
- Applicants **NEW** to EGrAMS are required to create a user profile by going to the EGrAMS portal website.

2) Submitting a Project Director Request through the EGrAMS MDHHS site at <http://egrans-mi.com/mdhhs>.

- **ALL** applicants are required to submit a Project Director Request on or before **November 7, 2019**.
- Requests will be processed within two business days.

##### c. Application Submission

Only one application will be accepted from each applicant, but multiple projects can be included in one application. The applicant's Authorized Official must submit the application and any related materials and attachments electronically using the MI E-

[Grants website](#). For technical assistance when entering the application, contact the MI E-Grants Helpdesk at 517-335-3359.

Applicants are encouraged to complete the grant application well in advance of the grant application deadline to allow enough time to complete the application process and to receive technical assistance if necessary.

To gain access to the application and complete entry and submission, a step-by-step instruction manual is available for your use. Visit the [MI E-Grants website](#) and click the link "About EGrAMS" on the left-side panel to access Competitive Application Instructions.

d. Pre-Application Conference

A pre-application conference call and webinar will be held to provide instruction on using the MI E-Grants system. The pre-application conference will be held on **October 18, 2019** beginning at 10:00 a.m. to 12:00 p.m. and will last approximately 120 minutes. Please call 1-877-820-7831, passcode 231160 to join the call. A simultaneous webinar will be held. The webinar can be accessed at: <http://breeze.mdch.train.org/miegrants>.

3. Questions/Inquiries

This solicitation is competitive; therefore, staff cannot have individual conversations with prospective applicants. Any questions concerning the content of this RFP must be sent via email to Cheryl Klima, at MDHHS-CMPGrants@michigan.gov on or before **November 1, 2019**. Questions may be discussed verbally at the pre-application conference. MDHHS will compile all relevant questions and answers and post these as well as any other clarifications or revisions to the initial **RFP by November 5, 2019** on the [MI E-Grants website](#).

4. Incurring Costs

The State of Michigan is not liable for any cost incurred by the applicants prior to issuance of an agreement.

5. News Releases

News releases pertaining to this RFP on the service, study, or project to which it relates may not be made without prior MDHHS approval.

6. Disclosure of Proposal Contents

Proposals are subject to disclosure under the Michigan Freedom of Information Act (PA No. 442 of 1976).

7. Subcontracting

Subcontractors shall be subject to all conditions and provisions of any resulting agreement.

If subcontracting, the Grantee must obligate the subcontractors to maintain the confidentiality of MDHHS' client information in conformance with state and federal requirements.

If portions of the services are being subcontracted, the applicant must identify the services the subcontractor will perform and provide all information requested, as it applies to both the applicant and the subcontractor(s). A subcontractor budget and statement of work must be provided for subcontractor services for \$50,000 or more. If the subcontractor's price is based on a fee schedule, the fee schedule must be included.

MDHHS may, at its discretion, require information on the process of an awarded subcontractor application.

A Grantee is responsible for the performance of any subcontractors. Subcontractors shall be held to the same standard of quality and performance as the Grantee. Evaluators of applications will consider the qualifications of both the Applicant and subcontractor when making agreement award recommendations.

## 8. Evaluation Process

Only applications receiving a minimum of **75 points** are eligible to receive funding through the grant program. An application will be evaluated based on the evaluation criteria identified in the RFP.

- A committee will review, evaluate and score the applications against the RFP requirements.
- Non-nursing facility and out of state applicants must demonstrate pre-arranged partnerships with specific Michigan nursing facilities. Letters of agreement must be submitted with the grant application.
- The applications are ranked by score.
- MDHHS reserves the right to establish the criteria used to evaluate each applicant's response and determine the most responsive, capable and qualified applicants.
- MDHHS reserves the right to request more information, including an in-person presentation by the applicant and may provide technical assistance to applicants who have submitted promising, interesting or innovative proposals, regardless of initial review score.
- The Centers for Medicare and Medicaid Services makes the final approval of all applications.
- In addition to cost, other principal factors may be considered in evaluating applications relative to:
  - Applicant's past performance
  - Applicant's ability to respond to all requirements outlined in the RFP, including a detailed budget. Applications that span longer than one year will need to include a budget for each year of the proposed project, not to exceed three years (attached to the budget narrative section).
  - Applicant's ability to maintain a presence in carrying out proposed grant objectives
  - Financial stability
  - Continuity and stability in implementation of projects
  - Dissemination and knowledge transfer activities, including willingness to participate in an annual conference to share project progress, success, failures, and lessons learned.

MDHHS reserves the right to deny the applicant's application or grant agreement when MDHHS determines in its sole discretion that contracting with or awarding a grant to an applicant presents an unacceptable financial risk to MDHHS.

### Clarifications

MDHHS may request clarifications from one or more applicants. MDHHS will document, in writing, clarifications being requested and forward to the applicants affected. This request may include any changes to the original application and will provide an opportunity to clarify the application submitted.

After reviewing the clarification responses, MDHHS will reevaluate the applications using the original evaluation method.

### 9. Reservations

MDHHS reserves the right to:

- a. Discontinue the RFP process at any time for any or no reason. The issuance of an RFP, preparation and submission of an application, and MDHHS's subsequent receipt and evaluation of an application does not commit MDHHS to award an agreement, even if all the requirements in the RFP are met.
- b. Consider late applications if: (i) no other applications are received or (ii) no complete applications are received.
- c. Consider an otherwise disqualified application, if no other qualified applications are received.
- d. Request that an applicant come to Lansing for an in-person presentation to the review committee on a proposed project.
- e. Disqualify an application if it is determined that an applicant purposely or willfully submitted false information in response to the RFP. The applicant will not be considered for award, the State may pursue debarment of the applicant and any resulting agreement that may have been established may be terminated.
- f. Consider prior performance with the State in making its award decision.
- g. Consider total cost of ownership factors (e.g., transition and training costs) in the final award recommendation.
- h. Refuse to award an agreement to any applicant that has failed to pay State taxes or has outstanding debt with the State of Michigan.
- i. Negotiate with one or more applicants on price, terms, technical requirements, or other deliverables.
- j. Award multiple agreements, or award by agreement activity.

- k. Evaluate the application outside the scope identified in Section I.8 Evaluation Process, if MDHHS receives only one application.
- l. Evaluate applications using a method that establishes the relative importance of each deliverable.

10. Award Procedure

Nursing Facility Enhancement Program grants undergo a **two-part approval process. An MDHHS Review Committee will first review all proposals.** This process takes approximately three weeks. Those approved for consideration for funding are then forwarded to the Centers for Medicare and Medicaid Services (CMS) for final review and approval. **CMS approval takes approximately 45 days.**

Following CMS approval MDHHS will notify applicants selected for funding via the MI E-Grants system. Applications selected for funding will either be approved as submitted or approved with revisions required.

For any applications approved as submitted, the applicant will be notified that the agreement document is available for signature in the MI E-Grants system.

For any applications approved with revisions required, the applicant will be notified that the application is ready for revisions in the MI E-Grants system. After successful completion of required revisions and subsequent MDHHS and CMS reviews, the applicant will be notified that the agreement document is available for signature in the MI E-Grants system.

The Authorizing Official for the applicant must electronically sign the agreement in MI E-Grants.

11. Protests

Award decisions are discretionary and are not subject to protest or appeal.

12. Acceptance of Proposal Content

The contents of the application of the successful applicant may become contractual obligations if an agreement ensues. Failure of the successful applicant to accept these obligations may result in cancellation of the award.

13. Standard Terms

Awards resulting from this RFP require execution of an agreement with MDHHS. A copy of the boilerplate agreement language for this program is available on the [MI E-Grants website](#) for reference. All rights and responsibilities noted in the boilerplate agreement language will become the rights and responsibilities of the indicated parties if the application is approved for funding. Applicants should review this agreement before applying.

14. Material Changes to Projects After Funds are Awarded

Material changes to a project after grant funds are awarded, such as loss of intellectual property, change in principal investigator or project staff responsible for oversight, or changes in staff implementing the grant or grant activities, must be reported to MDHHS

and could result in cancellation of the grant. Significant changes to funded projects, when approved by the State, may also require approval by CMS.

15. Registering on the SIGMA Vendor Self Service Website

To receive payment from the State of Michigan, a Grantee must be registered on the [SIGMA Vendor Self Service website](#), which links to the Statewide Integrated Governmental Management Application system (SIGMA).

16. State of Michigan Employees

State of Michigan employees may not act as applicants. Proposals from applicants who are current State of Michigan employees will be disqualified and will not be reviewed.

Policy in Civil Service Rule 2-8, Ethical Standards and Conduct, states an employee cannot represent or act as an agent for any private interests, whether for compensation or otherwise, in any transaction in which the State has a direct and substantial interest and which could reasonably be expected to result in a conflict between the employee's private interests and official State responsibilities.

## Section II

### GRANT PROGRAM SPECIFICATIONS

#### Introduction

This Request for Proposal (RFP) provides the information necessary to submit an application to the Nursing Facility Enrichment Program as described herein. The specifications described in this RFP and the budget narrative sample provide helpful information for developing the application. The documents required for the completion of this application are available on the [MI E-Grants website](#).

#### 1. Match Requirements

Not applicable.

#### 2. Purpose of the Nursing Facility Enrichment Program

The purpose of the Nursing Facility Enrichment Program is to fund projects and activities that will benefit and enrich the lives of extended stay nursing facility residents. All proposals must include enhancements to nursing facility services and go beyond the services required to be provided by a nursing facility.

#### 3. Who May Apply for Nursing Facility Enrichment Program Funds

Funds may be granted to protect or improve the quality of life and care for nursing facility residents provided that the grantee is qualified and capable of carrying out the intended project.

Examples of eligible organizations include, but are not limited to the following:

- Hospitals and Health Care Organizations
- Academic Institutions
- Certified Long-Term Care Facilities (LTC: Skilled Nursing Facilities [SNF], Nursing Facilities [NF], SNF/NF)
- Nonprofit Organizations
- Private Contractors
- Native American Tribal Organizations

#### 4. Grant Duration

Applicants may submit projects with a duration up to three years. Awards will be made on an annual basis. Agreement period will be based on the State's fiscal year (e.g. 4/1/2020 – 9/30/2020, 10/1/2020-9/30/2021)

## 5. Definitions

**CMP:** Civil Money Penalty, money obtained from fines assessed against nursing facilities for the purpose of deterring or sanctioning poor quality by the Centers for Medicare and Medicaid Services.

**CMS:** Centers for Medicare and Medicaid Services (a Division of the Federal Health and Human Services Administration)

**Culture Change:** The common name given to the national movement for the transformation of older adult services, based on person-directed values and practices where the voices of elders and those working with them are considered and respected. Core person-directed values are choice, dignity, respect, self-determination and purposeful living.

**Consumer Information:** Information that is directly useful to nursing facility residents and their families in becoming knowledgeable about their rights, nursing facility care processes, and other information useful to a resident. Funds may be used to promote culture change model-type projects that involve one or multiple nursing facilities.

**Family Council:** a group of family members that meets regularly. It is a consumer group, composed of relatives and friends of the home's residents. Usually this group works together to solve common problems which involves many of the residents in the nursing home or other long-term care settings.

**FSR:** Financial Status Report, a report submitted to EGrAMS monthly by a grantee to identify contract expenditures. This report is the method of reimbursement for project costs.

**HHS rate agreement:** Michigan Health and Human Services established indirect rates for colleges and universities

**Interested parties:** Include those who may use the reported results of the project to inform practices, program development, quality of life and care improvements, and those interested in replicating the project.

**Long-Term Care Ombudsman:** The Michigan Long Term Care Ombudsman Program strives to improve the quality of care and quality of life experienced by residents who reside in licensed long-term care facilities. Ombudsmen advocate for the resident in the facilities, guided by the wishes of the resident.

**Measurable Outcome:** An observable result that describes how the project benefited nursing home facility residents.

**Nursing Facility (NF):** An institution (or a distinct part of an institution) which is primarily engaged in providing to residents; skilled nursing care and related services for residents who require medical or nursing care; rehabilitation services for the rehabilitation of injured, disabled, or sick persons; or on a regular basis, health-related care and services to individuals who because of their mental or physical condition require care and services (above the level of room and board) which can be made available to them only through institutional facilities, and is not primarily for the care and treatment of mental diseases.

**Person Directed Values:** Respecting and supporting the resident's rights for choice, dignity, respect, self-determination and purposeful living.

**Quality of Care:** The World Health Organization (WHO) defines quality of care as "the extent to which health care services provided to individuals and patient populations improve desired health outcomes. In order to achieve this, health care must be safe, effective, timely, efficient, equitable and people-centered."

**Resident:** someone who resides in the nursing facility for an extended period of time

**Resident Council:** a group of residents that meets regularly. It is a consumer group, composed of the homes' residents. Usually this group works together to solve common problems which involves many of the residents in the nursing home or other long term care settings.

**RFP:** Request for Proposal, a formal competitive solicitation process.

**Skilled Nursing Facility (SNF):** A SNF is a licensed nursing facility with the staff and equipment to give skilled nursing care or skilled rehabilitation and other related health services to those who are chronically ill, usually elderly patients. SNF institutions are certified to participate in and be reimbursed by Medicare and Medicaid. A SNF provides extensive care services, such as intravenous feedings, blood pressure monitoring, medication injections, and care for patients on ventilators.

**Transition Preparation:** An initial home visit for a nursing facility resident to help him or her evaluate the appropriateness of a potential transition to another living arrangement.

## 6. Funding Objectives

Both CMS and MDHHS have objectives for funding Nursing Facility Enrichment Program projects with CMP funds. The MDHHS objectives expand upon the CMS objectives to meet the unique needs of Michiganders who reside in a nursing facility.

### A) CMS funding objectives:

- 1) Projects that support resident and/or family councils and other consumer involvement in assuring quality care. Examples include the following: culture change, resident or family councils, consumer information, resident transition due to facility closure or downsizing, or transition preparation.

2) Improvement initiatives, such as:

Direct Improvements to quality of care: Funds may be used for projects designed to directly improve care processes for nursing facility residents of multiple nursing facilities.

Training: Funds may be used for joint training of facility staff and surveyors, technical assistance for facilities implementing quality assurance programs, training for resident or family councils, Long-Term Care ombudsman or advocacy organizations and other activities that benefit nursing facility residents.

B) MDHHS Funding Objectives:

- 1) Projects that include resident and other stakeholder input in the development of the project. This may take the form of resident or family councils. Funds may be used for projects by not-for-profit resident advocacy organizations that do the following:
  - a. Assist in the development of new independent family councils;
  - b. Assist resident and family councils in effective advocacy on their family members' behalf; and
  - c. Develop materials and training sessions for resident and family councils to assist with implementation of new federal or state legislation.
  - d. For example, Funds may be used to support facilitators, involvement of knowledgeable experts in council meetings, or other initiatives to engage residents and families in the development and implementation of quality improvement programs.
  
- 2) Projects that improve the quality of life for residents through innovative approaches to implement person directed values within the nursing facility. For projects to meet this priority, they must include outcomes that seek to do any of the following:
  - a. Surprise and delight nursing facility residents;
  - b. Improve activities, programs, processes or systems to enhance daily life for nursing facility residents;
  - c. Protect or improve the quality of life and care for nursing facility residents;
  - d. Culture Change, implementing emerging or nationally-sanctioned person centered culture change models;
  - e. Promote increased nursing facility resident autonomy;
  - f. Deepen relationships between residents, staff, and volunteers of nursing facilities;
  - g. Support resident and family councils and other consumer involvement in assuring quality care in facilities;
  - h. Support facility improvement initiatives, such as joint training of facility staff and surveyors, or technical assistance for facilities implementing quality assurance and performance improvement programs; OR
  - i. Utilize new, innovative or pioneering programs or methods designed to improve life for nursing facility residents.

## 7. Unallowable expenses

CMS and MDHHS prohibit the following uses of CMP funding:

- A) Conflicts of Interest: Projects for which a conflict of interest exists or there is the appearance of a conflict of interest.
- B) Duration: Projects lasting more than 3 years.
- C) Duplication: To pay entities to perform functions for which they are already paid by state or federal sources. Funds may not be used to enlarge an existing appropriation or statutory purpose that is substantially the same as the project.
- D) Unfunded Mandate: To fund legislative directives for which no or inadequate funds have been appropriated.
- E) Capital Improvements: To pay for capital improvements to a nursing facility, or to build a nursing facility, as the value of such capital improvement accrues to a private party (the owner). This includes, but is not limited to:
  - 1) Building or Capital Redesign: Funds may not be used to build or redesign a nursing facility, including conversion to a Green House.
  - 2) Capital Expense: Replacing an aging boiler.
- F) Nursing Facility Services or Supplies: To pay for nursing facility services or supplies that are already the responsibility of the nursing facility, such as laundry, linen, food, heat, or staffing costs. This prohibition, however, does not prevent the temporary payment of salary for an individual who will work in the nursing facility as part of an evaluated demonstration of a new service, skill set, or other innovation that the nursing facility has not previously had in place and which the nursing facility may sustain after the demonstration if resources permit. Examples might include new use of a wound specialist and adoption of new skin care techniques, new uses of advance practice nurses, or new methods of retention and training for certified nurse assistants.
- G) Temporary Manager Salaries: To pay the salaries of temporary managers who are actively managing a nursing facility, as this is the responsibility of the involved nursing facility in accordance with 42 CFR §488.415(c).
- H) Supplementary Funding of Federally Required Services: To recruit or provide Long-Term Care Ombudsman certification training for staff or volunteers or investigate and work to resolve complaints as these are among the responsibilities of Long-Term Care Ombudsman programs under the federal Older Americans Act (OAA), regardless of whether funding is adequate to the purpose. On the other hand, there is no prohibition to an Ombudsman program receiving funds to conduct or participate in approved projects, or to carry out other quality improvement projects that are not within the Ombudsman program's existing set of responsibilities under the OAA. Nor is there any prohibition to Ombudsman program staff or volunteers to participate in training that is paid by funds but open to a broad audience, such as nursing facility staff, surveyors, consumers, or others.

## 6. Program Requirements

In addition to the boilerplate agreement, successful applicants are required to comply with all requirements contained in Attachment E, Program Specific Requirements.

7. Application Information

This section describes the content that should be included in each portion of the application.

Certifications:

*I hereby certify that the goals and objectives of this proposed project support one or more of the CMS funding objectives.*

*I hereby certify that the proposed project will benefit nursing facility residents.*

A) Executive Summary (Maximum 5 points, Maximum 1,200 characters)

Briefly describe the project and how it is consistent with the overall goals of the Nursing Facility Enrichment Program. Describe how the project is resident- and person-centered, why it is necessary, and how your organization is uniquely qualified to plan, implement, and evaluate the project.

B) Project Narrative (Maximum 60 points, 5,000 characters in each sub-section)

i. Problem Statement (Maximum 5 points)

Describe in both quantitative and qualitative terms the nature and scope of the problem or issue the proposed project is designed to address. Describe how the project will potentially affect nursing facility residents. Include a description of the gaps in nursing facility resident happiness, satisfaction, well-being, spontaneity, meaningful activities, connections to community, or opportunity for person-centered life enrichment.

ii. Goals and Objectives (Maximum 5 points)

Describe the project's goals and major objectives. Unless the project involves multiple, complex objectives, there should only be one overall goal.)

iii. Proposed Activities (Maximum 5 points) up character limit to 10,000

Provide a clear and concise description of the activities that will be used to address the issues described in the problem statement. The section must include the rationale for implementing the activities. Tell us here how residents have been involved, how many will be served, and how they will benefit from these activities.

iv. Challenges and Barriers (Maximum 5 points)

Describe major challenges or barriers anticipated throughout the project and the plan to overcome them. Include a description of strategic partnerships with entities such as organizations, supporters or consumer groups, that will be formed, if any.

v. Expected Measurable Outcomes (Maximum 5 points)

Please clearly identify the measurable outcomes that are expected because of this project. Your application will be scored on the clarity and nature of your proposed outcomes. **Please note that projects that do not include expected measurable outcomes will not be funded.** See the definitions section for "Measurable Outcomes". The outcome may be described in terms of a change in the nursing facility resident's functional status, mental well-being, knowledge, skill, attitude, awareness, happiness or behavior. They may also measure a change to the degree in which nursing facility residents exercise choice to participate in activities, receive care, or express satisfaction with the way this project's activities are delivered. Measurable outcomes require baseline data. Baseline data must be obtained before the project is implemented, so the evaluation can demonstrate the amount of change (if any) after the project period ends. Data should include measurements of resident satisfaction before, during and after implementation of the project. A measurable outcome is not a

measurable “output” such as the number of residents who served, number of training sessions held, or number of services or units provided.

vi. Evaluation (Maximum 5 points)

Describe the methods, techniques, and tools that will be used to determine whether the proposed activities achieved the anticipated outcomes, and to document the lessons learned, both positive and negative, from the project. This section will be useful to people interested in replicating or modifying the project. Specifically, this section must describe a “process evaluation” the applicant will use to measure progress in implementing the project, including how it plans to document “lessons learned” from the process.

vii. Dissemination (Maximum 5 points)

Describe how the applicant will disseminate the project’s results and findings. Dissemination must be timely and in easily understandable formats to interested parties. This section must include an agreement to participate in an annual conference to share their project progress with others. Applicants must include, in the budget narrative and budget sections, projected expenses for project staff to attend a one-day conference in Lansing in their annual project budget.

viii. Organizational Capacity and Key Staff (Maximum 5 points)

The application must include an organizational capacity statement and vitae for key staff and project personnel. The organizational capacity statement should describe how the applicant’s agency is organized, the nature and scope of its work and the capabilities it, and the key staff possess. Required elements include a short vita for each key project staff and a Staffing Plan including key staff, their names, and titles/positions within the organizations. (PROVIDE EXAMPLE)

ix. Budget Narrative (Maximum 10 points)

Provide a clear synopsis of the anticipated expenditures for the proposed project (see attached example for reference. Please refer to #7 - Unallowable Costs to ensure that the project does not include any CMS- or MDHHS-prohibited costs.

C) Work Plan (Maximum 10 points)

List all objectives and associated activities that will take place during the first year of the proposed project. Objectives should be consistent with program goals. Activities should clearly describe the action steps that will be taken to accomplish each objective. Key staff should be listed for each activity and these positions should be reflected in the budget. Activity dates should show project work is being done across the entirety of the grant year (10/1/2019 to 9/30/2020).

D) Budget (Maximum 10 points)

Include all costs associated with the project for the first fiscal year (do not include costs for subsequent years if the project spans multiple grant years; grant year 1 begins on 10/1/2019 and ends on 9/30/2020). All project costs should be reasonable and allowable (see #7 - Unallowable Costs for reference). The costs in the budget should align with the Budget Narrative and the activities described in the Work Plan to support the Objectives and Activities of the overall project.

E) Miscellaneous – rule about number/type/size of attachments (no more 500-page applications)

8. Credentials

The Grantee must assure appropriately credentialed or trained staff under its control, including Grantee employees and subcontractors, perform functions identified in the proposal. The Grantee must supply an organizational chart for the project staff and describe their roles in the project.

9. Expected Performance Outcomes

Performance outcomes, based on project objectives and their interventions, must be included in the Project Narrative section of the application. During the project period, the Grantee must demonstrate measurable progress toward the achievement of projected outcomes.

10. Reporting Requirements

In addition to the boilerplate agreement, successful applicants are required to comply with all requirements contained in Attachment C, Reporting Requirements.

This includes, in part, the following reports and requirements:

- 1) Monthly submission of a Financial Status Report that details grant expenses incurred each month.
- 2) Submission of a quarterly workplan progress report.
- 3) Submission of an annual report 30 days after the end of the grant period. This report must include a description of the measurable progress made toward goals and any impediments incurred in achieving identified goals.
- 4) Submission of a final report covering the entire grant period 30 days after the end of the project period.
- 5) Participation in an annual meeting to share outcomes, best practices, and lessons learned with other grantees and additional interested parties.

11. Reference Documents

Reference documents for this RFP include:

- 42 CFR 488.433
- State of Michigan Review CMP Proposal Review Criteria
- CMS Memo
- Sample budget narrative

## Section III

### EVALUATION CRITERIA

The maximum score an application can receive equals 100 points. Only those applications receiving a score of **75 points** or more will be considered for award. The maximum number of points for each of the categories is as follows:

<b>Category</b>	<b>Total Points Possible</b>
<b>Narrative</b>	
Executive Summary	<b>10</b>
Project Narrative ( <b>60 points overall</b> ):	
Problem Statement	<b>5</b>
Goals and Objectives	<b>10</b>
Proposed Activities	<b>15</b>
Challenges and Barriers	<b>5</b>
Expected Measurable Outcomes	<b>7</b>
Project Evaluation	<b>8</b>
Dissemination	<b>5</b>
Organizational Capacity & Key Staff	<b>5</b>
Budget Narrative	<b>10</b>
<b>Work Plan</b>	<b>10</b>
<b>Budget</b>	<b>10</b>
<b>Total</b>	<b>100</b>

Evaluators will score applications using the following review questions and requirements:

#### **Executive Summary (Maximum 10 points, Maximum of 1200 characters)**

- Is this project consistent with the overall purpose of the Nursing Facility Enrichment Program?
- Will it benefit nursing facility residents?
- Is the project resident- and person-centered?
- Does the organization describe overall its ability and experience to plan, implement and evaluate the project? (detailed on page 17)

#### **Project Narrative (Maximum 60 points overall, Maximum of 10,000 characters)**

- **Problem Statement (Maximum 5 points):** Is the problem or issue described in both quantitative and qualitative terms? Does the problem statement specifically relate to nursing facility residents? Does it include a description of gaps in nursing facility resident quality of life? Does the applicant include baseline data to demonstrate the need for these activities?

- **Goals and Objectives (Maximum 10 points, Maximum of 10,000 characters):** Do the goals and major objectives make sense and flow logically with each other? Is there one overall goal? If not, are the multiple large goals well described?
- **Proposed Activities (Maximum 15 points, Maximum of 10,000 characters):** Does the section include a clear and concise description of the activities that will be used to address the issues described in the problem statement? Does the section include a rationale for implementing the activities? Will the proposed activities benefit ALL residents or just a subset of the residents (just long-term vs. rehab)?
- **Challenges and Barriers (Maximum 5 points, Maximum of 10,000 characters):** Is there a description of the major challenges or barriers anticipated throughout the project? Is there a plan for overcoming these challenges? Is there a description of any strategic partnerships with entities such as organizations, supporters or consumer groups, that will be formed, if any, to overcome these challenges?
- **Expected Measurable Outcomes (Maximum 7 points, Maximum of 10,000 characters):** Does this section clearly *and concisely* identify the measurable outcomes that are expected because of this project? Will the measurable outcomes demonstrate the success of the proposed project? Do the measurable outcomes make sense given the nature of the proposed project?
- **Evaluation (Maximum 8 points, Maximum of 10,000 characters):** Does this section describe the methods, techniques and tools that will be used to determine whether the proposed projects achieved the anticipated outcomes, and to document the lessons learned, both positive and negative, from the project?
- **Dissemination (Maximum 5 points, Maximum of 10,000 characters):** Does this section describe how the applicant will disseminate the project's results and findings? Does the grantee agree to participate in an annual conference to share their project progress with others?
- **Organizational Capacity and Key Staff (Maximum 5 points, Maximum of 10,000 characters):** Does the application include an organizational capacity statement that lists key staff and project personnel? Does this section describe how the organization(s) and key staff are capable of successfully implementing this project? Are the following attached: a resume for each key project staff and an organizational chart for this project (rather than the full organization) including key staff, their names and titles?
- **Budget Narrative (Maximum 10 points, Maximum of 10,000 characters) - See Sample Budget Narrative – Attached:** Does the budget narrative resemble the sample provided and provide a clear synopsis of costs for the proposed project? Does the budget narrative include any prohibited costs by CMS?

**Work Plan (Maximum 10 points)**

- Are the objectives consistent with the program goals?
- Do the activities clearly describe what actions or steps will be taken to accomplish each objective?
- Is the workplan organized and laid out chronologically along a timeline for completion of the project goals and activities? (example to come)
- Are key staff listed consistent with the project contacts and budgeted staff?
- Do activities extend across the full length of the project?

**Budget (Maximum 10 points)**

- Are the line items requested allowable and reasonably adequate to provide consistent service during the project period?
- Are the funds allocated in the budget categories consistent with the work plan?
- Do the line items support the work plan, objectives and activities of the program?