



## **DCF Grant Request for Proposal (RFP)**

Independent Living Services for Older Individuals who are Blind or Visually Impaired  
Rehabilitation Services

Release Date: September 13, 2012

Deadline: October 22, 2012

Contact Person: Brie Wilkins

DCF Procurement Services

[Brie.Wilkins@dcf.ks.gov](mailto:Brie.Wilkins@dcf.ks.gov)

***Strong Families Make A Strong Kansas***

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## **Overview**

The Kansas Department for Children and Families (DCF), Division of Rehabilitation Services (RS), announces the release of a Request for Proposal (RFP) to fund Independent Living Services for Older Individuals who are Blind (OIB). Eligible applicants include: public or private not-for-profit entities; faith-based organizations; agencies that specialize in providing services for persons who are blind or visually impaired; independent living centers; or other qualified organizations or individuals with the resources and expertise to serve the eligible population.

### **Request for Proposal Timeline**

Release of Request for Proposal	September 13, 2012
Written Questions from Potential Bidders due by 5:00 p.m.	September 28, 2012
Q&A Emailed & Posted by DCF	October 3, 2012
Applications Due	5:00 p.m. October 22, 2012 Send applications to: Brie Wilkins, DCF Procurement Docking State Office Building, 8 <sup>th</sup> Floor 915 SW Harrison, Topeka, KS 66612
Grant Start-Up	February 17, 2013

#### **If you have questions regarding this RFP please contact:**

Brie Wilkins, DCF Procurement  
Docking State Office Building, 8<sup>th</sup> Floor  
915 SW Harrison, Topeka, KS 66612  
Email: [Brie.Wilkins@dcf.ks.gov](mailto:Brie.Wilkins@dcf.ks.gov)

## **I. Funding Opportunity/ Program Background**

The OIB program, authorized under Title VII Chapter 2 of the Rehabilitation Act, provides funding to community not-for-profit or faith-based organizations for outreach and individualized independent living services for persons who are age 55 and older who are blind or visually impaired. Applicants must successfully communicate a comprehensive approach to providing services resulting in achievement of specifically defined independent living outcomes for individuals eligible for the OIB program. Applicants must demonstrate the capacity to provide OIB services as it relates to the implementation of the program's standards.

### **Program Philosophy**

The mission of Rehabilitation Services (RS) is to empower Kansans with disabilities to achieve their goals for employment and independent living. A priority of the agency is to provide services for persons who are blind or visually impaired in the communities where they live, work and attend school. Statewide access to services, provision of a full array of services, consumer informed choice, qualified staff, accountability for the use of public funds, and collaboration with community-based organizations are key operating principles.

## **Purpose, Goals and Objectives**

The purpose of this program is to provide federal and state funds to community not-for-profit or faith-based organizations to implement independent living services for Older Individuals who are Blind (OIB). The goal of this program is to empower eligible individuals to live independently in their own homes and communities rather than in more costly institutional settings. To accomplish this goal, applicants must demonstrate the ability to provide independent living services, conduct activities that will improve or expand services for these individuals, and conduct activities to improve public understanding of the issues/concerns of these individuals. This grant will be awarded to a broad range of organizations that have the ability to make a community-wide impact. Programs should include design elements that may include the following: needs assessment; description of services already provided; description of staff qualifications; identification of services to be provided; description of methods for delivering services; intended impact and outcomes; geographic area to be served; demographics/projected number of persons to be served; use of comparable benefits; and cost effectiveness.

## **Program Outcomes**

Grantee shall be responsible for providing direct services that support the implementation of evidence-based strategies that result in improvements in targeted state- or community-level factors, while also contributing to state and local outcomes as indicated below.

Program outputs and outcomes are defined in the Rehabilitation Services Administration (RSA) 7-OB Form and Instructions, which may be found at the following link: <http://www2.ed.gov/rschstat/eval/rehab/rsamis/rsa-7-ob-instructions.pdf>

Performance measures are:

### Measure 1.1

Of individuals who received assistive technology (AT) services and training, the percentage who regained or improved functional abilities previously lost as a result of vision loss.

### Measure 1.2

Of individuals who received orientation and mobility (O & M) services, the percentage who experienced functional gains or maintained their ability to travel safely and independently in their home and/or community environment.

### Measure 1.3

Of individuals who received services or training in alternative non-visual or low vision techniques, the percentage that experienced functional gains or were able to successfully restore and maintain their functional ability to engage in their customary life activities within their home environment and community.

### Measure 1.4

Of the total individuals served the percentage that reported that they are in greater control and are more confident in their ability to maintain their current living situation as a result of services.

## **II. Award Information**

### **Funding Information**

Funding is provided through a grant to KRS from the Rehabilitation Services Administration (RSA), U.S. Department of Education. Federal funds are authorized through Title VII Chapter 2 of the Rehabilitation Act. State General Funds are used to match federal OIB funds (10% State/90% Federal).

## **Award Amounts and Length**

Multiple awards will be issued for the funding period of February 17, 2013 through June 30, 2016.

- Projected funding statewide for February 17, 2013 through June 30, 2014 (time period #1) is approximately \$477,889.
- Projected funding statewide for July 1, 2014 through June 30, 2015 (time period #2) is approximately \$350,000.
- Projected funding statewide for July 1, 2015 through June 30, 2016 (time period #3) is approximately \$350,000.

Upon mutual written consent, the grant may be renewed twice. The renewal period each time will be two years.

In awarding funding, KRS will emphasize statewide availability of services.

Awards are subject to the availability of funds and any modifications or additional requirements that may be imposed by law. Ongoing funding, as well as any subsequent renewals, is contingent upon continued availability of funding and satisfactory performance of the grantee.

Applications that exceed the total funds available or applications that request the total funds available for less than statewide coverage will be considered non-responsive to this RFP and may not be considered for funding.

## **Allowable Uses of Funds**

Programs may include the following allowable uses of award funds, as defined in Section 752(d) and (e) of the Rehabilitation Act:

- Providing independent living services to older individuals who are blind. This may include:
  1. Services to help correct blindness, such as:
    - A. Outreach services;
    - B. Visual screening;
    - C. Surgical or therapeutic treatment to prevent, correct or modify disabling eye conditions; and
    - D. Hospitalization related to such services.
  2. The provision of eye glasses and other visual aids.
  3. The provision of services and equipment to assist an older individual who is blind to become more mobile and more self-sufficient.
  4. Mobility training, Braille instruction, and other services and equipment to help an older individual who is blind adjust to blindness.
  5. Guide services, reader services, and transportation.
  6. Any other appropriate service designed to assist an older individual who is blind in coping with daily living activities, including supportive services and rehabilitation teaching services.
  7. Independent living skills training, information and referral services, peer counseling, and individual advocacy training.
  8. Other independent living services.
- Conducting activities that will improve or expand services for such individuals; or
- Conducting public activities to help improve public understanding of the problems of such individuals.

### III. Eligibility

Eligible clients: Persons eligible for OIB services are individuals who are age 55 or older whose significant visual impairments make competitive employment extremely difficult to attain but for whom independent living goals are feasible. (Section 751 of the Rehabilitation Act).

Eligible applicants for this RFP: DCF invites applications from public or private agencies or organizations, including non-profit entities; faith-based organizations; agencies that specialize in providing services for persons who are blind or visually impaired; independent living centers; or other qualified organizations or individuals with the resources and expertise to serve the eligible population.

Consistent with federal law, faith-based and other community organizations are invited and encouraged to apply for awards to deliver services within the state. Faith-based and other community organizations will be considered for awards on the same basis as other eligible applicants and, if they receive assistance awards, will be treated on an equal basis with all other grantees in the administration of such awards.

Applicants are required to have a DUNS number at time of submission of funding proposal. This number is a unique nine-digit identification number provided by Dun & Bradstreet. It may be obtained at no cost at the following website: [www.fedgov.dnb.com/webform](http://www.fedgov.dnb.com/webform) or by calling 866-705-5711. Verification of the DUNS number must be submitted as part of the funding proposal.

#### Priority Considerations

The Peer Review Panel will also take into consideration any Priority Considerations identified in this RFP, as follows:

- Demonstrated experience and expertise in working with individuals who are blind or visually impaired.
- Availability of qualified staff as follows:

Rehabilitation Teachers must meet one of the following qualification standards:

- A. Rehabilitation Teaching certification, such as vision rehabilitation therapist certification offered through the Academy for Certification of Vision Rehabilitation and Education Professions (ACVREP) – <http://www.acvrep.org/>
- B. Degree or certification through an accredited university program; the Association for the Education and Rehabilitation of the Blind and Visually Impaired offers a list of such vision rehabilitation teaching programs at: <http://www.aerbvi.org/modules.php?name=News&file=article&sid=1103>
- C. Degree in special education or related field plus one year of training as a rehabilitation teacher.
- D. Three years minimum of supervised experience in teaching persons who are blind or visually impaired.

Orientation and Mobility Specialists must meet one of the following standards:

- A. Certification through the Academy for Certification of Vision Rehabilitation and Education Professions (ACVREP) – <http://www.acvrep.org/>
- B. Degree or certification through an accredited university program; the Association for the Education and Rehabilitation of the Blind and Visually Impaired offers a list of such programs at: <http://www.aerbvi.org/modules.php?name=News&file=article&sid=1103>
- C. Certification from the National Blindness Professional Certification Board (NBPCB) – <http://www.nbpcb.org/pages/NOMCcertification.php>

Braille Instructors must meet one of the following standards:

- A. Licensure as a Teacher for the Visually Impaired through the Kansas State Department of Education (KSDE); please scroll to page 172 in the following KSDE document –

<http://www.ksde.org/LinkClick.aspx?fileticket=3wX%2fAJRzxIk%3d&tabid=295>

- B. Certification in Literary Braille from the National Blindness Professional Certification Board (NBPCB) – <http://www.nbpcb.org/nclb/index.php>
- C. Certification through the National Library Service (NLS) for the Blind and Physically Handicapped at the Library of Congress. The NLS has awarded a contract to the National Federation of the Blind (NFB) to conduct NLS Braille certification programs. For more information, please visit: <http://nfb.org/braille-certification>

- Capacity to serve the proposed geographic area and provide services in the home communities or close proximity to the home communities of individuals being served. Close proximity is defined as the distance for which it would be feasible for the client to travel to that location, participate in the specific service identified, and return to the home community all within one day.
- Cost-effectiveness. The budget narrative must clearly identify administrative and direct service costs, including any standard per client fees or equipment dispensing fees. It must also describe the average projected cost per person served in each of the following categories:
  - Clinical/functional vision assessments and services
  - Assistive technology devices
  - Assistive technology services and training
  - Independent living and adjustment training, which includes orientation and mobility training, communication skills training, personal management and daily living skills training, advocacy training, support network activities, counseling and information/referral.
  - Community awareness activities
- Expertise and strategies that will be implemented to secure comparable benefits to leverage funding for OIB services, for example through Medicare or other insurance. Comparable benefits are defined as services provided or paid for, in whole or in part, by other entities. They must be available to the individual at the time needed to ensure the progress of the individual towards achieving independent living outcomes.

#### **IV. Proposal Process**

Questions regarding the proposal process can be submitted by email only to [Brie.Wilkins@dcf.ks.gov](mailto:Brie.Wilkins@dcf.ks.gov). Frequently asked questions and answers (FAQs) will be updated regularly and posted on the web at <http://www.dcf.ks.gov/services/RS/Pages/RSparkers.aspx>

Please note that staff assistance through DCF is available Monday through Friday from 8:00 a.m. to 5:00 p.m. CST (see “Contact Information” on the title page for more information about DCF staff assistance).

#### **How to Apply**

Applications shall be delivered by 5:00 p.m. CST on October 22, 2012. Applicants are also required to submit the original and four (4) copies and one electronic copy addressed to:

Attn: Brie Wilkins  
Docking State Office Building  
915 SW Harrison, 8<sup>th</sup> Floor  
Topeka, Kansas, 66612-1570

The application must be arranged in the order indicated in the “Application Checklist” on page 13.

## **What a Proposal Should Include**

Applications must include all the components described in this section. Failure to submit an application that contains all of the specified information may negatively affect the review of the application; preclude access to or use of award funds pending satisfaction of the conditions; and/or prevent the proposal from proceeding to Peer Review for further consideration.

DCF strongly recommends use of appropriately descriptive file names (e.g. “Program Abstract”, “Program Narrative”, “Budget Detail Worksheet and Budget Narrative/Justification,”) for all attachments. DCF recommends that resumes be included in a single file, when requested.

### ***Table of Contents***

Include page numbers for each of the major sections of your application and for each attachment. DCF highly recommends a Table of Contents be included as part of the grant proposal.

### ***Applicant Information (5 points)***

Complete the Applicant Information Page (Attachment A). This is a standard form used for submission of proposals and related information. DCF takes information from the applicant’s profile to populate the fields on this form. The Application page (Attachment A) and Assurances (Attachment C) must be signed by an official authorized to sign.

### ***Program Abstract (10 points)***

The program abstract should be no more than one double spaced page, using a standard 12-point font (Times New Roman is preferred) with not less than 1-inch margins, and should include the following:

- Identify the type of applicant (community not-for-profit, faith-based or other organization).
- Describe the proposed program for which funding is being requested (including the purpose and program outcomes, the geographic area (by county or counties), description of target population, services to be provided and number of clients to be served).

### ***Program Narrative (75 points)***

The program narrative must include five sections: Statement of the Problem, Project Design, Implementation Plan, Management Structure and a Sustainability Plan. These should be provided in the order listed below. The program narrative should be double-spaced, using a standard 12-point font (Times New Roman is preferred) with not less than 1-inch margins, and should not exceed 30 pages. Please number pages “1 of XX” “2 of XX”, etc.

If the Program Narrative fails to comply with these length-related restrictions, noncompliance may be considered in peer review and in final award decisions.

The following sections should be included as part of the Program Narrative:

- Statement of the Problem (10 out of 75 points) – Identify and describe the challenges or needs the program will address in the geographic area to be served. Provide data to show the nature and scope of the need. Explain previous or current efforts to address the problem, including an analysis of the outcome of these efforts. Provide a clear and concise statement of the purpose or goal of the program and how it will address the needs identified.

- Project Design (30 out of 75 points) – Describe the services to be provided. Describe the specific strategies that substantiate the project as a comprehensive program. Identify the geographic boundaries of the proposed program, as well as the target population to be served. Describe outreach and referral strategies to ensure access to the target population. Describe how your program will ensure cultural competence. Describe how your program will ensure program and physical accessibility for people with disabilities. Describe any potential barriers to implementing the project and strategies to overcome them.
- Implementation Plan (15 out of 75 points) – Provide a realistic and detailed implementation plan with activities or services and a timeline that indicates significant milestones in the project. Outline the specific program outcomes of the project and how they will address the problem. Describe how the project will address the allowable uses of funds and priority consideration (if applicable) outlined on pages 7 and 8. Applicants should identify who will collect data, who will be responsible for performance measures, and how the information will be used to evaluate and guide the program.
- Management Structure (10 out of 75 points) – Describe the experience and capability of the applicant, staff, and contractors. Identify the agency that will serve as the grantee and fiscal agency responsible for the grant's administration. Identify the staff team supporting the project including the name, title, and affiliation of each member. Provide documentation of any collaboration that has or is occurring on the initiative. Provide resumes of staff who will be assigned to this project, or provide the position description of staff positions to be hired. Include documentation of licensing, accreditation, and certification.
- Sustainability Plan (10 out of 75 points) – Applicants should describe how the long-term financial sustainability of the project will be funded in the future, including strategies to cultivate alternate funding and community collaboration. If the project will not continue after the grant, provide a clear explanation of why.

***Budget Detail Worksheet and Budget Narrative/Justification*** (10 points)

Applicants must submit a Budget Detail Worksheet and Budget Narrative outlining how grant funds will be used to support and implement the program.

The Budget Narrative should thoroughly and clearly describe every category of expense listed in the Budget Detail Worksheet. The narrative should be mathematically sound and correspond with the information and figures provided in the Budget Detail Worksheet. The narrative should explain how all costs were estimated and calculated and how they are relevant to the completion of the proposed project. The narrative may include tables for clarification purposes but need not be in a spreadsheet format. As with the Budget Detail Worksheet, the Budget Narrative should be broken down by year.

Please note: Furniture and office equipment expenses will not be allowed through this RFP.

All per diem and travel-related expenses may not exceed the State of Kansas expense limits for the time period in which they occur.

As authorized by K.S.A.75-3207a, the Secretary of Administration has fixed the rates for State Fiscal Year 2013 as follows:

**Meal allowance (in-state):**

Breakfast: \$11

Lunch: \$12

Dinner: \$23

**Reduced meal allowance:**

If the cost of meals is included within the cost of registration fees or other fees and charges paid by the agency or supplied without cost by another party, the meal allowance should be reduced as shown in the table above.

**Lodging expense limitations (in-state): \$83**

K.S.A. 75 3207a(f) provides that the daily lodging expense limitations established above may be exceeded by the lesser of either: (1) an additional 50% of the applicable lodging expense limitation, or (2) the actual lodging expense incurred.

These lodging limits continue to be applied to the lodging rate before taxes. Thus, the amount reimbursed or paid for lodging expenses may exceed the established lodging limitation by as much as the amount of associated taxes.

**Vehicle mileage:** As authorized by K.S.A.75-3203a, the Secretary of Administration has fixed the private vehicle maximum mileage reimbursement rates for FY 2013 at: 55¢ per mile for privately owned automobile.

More information is available at the following web site:

<http://www.da.ks.gov/ar/employee/travel/travbkSMART12.htm>

## **V. Review and Selection Process**

### **Peer Review Panel**

DCF is committed to ensuring a fair and equitable process for awarding grants. Eligible applications will be evaluated, scored, and rated by a peer review panel. Peer review is the process by which competitive discretionary grant applications are evaluated by internal and external reviewers. Peer reviewers evaluate applications to make sure the information presented is reasonable, understandable, measurable, and achievable, as well as consistent with program or legislative requirements as stated in the solicitation.

DCF leadership uses the peer review summaries as guidance when selecting projects for awards. The peer reviewers' ratings serve as a basis for recommending whether to consider an application for funding. Peer review evaluations are advisory only, though, and do not bind DCF to follow the ratings. In addition to peer review ratings, considerations may include, but are not limited to, underserved populations, strategic priorities, past performance, geographic balance, and available funding.

### **Selection Criteria**

The Peer Review Panel uses a scoring guide when reviewing proposals. The scoring guide has a 100 points total scoring system. The Scoring Guide scores as follows:

1. Applicant Information – Attachment A (5 points)
2. Program Abstract (10 points)
3. Program Narrative (75 points total)
  - A. Statement of the Problem (10 Points)

- B. Project Design (30 points)
  - C. Implementation Plan (15 points)
  - D. Management Structure (10Points)
  - E. Sustainability (10 Points)
4. Budget Justification (10 Points)

## **VI. Post Award Requirements**

### **Notice of Post-Award Reporting Requirements**

Program reporting includes:

- Demographic, service and outcome reporting necessary to meet the requirements of the federal OIB report will be required quarterly. Quarterly report due dates are:
  - January 20 (for the quarter of October 1 – December 31)
  - April 20 (for the quarter of January 1 – March 31)
  - July 20 (for the quarter of April 1 – June 30)
  - October 20 (for the quarter of July 1 – September 30)Data elements must be reported quarterly and year-to-date. More information is available at the following website: <http://www2.ed.gov/rschstat/eval/rehab/rsamis/rsa-7-ob-instructions.pdf>
- Quarterly project reports will be required regarding the status of grant activities, emerging issues or trends, budget variances and priority focus areas for the next quarter. Quarterly report due dates are:
  - January 20 (for the quarter of October 1 – December 31)
  - April 20 (for the quarter of January 1 – March 31)
  - July 20 (for the quarter of April 1 – June 30)
  - October 20 (for the quarter of July 1 – September 30)
- Monthly invoices reporting line-item expenses for the invoiced month will be due by the 20<sup>th</sup> day of the following month. (See Attachments D, E and F for additional details. These are post-award requirements provided for the applicant's information and reference. These forms do not have to be submitted with the proposal. )

The work required by contracts awarded through this funding shall be completed in accordance with the respective dates specified in the contract, or as requested by DCF. Acceptance of any late deliveries shall not be deemed a waiver of DCF's right to hold the contractor liable for any actual loss or damage resulting there from, nor shall it act as a modification of the contractor's obligation to make future deliveries in accordance with the award set forth in this Section.

### **Federal Funding Accountability and Transparency Act (FFATA) Requirements**

Awards through this RFP will be subject to Federal Funding Accountability and Transparency Act of 2006 (FFATA). In order to meet these requirements, applicants should provide the names and total compensation for the five most highly compensated executives of the organization.

### **Audit Requirements**

Submit the most recent audited year-end financial statement, to include the management letter and any notices of findings or ongoing concerns.

### **Additional Requirements**

The applicant must assure that it will comply with the invoicing and documentation standards described in Attachments D, E and F. An assurance statement, signed by the responsible authority of the applicant agency,

must be included in the proposal.

## **VII. Resources**

### **On-Line Resources**

For more information, a list of definitions, budget sheets, or copies of a Work Plan and Logic Models please go to the DCF Procurements Resource page at <http://pubauth.srs.ks.gov/agency/procure/Pages/Resources.aspx>.

### **Proposal Checklist**

The following sections must be submitted in this order:

- \_\_\_ Table of Contents
- \_\_\_ Applicant Information (Attachment A)
- \_\_\_ Program Abstract
- \_\_\_ Statement of Problem\*
- \_\_\_ Project Design\*
- \_\_\_ Implementation Plan\*
- \_\_\_ Management Structure\*
- \_\_\_ Sustainability Plan\*
- \_\_\_ Budget Sheet (Attachment B)
- \_\_\_ Budget Narrative

### **Attachments:**

- \_\_\_ Statement of Compliance with Assurances (Attachment C)
- \_\_\_ Statement of Compliance with invoicing and documentation requirements (Attachments D, E and F)
- \_\_\_ List of Board Members and a Board Member Conflict-of-Interest Statement
- \_\_\_ Licensing/Accreditation/Certification Documentation of direct service staff
- \_\_\_ The most recent audited year-end financial statement, to include the management letter and any notices of findings or ongoing concerns
- \_\_\_ Organizational Chart/Description
- \_\_\_ FFATA requirements described on Page 12.

\* These items are considered part of the narrative which should not exceed a total of 30 pages in length.

**Attachment A – Applicant Information**

**A. Applicant Agency**

Name:		
Address:		
City, ST Zip:		
Telephone:		Email:

**B. Type of Agency** Public Private Non-Profit Private Profit

**C. Official Authorized to Sign Application**

Name:		
Title:		
Address:		
City, ST Zip:		
Telephone:		Email:
Signature:		

**D. Project Director**

Name:		
Title:		
Address:		
City, ST Zip:		
Telephone:		Email:

**E. Financial Officer**

Name:		
Title:		
Address:		
City, ST Zip:		
Telephone:		Email:

**F. Type of Application** New Revision Continuation of Grant # \_\_\_\_\_

**G. Title of Project:**

**H. Geographic Area to be Served and Target Population**

Area:	
Population	

**I. Federal Identification Number (Fein):**

**J. DUNS Number:**

**K. Applicant's Fiscal Year:**

**L. Project Costs**

Grant Funds Requested:	\$
Local Funds/Cash Match	\$
In-Kind	\$
<b>Total Cost</b>	\$

**Attachment B - Budget Sheet**

**Please refer to separate Excel and PDF files for this Attachment at:**

**<http://www.dcf.ks.gov/services/RS/Pages/RSparters.aspx>**

## Attachment C - Assurances

### a. Supplantation of Grant Funds

The grantee shall not replace or supplant funding of another existing program with funds provided for in this Grant. Funds awarded under this Agreement may not be used for any purpose other than the one defined in this document.

### b. Debarment

As part of the Code of Federal Regulations (45 C.F.R. Part 76), all governmental entities receiving funding from the Federal Government must participate in a government wide system for non-procurement debarment and suspension. A person or entity that is debarred or suspended shall be excluded from Federal financial and non-financial assistance and benefits under Federal programs and activities. Debarment or suspension of a participant in a program by one agency shall have government wide effect. The Secretary of SRS is authorized to impose debarment. Before any person or entity enters into an agreement, grant or contract with SRS, the Excluded Parties Lists@ shall be researched for potential debarred persons or entities (located at <http://epls.arnet.gov>).

### c. Compliance With Laws and Regulations

The Grantee agrees that it will comply with all federal, state, and local laws and regulations in effect at any time during the course of this Grant. The Grantee shall certify to SRS that it will provide a drug-free workplace and as a condition of the Grant, the Grantee will not engage in the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance in conducting any activity with the Grant.

### d. Nondiscrimination and Workplace Safety

The grantee agrees to abide by all state, federal and local laws, rules and regulations prohibiting discrimination in employment and controlling workplace safety. Any violation of applicable laws, rules and regulations may result in termination of this Grant.

### e. ADA Compliance

The contractor agrees: (a) to comply with the Kansas Act Against Discrimination (K.S.A. 44-1001 et. seq.) and the Kansas Age Discrimination in Employment Act (K.S.A. 44-111 et seq.) and the applicable provisions of the Americans with Disabilities Act (42 U.S.C. 12101 et. seq.) (ADA) and to not discriminate against any person because of race, religion, color, sex, disability, national origin or ancestry, or age in the admission or access to, or treatment or employment in, its programs or activities; (b) to include in all solicitations or advertisements for employees, the phrase "Equal Opportunity Employer@; (c) to comply with the reporting requirements set out at K.S.A. 44-1031 and K.S.A. 44-1116; (d) to include those provisions in every subcontract or purchase order so that they are binding upon such subcontractor or vendor; (e) that a failure to comply with the reporting requirements of (c) above or if the contractor is found guilty of any violation of such acts by the Kansas Human Rights Commission, such violation shall constitute a breach of contract and the contract may be cancelled, terminated or suspended, in whole or in part, by the contracting state agency or the Kansas Department of Administration; (f) if it is determined that the contractor has violated applicable provisions of ADA, such violation shall constitute a breach of contract and the contract may be cancelled, terminated or suspended, in whole or in part, by the contracting state agency or the Kansas Department of Administration.

Parties to this contract understand that the provisions of this paragraph Ae.@ (with the exception of those provisions relating to the ADA) are not applicable to a contractor who employs fewer than four employees during the term of such contract or whose contracts with the contracting state agency cumulatively total

\$5,000 or less during the fiscal year of such agency.

**f. Audit Requirements**

Awards containing Federal funds are subject to the Audit Requirements listed in OMB Circular A-133. Organizations expending Federal award funds in excess of \$500,000 during their fiscal year must have an audit completed in accordance with this Circular. Organizations spending less than \$500,000 annually in Federal awards may be subject to other audit requirements which will be established at the time of the award.

**g. Cost Principles**

Funds awarded through this agreement are subject to the following requirements as established by the Office of Management and Budget:

- OMB Circular A-102 – Grants and Cooperative Agreements with State and Local Governments
- OMB Circular A-110 – Uniform Administrative Requirements for Grants and Other Agreements with Institutions of Higher Education and Other Non-Profit Organizations
- OMB Circular A-21 – Cost Principles for Educational Institutions
- OMB Circular A-87 – Cost Principles for State, Local and Indian Tribe Governments
- OMB Circular A-122 – Cost Principles for Non-Profit Organizations

If selected as the sub- recipient of this award, I agree on behalf of *[Agency name]* to abide by the assurances described in this document.

\_\_\_\_\_  
*[Officer's Name and Title]*

\_\_\_\_\_  
*[date]*

**Attachment D - Grant Invoice**

**Please refer to a separate PDF files for this Attachment at:**

**<http://www.dcf.ks.gov/services/RS/Pages/RSparters.aspx>**

# ATTACHMENT E

## Kansas Rehabilitation Services

Performance-Based Grants  
Invoice Instructions

### **Invoice due dates:**

Monthly invoices reporting line-item expenses for the invoiced month will be due by the 20<sup>th</sup> day of the following month.

### **Standard format and supporting documentation:**

Grantees will submit invoices and supporting documentation in accordance with the standard Excel file and format provided by KRS (see RFP Attachment D).

### **Expenditure-based invoices:**

Funding for this project is being provided by KRS through a performance-based grant. Therefore, grantees will be reimbursed for expenditures they have actually incurred in order to carry out the project activities.

Supporting documentation attached to the invoice must specify a precise accounting of costs incurred for each line item. Grantees may submit the supporting document in Word, Excel or PDF files in accordance with the following:

Line item	Supporting documentation required
Personnel	Identify the person by name or functional title, the actual hours the individual worked on project activities for the specific period of time being invoiced, and the corresponding salary. <i>(Although not required to be submitted with the invoice, timesheets and records about the types of activities undertaken should be maintained by the grantee, such as face-to-face direct service with specific consumers, administrative functions, marketing/outreach functions. All activities must be consistent with the grant and approved budget. Please refer to the section below entitled "maintenance of records for audit."</i>
Fringe	Identify the person by name or functional title, the percentage of time the person is assigned to this project, and the corresponding fringe, specifying FICA, workers comp, unemployment, retirement, benefits, etc.
Travel	For each travel event, identify the date(s), purpose, location and participant(s). Specify amounts for mileage, per diem, overnight hotel and/or other allowable expenses. Per diem and travel-related expenses may not exceed the rates established by the Kansas Department of Administration for the time period covered by the invoice.
Staff recruitment, training, development	Identify the activity that occurred and related detailed expenditures. For staff involved in training and development activities, identify them by name, specify the nature of the training, and identify associated costs.

Equipment	Identify equipment purchased for use in carrying out the project activities, if approved in the budget. Identify equipment provided for consumers, specifying the consumer's name, invoice amount and dispensing fee, if any, to be paid with contract dollars. For each, also identify if there was a third party payor for the equipment, identifying the payor and amount. <i>(Note, consumer equipment may also be accounted for below under direct consumer services, depending on how the grantee submitted the budget.)</i>
Supplies	Identify total supply expenses to carry out the project activities. If the approved budget includes brochures and marketing materials in this line item, provide specific details.
Communications	Identify specific communications expenses expended in accordance with the approved budget.
Direct consumer services	Account for expenditures in accordance with your grant. The items accounted for in this line item will vary according to each grantee's specific approved budget. This may include staff time if it is budgeted in this line item rather than personnel, sub-grantee time if it is budgeted in this line item rather than contractual, assessment fees, purchase of services from qualified vendors, purchase of assistive technology and related dispensing fees, costs associated with educational/outreach events or other items identified in the approved budget. Identify the services provided, specifying the consumer's name and costs associated with this line item. For each, also identify if there was a third party payor for the service, identifying the payor and amount.
Contractual	Identify expenditures made to sub-grantees or vendors. Provide the description of the service provided, and the cost. If the sub-grantee expense relates to direct consumer services, include the consumer's name and the number of consumer service contact (face-to-face) hours.
Other	Please be specific consistent with the level of detail requested in other line items.

***Invoices:***

Total expenditures for the grant year may not exceed the budget amount. It is expected that invoices will be submitted for expenses incurred each and every month of the grant period. The monthly payments made will be tracked by KRS. Grantees are expected to manage these grant resources in order to provide and maintain services throughout the entire grant period.

***Separate accounting of funds:***

Funds for this grant must be tracked separately and may not be co-mingled with funds from other sources.

***Maintenance of records for audit:***

The grantee must maintain sufficient records to correlate expenditures to authorized grant/project activities completed and/or consumers served. These records include, but are not limited to:

- Time sheets indicating actual hours worked on approved project activities for staff paid through grant funds. Records must specify the nature of the work completed. If staff salaries are paid for direct consumer services, the timesheets must correlate to specific entries in the consumer service records.
- Expenditures made to sub-grantees or other vendors for services provided, including the name of the sub-grantee, description of services provided, identification of the consumer served (if pertinent) and hours paid.
- Travel documentation (locations, mileage, per diem, hotel expenses) when pertinent to activities authorized through this grant.
- Consumer records of services provided directly by staff and/or sub-grantees.
- Consumer records specifying equipment purchased with grant funds and provided to the consumer.

Such records must be made available for audit upon request of KRS or DCF.

***KRS contact person:***

Questions about invoicing and submission of invoices for payment should be directed to:

Kathy Cooper  
 Coordinator of Capacity-Building Initiatives  
 Kansas Rehabilitation Services  
 Docking State Office Building, 9<sup>th</sup> Floor North  
 915 SW Harrison  
 Topeka, KS 66612  
[Kathy.Cooper@dcf.ks.gov](mailto:Kathy.Cooper@dcf.ks.gov)  
 785-296-3130  
 FAX: 785-368-7467

***Requests to change budget line items:***

Any changes to budget line items must be approved in advance by the KRS contact person listed above. Should you wish to make a change in your line item budget, please submit a written request including specific dollar amounts, rationale and projected impact on the project to the contact person for prior approval. Email requests are acceptable, followed up by sending in a request with an original signature.

***Please note:*** All invoice instructions and expectations are provided in accordance with accountability standards established for services authorized by the Rehabilitation Act, related implementing regulations, the General Administrative Regulations of the U.S. Department of Education, and the U.S. Office of Management and Budget cost/expenditure circulars.

## ATTACHMENT F

### **Supporting documentation for salaries or wages charged to grants with Kansas Rehabilitation Services (KRS)**

Expenditures for salaries or wages charged to grants with KRS are governed by the federal Office of Management and Budget Circular A-122.

In order to charge your grant with KRS for salaries or wages, your organization must maintain documented payroll records which are approved by a responsible official of your organization. Payroll records must be supported by personnel activity reports. (Examples are provided on following pages.)

These requirements apply to positions referred to in the OMB circular as "professionals and nonprofessionals."

#### Personnel activity reports

- Your organization must maintain reports reflecting the distribution of activities for all staff members whose compensation is charged, in whole or in part, to the contract.
- Distribution of activities means that you must clearly identify the amount of time the employee spent on allowable contract activities.
- If the employee is "nonprofessional," personnel activity reports must reflect both the number of hours worked per day on KRS grant activities and the total number of hours the employee worked per day. For this purpose, the term "nonprofessional" shall have the same meaning as "nonexempt employee" **under the Fair Labor Standards Act.**
- When direct services to consumers are provided, reports must specify the name of the consumer, the service provided, the date, location and total time on task. For audit purposes, corresponding consumer files must be consistent with the personnel activity reports.
- The reports must reflect an after-the-fact determination of the actual activity of each employee. It is not allowable to provide estimates based on the budget or to simply allocate a percentage of the employee's time to the grant. It is not allowable to use any kind of estimating method that is determined before allowable work activity actually occurs.
- The reports must be signed by the employee or by a responsible supervisory official who has first-hand knowledge of the activities performed by the employee.
- The reports must be prepared at least monthly and must coincide with one or more pay periods.

#### Related notes

- Fringe benefits charged to the grant must be in proportion to the amount of time the employee spent on allowable grant activities.

- Please invoice KRS for salary and wages for the month the employee worked, rather than the month in which your organization issues the paycheck. This will help us avoid delays in payments at the end of the year.

#### Accounting for leave time

- if an employee's work is routinely charged to multiple funding sources, how do you allocate the use of approved leave, such as vacation time or sick leave? Vacation leave, sick leave, military leave, and the like, are allowable, provided such costs are absorbed by all organization activities in proportion to the relative amount of time or effort actually devoted to each. Therefore, if an employee spends 50% of his/her time on KRS grant activities, based on an after-the-fact determination of the actual activity and not a budget estimate or projection, then 50% of allowable leave time could be allocated to the KRS grant.

#### Requests for line item changes

- Grantees are reminded that any and all line item changes must have the prior written approval of the KRS project manager. It is not possible for grantees to independently move funds from one line item to another without prior approval. To request consideration of a request to change line items, please contact:

Kathy Cooper  
Coordinator of Capacity-Building Initiatives  
Kansas Rehabilitation Services  
Docking State Office Building, 9<sup>th</sup> Floor North  
915 SW Harrison  
Topeka, KS 66612  
[Kathy.Cooper@dcf.ks.gov](mailto:Kathy.Cooper@dcf.ks.gov)  
785-296-3130  
FAX: 785-368-7467

## Example of payroll record to submit with grant invoice

Name of your organization

Employee name

Time period of this record

Earnings codes used during this schedule pay period.					
Date	Program A*	Program B*	Vacation	**	Total
1	<i>insert number of hours worked</i>	<i>insert total number of hours worked</i>			
2					
3					
Etc.					

*\*Identify the program name, for example Older Blind Independent Living. Include other programs in your organization from which this employee receives part of his/her compensation. If you use acronyms for programs in the table, provide a key on the page with the full name.*

*\*\*Add additional columns depending on the number of programs and categories (vacation, sick leave, holidays, discretionary days, re-arranged time, etc.)*

Signature of employee/Date

Signature of organization official responsible to approve payroll/Date

## Example of personnel activity report to maintain on file for audit

Please note that activity examples are examples and each grantee may charge salary or wage expenses only in accordance with the approved grant and budget line items.

Name of your organization  
Employee name

Time period of this record  
Circle one (FLSA status): Exempt      Non-exempt

Date	Activity (describe) <i>When direct services to consumers are provided, reports must specify the name of the consumer, the service provided, the date, location and total time on task. Expand the space below as needed to provide the required level of detail.</i>	Funding source*	Daily summary of number of hours worked <i>Include travel time if it is directly paid from an approved personnel budget line item.</i>	
			Total Hours Direct Services	If Non-Exempt, Total Hours Worked in the Day
<p><i>Calendar Date #1</i></p> <p><i>This example shows an 8-hour work day on KRS grant activities.</i></p>	<p>Activity #1: Example – Met with 4 consumers in Topeka as follows: Name: 2 hours Name: 2 hours Name: 2 hours Name: 2 hours</p>	OIB	8	8
<p><i>Calendar Date #2</i></p> <p><i>This example shows that a non-exempt employee worked 3 hours on KRS grant activities and a total of 8 hours that day. The 5 hours worked on other programs do not have to be documented for this report, but documentation may be required for other funding sources.</i></p>	<p>Activity #1: Example – Conducted outreach and awareness event in Olathe from 1 to 4 p.m.</p>	OIB	3	8

Calendar Date #3	Activity #1: Specify			
	Activity #2: Specify			
Calendar Date #4, etc.				

Tabulation of total hours per funding source for this time period, taken from the detail listed above:

Funding source (specify)	Hours
Funding source (specify)	Hours
Funding source (specify)	Hours
Etc.	
Total hours	XXXX

*\*Identify the program name, for example OIB. Include other programs in your organization from which this employee receives part of his/her compensation. If you use acronyms for programs in the table, provide a key on the page with the full name.*

Signature of employee/Date

Signature of responsible supervisory position with first-hand knowledge of the activities performed by the employee/Date