

# Music & Memory Grants Request for Proposals (RFP)

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# Welcome! Music & Memory Grants

#### **Agenda**

- Request for Proposals (RFP) Basics
- Timeline
- Application Process
- Proposal Requirements
- Q/A

- Authorized by Civil Monetary Penalties (CMP) Committee & Federal CMS
- Monies targeted for use by Medicaid-Certified Nursing Facilities
- Up to \$ 2500 per facility (with some limitations)

Enhance quality of care and/or quality of life for residents with dementia or other memory impairments, by implementing:

New Music & Memory programming

<u>or</u>

Expansion or improvement of existing Music & Memory programming

- Competitive application process
- Similar to PIPP projects amendment to existing APS contract

#### **Project Evaluation**

- Based on identified project goals/objectives, facilities must be willing to collect data to;
  - Evaluate outcomes
  - Identify lessons learned
  - Monitor progress
- Final Report
- Follow-up survey

#### **Proposal Review Process**

**Phase I**: Proposals received by the deadline will be reviewed to determine if all required components are included (proposals missing required sections will *not* move forward to Phase 2).

**Phase II:** Proposals that passed Phase I of the evaluation will be reviewed and ranked by a selection committee. Based on the rankings, the selection committee will make recommendations to the commissioner.

#### **Possible Points**

- How well does the proposal address the goals of the music and memory project? (15)
- Clear description of the population to be served. (10)
- Work plan is clear and staff responsibilities and roles are identified. (25)
- Sufficiency of communication plan with residents and families. (10)
- Budget is detailed and includes a clear budget narrative. (15)
- Project goals are defined and data collection plan developed, for auditing and monitoring progress toward goals. (25)

#### **Proposal Submission**

- Proposals must be submitted electronically using the Music and Memory Project Fillable Proposal Form. This is a Word document in a table format (each section can be expanded as needed).
   Completion of each section is required. The form can be located on the DHS provider portal at: <a href="https://nfportal.dhs.state.mn.us">https://nfportal.dhs.state.mn.us</a>
- The fillable form *must* be submitted to DHS as an email attachment by midnight on April 14, 2017. The email address for form submission is: <a href="mailto:DHS.NFRP.CostReport@state.mn.us">DHS.NFRP.CostReport@state.mn.us</a>

## Music & Memory Grants – Timeline

#### **Tentative Implementation Schedule**

- April 14, 2017 Proposals due by midnight
- April- May 2017 Phase I review of proposals
- April May 2017 Phase II review and selection of proposals
- May 2017 Negotiate contracts
- May 2017 April 2018 Facility Project Implementation
- April 2018 or upon completion (if sooner) Outcome reports & Follow-up due to DHS

## Music & Memory Grants – Application Process

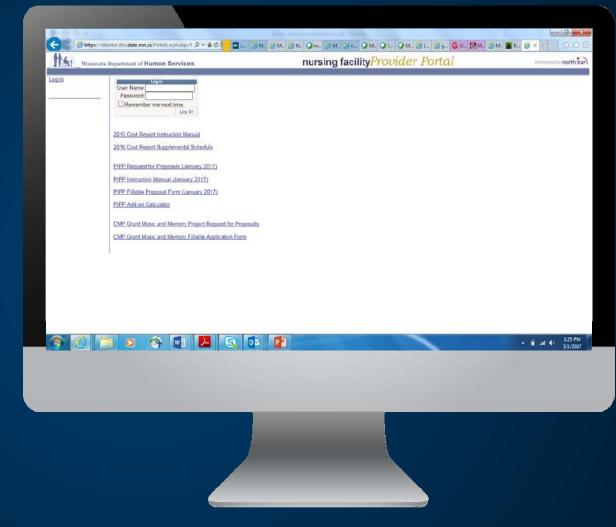
How do we complete a proposal?

What do we need?

Let's walk through the form...

## Completing a Proposal

- First, go to the Provider Portal home page
- Open, download and save a copy of the Music & Memory Fillable Application Form



#### **SECTION 1**

Facility Name or Organization	Enter text here
Address	Enter text here
Primary Contact Name	Enter text here
Contact Title	Enter text here
Contact Phone	Enter text here
Contact Email	Enter text here
Contact Address	Enter text here
Project Leader	Enter text here
Leader Title	Enter text here
Leader Phone	Enter text here
Leader Email	Enter text here
Facility MN Taxpayer I.D. #	Enter text here

#### **SECTION 2**

Provide a brief overview of the facility. This section should include brief information about the facility, number of residents served and geographic area served. Also include any strengths about your organization that will add value to your proposal and success of the project.

#### **SECTION 3**

Description of the Population to be Served: Describe the level of need for music and memory programming in your facility, including information on the numbers of residents your facility serves who have dementia or other memory impairment. Explain what group or groups of residents will receive and benefit from your music and memory programming and how you will seek to identify those residents. Describe how you will educate residents and their families or other representatives about the benefits of your music and memory programming and how you will invite them to participate.

#### **SECTION 4**

Project Description: Provide an overall summary description of your proposed project, including the following:

- I. Identify which staff or departments will be involved in the implementation of your proposed project, including Lead staff and/or project manager. Who is going to do what? Describe staff roles, leadership, committee formation and any outside parties involved.
- II. Describe how your organization plans to implement its music and memory programming (e.g. activities involved in your program). What is your road map or work plan?
- III. Provide a proposed implementation timeline (not to exceed 24 months). If you currently have a music and memory program in place, how would you use these grant funds to effectively expand or improve your program?

#### **SECTION 5**

Project Goals: Clearly define the goals and objectives of this project. Specify outcomes that will be used to demonstrate the program's effectiveness.

#### **SECTION 6**

Evaluation Plan: Describe how you will collect data, audit and monitor your implementation strategies. Describe your action plan to address audit results. For example:

- Data Collection: <u>What</u> data will be used to track project progress? <u>How</u> will the data be collected? <u>Who</u> will collect the data? <u>Where</u> and <u>When</u> will the data be collected?
- Identify monitoring tools to be used by specific staff or teams.

#### **SECTION 7**

Budget Proposal: This section should specify the grant amount requested (not to exceed \$ 2500) and detail all estimated expenses in the proposed project. For example, the budget should include resource needs such as training, consultants, equipment, etc. Please note that documentation such as receipts, invoices, etc. will be required to obtain grant funds.

Include a budget narrative. Explain the proposed use of the grant funds and any matching funds or in-kind contributions. For example, staff time would be considered an in-kind contribution. Your explanation should provide sufficient detail to justify the total amount budgeted in each category. The program budget must be complete and reasonable, must link to the proposed program activities, and must specify how the amounts for each budget item were determined.

The budget should include resource needs such as Retraining, consultants, equipment, etc. and estimating what they may cost.

#### **SECTION 7, continued.**

Check the box to indicate that you understand that documentation of project expenses such as receipts, invoices, etc. will be required to obtain grant funds.

#### (IMPORTANT NOTE):

Read the previous statement carefully.

Project expenses must be:

- Allowable
- In accordance with your submitted/approved budget
- Not exceed the amount stated in your approved grant contract
- Be submitted on an approved invoice form
- Be accompanied by ACTUAL receipts/proofs for the same amount/s you claim

Additionally, approved project expenses are reimbursed after-the-fact, not in paid in advance.

## OTHER BUDGET CONSIDERATIONS (NON-ALLOWABLE EXPENDITURES)

- Staffing Costs (salary/wages)
- Indirect Costs
- Travel Expenses Limited
- Mileage Expenses Limited
- Copying/Printing
- Other Restrictions

## Music & Memory Grants – Proposal Review

- Read the RFP thoroughly, understand the requirements & goals
- Does your application address all the issues & requirements?
- Have you completely answered all the questions?
- Does proposal "flow" logically
- Review your application with "fresh" eyes don't assume reviewers understand your meaning/intent

## Music & Memory Grants – Proposal Review

#### -Emphasis on-

- Clarity
- Concise
- Complete

Q/A Time Submit
Questions
via Text
Message



## Thank you!

For technical assistance in preparing your application, please contact:

**Munna Yasiri** 

**MN Department of Human Services (DHS)** 

(651) 431-2264

munna.yasiri@state.mn.us.

(contacting any other State employee in connection with this RFP could result in rejection of your response)