PROPOSAL SUBMITTAL FORM

Agency Information

Agency Name: Blue Grass Community Action Partnership

Mailing Address: 111 Professional Court, Frankfort, KY 40601

Street Address: 111 Professional Court, Frankfort, KY 40601

Phone: (502) 848 - 8700

Is your Agency registered with the IRS as a 501(c)3 organization? ☑ Yes ☐ No

*Note: Agencies **must** be registered with the IRS as a 501(c)3 organization to be eligible for ESR Program funding.*

Does your agency have a current profile with Blue Grass Community Foundation's GoodGiving.net? ☑ Yes ☐ No

*Note: Agencies **must** have profiles with GoodGiving.net to be eligible for ESR funding.*

Website Address: bluegrasscommunityaction.com

Agency Representative *(typically the Executive Director - Name, Title, Phone, Email)*:

Troy Roberts, Executive Director, (502) 848-8700, ex. 213, troy.roberts@bgcap.org

Person Completing Application *(Name, Title, Phone, Email):*

Linda DeRosett, Elder Nutrition Director, (502) 848-8717, linda.derosett@bgcap.org

Program Information

Name of program for which funds are being requested: **Elder Nutrition Program in Fayette County**

Total Funding Amount Requested: $ **50,000**

RFP #13-2019 PROPOSAL SUBMITTAL FORM

- **Save this PDF formatted Proposal Submittal Form to your hard drive before beginning to enter responses in it to ensure your responses are saved to the form.**
- **LIMIT RESPONSES IN TEXT BOXES TO 250 WORDS**
- **REMINDER: All proposals must be written in a clear and concise manner, as there will be no follow-up or clarifications to proposer's submittal form once the evaluation process begins.**

5.1 Program Proposal & Design

5.1.1 Needs Statement—Purpose of the Program Proposal / Problem Statement **15 Points**

Using local data, provide a description of the problem in Fayette County. Identify the specific population your program is targeting (i.e. age, geographical region, economic status, etc.) and explain why. Discuss whether this population is under-served or at-risk. Describe your understanding of the local system of services addressing this problem, obstacles and/or opportunities your clients face, and how your agency fits within this system of services.

The Elder Nutrition Program (ENP) provides daily nutritious meals to many senior citizens (age 60 and older) in Fayette County at no cost to program participants. Currently, the ENP serves 433 congregate clients over 2,500 meals per month at two sites (the Lexington Senior Center and the Ballard-Griffith Towers). The ENP also serves over 2,300 meals a month to 139 home-bound clients who otherwise would have little or no access to a hot and nutritious meal. The wait list for the home-bound meal delivery service has been reduced from over 100 clients in 2016 to less than 10 as of 2019. This list changes monthly as intake/referrals are received.

Target Audience: Individuals age 60 or older and disabled individuals under age 60 living with an eligible older individual. Outreach efforts to identify low-income (according to US census data, July, 2018), minority, frail elderly and nutritionally-at-risk clients are conducted through referrals, screenings and assessments.

The case manager uses the KY Basic Napis form to determine a client's nutrition needs as well as their ability or inability to perform daily activities. For those clients that are high nutrition risk, meals start within 3 to 5 days after assessment. The Elder Nutrition Program assessor also refers clients to other resources that may provide them with assistance.

The meal delivery driver is also an important component of the program. The driver may be the only social interaction that a client has each day. If needed,the driver can alert the Nutrition Coordinator of any significant changes in a client's health or well being.

5.1.2 Service Delivery Model **15 Points**

What steps will you take or what activities will you provide to assist clients in achieving these goals? Describe each "unit of service" you will provide for clients and how often and how long this service will be provided (e.g. a one-time three-hour training; a weekly one-hour support group for 12 weeks; one 30-minute health exam twice a year; 1-3 hour advocacy services as needed; etc.) How will these services address the problem as identified in the Needs Statement above? Be specific.

To assist congregate clients (those clients who can come to the Lexington Senior Center and the Ballard-Griffith Towers) to remain active and healthy, the Elder Nutrition Program provides the following:

a. An initial assessment to determine if the client is eligible to receive meals and/or transportation to the nutrition site. If needed, referrals are also provided for other services in Fayette County
b. Transportation to and from the nutrition site
c. A nutritious meal served Monday through Friday
d. Nutrition education presentations and literature provided monthly

In order for homebound meal recipients to remain independent, the Elder Nutrition Program will provide:

a. An initial assessment to determine if the client is eligible for meals and/or other services available in Fayette County
b. Follow up visits and phone calls to clients that require case management
c. A nutritious meal meeting 1/3 of the Required Daily Allowance, delivered Monday through Friday
d. Daily communication/socialization with the meal delivery driver
e. Monthly menus and nutrition education materials
f. Emergency Shelf Meals are provided prior to inclement weather to ensure that clients have food in the event that meals cannot be delivered. Nutrition staff call clients for a wellness check to ensure they are safe and have adequate food.
g. Comment cards are given to clients each month to gather input on meals and services provided
h. Reassessments take place yearly

5.1.3 Client Eligibility and Requirements **5 Points**

What eligibility requirements must clients meet to qualify for services? What are the expectations of clients while receiving services? (e.g. client must pay $30 fee for each class; client must remain sober; client is responsible for chores; nothing other than participation in services; etc.)

Eligibility requirements to receive a congregate meal:
a. Age 60 or older
b. The spouse of an individual age 60 or older
c. Is an individual with a disability and resides in a home with an eligible older individual
d. Is a disabled individual under the age of 60 who resides in a housing facility primarily occupied by older individuals at which congregate nutritious services are provided
e. Elder Nutrition Program volunteers

Eligibility to receive home delivered meals:
a. Age 60 or older, or the spouse of a client age 60 or older
b. Unable to attend congregate meals due to illness or an incapacitating disability
c. Has no one in the home who could prepare a nutritious meal on a regular basis
d. Is under age 60 but has a disability and resides with a homebound client age 60 or older

5.1.4 Evidence-Based/Best Practice **10 Points**

Describe the evidence-based or promising practice model on which this service approach is based. Provide particular sources that indicate what you are doing is best-practice.

The Elder Nutrition Program follows Kentucky Nutrition Guidelines 910 KAR 1:190 Section 4 and Section 5 for eligibility and food safety.

Section 4. Congregate Nutrition Services.
The Elder Nutrition Program in Fayette County provides at least one hot or nontraditional meal once per day, five days per week. Temperatures are measured prior to serving congregate meals to ensure that hot foods are at or above 135 degrees and cold foods are at or below 41 degrees.

Section 5. Home Delivered Nutrition Services
The Elder Nutrition Program in Fayette County provides at least one hot or nontraditional meal once per day, five days per week. Hot meals are delivered in insulated bags with a hot plate to ensure that the food remains at or above 135 degrees. Cold foods are transported in coolers or insulated bags containing ice or ice packs to ensure that the food remains at or below 41 degrees. Temperatures are measured upon arrival at the nutrition sites and again prior to packing meals for home delivery. Delivery routes are established to minimize nutrient loss and to facilitate temperature retention. Meals are delivered within four hours from the time of preparation to the last destination. Temperatures are taken during the route to ensure that the meals are at the proper temperatures. Nutrition education materials are also given to homebound clients once a month.

5.2 Program Measures & Evaluation

5.2.1 Service Efficacy & Desired Outcomes **10 Points**

What do you hope to help your clients achieve? What are some examples of goals you will set with clients? What is your service philosophy in terms of helping your clients achieve these goals? Describe how you define "successful" completion of services. (e.g. service is complete if: client remains for entire three-hour training; client continues services until judge orders otherwise; etc.) What percentage of clients meet that criteria for success?

The measure of success for providing meals to congregate clients is determined by the number of clients that attend the nutrition sites to receive a nutritious meal and nutrition education in a socially stimulating environment. Based on data from 7/18 to 3/19, 98% of the congregate clients at the Lexington Senior Center continue to receive a nutritious meal. At Ballard-Griffith Towers, 96% of clients continue to receive a meal.

The measure of success for providing meals to homebound clients is determined by the number of clients that stay independent and self-sufficient. Based on data from 7/18 to 3/19, 95% of the program's homebound clients remained in their home.

According to the Nursing Home Ombudsman Agency of the Blue Grass, the cost of a day's stay in a Lexington Nursing Home is $200 a day, or $73,000 per year. By providing a nutritious meal and coordinating services with partner agencies, the ENP is able to help seniors remain independent and avoid premature nursing home placement. Anecdotal evidence is provided by the nutrition staff at the sites who see the positive effects on clients who have the opportunity to interact with others, develop healthy social interactions and establish friendships with peers.

5.2.2 Client Empowerment & Community Impact **10 Points**

Describe what meaningful difference these services make in the lives of people served. What value is added to the community? Provide examples. (e.g. client demonstrates change in attitude; client has behavior change; etc.)

The ENP addresses the following social/health issues by providing a nutritious meal meeting 1/3 of the Required Daily Allowance.

Obesity - the meals are low in fat, have no added sodium and limited carbohydrates

Malnourishment - for those clients at high nutrition risk, the ENP also provides a frozen meal for evenings and weekends

Income, Health and Welfare - the client's financial status increases with delivery of a nutritious meal five days a week, thereby reducing poverty in Fayette County. Our clients' quality of life improves as they have more money for prescriptions, purchased food, utilities and rent or mortgage.

Independence and Self Sufficiency - a nutritious meal along with nutrition education and referrals to other agencies can help clients stay in their home. The daily interaction with their delivery driver also provides much needed socialization and gives the driver an opportunity to assess any changes in the client's wellbeing.

5.2.3 Data Assessment & Quality Improvement **10 Points**

While it doesn't have to be complicated, evaluation is more than saying "we provided this many 'units of service.'" How will you know if your services have been effective? How does this relate to the desired outcomes for your clients? How will the information gathered be used to improve your services in the future? Be specific (for example, data collection may be through focus groups, pre-and post-tests, client satisfaction surveys, etc.), and also **be specific regarding sampling size and frequency of evaluation.**

Homebound and congregate clients are given the opportunity to provide feedback on meals each month. The feedback and suggestions are reviewed every quarter at the Menu Advisory meeting prior to finalizing new menus.

Below are results from the FY18 survey complete by 116 congregate clients:
100% said that they are eating healthier food
90% are eating a larger variety of foods
91% are maintaining a healthier weight
94% felt that their health had improved
98% felt better
95% were less hungry
97% continued to live in their own home

Below are the results of FY18 survey completed by 109 homebound clients:
93% said they were eating healthier food
98% said they were eating a larger variety of food
90% felt that their health improved
95% felt better
97% were less hungry
100% continued to live in their own home

5.3 Capacity & Sustainability

5.3.1 Staff Qualifications & Experience **5 Points**

Provide information on the key/primary individuals that will be involved in the provision of services and demonstrate that they have the capacity to address the stated need. List each position by title and name of employee, if available. Describe the anticipated roles and responsibilities for each person as it relates to this project. Describe the experience, expertise, and capacity of each individual to address the proposed activities.

Executive Director Troy Roberts is responsible for the management of the agency including compliance with all local, state and federal funding sources' guidelines and regulations. Troy has 23 years of experience with the agency.

Director of Aging Services Jaime Albritton is responsible for the programmatic management of the programs under Aging Services. Jamie has 16 years of experience with the agency.

Elder Nutrition Program Director, Linda DeRosett is responsible for oversight of the Elder Nutrition Program. This position provides technical and administrative assistance and monitors the sites twice annually to ensure all State guidelines are met. Linda has 12 years of management experience in the non-profit sector.

Nutrition Coordinator/Case Manager in Fayette County is Emily Dahlman. She is responsible for arranging, coordinating, monitoring, evaluating and reassessing the client's physical condition and social situation. She supervises kitchen staff and the meal delivery drivers. Emily has six years of experience in Aging Services.

Driver Coordinator, Craig Meeker is responsible for oversight of the Lexington Senior Center kitchen and meal routes. Craig has 6 years of experience in Aging Services.

5.3.2 Partnership & Resource Leverage **5 Points**

How do your programs and services support our community's comprehensive response to the identified priority area of Community Wellness & Safety? Does your organization have any formal agreements or informal working relationship with other local service programs?

What role does your governing board members, volunteers, and / or donors play in facilitating viable service delivery and program administration? Does your program have any major civic benefactors or corporate sponsors? Describe other secured funding sources and committed operational resources your organization has allocated for the proposed program.

During a client's initial assessment, the assessor can determine whether there are other resources needed in addition to meals. The assessor may refer the client for food stamps, commodities, nutrition counseling, personal care services, dental services, housekeeping and laundry services and transportation and assistance for doctor or hospital visits.

The Elder Nutrition Program collaborated with United Way of the Bluegrass, Home Health agencies, local hospitals and physicians, social workers, the Fayette County Extension Office, Sayre Christian Village, Christ Church Apartments, the Senior Companion Program, Meals on Wheels, Red Cross Wheels, the University of Kentucky, Blue Grass Care Navigators and other facilities to feed the aging population of Fayette County.

The Elder Nutrition Program has a formal agreement with Bateman Senior Meals (the winning bid in an RFP process) to provide meals. All meals are reviewed and approved by the state dietitian.

The Blue Grass Community Action Partnership (BGCAP) receives a federal grant thought the Bluegrass Area Development District but must show local support which is provided through funds from United Way and Lexington Urban Fayette County Government. The BGCAP Board oversees all major agency decisions. The Board consists of 1/3 elected public officials or their representatives, 1/3 representing agency target sectors and 1/3 representing the private sector. The Board is responsible for oversight and governance of the agency.

5.3.3 Outreach & Inclusion Strategy **15 Points**

Demonstrate how the program will ensure services are available and accessible by all potential participants, especially related to language barriers for persons with limited English proficiency; persons with physical or other disabilities; and persons impacted by poverty and economic distress.

Has your organization enacted any policies (or employs any standard operating procedures) to ensure equitable service opportunity and / or benefit program to a diverse cross-section of the greater community?

The Elder Nutrition Program collaborates with the American Red Cross Wheels program to provide transportation to the Lexington Senior Center for clients taking part in the congregate program. The Wheels' vehicles have lifts that make the vehicle accessible for clients using a wheelchair, scooter, cane or walker. The Lexington Senior Center's dining rooms are located on the ground floor and are open from 8 to 5. Lunch is served between 11:30 and noon.

The Ballard-Griffith Towers are an ADA approved facility with a dining room on the main floor, easily accessible to all residents. Coffee is provided beginning at 10 a.m. and lunch is served between 11:30 and noon.

The Blue Grass Community Action Partnership (BGCAP) contracts with InterpreTalk Language Services. An assessor or case manager may contact this service to assist them is acquiring information and feedback from a client. BGCAP's phone system also allows clients access to an interpreter when needed.

6.0 Program Budget Summary Form Instructions

Proposal Submittal shall be considered incomplete and shall be rejected without completed Budget Summary Form. *(Including total amount of ESR grant request.)*

For organizations requesting funding for more than one program in this RFP, combine into a single Program Budget narrative for the proposal.

Please note that the Program Budget will be part of the grantee agreement with LFUCG and regular tracking and expenditure reporting will be required.

To ensure readability and uniformity, please use the Program Budget form included. Provide brief line-item detail as specified in each section below and verify all calculations.

This section provides a summary of the total proposed Program Budget for FY 2020. It requests the allocation of all projected funding amounts (City and non-City sources) for anticipated FY 2020 program expenditures.

Total Program Budget

Column A should reflect projected expenditures for the entire program (not just the proposed LFUCG ESR grant funding request portion). When the chart is completed this column should equal ESR Grant Funding Request plus other/non-ESR program funding. (A=B+C)

ESR Grant Funding Request

Column B is the grant amount being requested from this RFP to support this program's services to eligible Fayette County Participants.

Non-LFUCG Program Funding

Column C is the non-LFUCG ESR funding that is allocated to the Total Program Budget (A-B = C).

This form is for the budget for the PROGRAM applying for ESR funds, not the total agency budget.

For each category identify the amount requested and the amount to be leveraged through other programs or organizations (if applicable).

Staff Salaries – Identify the number of Full-time position salaries allocated to the program, and part-time positions allocated to the program, and the amounts of each allocated to Columns A, B, & C.

Consultant Services – In the "List Details" box, **briefly** describe any expenses associated with providing expanded supportive services or other services for which the organization intends to contract with another entity. Any of these expenses to be provided by the proposing organization should be included in other line items.

Space/Facilities – In the "List Details" box, **briefly** list the basis of the allocation of rental costs, utilities, janitorial costs, and any other facility costs for the Program. Identify any office or program space in an LFUCG owned building, and any other costs (rent, monthly utilities, etc.) reimbursed to LFUCG.

Scholarships/Stipends – In the "List Details" box, **briefly** list the type of scholarships or stipends, and include the number of people or organizations to receive funds.

Operating Expenses – In the "List Details" box, **briefly** list the costs associated with expenses, supplies, utilities, and any other expense associated directly with the operation of the project.

Other – In the "List Details" box, **briefly** list any other costs for the Program not covered above.

PROGRAM BUDGET SUMMARY

Agency Name **Blue Grass Community Action Partnership**

Program Name **Elder Nutrition Program--Fayette County**

FY 2020 (July 1, 2019-June 30, 2020) Total Program Budget

	# of Employees:	Column A Total Program Budget [= B+C]	Column B ESR Grant Funding Request	Column C Non-ESR Program Funding [A-B]
1. Staff Salaries for Program				
Full-Time (FTE)	2	80,911	**49,382**	31,529
Part-Time	13	207,734	**135,222**	72,512
Total Salaries		288,645	**184,604**	104,041
3. Consultant Services	$	0		
list details				
4. Space/Facilities	$	26,667	**5,112**	21,555
list details	Rent, Utilities, & Maintenance			
5. Operating Expenses	$	35,788	**7,566**	28,222
list details	Travel, Equipment/Data Processing, Supplies, Office Expense, Insurance, & License/Fees.			
6. Scholarships / Stipends	$	0		
list details - numbers & amounts				
7. Other	$	1,051,331	**222,336**	828,995
list details	Food Supplies, Meals for Clients, Meal Transportation, & Indirect.			
8. TOTAL PROGRAM BUDGET	$	1,402,431	**419,618**	982,813

Cost per Program Participant: $ **687**

I understand that this document in its entirety is incorporated into my grant Agreement with the Lexington-Fayette Urban County Government.

Authorized Representative *(typed name)*: Troy Roberts

Title: Executive Director **Date**: 4/18/2019