PROPOSAL SUBMITTAL FORM

Agency Information

Agency Name: Bluegrass Council of the Blind

Mailing Address: 1093 S. Broadway, Ste. 1214

Street Address: _____

Phone: (859) 259 - 1834

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 Silver Seal of Transparency or higher profile on GuideStar.org? ☑ Yes ☐ No
*Note: Agencies **must** have a Silver Seal of Transparency or higher profile with GuideStar.org to be eligible for ESR funding.*

Website Address: www.bcbky.org

Agency Representative *(typically the Executive Director - Name, Title, Phone, Email)*:
Theresa Thomas, Executive Director, 859-259-1834; theresa@bcbky.org

Person Completing Application *(Name, Title, Phone, Email):*
Susan McDaniel, Deputy Director, 859-230-0162; mcdaniel@bcbky.org

Program Information

Name of program for which funds are being requested: **Peer Support/Assistive Technology & Training**

Total Funding Amount Requested: $ **41,106**

RFP #3-2020 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.

2017 Census data reports there are nearly 7,500 blind or visually impaired (b/vi) adults in Fayette County and 140,000 (USDHHS) in Kentucky. The National Center for Health Statistics (2017) reports approximately one person in three has some form of vision-reducing eye disease by age 65. Diabetes is the leading cause of blindness in the U.S., and Kentucky ranks 6th in highest incidence of diabetes. Diseases such as diabetes, cataracts, glaucoma and macular degeneration are robbing adults of their vision, along with their independence, safety and health. A Pocklington Trust study shows the link between visual impairment and depression, suggesting that depression adversely affects the rehabilitation outcomes of b/vi people as they become more concerned with their inability to carry out activities of daily living rather than visual impairment itself. BCB is the only nonprofit in Fayette County serving this vulnerable and underserved population who are at risk for isolation, depression, poor health, food insecurity and dependency on others.

Statistics from the National Federation of the Blind show more than 70% of b/vi adults are not employed, leaving most in poverty. The Kentucky Division of Blind Services provides services to persons trying to enter the workforce, leaving thousands of seniors, past work age, with little to no help with learning basic skills to live with low vision. BCB fills that gap by providing services for the whole person: improving independent living skills, employability, quality-of-life and making a positive impact on the well-being of Central Kentucky's b/vi population.

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.

Annual outputs BCB provides:
• 255 assistive devices/ items are distributed
• 1,000 cumulative, individual hours of training on assistive devices
• 255 individual/group trainings on devices and techniques used for overcoming the barrier of vision loss
• 150 individuals complete the intake process, gaining knowledge of services, resources/referrals available
• 1,200 lbs. of food distributed to b/vi consumers to reduce food insecurity.
• 500 meals served to program participants providing opportunities for socialization and sharing
• 4 membership meetings inspiring leadership and offering local, state and national connections
• 10 mentoring conference calls supportive in nature
• 11 small group mentoring meetings encouraging socialization and support
• 5 jobs provided to persons with blindness
• 56 Intake appointments where consumers gain knowledge of services/resources/referrals
• 10 monthly support group meetings offering socialization, access to resources, tools and tips

Goals, outcomes and numbers achieving apply to any of the following: blind/visually impaired (b/vi), their families, caregivers and professionals working with b/vi and the Fayette County community.
Outcome 1 = Participants report a decrease in isolation and increase in self-esteem, confidence and abilities, which result in greater health and well-being. Goal: 85% achieving
Outcome 2 = Participants increase independence, safety and health through accessing assistive technology (AT), training, education and knowledge for living with blindness or a vision impairment. Goal: 85% achieving

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.)

Mentoring, support meetings, community outings, information and referral services, supplemental food, technology demonstrations, trainings and seminars are all completely free to the consumer and require no financial obligation from consumers. Although we receive most new consumers as a referral from local doctors or from the state Division of Blind Services, we also accept “self-referrals” --no formal referral is needed. For some services, a confidentiality agreement and background check is required, with the option to have BCB pay for the background check or self-pay, voluntarily. Some technology devices made available for lending or for distribution may require an application process and are determined based on need. These are reviewed by a committee and awarded based on availability. Supplemental Food Distribution is open to anyone who is blind or visually impaired, with those who are registered with God’s Pantry Food Bank given first priority. If we have additional food that month, then anyone else who is blind or vision impaired are offered the remaining food boxes. As an affiliate of the American Council of the Blind (ACB), our membership is a service we offer that has a membership fee of $10 annually, with $5 of that being paid to ACB. We keep this fee as low as possible to ensure all who wish to participate are given the opportunity, with sponsorships available for those (paid for by other BCB members) who are unable to pay the $10 membership dues but wish to be a member. Membership is NOT required to receive services.

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.

A Thomas Jefferson University study (published in the American Academy of Ophthalmology) revealed the best treatment for those who have macular degeneration was a combination of physical and emotional treatment from occupational therapy, which reduced depression. BCB provides very similar services to what occupational therapy low vision programs provide.

The most unique and valuable aspect of our programs is that we are people with vision loss helping others with vision loss. Nearly 75% of our staff is visually impaired, as well as 70% of the board and 57% of our 101 members. Leaders at BCB have personal experience overcoming the challenges of vision loss and are eager to help others through education, training, encouragement and personal triumphs. BCB’s program mirrors disABILITY LINK, which is based on one person with a disability helping another person with a disability in similar situations to develop strategies and self-advocate. disABILITY LINK is also considered a best practice developed through the creation of collaboration between the Georgia Council on Developmental Disabilities, Georgia Centers for Independent Living and the skills and insights of peer supporters in Georgia. Training has been presented at the following national conferences: 2007 American Association on Intellectual and Developmental Disabilities, 2007 National Council on Independent Living and 2014 Association of Programs in Rural Independent Living.

BCB services provided through the Peer Support program were developed by a team including Dr. Susan Ament, retired psychologist, Jeremy Smith, a local licensed counselor, and the Executive Director, Theresa Thomas, all of whom are legally blind.

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?

Common goals for BCB consumers include:
• increasing access to assistive technology and instruction on living with low to no vision;
• increasing the ability to independently manage daily tasks with vision loss;
• consumers feeling more supported/connected, reducing depression and isolation;
• consumers learning new techniques and access to resources for living with blindness or vision impairments;
• less reliance on caregivers and family for help;
• increasing the ability to manage health independently.
Outcomes achieved include:
• increased independence/self- esteem/confidence;
• feelings of support and connection;
• inclusion in the community.
BCB bases success on each consumer's individual goals, which may be job-related, social or mobility issues, or just wanting to know how to learn to live a life without sight, i.e., how to be "normal" living with blindness or vision impairment.
Personal goals may include:
• learning how to access printed text (reading mail, kids' homework, notes from school, medication labels/warnings, cooking instructions/ingredients);
• accessing technology to manage health (talking accessible devices: glucometers, body scales, BP monitors, prescription labels);
• connecting with others experiencing vision impairments for peer support;
• increasing community involvement;

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 most meaningful impact we see in our consumers is hope. With hope, they are able to take the steps needed to learn to live independently, successfully and happily with the challenges in life brought on by a loss of vision. Hope results in actions to achieve, and these actions lead to the outcomes of persons with low to no vision having the tools and knowledge to be successful in reaching their goals. This improves the quality of life NOT ONLY for the person with a vision impairment, but for their family, caregivers and the community as a whole. Positive outcomes include increased: abilities, confidence, access and inclusion; and a reduction in: isolation, stress, dependency and financial burden.
Peer-to-peer mentoring, training and support have long proven to be a highly effective tool in improving confidence, stability and reaching goals. Peer-to-Peer programs and support have long been used to increase mental and physical well-being of all participants, benefiting both mentors and mentees in many ways. BCB programs will benefit Fayette County and improve lives by increasing economic stability, removing barriers, providing adaptive learning opportunities and promoting inclusion. It will improve the lives of our consumers and their families, employers and the community as a whole.
BCB consumer Anna stated, "I had no idea what I was going to do. I had no clue these types of devices were available to help me! You have truly opened my eyes."

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.**

BCB conducts surveys following group activities and trainings. We offer the opportunity to participate in focus groups and give one-on-one feedback. We also conduct annual surveys each December and smaller surveys by phone throughout the year to gather feedback on an on-going basis. We require mentoring participants to report monthly and provide helpful observations and comments that we use for program evaluation.
Surveys and observations by the staff regarding attendance leads us to the conclusion of success, as many participants return to participate month after month and share with us they are learning, as well as feel useful and valued as a resource for others to learn from and gain support.
BCB uses focus groups, surveys, self-reporting and observations to evaluate and modify programs. Currently, 92% of participants attending peer support group meetings report learning new information and 95% value the information learned as helpful to them. Surveys show 100% of consumers receiving assistive devices and/or training have increased abilities in managing daily tasks.
In November 2019, BCB partnered with the AmeriCorps program to acquire a full-time AmeriCorps Vista volunteer to work with our program coordinators in the area of capacity building. Our Vista volunteer will manage the data tracked by each program, working closely with the program coordinators to determine the challenges and successes of the programs, which will be used for reporting, evaluating and adapting the programs to reach the highest outcomes. The Vista volunteer will also assist to identify areas where we can use additional volunteers to expand the programs to serve more people in need.

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.

Program coordinators manage all aspects of the Peer Support and Assistive Technology programs with supervision from BCB's Executive Director and support from volunteers.

Legally blind from birth, Peer Support Program Coordinator Dr. Susan Ament has first-hand experience with overcoming the challenges associated with vision impairment. Despite her disability, she obtained a doctorate in Clinical Psychology from the University of Louisville and worked full time as a clinical psychologist at a mental health clinic in Indiana before moving back to Lexington. Dr. Ament served four years on the State Rehabilitation Council (SRC), most recently serving as Chair of the SRC in 2014-15.

BCB Assistive Technology and Training Program Coordinator Richard Sizemore is a Microsoft Certified Professional, has been a computer and accessibility consultant for 20 years, and has more than 8 years' experience in technology training for the blind/visually impaired and individuals with multiple disabilities at organizations such as Career Visions, Connected Learning Network and the Kentucky School for the Blind. Born with optic nerve hypoplasia and nystagmus, Richard is legally blind.

With grant funding, BCB would hire Sam Seavey. Sam was diagnosed with macular degeneration at age 11 and has an extensive background in devices/techniques for living with low vision, which he shares through his YouTube Channel, "The Blind Life." With more than 13,000 subscribers and 800-plus helpful videos, Sam helps b/vi people worldwide, offering tips

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.

BCB is the only nonprofit exclusively meeting the wellness and safety needs of b/vi adults in Lexington. Through our organization's direct services and through collaborations with agencies such as the LFUCG Department on Aging and Disability Services, Kentucky Division of Blind Services, UK Teachers of the Visually Impaired, and the VA, BCB provides much-needed peer support and assistive technology services to counter the fear, isolation and depression associated with vision impairments. To fill additional gaps in services, we partner with providers like Retina Associates of Kentucky and UK Eye Clinic to provide vital programs free of charge, build community involvement and establish comprehensive services without duplication.

With a part-time staff obligated to a total of 102 hours per week cumulatively, we depend HEAVILY on board members and volunteers. Volunteers provide an average of 123 hours of service each month. Many of our consumers also become volunteers, assisting with mentoring, support group meetings, trainings, seminars, fundraising, outreach, and general office work. By serving people with vision impairments, their families and those who work with b/vi individuals, BCB builds an inclusive, sustainable, thriving support system for our organization and the broader community. Last fiscal year, 63% of our funding came from foundations and grants; 37% from individual and corporate donors. Funding sources included Linda Neville Trust, the 2019 BCB SEE Cruise fundraiser, United Way of the Bluegrass, Lexington Lions Club, Good Samaritan Foundation and BlueGrass Community Foundation. A partnership with the Lexington Senior Center is in place for our new Silver Initiative.

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?

Accessibility is of the utmost importance to BCB, as we know, first-hand, the challenges of living in a sighted world. We make all efforts to include persons with vision impairments, offering printed materials in large print, electronically (for screen reader users) and in audio format that can be played on a free audio book player. We also offer materials in Braille. We strive to train all volunteers and community members, on "best practice" procedures for persons with all types of challenges. BCB has adopted the Non-Discrimination policy suggested by the United Way of the Bluegrass.

The BCB Office Manager is fluent in American Sign Language as well as in Tactile Signing (used by people who have both hearing and vision impairment) and is available to interpret for consumers upon request. BCB has an active account with Language Line Solutions, which is available for staff to access 24/7 for consumers with language barriers, upon request. BCB brochures are available in Spanish both in print and on our Web site. With the population we serve being over age 55, we are seeing more and more consumers with multiple challenges and the need for adapting tools and techniques to assist people with a variety of challenges. As a result, BCB is committed to the community by staying abreast of current trends, best practices and technology to accommodate people with a variety of challenges. Examples include serving on the Mayor's Commission for People with Disabilities and attending the Assistive Technology Industry Association's international conference.

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.)* **The Program Budget will be the same for both FY21 and FY22; there will be no increases in award for Year 2 of the grant.**

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 2021. It requests the allocation of all projected funding amounts (City and non-City sources) for anticipated FY 2021 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 **Bluegrass Council of the Blind**

Program Name

FY 2021 (July 1, 2020--June 30, 2021) 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)	1	10,771	3,910	6,861
Part-Time	5	47,124	17,106	30,018
Total Salaries		57,895	21,016	36,879
3. Consultant Services	$	4,200	1,530	2,670
list details	Includes allocated accounting fees for 990 preparation and filing as well as 1099 contractor fees for Assistive Technology Program.			
4. Space/Facilities	$	17,760	6,391	11,369
list details	Portion of building rent allocated to programs.			
5. Operating Expenses	$	38,747	12,169	26,578
list details	Includes all materials and supplies used in Assistive Technology and Peer Support Programs plus allocated Telephone, Internet, Software and Insurance costs.			
6. Scholarships / Stipends	$	0	0	0
list details - numbers & amounts				
7. Other	$	0		
list details				
8. TOTAL FY21 PROGRAM BUDGET *(Program budget will be the same for FY22; no increase in award for Year 2 of the grant)*	$	118,602	41,106	77,496

Cost per Program Participant: $ 79

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)*: David White

Title: Director of Finance and Accounting **Date**: 4/1/2020