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Northern Arizona Region
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Southern Nevada Region
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alzheimer's association®

October 16, 2014

Marcella Crane, Contracts Manager
Arizona Developmental Disabilities Planning Council
1740 West Adams, Suite 410
Phoenix, AZ 85007

Subject: Clarification Response to Questions on RFGA ADDPC-FF14-GP-00

Dear Ms. Crane:

Below are the responses to the questions that you indicated on October 9, 2014 that needed further clarification. Attached you will find:

1. Additional information about our outreach plans for participants including proposed partnerships with other organizations and our experience in providing services through funding from the Arizona Developmental Disabilities Planning Council and ongoing as part of our organizational mission and daily operational work;
2. Clarification and reorganization of the yearly work plan for the proposed workshops;
3. Additional budget narrative information concerning staff hours and salary clarifications and personnel qualifications questionnaire information for additional staff included in the submitted budget clarification information (three additional staff have been included since the original budget was prepared).

Please let me know if any additional information is needed or yo
responses. Thank you for the opportunity to clarify our proposa

Second Clarification response received 10/16/1

Sincerely,

Cindy Vargo
Central Arizona Regional Director

BUDGET SUMMARY

Budget Request Form

Contractor Name Alzheimer's Association Desert Southwest Chapter

Contractor Address 1028 E McDowell Road, Phoenix Arizona 85006
Street Address City State Zip

Project Name CarePRO for Family Caregivers of Individuals with Developmental Disabilities

Budget Category	Requested ADDPC Funds	Non-Federal Cash Match	Non-Federal In-Kind Match	Total Program Cost
Personnel / Salaries	31,110	7,775	0	38,885
Fringe Benefits	9,730	2,435	0	12,165
Supplies / Operating Expenses		850	0	850
Travel	0	280	0	280
Rent or Cost of Space	0	2,380	0	2,380
Contracted Services / Professional Services	0	0	0	0
Administrative / Indirect Costs	0	0	0	0
Total Costs	40,840	13,720	0	54,560

It is understood that Non-Federal Funds identified in this budget will be used to match only ADDPC Federal Funds, and will not be used to match any other Federal Funds during the period of the ADDPC funded Project.

Additional Description and background information shall be included as a budget narrative, including the match. The contractor agrees to submit additional background information to the ADDPC upon request.

Deborah B Schaus
Name of Certifying Official

Executive Director
Title of Certifying Official

602-528-0545
Phone

deborah.schaus@alz.org
e-mail

BUDGET NARRATIVE

Budget justifications detail is provided for each expense line item, both for funds requested and for match.

Personnel / Salaries/ ERE = $38,885 total; $31,110 Requested Funds; $7,775 Match for Salaries
$12,165 Total; $9,730 Requested Funds; $2,435 Match for ERE

A total of 1,396 staff hours or 0.67 FTE (Full Time Equivalent) for direct project support is proposed, as follows:

Region	Position	Staff Name	# Project Hours	Project FTE	Hourly Wage	Project Wage	Pro-Rated Project ERE
Central AZ	Regional Director	Cindy Vargo	168	0.08	37.74	6,340	1,680
	Program Manager	Mindy Wakefield	130	0.06	27.19	3,535	1,155
	FCC	Brett Petersen	400	0.19	23.00	9,200	3,200
Northern AZ	Regional Director	Meg Fenzi	149	0.07	39.77	5,925	1,520
	FCC	Mary Novar	200	0.10	28.08	5,615	1,770
Southern AZ	Regional Director	Kelly Raach	84	0.04	32.08	2,695	660
	Program Manager	Morgen Hartford	65	0.03	21.15	1,375	535
	FCC	Elizabeth Kinder	200	0.10	21.00	4,200	1,645
TOTAL			1,396*	0.67		38,885	12,165

ERE (Employee Related Expenses) are pro-rated for both requested funds and match for the staff positions noted above. This includes employer paid health plan, 401k plan, payroll taxes, etc. The benefits package for all employees is approved by the Board of Directors annually.

Supplies / Operating Expenses = $850 total; $0 Requested Funds, $850 Match

- Snacks/Water for workshop participants: 4 workshops @ $10.00 = $40.00
- Notebooks and materials for workshop participants: 44 participants @ $15. = $660
- Office / program supplies: pens, flip charts, paper, etc. = $150

Travel: = $280 total; $0 Requested Funds, $280 Match

A total of 629 miles of travel from the Chapter's offices to the workshop locations is included in the budget at the Arizona Accounting Manual personal vehicle mileage reimbursement rate of $0.445 per mile (effective 11/15/06). This includes travel of all staff to workshops in Phoenix, Prescott and Tucson areas, as well as all four project staff driving to do any outreach in their respective regions.

Rent or Cost of Space = $2,380 total; $0 Requested Funds, $2,380 Match

Projected cost of $2,380 is projected for pro-rated office occupancy space for .67 FTE.

Eligibility/Outreach/Partnerships:

The Alzheimer's Association Desert Southwest Chapter, a nonprofit organization, has experience in the following categories:
c. Working with parents that want to learn or increase their self-advocacy skills, or to increase their knowledge or skills on particular developmental disability topics.
d. Working with community stakeholders that provide support and training to persons with developmental disabilities and their families.
e. Developing and/or using existing curriculum that is a best practice.
f. Providing training on multiple topics, in various formats, and the ability to conduct evaluation to track output and outcome measurements.

Though ongoing community workshops, education classes, support groups and family care consultation services (case management) staff members at the Alzheimer's Association work with parents, siblings and support care staff members of individuals with developmental and intellectual disabilities by providing information, emotional support, skill building and education related to caring for a loved one with dementia. In addition the Alzheimer's Association Desert Southwest Chapter has recently successfully completed a grant from the Arizona Developmental Disabilities Council to provide education and training to support coordinators and family members about the connection between Alzheimer's disease and Down syndrome. These 4 hour workshops were held in multiple locations throughout the state of Arizona with more than 175 participants in attendance. Since completion of the contracted workshops in June of 2014 an additional 150 support providers and family members have participated in an additional 5 workshops held in the greater Phoenix and Tucson areas.

If funded to provide CarePRO under this grant we will continue to work closely with the community-based aging services network and other providers of services to our target population. This includes Area Agencies on Aging (statewide); assisted living and care facilities; elder law and health care providers; the faith community and other nonprofits who provide services to specific underserved communities (DUET, Jewish Community Services, Foundation for Senior Living Adult Day Services, Gompers Habilitation Center, etc.); with state, local and city agencies and departments (Department of Ecomomic Services – Aging and DDD services, ASU, UofA, senior services in cities located in greater Phoenix, Tucson and Prescott/Flagstaff areas) and consumer rights organizations (ABIL, Arizona Commission for the Deaf and Hard of Hearing,One Voice, ARC). We realize the importance and benefits of partnering and collaborating with other organizations in order to provide quality programs and services to all segments of the population. We will make additional efforts to extend our reach to individual providers who support individuals with I/DD, nonprofit organizations that provide family support programs for individuals with I/DD and other organizations that serve the larger community of persons with disabilities, their families and support staff.

Minimally the proposed partners for the project include:

- Arizona Department of Economic Security
  - Department of Aging Services
  - Division of Developmental Disabilities
- Arizona Developmental Disabilities Planning Council
- Southern Arizona Network for Down Syndrome
- Arizona Bridge to Independent Living
- Service Providers throughout Arizona that have Senior Day programs
- Institute for Human Development, Northern Arizona University
- Arizona Association of Providers for People with Disabilities
- Scottsdale Training and Rehabilitation Services
- RISE Services
- ACUMEN
- Gompers Habilitation Center
- Danville Services
- ARC of Arizona and local chapters

As a member of the aging care network in Arizona for more than 30 years, the Alzheimer's Association has established a strong and positive reputation of providing the unique services and supports for individuals and families who are dealing with the challenging effects of Alzheimer's disease. That reputation extends to our collaboration with other agencies and programs within almost every segment of all communities we serve including individuals with developmental disabilities and their families. Outreach will be done through a variety of formats including posting information on partner websites, emails, direct mail, newspaper, fliers and most importantly directly working with organizations that provide services to individuals with developmental and intellectual disabilities that can directly contact individual family caregivers who would benefit from participation in CarePRO.

D. Timeline of Major Activities

Activity	Dec 14	Jan 15	Feb 15	Mar 15	Apr 15	May 15	June 15	July 15	Aug 15	Sep 15	Oct 15	Nov 15
Administrative Responsibilities												
Comply with Initial ADDPC contract requirements (contracts, background checks, etc.)	x											
Pre-workshop evaluations administered to participants (two workshop sessions begin in May)		x		x		xx						
Survey #2 (Intermediate Term Outcome Post Survey) to 30% of participants 3 months after the last training session for each individual by mail/email and by phone if that is more convenient for the participant; first 30 day evaluations in March – last of 3 month evals in beginning of October				x	x	x	x	x	x	x	x	
Survey #3 (AIDD Consumer Satisfaction Survey) to 100% of participants results documented before the last narrative report to ADDPC: survey done by mail/email/phone					x	x	x	x	x	x	x	
Create reports and send to ADDPC – quarterly and final report		x			x			x			x	X final
Workshop Activities												
Pre-workshop												
Development and finalization of learning objectives and workshop materials	x											
Set dates for workshops and secure locations	x		x		x		x					
Develop outreach plan	x	x	x	x								
Implement outreach	x	x	x	x	x	x	x					

Screen Participants		x	x	x	x	x							
Assemble notebooks		x		x		x	x						
Send reminders to participants	x		x		x	x	x						
Train Co-facilitators	x	x											
Workshop Activities													
Pre/post workshop evaluations administered to participants at first (pre –survey) and last workshop (post survey #1)		x		x		x	x						
Hold Workshops (10 weeks for each class wave – 5 education sessions) new workshop begins * (Jan; March and 2 in May)		*x	x	*x	x	**x	x	x					
Provide Coach calls (10 weeks for each class wave – 5 coach call sessions)		x	x	x	x	x	x	x					
Ensure participants have info. for follow-up services – will happen in 10th week of each workshop wave				x		x		x					
Post Workshop Activities													
Review, compile and analyze evaluations (after each workshop wave – 10 weeks each)			x		x		x	x	x				
Modify training if necessary – after each wave of 10 weeks			x			x	x	x	x				
Ongoing Activities													
Develop Partnerships w/ DD organizations	x	x	x	x	x	x	x	x	x	x			
Before each new workshop wave revise training materials if needed based on evaluations	x	x	x	x	x	x	x						
Work with families after workshops end or in individuals drop out of class		x	x	x	x	x	x	x	x	x	x	x	x

PERSONNEL QUALIFICATIONS QUESTIONNAIRE

Instructions: Complete a separate **Personnel Qualifications Questionnaire** **for each person** in an administrative/management or key personnel position, including Subcontractors. This should include all of those that are directly responsible for providing services listed under the Scope of Work in a paid or unpaid position. If personnel are to be hired, provide a job description ensuring at a minimum, questions #5 and #6, with other information as deemed necessary, is provided.

1. Name of person: Elizabeth Kinder, MA, CMC

2. Position currently held with Applicant: Family Care Consultant Southern Arizona

3. Proposed position for contract service and percentage of time devoted to the contract service:

Tucson area outreach, logistical planning, facilitator of workshops; coach calls – total of 200 project hours .10 FTE

4. Number of years with Applicant: 1 year

5. Identify the primary function(s) of this person in terms of providing services under this Contract:

Outreach and recruitment in the Tucson area. Help with arrangement for facility location for workshops. Help coordinate logistics, including materials and supplies. Serve as co-facilitator of workshop with Regional Director.

6. Briefly describe the person's work experience, job training, formal education. (Do not attach resumes)

Elizabeth Kinder, MA, CMC who is a Family Care Consultant at the Alzheimer's Association of Southern Arizona Desert Southwest Chapter. Elizabeth has a Masters degree in Rehabilitation Counseling and a Graduate Level Certificate in Gerontology, both from the University of Arizona. Elizabeth has worked for the Department of Economic Security as a Vocational Rehabilitation Counselor, as well as a Geriatric Care Manager serving older adults and their families for over 13 years throughout Pima County. Elizabeth is recognized as a Nationally Certified Professional Geriatric Care Manager (CMC).

PERSONNEL QUALIFICATIONS QUESTIONNAIRE

Instructions: Complete a separate **Personnel Qualifications Questionnaire** **for each person** in an administrative/management or key personnel position, including Subcontractors. This should include all of those that are directly responsible for providing services listed under the Scope of Work in a paid or unpaid position. If personnel are to be hired, provide a job description ensuring at a minimum, questions #5 and #6, with other information as deemed necessary, is provided.

1. Name of person: Morgen Hartford

2. Position currently held with Applicant: Program Manager

3. Proposed position for contract service and percentage of time devoted to the contract service:

Tucson area outreach, logistical planning, facilitator of workshops, evaluation support; coach calls – total of 65 project hours .03 FTE

4. Number of years with Applicant: 1 year

5. Identify the primary function(s) of this person in terms of providing services under this Contract:

Support outreach and recruitment in the Tucson area; arrange for facility location for workshop; coordinate Logistics; serve as co-facilitator of workshop and help with evaluations.

6. Briefly describe the person's work experience, job training, formal education. (Do not attach resumes)

Morgen Hartford is the Program Manager for the Alzheimer's Association, Desert Southwest Chapter, Southern Arizona Region. He joined the Alzheimer's Association in January, 2014 after receiving his Master of Social Work Degree from the University of Montana in 2013, where he studied clinical social work and organizational practice. Mr. Hartford has practice experience with a diversity of populations including children, teens, seniors. As Competitive Program Director for Mismo Gymnastics, Inc., he served as a mentor, gymnastics instructor, and Special Olympics coach for children and young adults with developmental and intellectual disabilities. Mr. Hartford currently provides dementia education throughout Southern Arizona; coordinates more than 25 support groups across five counties; and implements the evidenced-based skills training programs CarePRO and EPIC for care partners and people with dementia.

Clarification
#1 me

need further clarification
- budget
- outreach to dd.
- timeline
- how many per workshop?

September 25, 2014

Ms. Debra Schaus
Alzheimer's Association Desert Southwest Chapter
1028 East McDowell Road
Phoenix, AZ 85006

Subject: Proposal in response to RFGA ADDPC-FFY14-GP-00
Comprehensive Education Projects to Promote Self-Advocacy and Information

Dear Ms. Schaus,

All applications received under RFGA ADDPC-FFY14-GP-00 have been reviewed and your application is considered to be susceptible for an award pending further clarification. Please provide a written response to the following questions to me, via email, by 3:00 P.M., Thursday, October 2, 2014.

1. How will the applicant ensure that the target population to receive the CarePRO training is for caregivers of a family member that has a developmental disability as their primary medical issue, coupled with dementia which is a secondary medical issue? The ADDPC needs assurances that if this project is funded, that target population is meant for caregivers that provide support to a family member that has a developmental disability.
2. Clarify if the small group training will be between 6-12 or 8-12.
3. Clarify if outreach to more families would be possible during the contract year.
4. Since CarePRO is a current program, clarify what data has been collected to date to show its effectiveness, and briefly state any output and outcome data that has been collected and analyzed.
5. Clarify if outreach to disability organizations will be a part of this project and to whom.
6. Clarify how recruitment, selection and commitment will be conducted. What will occur if a person is no longer able to commit? How will barriers be addressed?
7. Provide a timeline for a full 12 month period.
8. It appears only two staff have knowledge and expertise in issues that affect persons with developmental disabilities. Clarify who and what will be the oversight of other staff that have limited or no expertise on issues that impact persons with developmental disabilities.

how will reaching out to

9. Recalculate Personnel and Fringe Benefits, as projected staff hours do not add up to 1396 hours. The ADDPC prefers personnel hours to be calculated as follows: Person Identified, Salary x Time to be spent on program as either hours or %, x number of months assigned to project.

The Evaluation Committee will review your responses and further consider your application. If you have any questions, don't hesitate to contact me at (602) 542-8976 or by email at mcrane@azdes.gov

Sincerely,

Marcella Crane
Contracts Manager

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September 30, 2014

Marcella Crane, Contracts Manager
1740 West Adams, Suite 410
Phoenix, AZ 85007

Subject: Clarification Response to Questions on RFGA ADDPC-FFY14-GP-00

Dear Ms. Crane;

Below are the responses to the questions from the ADDPC review committee listed in your September 25, 2014 letter concerning our application for RFGA ADDPC-FFY14-00.

1. ***How will the applicant ensure that the target population to receive the CarePRO training is for caregivers of a family member that has a developmental disability as their primary medical issue, coupled with dementia which is a secondary medical issue? The ADDPC needs assurances that if this project is funded, that target population is meant for caregivers that provide support to a family member that has a developmental disability.***

   Participation is based on eligibility and baseline screening given to each potential CarePRO participant. Below is the screening tool that would be used.

   Eligibility Screening
   Staff contacts the potential program participant (Caregiver) and shares an overview of the program, objectives and curriculum, including clarifying that there will be five group sessions over a ten week period with five individual coach calls on alternating weeks and the criteria of being a caregiver of a family member that has a developmental disability as their primary medical issue, coupled with dementia as a secondary medical issue The purpose of this phone screening is to determine if the program is appropriate for the caregiver by understanding the caregiving situation, the time commitment, range of caregiving responsibilities and the stress level of the care partner. Acceptance into the program comes at the conclusion of this screening based on the care partner meeting the eligibility criteria in the screening. If the care partner is not appropriate for the program, alternative Chapter programs are to be offered (such as Family Care Consultation, Support Groups, etc.).

the compassion to care, the leadership to conque

Primary diagnosis

Alzheimer's Association® Desert Southwest Chapter
Program Guidelines: Care Partners Reaching Out (CarePRO)

- **Eligibility Criteria**

Pre-Screen

1. Does CG (Caregiver) provide, on average, at least 4 hours of supervision or direct assistance per day for a family member that has a developmental disability as their primary medical issue, coupled with dementia which is a secondary medical issue? ***If the answer is No – Excluded***

2. Has the CG taken care of CR (Care Recipient) for more than 6 months? ***No – Excluded***

3. Does CR have progressive memory problems? ***No – Excluded***

Risk Assessment – Part I

4. Within the past month, has CR…

- Been having any memory problems - such as asking the same question over and over, forgetting what day it is, or losing or misplacing things?
- Been having any behavior problems - such as arguing, being irritable, verbally aggressive or waking-up CG or other family members at night?
- Needed help with daily activities – such as bathing, changing clothes, brushing teeth, or shaving?

If CG answered No to all 3 questions – Excluded

Risk Assessment – Part II

5. Within the past month, has the CG …

- Felt overwhelmed?
- Felt angry or frustrated as a result of your caregiving?
- Felt cut off from friends and family?
- Had crying spells or felt like you often needed to cry?
- CG rates their current level of stress on a scale of 1 to 10, with 1 being "not stressful" to 10 being "extremely stressful." Is the score 6 or higher?
- CG rates their current health compared to 1 year ago as "Better," "the Same," or "Worse." Did the CG rate her or his health as Worse?

If CG answered No to 5 or more questions – Excluded

Exceptions (potential participants who meet the criteria below should be discussed between staff members and regional leadership to resolve eligibility)

- Caregiver has provided less than 3 months of direct care
- Family member/caregiver living near-by who provides 14 hrs/week of direct care (includes weekend caregivers).

2. ***Clarify if the small group training will be between 6-12 or 8-12.***
Each small training group will ideally contain between eight (8) and twelve (12) participants. If there are fewer individuals in a particular area –especially more rural areas – the course (five sessions) will still be held with a minimum of 6 participants.

Other groups Down Syndrome Concerns do you have families now

3. ***Clarify if outreach to more families would be possible during the contract year.***
If more families indicate that they are interested in and qualify for participation in CarePRO additional sessions will be added as needed and possible during the contract year.

4. ***Since CarePRO is a current program, clarify what data has been collected to date to show its effectiveness, and briefly state any output and outcome data that has been collected and analyzed.***
Dr. David Coon and his colleagues at Arizona State University and Cleveland Clinic conducted thorough pre- and post-assessments with CarePRO participants, using standardized measurements that included caregiver burden, stress and depression as well as other quality of life indicators for both the Caregiver and the Care Recipient.

For the CarePRO ADSSP project, 447 caregivers in Arizona and 215 in Nevada were enrolled, for a total of over 660 caregivers. Pre-post analyses demonstrated that CarePRO's combination of skill building workshops and telephone coach calls produced significant improvement on the key outcomes identified as well as numerous other outcomes. The findings below providing evidence of CarePRO's effectiveness both in terms of statistical significance (p's < .001) as well as a range of very respectable effect sizes (from .23 - .66). Analyses include those who placed their loved ones in a long term care facility or whose loved ones had died, since many CarePRO skills (e.g., stress management, challenging unhelpful thinking, increasing simple everyday pleasant events, and effective communication skills) are applicable to life in general. Moreover, the numbers of caregivers reporting placement or bereavement was relatively small and removing them from the analyses produced no substantive differences in the findings. Findings were similar across both states.
Analyses conducted on the entire sample of participants completing follow-up interviews immediately after the intensive phase of the intervention (after completion of the 5 group workshop meetings and 5 coach calls) yielded the following in terms of statistically significant improvements in key outcomes: 1) *reductions* in depressive symptoms, bother/upset associated with care recipient memory and behavior problems, use of negative coping strategies, and negative interactions with others in the caregiver's social support system; as well as 2) *increases* in caregiver use of positive coping strategies and caregiver satisfaction with received social support. A variety of other quality of life indicators were also measured. These analyses yielded a number of other significant findings (p's <.001) including *reductions* in overall memory and behavior problems, as well as *increases* in caregiver physical health indicators, leisure time satisfaction, positive aspects of caregiving, self-efficacy for caregiving, caregiver preparedness, and knowledge of formal care services. They also examined the maintenance of these gains over time and provided 2 additional coach calls before a 6 month evaluation and another coach call before a 12 month evaluation. Follow-up assessments at both 6 and 12 months showed improvements in most outcomes were maintained.

In terms of acceptability, well over 95% of CarePRO participants described not only overall benefit from their CarePRO participation, but also specific benefits in terms of an increased understanding of memory loss and its effects on people; more confidence in dealing with their loved one's problems; making their lives easier; and enhancing their ability to provide care. Close to 90% also felt CarePRO helped improve their loved one's life.

5. ***Clarify if outreach to disability organizations will be a part of this project and to whom.***
Outreach to disability organizations will be an essential part of this project as stated on page 9 of the proposal. Outreach will be done thorough organizations that provide services to individuals with developmental disabilities and work with ADDPC as listed on the resources and links section of the website. In addition, we will work with local educational institutions (U of A – UCEDD and NAU – Institute for Human Development) that have departments that specialize in providing services to individuals with developmental disabilities.

6. ***Clarify how recruitment, selection and commitment will be conducted. What will occur if a person is no longer able to commit? How will barriers be addressed?***
As described in the response to question one staff members of the Alzheimer's Association Desert Southwest Chapter will contact the care partner and share an overview of the program, objectives and curriculum, including clarifying that there will be five group sessions over a ten week period with five individual coach calls on alternating weeks with the eligibility criteria of being a caregiver of a family member that has a developmental disability as their primary medical issue, coupled with dementia as a secondary medical issue The purpose of this phone screening is to determine if the program is appropriate for the caregiver and if they understand the time commitment and agrees to fully participate. Acceptance into the program comes at the conclusion of this screening based on the care partner meeting the eligibility criteria in the screening.

If a caregiver misses a session then makeup sessions are available one-on-one with staff members at a time that is agreed on by both. These make-up sessions can be done in person or by phone. Participants are encouraged to attend as many regularly scheduled sessions as possible and overall past classes have less than an 11% dropout rate – an extremely low drop out level for a community based intervention of this length.

Other barriers such as respite care for care recipients will be addressed and supported through staff connection with respite providers and if necessary scholarships can be provided to pay for respite care. Workshops will be held in building that are accessible and on major bus or light rail lines to support full access to the sites. Carpool arrangements can be coordinated among participants. Workshops will be held during various times to allow for caregivers who work to participate in some series of workshops, Workshops can/will be held in Spanish if there is a need and a group of six or more participants. Workshops are designed so that individuals who have difficulty reading workbook materials because of literacy concerns or who may be blind can still participate fully.

This program is most successful when individuals participate fully in all group sessions and coach calls so staff members work hard to support the elimination of any barriers a caregiver may have to participation. If despite all efforts to support Caregivers in continuing with the workshops to completion and a Caregiver drops out; they will then be offered a full array of programs and services offered through the Alzheimer's Association Desert Southwest Chapter for continued ongoing support.

8. ***It appears only two staff have knowledge and expertise in issues that affect persons with developmental disabilities. Clarify who and what will be the oversight of other staff that have limited or no expertise on issues that impact persons with developmental disabilities.***

While only Cindy Vargo and Brett Petersen have extensive experience working with individuals with developmental disabilities and their families through nonprofits serving this population, the other staff members also have experience providing programs and services to individuals with developmental disabilities and intellectual disabilities.

Kelly Raach provided programs and services within an assisted living environment that included individuals with developmental disabilities for several years; Meg Fenzi provided counseling and senior services to individuals with developmental disabilities as well as the general population and Mindy Wakefield provided services within an assisted living environment that included individuals with developmental disabilities in Oregon. In addition, Cindy Vargo, Meg Fenzi and Kelly Raach all provided the ADDPC funded education classes last year on *Alzheimer's disease and Intellectual and Developmental Disabilities* to both professional support staff and family caregivers throughout Arizona.

It is anticipated that Cindy Vargo and Brett Petersen will take lead roles in working with all other staff members to ensure that they are educated in the unique challenges that often occur for families who are caring for individuals with developmental disability as their primary medical issue, coupled with dementia as a secondary medical issue. This will be done through training sessions, mentoring and shadowing at both initial workshops and coach call sessions and opportunities for staffing sessions after each workshop and coach call.

9. ***Recalculate Personnel and Fringe Benefits, as projected staff hours do not add up to 1396 hours. The ADDPC prefers personnel hours to be calculated as follows: Person Identified, Salary x Time to be spent on program as either hours or %, x number of months assigned to project.***

SEE ATTACHED PAGES 7 and 8

7. ***Provide a timeline for a full 12 month period.***

Timeline of Major Activities

Activity	Dec 14	Jan 15	Feb 15	Mar 15	Apr 15	May 15	June 15	July 15	Aug 15	Sep 15	Oct 15	Nov 15
Comply with Initial ADDPC contract requirements (contracts, background checks, etc.)	x											
Development/finalization of learning objectives and workshop materials	x											
Develop Partnerships w/ DD organizations	x	x	x	x	x	x	x	x	x	x		
Set dates for workshops and secure locations	x		x		x		x					
Develop outreach plan develop materials	x	x	x	x								
Implement outreach	x	x	x	x	x	x	x					
Screen Participants		x	x	x	x	x	x					
Assemble notebooks		x		x		x	x					
Send reminders to participants	x		x		x	x	x					
Train Co-facilitators	x	x										
Before each workshop finalize training materials (including revisions)	x	x	x	x	x	x	x					
Pre-workshop evaluations administered to participants		x		x		x	x					
Hold Workshops		x	x	x	x	x	x	x				
Provide Coach calls		x	x	x	x	x	x	x				
Ensure participants have info. for follow-up svcs.			x		x		x	x				
Review, compile and analyze evaluations			x		x		x	x	x			
Modify training if necessary			x			x	x	x	x			
Create reports and send to ADDPC		x	x		x			x			x	x
Administer evaluations - Ongoing after each workshop; 30 days and 3 months				x	x	x	x	x	x	x	x	
Work with families after workshops end or dropout - ongoing		x	x	x	x	x	x	x	x	x	x	x

Budget Request Form

Contractor Name Alzheimer's Association Desert Southwest Chapter

Contractor Address 1028 E McDowell Road, Phoenix Arizona 85006
Street Address City State Zip

Project Name CarePRO for Family Caregivers of Individuals with Developmental Disabilities

Budget Category	Requested ADDPC Funds	Non-Federal Cash Match	Non-Federal In-Kind Match	Total Program Cost
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Fringe Benefits	9,730	2,435	0	12,165
Supplies / Operating Expenses		850	0	850
Travel	0	280	0	280
Rent or Cost of Space	0	2,380	0	2,380
Contracted Services / Professional Services	0	0	0	0
Administrative / Indirect Costs	0	0	0	0
Total Costs	40,840	13,720	0	54,560

It is understood that Non-Federal Funds identified in this budget will be used to match only ADDPC Federal Funds, and will not be used to match any other Federal Funds during the period of the ADDPC funded Project.

Additional Description and background information shall be included as a budget narrative, including the match. The contractor agrees to submit additional background information to the ADDPC upon request.

Deborah B Schaus

Name of Certifying Official

Executive Director

Title of Certifying Official

602-528-0545 deborah.schaus@alz.org

Phone e-mail

BUDGET NARRATIVE

Budget justifications detail is provided for each expense line item, both for funds requested and for match.

Personnel / Salaries = $38,885 total; $31,110 Requested Funds, $7,775 Match

A total of 1,396 staff hours or 0.67 FTE (Full Time Equivalent) for direct project support is proposed, as follows:

Position	Name	Hours	% FTE
Central AZ Regional Director / Project Lead	Cindy Vargo	168 hours	.081 FTE
Central AZ Program Manager	Mindy Wakefield	195 hours	.094 FTE
Northern AZ Regional Director	Meg Fenzi	316 hours	.152 FTE
Southern AZ Regional Director	Kelly Raach	317 hours	.152 FTE
Family Care Consultant	Brett Petersen	400 hours	.192 FTE
Total		1,396 hours	.67 FTE

Fringe Benefits = $12,165 total; $9,730 Requested Funds, $2,435 Match

ERE (Employee Related Expenses) are pro-rated for both requested funds and match for the staff positions noted above. This includes employer paid health plan, 401k plan, payroll taxes, etc. The benefits package for all employees is approved by the Board of Directors annually.

Supplies / Operating Expenses = $850 total; $0 Requested Funds, $850 Match

- Snacks/Water for workshop participants: 4 workshops @ $10.00 = $40.00
- Notebooks and materials for workshop participants: 44 participants @ $15. = $660
- Office / program supplies: pens, flip charts, paper, etc. = $150

Travel: = $280 total; $0 Requested Funds, $280 Match

A total of 629 miles of travel from the Chapter's offices to the workshop locations is included in the budget at the Arizona Accounting Manual personal vehicle mileage reimbursement rate of $0.445 per mile (effective 11/15/06). This includes travel of all staff to workshops in Phoenix, Prescott and Tucson areas, as well as all four project staff driving to do any outreach in their respective regions.

Rent or Cost of Space = $2,380 total; $0 Requested Funds, $2,380 Match

Projected cost of $2,380 is projected for pro-rated office occupancy space for .67 FTE.

Please feel free to contact me directly, 602-528-0545 or cvargo@alz.org, with any additional questions or concerns about our application for funding. Thank you for this opportunity to share additional information and clarify our proposal.

Sincerely,

Cindy Vargo
Central Region Director

B. Executive Summary

CarePRO for Caregivers of Individuals with Alzheimer's Disease and Developmental Disabilities

The number of older adults with a developmental or intellectual disability affected by dementia is growing posing a significant challenge to families, friends and provider agencies concerned with supports and services. Although the research community is making strides in better understanding the causal and evolutionary factors leading to the onset of Alzheimer's disease and related dementias, the community still remains challenged with the 'here and now' of offering effective useful daily supports and care.

Many adults with developmental disabilities live in community settings, either independently or with support from families, friends and service providers; but with advanced age, they often experience age-related conditions and diseases, including dementia. Community service providers are facing a 'graying' of their service population, many of whom are affected by cognitive decline and Alzheimer's disease. Most often support providers are not prepared to address the challenge of providing effective and financially viable daily supports or long-term care requiring individuals to live with parents or siblings. While we often hear about the benefits of consumer-directed homecare, this model presumes that the individual's family caregivers are in a position to direct the care. Those aging with developmental disabilities may find themselves at risk under this approach, because neither they nor their families may be in a position to take on the responsibility of care management. More often than not the parent or sibling who takes on the responsibility of caring for a loved one with dementia and a developmental disability is unprepared for the unique challenges that lie ahead as the disease progresses. This creates a stressful and dangerous situation for both the individual with dementia and the caregiver.

The Alzheimer's Association Desert Southwest Chapter is requesting $40,840 to provide a new and effective intervention for caregivers. CarePRO is an evidence-based 10 session psycho educational skill building group based intervention for family caregivers. The Alzheimer's Association proposes to provide four (4) CarePRO workshop waves targeting for participation family members who are providing care and support for individuals who have both Alzheimer's disease and developmental disabilities.

CarePRO is designed to enable family members who are caring for loved ones with Alzheimer's disease at home to develop and use practical new skills to improve their ability to cope with the extreme stresses of caregiving resulting in enhanced physical health and emotional well being for both the caregiver and the individual with Alzheimer's, enabling people with dementia to remain at home longer. The workshops will be led by staff members of the Alzheimer's Association who have experience working with individuals with developmental disabilities and extensive knowledge of Alzheimer's disease and its progression. Workshops will be held in the Phoenix, Prescott and Tucson areas.

how to measu

C. Methodology

Section I: Eligibility and Availability of Funds

Eligibility

The Alzheimer's Association Desert Southwest Chapter, a nonprofit organization, has experience in the following categories:

c. Working with parents that want to learn or increase their self-advocacy skills, or to increase their knowledge or skills on particular developmental disability topics.

d. Working with community stakeholders that provide support and training to persons with developmental disabilities and their families.

e. Developing and/or using existing curriculum that is a best practice.

f. Providing training on multiple topics, in various formats, and the ability to conduct evaluation to track output and outcome measurements.

Though community workshops, education classes, support groups and family care consultation services (case management) staff members at the Alzheimer's Association work with parents, siblings and support care staff members of individuals with developmental and intellectual disabilities by providing information, emotional support, skill building and education related to caring for a loved one with dementia. In addition the Alzheimer's Association has recently successfully completed a grant from the Arizona Developmental Disabilities Council to provide education and training to support coordinators and family members about the connection between Alzheimer's disease and Down syndrome. These workshops were held in multiple locations throughout the state of Arizona with more than 175 participants in attendance.

The program we are asking to be funded in this proposal is called CarePRO. CarePRO is a unique evidence-based program designed to enable family members who are caring for loved ones with Alzheimer's disease at home to develop and use practical new skills to improve their ability to cope with the extreme stresses of caregiving. This will result in enhanced physical health and emotional well being for both the caregiver and the individual with Alzheimer's, enabling the person with dementia to remain at home longer.

The Alzheimer's Association Desert Southwest Chapter was involved as CarePRO was developed and tested through funding awards from the federal Administration on Aging to the States of Nevada and Arizona, as part of its initiative for evidence-based models for support of caregivers of people with Alzheimer's disease. These federal grants enabled CarePROs' current community-based service delivery design to be adapted from a more limited research-focused model of a psycho-educational intervention. We were very involved in the collection of data involving the output and outcome measurements for this federally funded project and were the only group to actually deliver the program components to participants.

CarePRO consists of an intensive 10-week series of peer support, education, skill building and practice, and follow-up counseling. Small groups of six to 12 caregivers who are exhibiting signs of stress are served in each CarePRO series. Each series

includes five group education sessions conducted every other week for about three hours by pairs of Alzheimer's Association's social service professional staff. During the alternating weeks, individual "coach calls" are conducted by staff with each caregiver to provide follow-up, personal coaching on how to implement the skills learned in class in their home situation and discussion of home skills practice experiences. Follow-up is then conducted periodically after the completion of the series, to reinforce continuation of the skills and new practices learned.

Good

Availability of Funds

The Alzheimer's Association Desert Southwest Chapter proposes to provide four (4), 10 week sessions on Alzheimer's disease and Developmental Disabilities for a minimum of 44 participants under the above Goal and Objectives of the Arizona Developmental Disabilities Planning Council. The total amount of funding requested by the Alzheimer's Association Desert Southwest Chapter is $40,480.

Participants must be caregiver for a person w/ DD not just children

Section II. – Purpose and Objectives addressed by proposed program

The proposed CarePRO workshops are aligned with the Council's 5 Year State Plan Goal for Information Sharing through the following objectives:

Objective 3: Provide reliable information on a variety of topics that are important to persons with developmental disabilities, their families, and persons who support them.

Objective 4: Provide information, education, and support to underserved populations to increase their access to services and supports and promote community inclusion.

Program Description & Components:

6-12 or 8-12. Clarify

CarePRO consists of an intensive 10-week series of peer support, education, skill building and follow-up counseling. Small groups of eight to 12 caregivers who are exhibiting signs of stress are served in each CarePRO series. Each series includes five group education sessions that are conducted every other week for about three hours each by pairs of the Alzheimer's Association's professional staff. During the alternating weeks, individual "coach calls" are conducted by staff with each caregiver to provide follow-up and home practice of the specific skills learned in the last session. Follow-up is also conducted periodically after the completion of the series, to reinforce continuation of the skills and new practices learned.

Through the program's group sessions and coach calls, CarePRO participants learn and use information and skills that include:

- Overview of dementia, course of illness and caregiving
- Identifying sources of frustration and stress in caregiving for a loved one with memory loss
- Finding ways for caregivers to take care of themselves
- Understanding the importance of relaxation; relaxation exercises
- Keys to understanding difficult and challenging behaviors; developing individual management plans for triggers, behaviors and responses
- Identifying and changing unhelpful thoughts; developing assertive communication style
- Communicating with someone with memory loss

- Identifying and monitoring moods; identifying shared pleasant events
- Planning for the future

Caring for an individual with a chronic disease, such as Alzheimer's disease and related dementia, leaves little time or energy for self-care especially if the individual also has a developmental or intellectual disability. The multiple tasks performed by caregivers many times cause them to neglect nutrition, exercise, socialization, and sleep. The chronic stress of caring for someone can lead to high blood pressure, diabetes and a compromised immune system. In severe cases, caregivers can take on the symptoms of the person that they care for. For example, a person caring for someone with dementia may develop progressive memory loss. Worse still, this syndrome can lead to premature death. Elderly caregivers are at a 63 percent higher risk of mortality than non-caregivers in the same age group, according to a study by University of Pittsburgh researchers Richard Schulz and Scott Beach reported in the Journal of the American Medical Association in December 1999.

One study of women caring for people with physical or mental disabilities found that caregivers with high levels of subjective burden were less likely to eat balanced diets, exercise, and participate in stress management and health-promoting activities. Another study of women caregivers found that almost two-thirds had experienced at least one chronic physical symptom. A third study of Latinas caring for family members documented very high levels of chronic physical health problems and affective disorders (Land H, Hudson SM. (Abst 107.6), May 4-7, 1997).

Parents of individuals with Down syndrome are often significantly older that other parents of children the same age. Often one or both may be dealing with other aging issues including physical disabilities, chronic illnesses or even dementia.

The target audience for participation in this program is family caregivers who are caring for an individual who has both developmental or intellectual disabilities and Alzheimer's disease or related dementia. This multi-week stress and depression management intervention program for caregivers of individuals who have both Alzheimer's disease and intellectual disabilities will address underlying behavioral health issues such as depression, anxiety and anger that contribute to the development of multiple chronic illnesses such as diabetes, heart disease, substance abuse, hypertension and other related diseases in caregivers. Participation will allow caregivers to increase their knowledge and access to services and supports, promote community inclusion and increase their ability to become an effective advocate for needed services.

44 persons to take

Section III – Tasks

1. Applicants shall detail proposed activities that are evidence based and/or a best practice model, targeting self-advocates, family members, and/or stakeholders in the community seeking to increase/improve their knowledge and skills in advocacy efforts, or to increase/improve their knowledge and skills on topics that are of importance to the developmental disability community.

Dementia has a devastating impact on all people – including people with an intellectual or developmental disability and their friends and families who may be involved with them as advocates and caregivers. It is important for family members and/or providers to recognize signs of dementia-related cognitive decline early on so that adults at-risk can be identified when early signs of mild cognitive impairment (MCI) or dementia first appear. Many times family members become the primary lifetime caregivers for adults with a developmental or intellectual disability. When Alzheimer's disease and related dementias occur, they are particularly affected and need additional types of supports. Family members who need information not only include parents, but also siblings and other relatives. Many families are at a loss on how to provide extensive care at home once dementia becomes pronounced and often care demands overwhelm them. They many times are confused about how to support individuals who have new and more demanding care needs. Research has shown that community-based models of care for adults with a developmental or intellectual disability and dementia living at home can be viable and are gaining preference for all individuals affected by Alzheimer's disease and other related dementias.

The institutionalization of adults with a developmental disability and dementia is opposite to the field's core beliefs and commitments to care practices; the use of long-term care facilities or other types of institutionalization can have very negative effect on persons' lifespan and quality of life including individuals with dementia. Information and education related to dementia care is needed to enhance the capabilities of family members. Education and training to raise awareness of dementia and how it affects adults with a developmental or intellectual disability is needed by all caregivers. The Alzheimer's Association recognizes there is a great need for more information to be provided relating to age-associated cognitive decline and dementia especially about how this information applies to people with an intellectual or developmental disability and the impact on families, friends, advocates and even care providers.

Dementia is a term that characterizes the progressive loss of brain function that occurs with certain neuropathological diseases or trauma and is often associated with aging. For this proposal we are only referring to non-reversible dementia that is progressive. It is marked by memory disorders, personality and behavioral changes, and impaired reasoning. Alzheimer's disease is the most prevalent type of dementia, associated with some two-thirds of all instances of dementia. Dementia related to a brain disease, such as Alzheimer's, generally has a progressive nature so that over time the individual affected continually loses more cognitive and functional skills and eventually is totally unable to function independently. The result is debilitation and death. This disease is the sixth leading cause of death in the United States. Of this number more than 200,000 affected adults are under the age of 65. In the United States, it is generally acknowledged that although persons with an intellectual disability are affected by dementia to the same degree as other adults in the general population some may be affected earlier and at a greater rate especially those who have experienced traumatic brain injuries. There are many causes of intellectual and developmental disabilities, some genetic, some hereditary, and some social or environmental. Among the genetic causes, Down syndrome is the one most commonly associated with dementia as adults

with Down syndrome are at much higher risk of Alzheimer's disease and generally manifest early onset of dementia. For adults with Down syndrome, studies show that at least 25% will be affected with dementia before age 40 and at least 50 to 70% will be affected with dementia by age 60. Some researchers believe that almost 100% of all individuals with Down syndrome will show some signs of dementia by age 60.

Because of this high prevalence for a significant portion of individuals with intellectual and developmental disabilities plus the lack of knowledge about Alzheimer's disease and the challenges it presents, workshops like CarePRO through the Alzheimer's Association are needed to help families effectively continue to provide appropriate in home supports for individuals who have dementia. They help families understand and implement effective behavioral and communication skills and techniques which are the foundation for effective quality support needed by people with an intellectual or developmental disabilities affected by dementia. Because CarePRO is an evidence-based program we know that it is effective in enabling family members who are caring for loved ones with Alzheimer's disease at home to develop and use practical new skills and it has been proven to improve their ability to cope with the extreme stresses of caregiving.

Through the CarePRO program caregiver participants learn to adopt a care philosophy that promotes quality of life and affirms that individual strengths guide decision-making even when the individual has dementia. They learn that even though the individual with dementia has diminishing ability to make decisions that they need to involve them in planning and service decisions. Participants also develop knowledge of resources and supports offered in the community and how to access these supports. Caregivers learn to understand the stresses and depression related to caregiving and are supported in developing new skills and knowledge to cope effectively and plan for disease progression of their loved one instead of crisis decision-making. This program provides education and training to caregivers to support them in developing individualized care plans and assistance in securing helpful community resources. By positively impacting caregiver stress, we not only improve the physical well being of caregivers but also enhance their capabilities to provide quality care for their loved ones with Alzheimer's disease improving their quality of life.

2. Applicants shall have the ability and capacity to target areas of state that normally are not represented. Various outreach methods shall be described with emphasis on reaching underserved/unserved populations.

Proposed Workshop Schedule

Location	Date	Length	Workshop Audience
Greater Phoenix Area	11/14– 1/15	10 weeks 5 – 2 ½ hr class sessions 5 – approx 1 hr coach call sessions	Parents, siblings and Friends providing caregiving for individuals with intellectual or Developmental Disabilities And dementia

Greater Phoenix Area	4/15 – 6/15	10 weeks 5 – 2 ½ hr class sessions 5 – approx 1 hr coach call sessions	Parents, siblings and Friends providing caregiving for individuals with intellectual or Developmental Disabilities And dementia
Greater Prescott Area	2/15 – 4/15	10 weeks 5 – 2 ½ hr class sessions 5 – approx 1 hr coach call sessions	Parents, siblings and Friends providing caregiving for individuals with intellectual or Developmental Disabilities And dementia
Greater Tucson Area	2/15 – 4/15	10 weeks 5 – 2 ½ hr class sessions 5 – approx 1 hr coach call sessions	Parents, siblings and Friends providing caregiving for individuals with intellectual or Developmental Disabilities And dementia

Our current relationships and collaborations will continue to support our efforts to reach out to diverse and underserved populations. We will continue to work closely with the community-based aging services network including Area Agencies on Aging (statewide); assisted living and care facilities; elder law and health care providers; the faith community and other nonprofits who provide services to specific underserved communities (DUET, Jewish Community Services, Foundation for Senior Living Adult Day Services, Gompers Habilitation Center); with state, local and city agencies and departments (Department of Ecomomic Services – Aging and DDD services, ASU, UofA, City senior services) and consumer rights organizations (ABIL, Arizona Commission for the Deaf and Hard of Hearing,One Voice). We realize the importance and benefits of partnering and collaborating with other organizations in order to provide quality programs and services to all segments of the population. We will continue to reach out to individual providers who support individuals with I/DD, nonprofit organizations that provide family support programs for individuals with I/DD and other organizations that serve the community of persons with disabilities, their families and support staff.

Outreach will be done through a variety of formats including information on websites, emails, direct mail, newspaper, fliers and most importantly directly working with those organizations that provide services to individuals with developmental and intellectual disabilities.

3. Applicant shall develop and implement activities that are culturally, linguistically responsive, age appropriate and sensitive to the persons they will serve.

Cultural differences often influence acceptance of Alzheimer's disease and related dementia diagnosis and the caregiving role, as well as perceptions regarding the

availability, accessibility, and acceptability of culturally competent services. Both the scientific and practice literatures (e.g., Coon, Gallagher-Thompson & Thompson, 2003; Coon et al., 2004; Haley et al., 2004; Yeo & Gallagher-Thompson, 2006), as well as findings from previous Arizona Alzheimer's Disease Demonstration Grants to States (ADDGS) projects, have shown that ethnic minority caregivers often value self-responsibility and familial commitment, and are more likely to attempt to provide care for their loved ones themselves. Furthermore, research suggests that service use also varies by caregiver gender, a finding that may become increasingly important as more men assume caregiving roles. Though a number of effective outreach strategies have been identified to help increase the accessibility and acceptability of interventions for underserved family caregivers (e.g., Arean et al., 2003; Gallagher-Thompson et al., 2004; Gallagher-Thompson et al., 2003), these differences among family caregivers create both challenges and opportunities for the aging network and community-based organizations as they attempt to expand their efforts to offer culturally competent and cost effective services (Coon, Ory, et al., 2003).

Interventions identified through rigorous research trials such as CarePRO have proven to be effective with diverse groups of caregivers. CarePRO is an evidence-based treatment (EBT) for family caregivers and was designed by adapting previous similar models, in cost effective ways, to meet the needs of family caregivers and the growing numbers of individuals that receive home based care throughout Arizona's communities, while at the same time remaining faithful in its delivery of core components proven to be effective with diverse populations.

4. Applicants shall have the ability to partner with other community stakeholders that will support the ADDPC Objectives. Applicants must describe these partnerships and how they will support the proposed project. As part of developing community partnerships, each funded applicant shall agree to meet bi-annually with other funded applicants to share their program, best practices and lessons learned.

Minimally the proposed partners for the project include:

- Arizona Department of Economic Security
  - Department of Aging Services
  - Division of Developmental Disabilities
- Arizona Developmental Disabilities Planning Council
- Southern Arizona Network for Down Syndrome
- Arizona Bridge to Independent Living
- Service Providers throughout Arizona that have Senior Day programs
- ACUMEN

As a member of the aging care network in Arizona for more than 30 years, the Alzheimer's Association has established a strong and positive reputation of providing the unique services and supports for individuals and families who are dealing with the challenging effects of Alzheimer's disease. That reputation extends to our desire and follow-through in collaboration with other agencies and programs within every segment of all communities we serve. We have an active volunteer speaker's bureau that uses speakers from many of these organizations who are experts on various topics related to

Alzheimer's disease. We receive funding and value our successful partnerships with many local cities in designing ways to provide needed supports for their residents with Alzheimer's disease. In addition, we partner with governmental and other nonprofit organizations throughout the state

5. Applicants shall describe how the chosen strategies and implemented activities are part of an ongoing and comprehensive program for participants for the duration of the contract period.

The following chart maps out weekly workshop topics, activities and coach call sessions for each participant as well as the final evaluation schedule. These strategies for skill development and support have been proven to be effective in achieving the desired outcomes. In addition through participation in these workshops participants will receive:

1. *Ongoing training and technical assistance,*
2. *Assistance to reduce or eliminate barriers to quality medical and support services for the individual with dementia,*
3. *Support to connect with and in collaborating and coordinating care services and support from other agencies and community organizations*
4. *Learn how to advocate assertively for needed services and programs for their loved one with dementia*
5. *And within the CarePRO workshop group share resources and develop additional knowledge of available resources from all segments of the community that every participant interacts with*

Week/Session	Basic Components	Target
Week One Group Session 1	• Knowledge of Dementia • Introduce the relationship between stress and well-being. • Relaxation Technique – Signal Breath	Bring together primary caregivers to help educate basics about dementia; increase awareness of the relationship between stress and well-being; simple relaxation technique.
Week Two Telephone Coach Session 1	• Q&A on Dementia • Reinforce Relaxation Practice	Reinforce need for practice to sustain change. Focus on relaxation technique.
Week Three Group Session 2	• Dealing with Difficult Behaviors • Effective communication with family and service providers • Relaxation Exercise – Stretching	Increase awareness of why behavior occurs. Teach 2 basic problem solving strategies to handle behavior problems.
Week Four Telephone Coach Session 2	• Q&A on Behavior Management • Reinforce Relaxation Practice	Reinforce need for practice to sustain change. Focus relaxation and behavioral management skills.

Week Five Group Session 3	• Dealing with reactions to difficult behaviors • Introduce 5 IDEAL steps to assertive communication • Relaxation Technique – Listening to Music	Learn a simple approach to evaluate reaction to difficult behaviors. Learn three types of communication styles and practice assertive communication skills.
Week Six Telephone Coach Session 3	• Q&A with IDEAL communication style • Reinforce Relaxation Practice	Reinforce need for practice to sustain change. Focus relaxation and mood management skills.
Week Seven Group Session 4	• Changing unhelpful thoughts • Mood Management • Identifying pleasant events	Learn to identify three key steps to changing unhelpful thoughts. Learn to recognize how one's own unhelpful thinking can affect and fuel behavior. Learn to identify and engage in simple pleasurable activities to reduce stress and distress.
Week Eight Telephone Coach Session 4	• Q&A on Mood Management • Review identified pleasant events	Reinforce need for practice to sustain change. Focus on mood management skills.
Week Nine Group Session 5	• Planning for the Future and Referral to Appropriate Programs and Services • Review of Program Skills	Increase knowledge of options and referrals for patient care and self-care. Review and reinforcement of Program's Key Skills.
Week Ten Telephone Coach Session 5	• Q&A on planning for future and referrals • Review key program skills	Reinforce need for practice to sustain change. Review overall program skills. Community resource information - resource manual listing including web pages and related materials
Week Fourteen and Twenty-two NOTE: There are 2 additional coach/evaluation calls between 30 days and 3 months.	• Check in on key stressors • Review skills as needed	Reinforce skill use to sustain change. Referrals as appropriate.

6. Applicants shall describe their efforts to develop and administer ADDPC's evaluation survey's and how data will be collected, analyzed and used to make changes in any part of program design or implementation.

Multiple evaluation tools will be used before and after the CarePRO program. Samples of the evaluation forms are included after the timeline section of this proposal packet. The summative outcomes will be measured using a pre-post evaluation methodology with data gathered by Central Arizona Program Manager for all workshop sessions.

Survey #1 (Short Term Outcome Post Survey) will be administered to 100% of participants immediately after the training; Survey #2 (Intermediate Term Outcome Post Survey) will be administered to 30% of participants 3 months after the last training session for each individual; and Survey #3 (AIDD Consumer Satisfaction Survey) will be administered to 100% of participants with results documented before the last narrative report is due to ADDPC.

In addition, the Alzheimer's Association uses the Core Services Quality Evaluation Initiative (CSQEI) nationally designed survey evaluation forms for educational workshops. These are standardized self-report surveys with a five-part Likert scale (strongly disagree, disagree, not sure, agree, strongly agree) to measure both client satisfaction and perceived outcomes for each education program and conference. Evaluations are given after each education session and at the end of a workshop series such as CarePRO. After evaluations are collected they are analyzed and information is used to make any modifications, revisions or additions in program delivery or content as needed to best meet participant needs.

The survey includes the following questions:

- Overall, I was satisfied with this program;
- I would recommend this program to others;
- The presenter was effective; I learned something new;
- I learned something I can use;
- My knowledge and skills have been enhanced so I can better help the person with dementia;
- My knowledge and skills have been enhanced so I can better maintain my own physical and emotional health;
- The program met my needs;
- The facilities and workshop location met my needs;
- What did you like best about this program? (open ended question);
- How could we improve this program? (open ended question)

In addition there is a separate evaluation survey that asks demographic questions such as gender, age, city, your relationship to person with dementia and race/ethnicity to capture the type of participants at the workshop (see sample). No names on evaluation forms.

The total number of participants that participate in each workshop will be tracked and reported along with a graphic chart that shows participant increase in knowledge and skills (survey 1), use of those knowledge and skills (Survey 2) and consumer satisfaction (survey 3) in addition to quarterly narrative reports

Section IV – Strategies

Through participation in CarePRO workshops participants will receive:

1. *Ongoing training and technical assistance*
   Each series includes five group education sessions that are conducted every other week for about three hours each by pairs of the Alzheimer's Association's

professional staff. During the alternating weeks, individual "coach calls" are conducted by staff with each caregiver to provide follow-up and home practice of the specific skills learned in the last session. Follow-up is also conducted periodically after the completion of the series, to reinforce continuation of the skills and new practices learned.

2. *Assistance to reduce or eliminate barriers to quality medical and support services for the individual with dementia and to implementation of class skill instruction:* During the alternating weeks, individual "coach calls" are conducted by staff with each caregiver to provide follow-up and home practice of the specific skills learned in the last session. Follow-up is also conducted periodically after the completion of the series, to reinforce continuation of the skills and new practices learned. During coach calls and follow-up participants are connected with community programs and services that are needed for both the caregiver and the individual with dementia. The Family Care Consultant coaches the caregiver in accessing the needed services by empowering them with appropriate questions and supports in assertive communication skills.

3. *Be connected with and supported in collaborating and coordinating care services and support from other agencies and community organizations*
Through the extensive collaborative network that the Alzheimer's Association has developed in the past 30+ years we are able to connect families with services and programs in every area of the community and that meet the varying cultural and unique needs of families.

4. *Learn how to advocate assertively for needed services and programs for their loved one with dementia*
CarePRO helps caregivers better understand the disease and the need for them to:
   - To advocate to enhance the quality of life of persons with developmental disabilities an dementia.
   - To provide support and information to other parents and families of persons with developmental disabilities.
   - To promote the expansion of enhanced services for those living at home.
   - Advocate to ensure quality of services provided for persons with developmental disabilities.
   - Better understand their rights and the rights of their loved one with dementia and are better able to speak up if they are unhappy about how they have been treated.

Section V - Evaluation

Evaluation Narrative

1. Describe what you plan to accomplish by the end of a 12 month period and how barriers to accomplishing the Tasks and implementing the Strategies and Activities will be addressed.

The Alzheimer's Association Desert Southwest Chapter proposes to provide four (4), 10 week sessions on Alzheimer's disease and Developmental Disabilities for a minimum of 44 participants.

Proposed Workshop Schedule

Location	Date	Length	Workshop Audience
Greater Phoenix Area	11/14 – 1/15	10 weeks 5 – 2 ½ hr class sessions 5 – approx 1 hr coach call sessions	Parents, siblings, Friends providing care for individuals w/ intellectual or Developmental Disabilities and dementia
Greater Phoenix Area	4/15 – 6/15	10 weeks 5 – 2 ½ hr class sessions 5 – approx 1 hr coach call sessions	Parents, siblings, Friends providing care for individuals w/ intellectual or Developmental Disabilities and dementia
Greater Prescott Area	2/15 – 4/15	10 weeks 5 – 2 ½ hr class sessions 5 – approx 1 hr coach call sessions	Parents, siblings, Friends providing care for individuals w/ intellectual or Developmental Disabilities and dementia
Greater Tucson Area	2/15 – 4/15	10 weeks 5 – 2 ½ hr class sessions 5 – approx 1 hr coach call sessions	Parents, siblings, Friends providing care for individuals w/ intellectual or Developmental Disabilities and dementia

2. Who will conduct the evaluation for this grant, and what methods will be used to carry out distribution and collection of each evaluation survey?
   The Program Manager will be responsible to ensure that all evaluation tools are used according to their designed purpose and administered according to schedule.

   Multiple evaluation tools will be used before and after the CarePRO program. Samples of the evaluation forms are included after the timeline section of this proposal packet.
   A. The summative outcomes will be measured using a pre-post evaluation methodology with data gathered by Central Arizona Program Manager for all workshop sessions.
   B. Survey #1 (Short Term Outcome Post Survey) will be administered to 100% of participants immediately after the training before participants leave the session;
   C. Survey #2 (Intermediate Term Outcome Post Survey) will be administered to 30% of participants 3 months after the last training session for each individual by mail/email and by phone if that is more convenient for the participant;

D. and Survey #3 (AIDD Consumer Satisfaction Survey) will be administered to 100% of participants with results documented before the last narrative report is due to ADDPC this will be by mail/email and or phone.

E. Additional supporting documentation of education and training programs will be gathered through the Core Services Quality Evaluation Initiative (CSQEI) Program Evaluation survey already used by the Chapter.

3. What types of output and outcome measurements will be collected? Describe each type.

   The outputs that we will measure are:
   1) Number of program participants
   2) Number of sessions participants attended
   3) Number of participants who participated in other Alzheimer's Association services

   The first of the four outcomes, change in caregiver depressive symptoms, is symptomatological, while the other three outcomes are focused on quality of life:
   1) change in caregiver depressive symptoms
   2) change in positive/adaptive coping strategies;
   2) change in negative coping strategies;
   3) change in negative interactions in the caregiver's social support system

   by what %

   are you doi[illegible] any pre-testi[illegible] to dete[illegible] [illegible]

   The primary outcomes of symptomatology (e.g., changes in caregiver depression) and quality of life (e.g., changes in coping skills and social support components) will be measured, but also measured will be their perception outcomes of social validity (e.g., caregiver perceptions of the utility of project services, such as their ability to continue to provide care at home and their perceived ability to provide better quality care and support).
   1) ability to continue to provide care at home
   2) perceived ability to provide better quality care and support

   what tool will b[illegible] use[illegible]

4. Who will analyze the information collected?
   All evaluations will be gathered and analyzed by Central Arizona Program Manager for all workshop sessions. She will evaluate the data and put it in graph form and submit results per ADDPC required schedule. Surveys include: Survey #1 - Short Term Post Survey; Survey #2 - Intermediate Term Outcome Post Survey; Survey #3 - AIDD Consumer Satisfaction Survey; Pre and Post workshop survey and Alzheimer's Association surveys.

5. Will funding be requested to support evaluation for this project? If so, ensure costs are listed in the budget and explained in the budget narrative.
   Only funding for Alzheimer's Association program manager time to administer and analyze data for ADDPC. Extensive evaluation has been done with this intervention and it is now considered evidence-based with generally accepted outcomes from participants.

Survey #1

Short Term Outcome Post Survey

The Applicant shall utilize Survey #1 for reporting *Short Term Outcomes*: Number who report Increase in Knowledge & Skills.
Data Source is Post Survey to 100% of the participants who attended a Self-Advocacy training event.
Administered immediately after the training takes place. The data must be analyzed and presented to the ADDPC in a graphic chart thirty (30) days after the contract period ends.

Post Survey Questions: Circle the correct response

1. After this training, I feel confident that I improved my leadership and/or self-advocacy skills.
   Strongly Agree Agree Neither Disagree Strongly Disagree

2. I learned new knowledge and skills that will benefit me or my family.
   Strongly Agree Agree Neither Disagree Strongly Disagree

3. I will be able to apply new knowledge and skills to be a better advocate for myself or my family.
   Strongly Agree Agree Neither Disagree Strongly Disagree

4. I would recommend this training to other self-advocates or family members.
   Strongly Agree Agree Neither Disagree Strongly Disagree

5. The topics were understandable and attending the training was worth my time.
   Strongly Agree Agree Neither Disagree Strongly Disagree

6. What aspect of the training was most useful to you?

7. What aspect of the training was least useful to you?

8. Other comments or suggestions for improving the training?

Survey #2

Intermediate Term Outcome Post Survey

The Applicant shall utilize Survey #2 for reporting *Intermediate Term Outcomes*: Number who report using knowledge & skills.
Data Source is Participant Survey to 30% of the total number who attended a Self-Advocacy training event.
Administered three (3) months after the last training takes place. The data must be analyzed and presented to the ADDPC in a graphic chart thirty (30) days after the contract period ends.

Post Survey Questions: Circle the correct response

1. Since the training, I have used the newly acquired skills and knowledge within 3 months to make better and informed choices for myself and/or my family.
   Yes No Describe situation:

2. Since the training, I feel more confident in sharing the information with others that work with persons with developmental disabilities.
   Yes No Describe situation:

3. Since the training, I feel more confident in speaking up at a civic or community event about issues that impact a person with a developmental disability and/or their family.
   Yes No Describe situation:

4. Would you attend additional trainings offered in your community?
   Yes No

5. Consider the training topics you received three months ago. What additional topic(s) would you like to know more about?
   Describe:

Survey #3
AIDD Consumer Satisfaction Survey

The Applicant shall utilize Survey #3, the Administrative on Intellectual and Developmental Disability (AIDD) Consumer Satisfaction Survey.
Data source is participant survey to 100% of the total number who participated in any self-advocacy activity.
Administered by the Applicant. The data must be analyzed and presented to the ADDPC in a graphic chart thirty (30) days after the contract period ends.

AIDD Questions: Circle the correct response

1. Respect: I (or my family member) was treated with respect during the project activity. Yes or No
2. Choice: I (or my family member) have more choice and control as a result of project activity. Yes or No
3. Community: I (or my family member) can do more things in my community as a result of project activity. Yes or No
4. Satisfied: I am satisfied with project activity. Strongly Agree / Agree / Disagree / Strongly Disagree
5. Better Life: My life is better because of project activity. Strongly Agree / Agree / Disagree / Strongly Disagree
6. Rights: Because of this project activity, I (or my family member) know my rights. Yes or No
7. Safe: I (or my family member) are more able to be safe and protect myself from harm as a result of activity. Yes or No

alzheimer's association®

Desert Southwest Chapter

CarePRO for Family Caregivers of Individuals with Developmental Disabilities

	Strongly Disagree	Disagree	Not Sure	Agree	Strongly Agree
1. I would recommend this program to others					
2. I learned something new					
3. I learned something I can use					
4. My knowledge and skills have been enhanced so I can better help the person with dementia					
5. My knowledge and skills have been enhanced so I can better maintain my own physical and emotional health					
6. The program met my needs.					
7. The facilities and workshop location meet my needs.					

8. What did you like best about this program? (open ended question)

9. How could we improve this program? (open ended question)

DRAFT

alzheimer's association

Desert Southwest Chapter

Central Arizona Region
1028 E McDowell Rd
Phoenix, AZ 85006
602.528.0545
alz.org/dsw

Please, **DO NOT** put your name on this form, as it is anonymous. Thank You!

Education Demographics

Gender

- ☐ male
- ☐ female
- ☐ prefer not to say

Education

- ☐ some high school
- ☐ high school graduate
- ☐ some college
- ☐ bachelor degree
- ☐ post / prof degree
- ☐ prefer not to say

Race / Ethinicity

- ☐ white
- ☐ black / african american
- ☐ hispanic / latino
- ☐ hawaiian / pacific island
- ☐ am indian / alaskan native
- ☐ asian
- ☐ two or more races
- ☐ other race
- ☐ prefer not to say

Family Income

- ☐ 0 - 9,999
- ☐ 10k - 14,999
- ☐ 15k - 24,999
- ☐ 25k - 34,999
- ☐ 35k - 49,999
- ☐ 50k - 59,999
- ☐ more than 60k
- ☐ prefer not to say
- ☐ unknown

Age

- ☐ under 21
- ☐ 21 - 34
- ☐ 35 - 39
- ☐ 40 - 44
- ☐ 45 - 49
- ☐ 50 - 54
- ☐ 55 - 59
- ☐ 60 - 64
- ☐ 65 - 74
- ☐ 75 - 84
- ☐ 85+
- ☐ prefer not to say

Relationship to Person with Dementia

- ☐ spouse / partner
- ☐ daughter / son
- ☐ grandchild
- ☐ friend
- ☐ sister / brother
- ☐ in-law
- ☐ self
- ☐ professional / facility
- ☐ other:
- ☐ prefer not to say

Dementia Information

Are you:

- ☐ an individual with dementia
- ☐ a care partner

Have you, or the person you care for, been diagnosed with the following:

- ☐ alzheimer's disease
- ☐ a related dementia: _____
- ☐ no diagnosis
- ☐ prefer not to say
- ☐ unknown

If you have, please list the date of diagnosis: _____

How Did You Hear About Us?

- ☐ alz assoc program
- ☐ community org
- ☐ employer / colleague
- ☐ faith community
- ☐ friend / relative
- ☐ healthcare provider
- ☐ internet
- ☐ newspaper / magazine
- ☐ phone book
- ☐ radio
- ☐ television
- ☐ other *(specify)* _____
- ☐ prefer not to say

Location

Maricopa County

- ☐ anthem
- ☐ avondale
- ☐ buckeye
- ☐ carefree
- ☐ cave creek
- ☐ chandler
- ☐ el mirage
- ☐ fort mcdowell
- ☐ fountain hills
- ☐ gila bend
- ☐ gila river
- ☐ gilbert
- ☐ glendale
- ☐ goodyear
- ☐ guadalupe
- ☐ laveen
- ☐ litchfield park
- ☐ mesa
- ☐ new river
- ☐ paradise valley
- ☐ peoria
- ☐ phoenix
- ☐ queen creek
- ☐ rio verde
- ☐ scottsdale
- ☐ srpmic
- ☐ sun city
- ☐ sun city west
- ☐ sun lakes
- ☐ surprise
- ☐ tempe
- ☐ tolleson
- ☐ wickenburg
- ☐ youngtown

Gila County

- ☐ globe
- ☐ hayden
- ☐ miami
- ☐ payson
- ☐ san carlos
- ☐ tonto tribe

Pinal County

- ☐ ak-chin
- ☐ apache junction
- ☐ casa grande
- ☐ coolidge
- ☐ eloy
- ☐ florence
- ☐ gold canyon
- ☐ oracle
- ☐ san manual
- ☐ superior

Other

- ☐ out of region
- ☐ out of state *(specify)* _____
- ☐ out of country

Sample

DL-0912-ANOD

D. Timeline of Major Activities

Activity Type	Person Responsible	Date Completed	Type of Support Documentation
Contract Management and Project Start-up			
Comply with ADDPC contract requirements – financial/program reporting	Executive Director Finance Director CAZ Regional Dir.	As required by contract	Contract, financial reports, program reports per contract
Program Workshop Development			
Development and finalization of learning objectives and workshop materials	CAZ Regional Dir. Co-facilitators Community Partners	11/14	Materials finalized, partnerships developed, workshop locations and dates secured
Develop Partnerships	CAZ Regional Dir. Co-facilitators	Ongoing	
Set dates for workshops and secure workshop locations	CAZ Regional Dir. Co-facilitators Community Partners	11/14 - 4/15	
Outreach for participants			
Develop outreach plan, materials	CAZ Regional Dir. Co-facilitators Development Director	10/14 initial ongoing for revised;	plan developed & implemented, registration materials/developed /distributed/participants registered
Implement outreach/ register participants	CAZ Regional Dir. Co-facilitators	Ongoing start 10/14	
Workshop prep and Implementation			
Assemble notebooks	CAZ Regional Dir. Co-facilitators	Ongoing	Workshop materials assembled, co-facilitators trained, workshops held
Send reminders to participants	CAZ Regional Dir. Co-facilitators	Ongoing start 11/14	
Train Co-facilitators	CAZ Regional Dir.	10/14 and ongoing	
Finalize training materials	CAZ Regional Dir. Co-facilitators	11/14 initially ongoing for revisions	
Pre-workshop evaluations administered to participants	Program Manager	11/14 and before each workshop wave	
Hold Workshops Provide Coach calls	CAZ Regional Dir. Co-facilitators	11/14 – 5/15	⟹ time for workshops.
Ensure participants have info. for follow-up	CAZ Regional Dir. Co-facilitators	Ongoing at workshops	

services			
Post Workshop			
• Review, compile and analyze evaluations	• CAZ Regional Director • Program Manager	Ongoing after each workshop; 30 days and 3 months	Evaluations reviewed, materials modified as necessary for next workshop
• Create reports for ADDPC	• Program Manager	As required	
• Modify training if necessary	• CAZ Regional Director • Co-facilitators	Ongoing after each workshop	

BUDGET SUMMARY

Budget Request Form

Contractor Name Alzheimer's Association Desert Southwest Chapter

Contractor Address 1028 E McDowell Road, Phoenix Arizona 85006
Street Address City State Zip

Project Name CarePRO for Family Caregivers of Individuals with Developmental Disabilities

Budget Category	Requested ADDPC Funds	Non-Federal Cash Match	Non-Federal In-Kind Match	Total Program Cost
Personnel / Salaries	31,110	7,775	0	38,885
Fringe Benefits	9,730	2,435	0	12,165
Supplies / Operating Expenses		850	0	850
Travel	0	280	0	280
Rent or Cost of Space	0	2,380	0	2,380
Contracted Services / Professional Services	0	0	0	0
Administrative / Indirect Costs	0	0	0	0
Total Costs	40,840	13,720	0	54,560

It is understood that Non-Federal Funds identified in this budget will be used to match only ADDPC Federal Funds, and will not be used to match any other Federal Funds during the period of the ADDPC funded Project.

Additional Description and background information shall be included as a budget narrative, including the match. The contractor agrees to submit additional background information to the ADDPC upon request.

Deborah B Schaus
Name of Certifying Official

Executive Director
Title of Certifying Official

602-528-0545 deborah.schaus@alz.org
Phone e-mail

BUDGET NARRATIVE

Budget justifications detail is provided for each expense line item, both for funds requested and for match.

Personnel / Salaries = $38,885 total; $31,110 Requested Funds, $7,775 Match

A total of 1,396 staff hours or 0.67 FTE (Full Time Equivalent) for direct project support is proposed, as follows:

- Central AZ Regional Director / Project Lead – Cindy Vargo – 168 hours
- Central AZ Program Manager – Mindy Wakefield – 195 hours
- Northern AZ Regional Director – Meg Fenzi – 149 hours
- Southern AZ Regional Directors – Kelly Raach – 84 hours
- Family Care Consultant – Brett Petersen – 400 hrs

The Chapter's Board of Directors' Compensation Committee periodically conducts a comprehensive wage comparison study, benchmarking the Chapter's wages to those of comparable non-profit organizations. This study was last conducted in December 2013 and the current salary ranges were adopted.

Fringe Benefits = $12,165 total; $9,730 Requested Funds, $2,435 Match

ERE (Employee Related Expenses) are pro-rated for both requested funds and match for the staff positions noted above. This includes employer paid health plan, 401k plan, payroll taxes, etc. The benefits package for all employees is approved by the Board of Directors annually.

Supplies / Operating Expenses = $850 total; $0 Requested Funds, $850 Match

- Snacks/Water for workshop participants: 4 workshops @ $10.00 = $40.00
- Notebooks and materials for workshop participants: 44 participants @ $15. = $660
- Office / program supplies: pens, flip charts, paper, etc. = $150

Travel: = $280 total; $0 Requested Funds, $280 Match

A total of 629 miles of travel from the Chapter's offices to the workshop locations is included in the budget at the Arizona Accounting Manual personal vehicle mileage reimbursement rate of $0.445 per mile (effective 11/15/06). This includes travel of all staff to workshops in Phoenix, Prescott and Tucson areas, as well as all four project staff driving to do any outreach in their respective regions.

Rent or Cost of Space = $2,380 total; $0 Requested Funds, $2,380 Match

Projected cost of $2,380 is projected for pro-rated office occupancy space for .67 FTE.

Applicants Background Information Form

Instructions: Complete each item, using attachments where necessary and label your response "**Applicants Background Information Form**". Attachments shall indicate the item number and heading being referenced as it appears below. Failure to make full and complete disclosure may result in the rejection of your application as unresponsive.

1. Contact Name for Project: Deborah B. Schaus

   Organization Name: Alzheimer's Association Desert Southwest Chapter

   Address: 1028 East McDowell Rd., Phoenix, Arizona, 85006

   Phone Number: 602-528-0545 FAX: 602-528-0546 Email: deborah.schaus@alz.org

2. The Applicant is (check the appropriate box):

	Individual		Corporation - For Profit		Limited Liability Company
	Partnership	X	Corporation - Not For Profit		Other - Please Describe:
	Limited Liability Partnership		Government Entity		

   Year Established: 1981

3. Authorized Signatory:

   (Name and Title of Authorized Signatory) is the signatory to this Contract on behalf of the Contractor and is responsible for the delivery of Contract Services during the term of this Contract.

	YES	NO
4. Has any Federal or State agency ever made a finding of noncompliance with any relevant civil rights requirements with respect to your business activities? If YES, please attach an explanation.		x
5. Has the Applicant, its major stockholders with a controlling interest, or its officers been the subject of criminal investigations or prosecutions or convicted of a felony? IF YES, please attach an explanation.		x
6. Does the Applicant have sufficient funds to meet obligations on time under the Contract while awaiting reimbursement from ADDPC? If NO, please attach an explanation.	x	
7. Have any licenses ever been denied, revoked or suspended or provisionally issued within the past five years? If YES, please attach an explanation.		x
8. Have you or has your organization terminated any contracts, had any contracts terminated, had any liquidated damages assessed or been involved in contract lawsuits? If YES, please attach an explanation.		x
9. Do you, your staff, any of your relatives, or voting members of your Board of Directors maintain any ownerships, employments, public and private affiliations or relationships which may have substantial interest (as defined in A.R.S. §38-502, Conflict of Interest) in any contract, sale, purchase, or service involving the ADDPC? If YES, please attach an explanation.		x
10. Has your organization ever gone through bankruptcy? If YES, when? Include the State, District and case number.		x

Applicants' Qualifications Questionnaire

1.The Alzheimer's Association was formed in 1979 to help those affected by Alzheimer's disease and related dementia. The nationwide mission of the Alzheimer's Association is to eliminate this devastating disease through the advancement of research, to provide and enhance care and support for all affected, and to reduce the risk of dementia through the promotion of brain health.

The Alzheimer's Association is the world's leading voluntary health organization in Alzheimer's care, support and research. We partner and collaborate with many organizations that provide support to individuals with Down Syndrome and other developmental disabilities and their families including: National Down Syndrome Society, Cleveland Clinic, Linda Crnic Institute for Down Syndrome, Global Down Syndrome Foundation and the National Task Group on Intellectual Disabilities and Dementia Practices and many more. The Alzheimer's Association also maintains the Green-Field Library and Resource Center which includes a free extensive online library of books and resource materials to help support care providers and family members who support individuals with I/DD who have Alzheimer's disease and related dementia. In addition there is a webpage specifically dedicated to providing information about Alzheimer's disease and Down Syndrome located within the national website. The Alzheimer's Association also financially supports several new grants to fund research to better treat Alzheimer's in people with Down syndrome.

The Desert Southwest Chapter focuses on providing needed support services and education to impacted families in Arizona and Southern Nevada. Our core services include Helpline/ Information and Referral, Family Care Consultation, Support Groups, Education, Early Stage Programming and Safe Return. These services are provided to all families who are impacted by Alzheimer's disease and related dementia. We currently have families who are caring for loved ones with Down Syndrome and Alzheimer's disease and for other families who are caring for family members who have intellectual disablilites of various types. We provide support services to these families to help them better understand the disease and its progression, how to best support their loved one through this process and how to care for themselves during the disease process. We provide emotional, practical and educational support for them throughout the disease progression.

Many Alzheimer's Chapters throughout the nation have well developed programs to address the needs of persons with Down Syndrome who develop Alzheimer's disease and those who provide supports. These programs include educational programs, support groups and personalized family care consultation. They are a great resource for us as we expand our current services to this important population. During this past year the Desert Southwest Chapter has been involved in developing and presenting a two hour training program for case manager within the DES Division of Developmental Disabilities in collaboration with Department of Aging. This training has been provided to over 250 participants with plans for it to become a required webinar training for all case managers. We have successfully completed eight training sessions – 2 in Prescott ares, 2 in Tucson area and 4 in the Phoenix area on Alzheimer's disease and Down

Syndrome for more than 175 attendees. In addition by request, Cindy Vargo has presented trainings on Alzheimer's and Down Syndrome at 6 day program facilities in Tucson and Phoenix to a total of 184 support staff members.

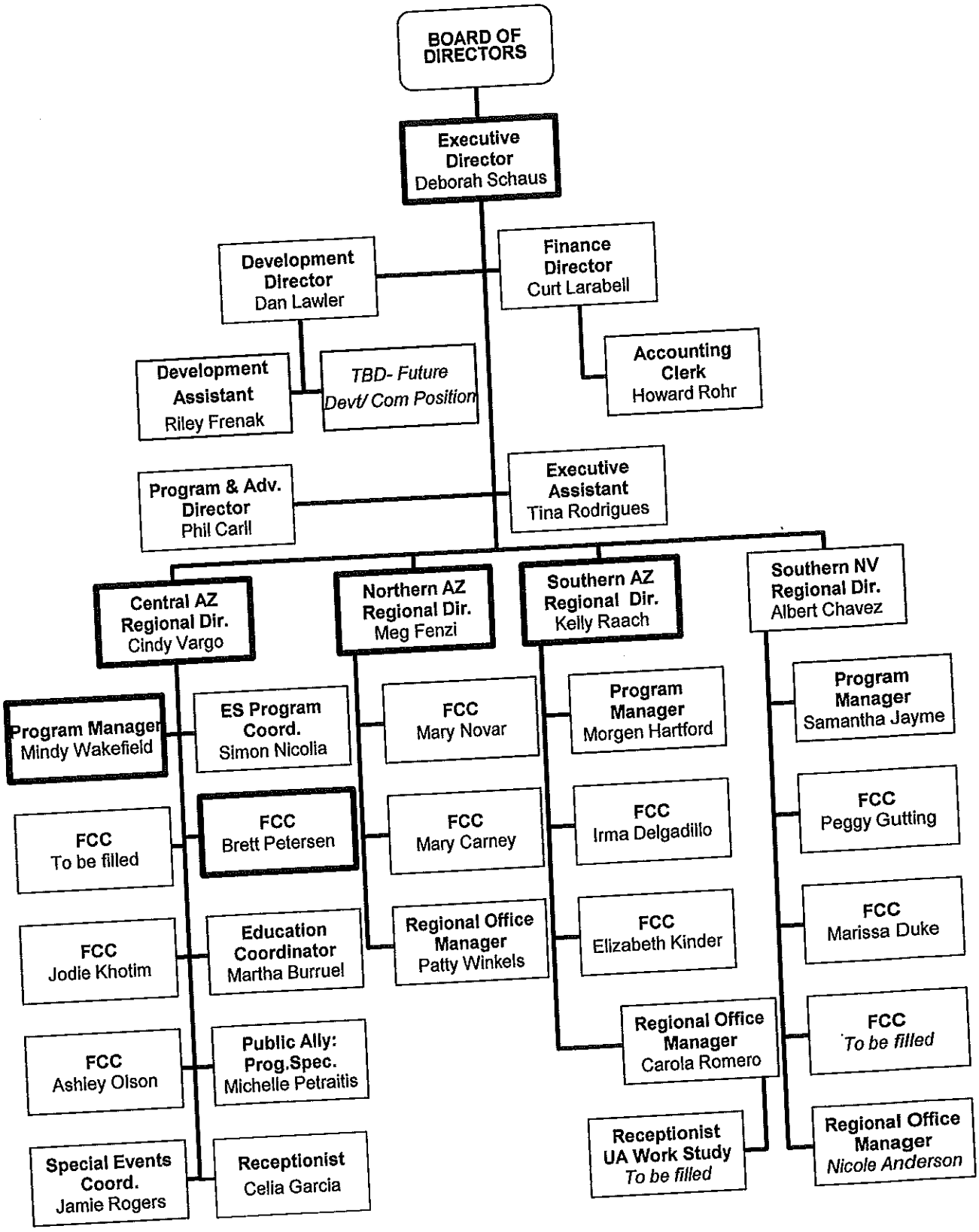
2. Our organzation is fully prepared to provide CarePRO workshops to family caregivers for individuals with developmental disabilities as described in this proposal and to administer all aspects of the project in compliance with all requirements.

The Alzheimer's Association has been serving families impacted by dementia in our communities for more than 30 years. And today we have a staff of 35 employees, assisted by more than 1,000 volunteers who strive to make a difference in the lives of everyone who has dementia or provides support for someone with dementia. We have a commitment through our current strategic plan to ensure collaboration as a strategic priority, recognizing the need to create innobative new partnerships to further our mission of reaching the growing number of people in all populations struggling with Alzheimer's in our communities. Today our Core Programs reach more than 15,000 people annually.

We have during the past several years actualized our goal to collaborate on a larger scale through our collaboration with Department of Economic Security, Arizona State University – College of Nursing and Health Innovation and Area Agency on Aging to serve in the role of primary outreach.recruitment and conducting intervention workshops to more than 500 participants (more than 6,250 hours of classroom program delivery). In addition we have collaborated with Arizona Department of Economic Security and Area Agency on Aging, Region One to develop the training module on dementia Alzheimer's disease and other dementias for the standardized training module for direct care workers (part of the Arizona Direct Care Workforce Initiative "Prinicples of Caregiving" training curriculum).

Our organization's total budget for the two-state area is more than $3,500,000 FY 2015. We have a diversified fund development plan that includes individual contributions (appeals, memorial and tribute gifts, planned gifts), grants and contracts (corporations, foundations, United Ways, government agencies), and special events (Walk to End Alzheimer's ®, Annual Gala, Wine to Remember, and third-party events benefitting our organization).

Alzheimer's Association Desert Southwest Chapter
Organizational Chart of Employees – 2014



PERSONNEL QUALIFICATIONS QUESTIONNAIRE

Instructions: Complete a separate **Personnel Qualifications Questionnaire** **for each person** in an administrative/management or key personnel position, including Subcontractors. This should include all of those that are directly responsible for providing services listed under the Scope of Work in a paid or unpaid position. If personnel are to be hired, provide a job description ensuring at a minimum, questions #5 and #6, with other information as deemed necessary, is provided.

1. Name of person: Cynthia Vargo, MNpS

2. Position currently held with Applicant: Central Arizona Regional Director

3. Proposed position for contract service and percentage of time devoted to the contract service:

Lead Staff for project development and delivery - total of 168 hours .08% of full time position

4. Number of years with Applicant: 6 years

5. Identify the primary function(s) of this person in terms of providing services under this Contract:

Lead staff for project development and delivery throughout Arizona. Will be the primary Phoenix workshop presenter and will train other staff co-facilitators; lead in managing the contract deliverables and billing.

6. Briefly describe the person's work experience, job training, formal education. (Do not attach resumes)

Cindy Vargo is an experienced non-profit social services leader who has been employed as the Central Arizona Regional Director for the past six years. She most recently served as CEO of Communities in Schools of Arizona. Prior to this, Cindy was Director of Program Services at Body Positive, Inc, a Phoenix organization that provides HIV/AIDS service, education and prevention. Cindy's past experience working with persons with disabilities and their families includes leadership positions with Utah Easter Seals, S.P.L.O.R.E., and the Utah Girl Scout Council where she developed a program to ensure inclusiveness for girls living with disabilities. She received her bachelor's degree in recreation management/ agency administration from Brigham Young University and her master's in nonprofit leadership and management from ASU.

PERSONNEL QUALIFICATIONS QUESTIONNAIRE

Instructions: Complete a separate **Personnel Qualifications Questionnaire** **for each person** in an administrative/management or key personnel position, including Subcontractors. This should include all of those that are directly responsible for providing services listed under the Scope of Work in a paid or unpaid position. If personnel are to be hired, provide a job description ensuring at a minimum, questions #5 and #6, with other information as deemed necessary, is provided.

1. Name of person: Mindy Wakefield, MSW

2. Position currently held with Applicant: Central Arizona Program Manager

3. Proposed position for contract service and percentage of time devoted to the contract service: Staff for project development, outreach and logistics, and total project evaluation component - total of 195 hours or .094% FTE allocated to this project

4. Number of years with Applicant: 4 years

5. Identify the primary function(s) of this person in terms of providing services under this Contract: Support staff for project development, outreach and delivery throughout Arizona, Evaluation component coordinator and data analyzing

6. Briefly describe the person's work experience, job training, formal education. (Do not attach resumes) Mindy Wakefield is an experienced nonprofit social services leader who has been employed as the Central Arizona Program Manager for the past four years. Prior to this, Mindy worked with people with memory loss and their families in a skilled nursing facility. She also worked as the Business/Program Manager with a small nonprofit agency and for the Maricopa County Human Services Department as a Human Services Planner for two years, doing contract/grant management and special projects. She received her bachelor's degree in Women's Studies and her master's in Social Work from ASU

PERSONNEL QUALIFICATIONS QUESTIONNAIRE

Instructions: Complete a separate **Personnel Qualifications Questionnaire** **for each person** in an administrative/management or key personnel position, including Subcontractors. This should include all of those that are directly responsible for providing services listed under the Scope of Work in a paid or unpaid position. If personnel are to be hired, provide a job description ensuring at a minimum, questions #5 and #6, with other information as deemed necessary, is provided.

1. Name of person: Brett Petersen, MSW

2. Position currently held with Applicant: Family Care Consultant

3. Proposed position for contract service and percentage of time devoted to the contract service: outreach and program delivery including workshop facilitation and coach calls - a total 800 hours or .385 FTE allocated to this project

4. Number of years with Applicant: 1 year

5. Identify the primary function(s) of this person in terms of providing services under this Contract: outreach and recruitment of participants and program delivery including workshop delivery and coach calls

6. Briefly describe the person's work experience, job training, formal education. (Do not attach resumes)

Brett Petersen is an experienced nonprofit social services leader who has been employed as a Family Care Consultant for one year. Prior to this, Brett worked with people with memory loss and their families at DUET. He also worked as the Executive Director of the Arc of Tempe for five years before receiving his MSW from ASU.

PERSONNEL QUALIFICATIONS QUESTIONNAIRE

Instructions: Complete a separate **Personnel Qualifications Questionnaire** **for each person** in an administrative/management or key personnel position, including Subcontractors. This should include all of those that are directly responsible for providing services listed under the Scope of Work in a paid or unpaid position. If personnel are to be hired, provide a job description ensuring at a minimum, questions #5 and #6, with other information as deemed necessary, is provided.

1. Name of person: Meg Fenzi

2. Position currently held with Applicant: Northern Arizona Regional Director

3. Proposed position for contract service and percentage of time devoted to the contract service:

Prescott area outreach, logistical planning, facilitator of workshops – total of 149 project hours % .07 of full time position

4. Number of years with Applicant: 11 years

5. Identify the primary function(s) of this person in terms of providing services under this Contract:

Outreach and recruitment in the Prescott area. Arrange for facility location for workshop. Coordinate logistics, including staff and materials and supplies. Serve as co-facilitator of workshop with local staff.

6. Briefly describe the person's work experience, job training, formal education. (Do not attach resumes)

Meg Fenzi has served as the Northern Arizona Regional Director since 2003. She has a master's of science degree in gerontology from the University of Arizona and a bachelor's of arts in communications from Arizona State University. Meg is a rural aging specialist and has been instrumental in developing and providing a growing range of the Chapter's services to people and families impacted by Alzheimer's disease to communities throughout Northern Arizona. Prior to joining the Chapter, Meg was a gerontologist in private practice for over ten years in Prescott, and served as an adjunct faculty member and gerontology program developer at Yavapai College. She has previous experience as an administrator in adult care services.

PERSONNEL QUALIFICATIONS QUESTIONNAIRE

Instructions: Complete a separate **Personnel Qualifications Questionnaire for each person** in an administrative/management or key personnel position, including Subcontractors. This should include all of those that are directly responsible for providing services listed under the Scope of Work in a paid or unpaid position. If personnel are to be hired, provide a job description ensuring at a minimum, questions #5 and #6, with other information as deemed necessary, is provided.

1. Name of person: Kelly Raach

2. Position currently held with Applicant: Southern Arizona Regional Director

3. Proposed position for contract service and percentage of time devoted to the contract service:

Tucson area outreach, logistical planning, facilitator of workshops – total of 84 project hours % .04 of full time position

4. Number of years with Applicant: Two years

5. Identify the primary function(s) of this person in terms of providing services under this Contract:

Outreach and recruitment in the Tucson area. Arrange for facility location for workshop. Coordinate logistics, including materials and supplies. Serve as co-facilitator of workshop with local staff.

6. Briefly describe the person's work experience, job training, formal education. (Do not attach resumes)

Kelly Raach began two years ago in the role of Southern Arizona Regional Director, although she has been an active volunteer in programs, outreach and events for over five years. Prior to her management position with the Chapter, Kelly served as Community Relations Coordinator of Pacifica Senior Living for over six years, working with people with dementia and conducting community outreach in the Tucson area. Kelly received her bachelor's degree in business management from the University of Phoenix.