INDEPENDENT LIVING AND ASSISTIVE TECHNOLOGY SECTION

TRAUMATIC BRAIN INJURY PROGRAM

REQUEST FOR APPLICATIONS

# RFA IL-24-04-01

# Addendum 1

# REVISED REQUIRED DOCUMENT CHECK LIST AND BIDDER’S CONFERENCE QUESTIONS AND ANSWERS

# ATTACHMENT 1: Required Document Checklist

**Page 1**

A complete application package must consist of the items identified below. Complete this checklist to confirm the items are included in your application. Place a check mark or “X” next to each item that you are submitting to the DOR. For your application to be responsive, **all required documents listed below must be returned with bid**. This checklist must also be returned with your bid package.

|  |  |
| --- | --- |
|  | Table of Contents (with all sections of the application with corresponding page numbers) |
|  | Required Attachment Check List (Attachment 1) |
|  | Cover Sheet and Assurances (Attachment 2) Page 1 signed by an authorized representative |
|  | Articles of Incorporation |
|  | Organization’s Bylaws |
|  | Organization’s Annual Corporate Report, as filed with the CA Secretary of State (see Attachment 3 for sample report) |
|  | Entity status letter from the CA Franchise Tax Board (see Attachment 4 for sample letter) |
|  | Nonprofit status letter from the Internal Revenue Service (see Attachment 5 for sample letter) |
|  | Licensing and Certification (if applicable) |

**ATTACHMENT 1: Required Document Checklist Cont’**

**Page 2**

|  |  |
| --- | --- |
|  | Proof of Insurance coverage for General Liability, Worker’s Compensation and, if applicable, Professional Liability (see Attachment 6 for sample certificate(s) |
|  | Program Narrative Section 1: Organization Information* Organizational Experience
* Organizational Resources

Section 2: Summary of Program Activities, Work Plan and Timeline, Planned Program Outcomes, and Evaluation * Summary of Program Activities
* Work Plan and Timeline
* Planned Program Outcomes
* Evaluation Measures

Sections 1 & 2: maximum 22 pages |
|  | Program NarrativeSection 3: Budget and Staffing Plan * Proposed Budget and Budget Narrative
	+ Budget Narrative (Attachment 8)
	+ Budget Spreadsheet (Attachment 9)
* Proposed Staffing Plan
	+ Description of personnel positions
	+ Key personnel resumes
	+ Duty statements for all positions funded
 |

**Bidders Conference Questions and Answers**

**Section 4: PURPOSE AND OVERVIEW OF THIS RFA**

**Question #1**

Referring to Section 4, Purpose and Overview of This RFA

With no more than one grant per county and many organizations serving multiple counties if two applications are submitted that overlap in one county but the remaining counties served by each org differ, will the Evaluation Panel consider awarding for partial counties?

**Answer:**

In the application, you will select a primary county, that is the county that will be awarded the funding. Each organization is limited to one award. The Department of Rehabilitation (DOR) will not award more than one grant per county except for Los Angeles County, which will be awarded up to two grants. This does not prohibit an organization from serving a broader range of counties, but the award will be for the primary county. Providers are encouraged to serve a larger geographic region and multiple counties beyond their primary county, but awards will only be awarded based on the primary county. Applicants can describe what primary county and geographic area they plan to serve in their program narrative and in the letter of assurance. The RFA states organizations must have a physical location for in-person services in the primary county they are proposing to serve. Geographic areas beyond their primary county can be served virtually and/or in-person.

**Section 6: DESCRIPTIONS OF SERVICES AND OBLIGATIONS**

**Question #2**

Referring to Section 6 (B) Description of Services and Obligation

Regarding the Match, if we request funding for $825,000, is the required match 20% of $825,000 ($165,000) or do you want the grant request plus the match to equal $825,000?

**Answer:**

Annual funding will be based on the amounts identified in Section 4, Purpose and Overview of this RFA. The 20% required match is in addition to the annual grant amount. The grant request should be for the funding amount only.

For example: The first state fiscal year grant amount is $225,000; therefore, you would need to also provide a match of 20% of the $225,000, for a match of $45,000. The grant budget of $225,000 is listed by line item in the submitted application budget and the $45,000 match is described in your Program Narrative’s Organizational Resources section.

**Question #3**

Referring to Section 6 (D) Description of Services and Obligation

Service providers must provide, directly or by arrangement, a coordinated service model to include the following (the model must be designed and modified with advice from consumers and their families, and must be accessible to the population in need, considering transportation and linguistic and cultural factors).

Please clarify what is meant by considering transportation and linguistic and cultural factors. Does this mean the model should be able to work in conjunction with these possible limitation, or that the model could/should address how it will assist in overcoming these obstacles through things such as transportation assistance or translators for instance?

**Answer:**

In the Program Narrative, applicants should describe how they will outreach and communicate with racially, ethnically, and socioeconomically diverse and geographically underserved communities. The planned impact of program activities must be designed and modified with advice from consumers and their families, and must be accessible to the population in need, considering transportation, linguistic and cultural factors. This will be defined in the narrative as part of the Summary and Program Activities to ensure services meet the needs of the diversity of the community served. All services must be available, with accommodations, to anyone who qualifies under the terms and conditions of this grant. For example, services and information must be made available in locations that are Americans with Disability Act accessible; accessible by public transportation options; in accessible formats; and, to individuals who do not speak or read English as their primary language or who need American Sign Language translation services. The program narrative should include how the organization will assist individuals to overcome obstacles to receive services.

**Question #4**

Referring to Section 6 (D) Description of Services and Obligation

Service providers must provide, directly or by arrangement, a coordinated service model to include the following (the model must be designed and modified with advice from consumers and their families, and must be accessible to the population in need, considering transportation and linguistic and cultural factors).

Please confirm if each of the 7 service categories must be included in the submitted service model.

**Answer:**

Yes, all seven service categories must be included in the Program Narrative and provided directly or by arrangement.

**Question #5**

Referring to Section 6 (D) III. Vocational Supportive Services

Do all four of the vocational services need to be met?

The following four characteristics distinguish “vocational supportive services” from traditional methods of providing vocational rehabilitation and day activity services:

* Service recipients appear to lack the potential for unassisted, competitive employment.
* Ongoing training, supervision, and support services must be provided.
* The opportunity is designed to provide the same benefits that other persons receive from work, including an adequate income level, quality of working life, security, and mobility.
* There is flexibility in the provision of support which is necessary to enable the person to function effectively at the worksite.

**Answer:**

Any of the characteristics for Vocational Supportive Services can be present and indicate that the individual with TBI may need additional supports to be successful with their employment goals. Individuals with TBI might need extra support in navigating services such as vocational rehabilitation and in finding and maintaining employment. Service providers are encouraged to connect individuals with TBI with Department of Rehabilitation for coordination of services to meet employment goals.

**Question #6**

Referring to Section 6 (F) Description of Services and Obligation

Service providers must seek all third-party reimbursements for which consumers are eligible and must utilize all services otherwise available at no cost to consumers, including vocational rehabilitation services provided by the department. However, grantees may utilize grant dollars for the purchase of non-reimbursed services or services otherwise unavailable to consumers.

Please provide clarification with an example.

**Answer:**

Providers must provide Enhanced Information and Assistance in identifying, accessing, utilizing, and coordinating all services needed by individuals with TBI, their families, and caregivers. Providers must also provide Community Navigation services to promote the utilization of cross-system services by providing information and guidance to consumers and their families to braid available resources, including mental health counseling, support groups, financial support, accessing community events/services/activities, support for activities of daily living, medical treatments and services, assistive technologies, and transportation.

Providers must seek all third-party reimbursements for which consumers are eligible by coordinating services through other grants and programs that the provider administers internally or by connecting them with external services and programs administered by other organizations and agencies.  This will ensure consumer get access to available service and funding sources and that limited TBI funding is leveraged to address unmet needs, not available through other systems.

**Question #7**

Referring to Section 6 (F) Description of Services and Obligation

Could assisting a consumer with a Social Security application or SSI/SSDI, Outreach, Access, and Recovery (SOAR) process fall into the Community Navigation or Community Reintegration Service Categories?

**Answer:**

It can be either. Providers will need to determine which service it falls best under depending on the consumer’s situation and services provided.

**Question #8**

Referring to Section 6 (F) Description of Services and Obligation

Are we able to pay direct services for a rehabilitation service that survivors can access that has a nominal cost beyond what insurance may cover (or no insurance is available). For example, physical therapy or transportation. Clarification on how we can pay for services directly for consumers.

**Answer:**

Service providers must seek all third-party reimbursements for which consumers are eligible and must utilize all services otherwise available at no cost to consumers, including vocational rehabilitation services provided by DOR. However, grantees may utilize grant dollars for the purchase of non-reimbursed services or services otherwise unavailable to consumers.

This grant can help pay for rehabilitation, therapies, transportation, or other services that are not covered by other funding sources such as insurance. Service providers can pay for services for consumers if they have appropriate budget line items that include paying for the cost of consumer goods and services, with a description in the budget narrative of what types of services would be included that are not available to the consumer though other funding sources. If there is a co-pay or a lack of other funding sources, service providers can use the TBI funding to meet that unmet need.

**Question #9**

Referring to Section 6 (F) Description of Services and Obligation

Are we able to provide paid work internships or paid hands-on training?

**Answer:**

Providing paid work experience could be an allowable expense if other funding sources are not available. Service providers should coordinate services with their local DOR office for paid work experience services or through American Job Centers before utilizing grant funds for those purposes.

**Question #10**

Referring to Section 6 (F) Description of Services and Obligation

Can we use TBI funds for financial assistance for homeless prevention rental assistance (first month’s rent, deposit, etc.)?

**Answer:**

Service providers must seek all third-party reimbursements for which consumers are eligible and must utilize all services otherwise available at no cost to consumers, including all existing resources through the Homeless Response System Continuums of Care and Homeless Management Information System (HMIS), or other sources for financial assistance. However, grantees may utilize grant dollars for the purchase of non-reimbursed services or services otherwise unavailable to consumers.

Service providers can pay for services for consumers if they have appropriate budget line items that include paying for the cost of consumer goods and services, with a description in the budget narrative of what types of services would be included that are not available to the consumer though other funding sources.

**Question #11**

Referring to Section 6 (F) Description of Services and Obligation

Are there limits on providing or collaborating with a respite program to pay down the cost or pay the respite fee so the caregiver has relief in the benefit of the survivor?

**Answer:**

Service providers will need to leverage all other funding sources. The intent is to provide the TBI services as outlined in the RFA. Any funding for consumer goods and services must help support one of the TBI services outlined in the RFA.

All other funding sources should be explored, and the individuals should be supported in navigating existing resources. Other funding sources might include services available through Area Agencies on Aging, Caregiver Resource Centers, CalAIM managed care, foundations, or [Community Living Fund](https://dor.ca.gov/Home/CommunityLivingServices). Service providers should provide Enhanced Information and Assistance and Community Navigation services to connect individuals with TBI to existing resources so that limited TBI funding can be utilized to address gaps in services.

**Section 7: SUBMITTAL OF APPLICATIONS**

**Question #12**

Referring to Section 7 (B) Submittal of Applications Section, Option 1

All documents must be in printable and searchable format and may not be password protected.

Need for clarification – should the document be searchable by keyword or by the submitted document table of content headings?

**Answer:**

The document should be searchable by keyword or search function.

**Question #13**

Referring to Section 7 (B) Option 1 Submittal of Applications

All electronic submissions should use subject line: RFA IL-24-04-01 Traumatic Brain Injury Grant Application.

Should the subject line additionally identify the submitting organization or not (ie. RFA IL-24-04-01 Traumatic Brain Injury Grant Application – SDBIF)?

**Answer:**

For uniformity with all applicants, the subject line should read as follows: RFA IL-24-04-01 Traumatic Brain Injury Grant Application

**Section 8: APPLICATION REQUIREMENTS**

**Question #14**

Referring to Section 8 (B) V, Application Requirements

The RFA states that Sections 1 and 2 must not exceed 22 pages combined.

Are there page limits on Section 3 or the Budget Narrative (Attachment 8)?

**Answer:**

No, there are no page limits for the Budget and Staffing Plan Section 3 and attachments including the TBI Budget Narrative (Attachment 8), TBI Budget (Attachment 9), description of personnel positions charged to the grant, resumes for key personnel, and duty statements for all positions charged to the grant.

**Question #15**

Referring to Section 8, Application Requirements

Regarding the Application

For the application, is there a specific order of information for each section and required document?

**Answer:**

Please refer to the RFA, Section 8 Application Requirements, pages 14 through 17, that outlines the order in which the application should be organized.

**Question #16**

Referring to Section 8 (B) Application Requirements

IV. (g) Organization of Application and Required Documents, Insurance and Bonding

i. Professional Liability Insurance (if applicable).

ii. Surety bonding for individual practitioners (if applicable).

iii. Dishonesty bonding for organizations and group practices (if applicable).

Please provide example of what service(s) or collaboration(s) submitted in a program would necessitate these 3 insurances.

**Answer:**

The insurances should be provided based on the type of business that you are part of.  If you are a medical organization or partnering with a medical organization, you would provide all of the insurances noted above.

**Section 11: PROGRAM NARRATIVE**

**Question #17**

Referring to Section 11 Program Narrative

For the workplan / timeline - are you wanting this in a table or chart format or only in narrative form?

**Answer:**

You can include a table or a chart with the narrative format, however the work plan should be primarily narrative based.

**Question #18**

Referring to Section 11 (A) II. Organizational Resources

I believe I heard you say that the match does not need to be included in the budget form, but should be in the budget narrative - is that correct?

**Answer:**

In the Program Narrative Section 1: Organizational Information, II. Organizational Resources, question e, applicants will describe how they will meet the 20 percent match requirement and what funding sources will be used. If awarded a grant, service providers will complete a budget form for the match to provide detail on match funds by line item.

**Question #19**

Referring to Section 11 (A) II. Organizational Resources

Is there a restriction on what funds can be used to meet the 20% match (ex. other State or Federal funds). An example would be an Aging and Disability Resource Connection (ADRC) housing coordinator is funded through a grant that is ultimately funded by the State and a TBI consumer is working with that housing coordinator, we would not typically bill that housing coordinator services against the TBI grant because he is getting funded through another source, can I use that toward the match?

**Answer:**

There are no restrictions for using State, Federal, private, or unrestricted funding to meet the 20% match requirement for the TBI program. The match must be funding used to serve individuals with TBI.

**Attachment 3: SAMPLE OF SECRETARY OF STATE ORGANIZATION’S ANNUAL CORPORATE REPORT**

**Question #20**

Referring to Attachment 3, Sample of Secretary of State Organization’s Annual Corporate Report

Regarding the Statement of Information (downloaded here: [https://bizfileonline.sos.ca.gov/search/business](https://bixfileonline.sos.ca.gov/search/business))

Is a Statement of Information the same thing as the Secretary of State Organizations Annual Corporate Report (what is required as shown in Attachment 3 of the RFA)?

**Answer:**

The DOR is asking for the Secretary of State Organizations Annual Corporate Report, sample is Attachment 3. To download your certificate, you will request a Certificate of Status, which you can download at <https://bizfileonline.sos.ca.gov/search/business>.

**Question #21**

Referring to Attachment 3, Sample of Secretary of State Organization’s Annual Corporate Report

Regarding the Organizations Annual Corporate Report

For this step, the URL you list does not work: "Copy of organization’s annual corporate report, filed with the California Secretary of State for all organizations who have completed one (1) year of fiscal operation, which can be found at [https://businesssearch.sos.ca.gov/](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fbusinesssearch.sos.ca.gov%2F&data=05%7C02%7Cgrants%40dor.ca.gov%7C0c7239d5bc6c4ad3356f08dc5fc9a968%7C19ed70549d9743c792b16781b6b95b68%7C0%7C0%7C638490566961815082%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0%7C%7C%7C&sdata=iYsNncL%2FLldSMVcXP3zIV4XbhKq%2F1%2B8aoFhL6j0AX%2FU%3D&reserved=0)."
I believe the correct URL is: [https://bizfileonline.sos.ca.gov/search/business](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fbizfileonline.sos.ca.gov%2Fsearch%2Fbusiness&data=05%7C02%7Cgrants%40dor.ca.gov%7C0c7239d5bc6c4ad3356f08dc5fc9a968%7C19ed70549d9743c792b16781b6b95b68%7C0%7C0%7C638490566961823934%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0%7C%7C%7C&sdata=aEssJsmJZn9P8GNZux3OiwMWN5RbXZ6aadNRJIuTzIM%3D&reserved=0). However, once there, I found my business name, but there are no links to download the Annual Corporate Report on file.

Please help with steps and credentials needed for this step.

**Answer:**

The correct URL is  [https://bizfileonline.sos.ca.gov/search/business.](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fbizfileonline.sos.ca.gov%2Fsearch%2Fbusiness&data=05%7C02%7Cgrants%40dor.ca.gov%7C0c7239d5bc6c4ad3356f08dc5fc9a968%7C19ed70549d9743c792b16781b6b95b68%7C0%7C0%7C638490566961823934%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0%7C%7C%7C&sdata=aEssJsmJZn9P8GNZux3OiwMWN5RbXZ6aadNRJIuTzIM%3D&reserved=0)

For assistance with credentials on the Secretary of State website, please call 916.653.6814.

**Attachment 7: EVALUATION AND SCORING**

**Question #22**

Referring to Attachment 7, Evaluation and Scoring

Are outcomes based on how many of each of the seven services categories are provided?

**Answer:**

All seven service categories are to be provided through this grant. In the Program Narrative, Section 2, part III, applicants will identify outcomes that will result from the strategies implemented for the TBI program. In the Program Narrative, Section 2, part IV, applicants will describe resources, methods, techniques, and tools that will be used to monitor and evaluate progress towards goals and objectives.

Refer to Attachment 7 Evaluation and Scoring in the RFA for the actual scoring rubric that will be used by the evaluation panel for all the applications scored.

**Attachment 8: SAMPLE OF BUDGET NARRATIVE**

**Question #23**

Referring to Attachment 8, Sample of Budget Narrative

Regarding the Indirect Cost Rate

Is there a limit for the acceptable rate (%) for indirect Costs attributed to the TBI Grant?

**Answer:**

The Indirect Cost Rate is capped at 15%.

**Attachment 9: TBI SERVICE BUDGET SPREADSHEET**

**Question #24**

Referring to Attachment 9, TBI Service Budget Spreadsheet

On page 55 of the RFA there is a description of the budget detail required in describing the Benefits Calculation which should include the % attributed for each item.

Should the % be reflective of the Total Benefits Calculation, or the % of the Staff Salary?

Example –

Benefits are calculated at 30% of staff salaries (FICA is 10%, OASDI is 10% and Medical is 10%) The items add up to 30%.

OR

Benefits are calculated at 30% of staff salaries (FICA is 20%, Medical is 50%, Retirement is 30%) The items add up to 100% of the benefit package.

**Answer:**

Benefits are calculated at a percentage of staff salaries. The items (FICA,
OASDI, etc.) should add up to the percentage.

**Other Questions**

**Question #25**

Is there an organization already receiving this funding in Marin County?

**Answer:**

No, not currently. There are currently 12 TBI providers, that are listed on the DOR [Traumatic Brain Injury website](https://www.dor.ca.gov/home/tbi) with current grants and contracts ending by September 30, 2024. This is a competitive solicitation for the TBI program with up to 12 grant awards beginning October 1, 2024, or upon approval (whichever date is later) through June 30, 2027. At the DOR’s discretion, one or more grants may be extended for up-to an additional one (1) year under the same terms and conditions, not to extend past June 30, 2029. The determination to extend a grant will be considered on a case-by-case basis.

**Question #26**

Our organization currently does not qualify for this grant opportunity because we do not offer all seven areas of service required. We are in the process of reviewing our services and strategically deciding about new services to add, etc. Is there a contact at DOR that we could consult with to discuss effective planning to incorporate all seven areas of service as we prepare for the next round of funding in 2026-2027? Given there are no other orgs receiving this funding in Marin, it could be very helpful for our organization to offer coordinated care that this grant is designed to support.

**Answer:**

The RFA seeks experienced and qualified non-profit organizations to provide directly, or by arrangement, all the core services as identified in Welfare and Institutions Code section 4357 and as outlined in the RFA. If an applicant organization does not currently provide all the services identified in Welfare and Institutions Code section 4357 and in the RFA, the program narrative provides an opportunity to describe how the RFA will increase the ability of the organization to provide TBI services and a detailed work plan and timeline for how the organization will provide services.

Please reach out to the DOR TBI staff at 916-558-5780 or TBI@dor.ca.gov