Application for I	Federal Assista	nce SF	-424		
* 1. Type of Submissi Preapplication X Application Changed/Corre	ion: ected Application	X Ne	ew [		If Revision, select appropriate letter(s): Other (Specify):
* 3. Date Received: Completed by Grants.gov	/ upon submission.	4. Applic	cant Identifier:		
5a. Federal Entity Ide	entifier:			!	5b. Federal Award Identifier:
State Use Only:				<u> </u>	•
6. Date Received by	State:		7. State Application	Ide	dentifier:
8. APPLICANT INFO	ORMATION:				
* a. Legal Name: De	elaware Depart	ment of	f Health and So	ci	cial Services
* b. Employer/Taxpay	ver Identification Nun	nber (EIN	/TIN):	I r	* c. Organizational DUNS: 6252276080000
d. Address:					
* Street1: Street2: * City:	1901 N Dupont	Hwy			
County/Parish:					
* State:					DE: Delaware
Province: * Country:				_	
* Zip / Postal Code:	19720-1160			_	USA: UNITED STATES
e. Organizational U					
Department Name:					Division Name:
DE Dept of Hea	lth/Social Ser	v			Aging/Physical Disabilities
f. Name and contac	t information of pe	erson to	be contacted on ma	atte	tters involving this application:
Prefix:	d	]	* First Name	ə: 	Lisa
Title: Deputy Dir	rector				
Organizational Affiliat					
	aon.				
* Telephone Number:	302-255-9358				Fax Number: 302-255-4445
* Email: lisa.bor	nd@state.de.us				

Application for Federal Assistance SF-424
* 9. Type of Applicant 1: Select Applicant Type:
A: State Government
Type of Applicant 2: Select Applicant Type:
Type of Applicant 3: Select Applicant Type:
* Other (specify):
* 10. Name of Federal Agency:
Administration for Community Living
11. Catalog of Federal Domestic Assistance Number:
93.763
CFDA Title:
Alzheimer-s Disease Initiative: Specialized Supportive Services Project (ADI-SSS) thru Prevention and Public Health Fund
* 12. Funding Opportunity Number:
HHS-2015-ACL-AOA-AL-0104
* Title:
Alzheimer's Disease Initiative - Specialized Supportive Services (ADI-SSS) Project Financed Solely by 2015 Prevention and Public Health Funds (PPHF 2015)
13. Competition Identification Number:
HHS-2015-ACL-AOA-AL-0104
Title:
14. Areas Affected by Project (Cities, Counties, States, etc.):
Add Attachment         Delete Attachment         View Attachment
* 15. Descriptive Title of Applicant's Project:
Delaware Alzheimer's Disease Initiative
Attach supporting documents as specified in agency instructions.
Add Attachments         Delete Attachments

Application	for Federal Assistance SF-424				
16. Congressi	ional Districts Of:				
* a. Applicant	1		* b. Progra	m/Project 1	
Attach an addit	ional list of Program/Project Congressional Distric	cts if needed.			
		Add Attachment	Delete Atta	achment View Attachment	
17. Proposed	Project:				
* a. Start Date:	09/01/2015		* b.	End Date: 08/31/2018	
18. Estimated	Funding (\$):				
* a. Federal	902,031.00				
* b. Applicant	0.00				
* c. State	326,892.00				
* d. Local	0.00				
* e. Other	0.00				
* f. Program In	come 0.00				
* g. TOTAL	1,228,923.00				
X c. Program	n is subject to E.O. 12372 but has not been s n is not covered by E.O. 12372. plicant Delinquent On Any Federal Debt? (I No de explanation and attach ng this application, I certify (1) to the statem	f "Yes," provide ex Add Attachment	planation in attac	achment View Attachment cations** and (2) that the statements	
comply with a subject me to	ertifications and assurances, or an internet site	aware that any fals U.S. Code, Title 218	se, fictitious, or f 8, Section 1001)	iraudulent statements or claims may	
specific instruct	epresentative:				
	•				
Prefix:	* Fir	st Name: Lisa			
Middle Name:					
* Last Name: Suffix:	Bond				
* Title:	eputy Director				
* Telephone Nu	umber: 302-255-9358		Fax Number:		
* Email: lisa	.bond@state.de.us				
* Signature of A	Authorized Representative: Completed by Grants.	gov upon submission.	* Date Signed:	Completed by Grants.gov upon submission.	

		SECTION	SECTION A - BUDGET SUMMARY	RY	Exp	Expiration Date: 06/30/2014
Grant Program Function or	Catalog of Federal Domestic Assistance	Estimated Unobligated Funds	igated Funds		New or Revised Budget	
Activity (a)	Number (b)	Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Alzheimer's Disease Initiative	93.763	↔	↔	902,031.00	326, 892.00	1,228,923.00
2						
ਲ						
4						
5. Totals		\$	\$	\$ 902,031.00	\$ 326,892.00	1,228,923.00

**BUDGET INFORMATION - Non-Construction Programs** 

OMB Number: 4040-0006 Expiration Date: 06/30/2014 Standard Form 424A (Rev. 7- 97) Prescribed by OMB (Circular A -102) Page 1

Prescribed by OMB (Circular A -102) Page 1A 40,485.00 2,709.00 1,228,923.00 Standard Form 424A (Rev. 7- 97) 1,110,000.00 1,228,923.00 75,729.00 Total (5) θ \$ € \$ \$ (4) € θ θ GRANT PROGRAM, FUNCTION OR ACTIVITY [(3) Authorized for Local Reproduction θ θ ŝ (2) 0.00 75,729.00 1,228,923.00 0.00 0.00 0.00 0.00 0.00 40,485.00 1,228,923.00 1, 110, 000.00 2,709.00 Alzheimer's Disease Initiative E θ θ θ i. Total Direct Charges (sum of 6a-6h) k. TOTALS (sum of 6i and 6j) 6. Object Class Categories j. Indirect Charges b. Fringe Benefits g. Construction f. Contractual d. Equipment 7. Program Income a. Personnel e. Supplies c. Travel h. Other

**SECTION B - BUDGET CATEGORIES** 

			SECTION (	C - NON-F	SECTION C - NON-FEDERAL RESOURCES	JRCE	S				
	(a) Grant Program			(q)	(b) Applicant		(c) State	(d) Other	Other Sources	(e)TOTALS	LS
8. Alzheimer'	Alzheimer's Disease Initiative			\$		\$	326,892.00	\$		32	326,892.00
10.											
11.											
12. TOTAL (su	12. TOTAL (sum of lines 8-11)			\$		\$	326,892.00	\$		32	326,892.00
			SECTION	D - FOREC	SECTION D - FORECASTED CASH NEEDS	RED	S		-		
			Total for 1st Year	1:	1st Quarter		2nd Quarter	3rd Quarter	uarter	4th Quarter	-
13. Federal		¢	300,677.00	\$	75,169.00	\$	75,169.00	\$	75,169.00	\$	75,170.00
14. Non-Federal	al	\$	108,964.00		27,241.00		27,241.00		27,241.00	27	27,241.00
15. TOTAL (su	15. TOTAL (sum of lines 13 and 14)	\$	409,641.00	\$	102,410.00	\$	102,410.00	\$	102,410.00	<b>\$</b>	102,411.00
	SECTION E - BUDGET ESTIMATES	DGET [	-	DERAL FL	<b>JNDS NEEDED F</b>	OR I	OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT	PROJECT	-		
	(a) Grant Program					-	FUTURE FUNDING PERIODS		(YEARS)		
					(b)First		(c) Second	(d) Third	hird	(e) Fourth	_
16. Alzheimer'	Alzheimer's Disease Initiative			\$	300,677.00	\$	300,677.00	\$	300,677.00	\$	
17.											
18.											
19.											
20. TOTAL (st	20. TOTAL (sum of lines 16 - 19)			\$ 01UED	\$ 300,677.00 \$	\$	300,677.00	s	300,677.00	\$	
21. Direct Charges:	arges:				22. Indirect Charges:	harg	es:				
23. Remarks:											
			Authori	zed for Lo	Authorized for Local Reproduction	r.		۵.	Stan rescribed by O	Standard Form 424A (Rev. 7- 97) Prescribed by OMB (Circular A -102) Page 2	kev. 7- 97) 2) Page 2

## **ASSURANCES - NON-CONSTRUCTION PROGRAMS**

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

# PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

**NOTE:** Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- 1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
- 2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- 4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
- Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to:

   (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352)
   which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education
   Amendments of 1972, as amended (20 U.S.C.§§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation

Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U. S.C. §§6101-6107), which prohibits discrimination on the basis of age: (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee- 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

- 7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
- Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
- 10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental guality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
- 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
- Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
- 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
Completed on submission to Grants.gov	Deputy Director
APPLICANT ORGANIZATION	DATE SUBMITTED
Delaware Department of Health and Social Services	Completed on submission to Grants.gov

Standard Form 424B (Rev. 7-97) Back

## Project/Performance Site Location(s)

Project/Performance Site Primary Location	I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.
Organization Name: DE Division of Agi	ng/Physical Disabilities
DUNS Number: 6252276080000	
Organization Name:       DE Division of Aging/Physical Disabilities         DUNS Number:       6252276080000         * Street1:       1901 N. DuPont Highway         Street2:	
Street2:	
* City: New Castle	County:
* State: DE: Delaware	
Province:	
* Country: USA: UNITED STATES	
* ZIP / Postal Code: 19720-1160	* Project/ Performance Site Congressional District: DE-001
Project/Performance Site Location 1	
DUNS Number:	
* Street1:	
Street2:	
* City:	County:
* State:	
Province:	
* Country: USA: UNITED STATES	
* ZIR / Restal Cada	

Additional Location(s)	Add Attachment	Delete Attachment	View Attachment
		P	

#### **CERTIFICATION REGARDING LOBBYING**

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

* APPLICANT'S ORGANIZATION	
Delaware Department of Health and Social Services	
* PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	
Prefix: * First Name: Lisa	Middle Name:
* Last Name: Bond	Suffix:
* Title: Deputy Director	
* SIGNATURE: Completed on submission to Grants.gov * DATE	Completed on submission to Grants.gov

## **Delaware Alzheimer's Disease Initiative**

## Summary/Abstract

The Delaware Division of Services for Aging and Adults with Physical Disabilities (DSAAPD), in partnership with the Alzheimer's Association Delaware Valley Chapter and key stakeholders, will in the course of this three-year project improve the responsiveness of the State's dementiacapable long term services and supports (LTSS) system. The goal of this project is to fill the gaps in Delaware's dementia-capable system of long term services and supports to better meet the needs of persons with Alzheimer's disease and related disorders (ADRD) and their caregivers. The **objectives** are to: 1) expand the availability of supportive services to persons with ADRD who live alone in a community setting; 2) expand the availability of supportive services to persons living with moderate to severe ADRD and their caregivers; 3) increase support available to family caregivers through the provision of training and consultation on behavior symptom management. Planned initiatives include: 1) expanded legal services; 2) a pilot sensory technology program; 3) caregiver training and consultation; 4) respite vouchers; 5) community living/integration services. Anticipated outcomes are: 1) improved access to legal services among persons with ADRD and their caregivers; 2) decreased health and welfare risk among persons with ADRD who live alone; 3) improved knowledge of behavior management strategies among ADRD caregivers; 4) increased amount of time off among ADRD caregivers; and 5) increased community engagement among persons with ADRD. The expected products are marketing and outreach materials; training materials; service specifications; web pages; evaluation reports; and a final project report.

## **Problem Statement**

The impact of Alzheimer's disease and related disorders (ADRD) is far-reaching. It is estimated that over five million Americans currently have Alzheimer's disease. While many cases of early-onset Alzheimer's disease exist - there are approximately 200,000 cases of persons under age 65 with the disease today - the majority of persons with the disease are aged 65 and over. In 2013, over 84,000 Americans died of Alzheimer's disease, making it the country's sixth leading cause of death<sup>1</sup>.

In Delaware, the incidence of the disease is equally daunting. It was estimated that there are currently 17,000 Delawareans aged 65 and older living with Alzheimer's disease. This figure represents 11% of the State's senior population. As would be expected, the number of people with Alzheimer's disease in Delaware has grown since the State, like the rest of the country, is in the midst of an unprecedented growth in the older population. Between 2015 and 2025, the number of persons aged 65 and over with Alzheimer's disease in Delaware is expected to grow by over 35% (to 23,000 people)<sup>2</sup>.

The economic impact of ADRD has been well documented. In 2015, the cost for the care of people with ADRD is estimated to be \$226 billion, with Medicare and Medicaid paying 68% of those costs<sup>3</sup>. In addition, numerous studies point to the significant impact on the lives of individuals who serve as informal caregivers. The American Psychological Association, in summarizing these findings states that, "While caregiving can be rewarding and positive, many family caregivers experience significant physical, psychological, and financial stressors in association with their caregiving role."<sup>4</sup>

<sup>&</sup>lt;sup>1</sup> Alzheimer's Association. *2015 Alzheimer's Disease Facts and Figures*. Chicago: 2015. <sup>2</sup> Ibid.

<sup>&</sup>lt;sup>3</sup> Alzheimer's Association. *Changing the Trajectory of Alzheimer's Disease: How a Treatment by 2025 Saves Lives and Dollars*. Chicago: 2015.

<sup>&</sup>lt;sup>4</sup> American Psychological Association. "Family Caregiving."

<sup>25</sup> June 2015. <u>http://www.apa.org/about/gr/issues/cyf/caregiving-facts.aspx</u>.

To respond to these needs, Delaware has made strides in developing the dementiacapability of its long term services and supports (LTSS) system. For example, regulations which govern the operation of various licensed LTSS entities, including nursing homes, assisted living facilities, home health agencies, personal care services entities, and adult day care centers, specify the dementia-related training required for staff employed by those entities. As another example, DSAAPD contracts with community-based organizations to operate Caregiver Resource Centers throughout the state which provide support to family caregivers, many of whom care for family members with ADRD. In addition, DSAAPD funds the operation of an Alzheimer's Adult Day Service which specializes in providing the supports needed by individuals with ADRD. Within the past several years, DSAAPD has established a strong partnership with the Alzheimer's Association Delaware Valley Chapter and has been working in close coordination with that organization to address the needs of persons with ADRD and their families. Delaware's small size has been an advantage in the development of a dementiacapable system in that organizations work together to share resources, cultivate a trained workforce, and promote advancements in the responsiveness of the LTSS system.

Recently, DSAAPD partnered with the Alzheimer's Association Delaware Valley Chapter to engage organizations and individuals around the State to develop an ADRD plan for Delaware. The resulting document, the *Delaware State Plan to Address Alzheimer's Disease and Related Disorders*, was released in February 2014 and laid the groundwork for collaborative efforts to improve the State's response to persons with ADRD and their families. Even more recently, the Delaware General Assembly passed House Concurrent Resolution No. 57 which established a Family Caregiving Task Force. The charge of the Task Force was to make findings and recommendations regarding the support needs of family caregivers who assist older people and people with disabilities. As part of its research efforts, the Task Force held listening sessions around the state and heard first-hand from caregivers, many of whom provide support to persons with ADRD, about their needs. On May 31, 2015, the Task Force released its report, *Caregiver Support Blueprint for Delaware*, to the General Assembly. This report included legislative, budgetary, and policy recommendations for consideration by the general Assembly.

Together these two documents, the *Alzheimer's Plan* and the *Caregiver Blueprint*, highlight the fact that there are gaps within Delaware's current dementia-capable LTSS system. Some of the specific gaps identified include the need for more legal services for persons with ADRD and their caregivers; the need for supportive services/technologies for persons with ADRD who live alone; the need for training and consultation for ADRD caregivers; the need for more services to allow ADRD caregivers to take a break from their caregiving responsibilities; and the need for services that can support ADRD caregivers when emergencies arise.

## **Goal and Objectives**

The goal of the Delaware Alzheimer's Initiative is to fill the gaps in Delaware's dementiacapable system of long term services and supports to better meet the needs of persons with ADRD and their caregivers.

The project has three objectives: 1) expand the availability of supportive services to persons with ADRD who live alone in a community setting; 2) expand the availability of supportive services to persons living with moderate to severe ADRD and their caregivers; 3) increase support available to family caregivers through the provision of training and consultation on behavior symptom management.

Specific activities planned to achieve this goal and these objectives, including plans for collaboration with key partners and plans to sustain the advances beyond the project period, are detailed in subsequent sections of this application.

#### **Proposed Intervention**

#### Overview

The proposed intervention will be achieved in two phases: the planning phase and the implementation phase, each of which is detailed below. In general, Delaware's proposed

Alzheimer's Disease Initiative will involve five key areas of program development. Each of these areas addresses the gaps in the State's current dementia-capable long term services and supports system and corresponds directly with the project's stated goal and objectives. The areas of program development are as follows:

- Broaden the existing legal services program in Delaware to address the specific needs of persons with ADRD and their caregivers.
- Develop a pilot ADRD sensor technology program to protect the health and safety of persons with ADRD who live alone.
- Develop an ADRD training and consultation program through the Delaware Caregiver Resource Centers to support family caregivers.
- Expand the availability of respite vouchers for ADRD caregivers through the Delaware Lifespan Respite Program.
- Expand the availability of community integration services for persons with ADRD through the Community Living Program.

## Planning Phase

The planning phase of the project is expected to last six months, during which time DSAAPD will lay the foundation for implementation activities to be conducted over the subsequent two and a half years. DSAAPD will carry out the following steps during the planning phase.

<u>Hire and orient a project director</u>. As described in the project management section below, DSAAPD plans to hire a qualified individual to fill a recently-vacated Planner IV position and to serve as the project director for this initiative. During the initial weeks of his/her employment, the newly-hired project director will have the opportunity to get acquainted with agency operations and meet project partners.

<u>Convene the Steering Committee</u>. DSAAPD, in partnership with the Alzheimer's Association Delaware Valley Chapter, established a steering committee to assist in the

development of the *Delaware State Plan to Address Alzheimer's Disease and Related Disorders.* The Steering Committee is now actively involved in the implementation of the plan, and will serve as an advisory body for this project. The committee is comprised of individuals with diverse backgrounds and areas of expertise who will provide a wealth of insight and support as the project progresses. Committee members include advocates, caregivers, and professionals from healthcare, education, and social services. During the planning phase, DSAAPD will convene a meeting of the Steering Committee to provide the members with information about the project and will elicit feedback from them about implementation planning.

Establish project pages on internet and intranet sites. DSAAPD will set up projectspecific pages on both its internet and intranet websites to help organize activities and to keep partners and other interested parties informed about progress in meeting objectives. In past projects, DSAAPD has found the use of these resources to be very effective in helping to maintain communication as well as share outcomes. These pages will continue to be developed with new information throughout the implementation phase of the project.

<u>Conduct a baseline assessment</u>. DSAAPD will coordinate with the Steering Committee to develop a baseline assessment of the dementia-capability of the State's current LTSS system.

<u>Develop project workplan</u>. DSAAPD will work with the Steering Committee to develop a project workplan which will detail the steps to be taken to meet the outcomes described in this application and will submit the plan to the Administration for Community Living/Administration on Aging (ACL/AOA) for review and consideration.

Participate in planning phase exit conference. DSAAPD will participate in a planning phase exit conference. As part of this conference, DSAAPD will present ACL/AOA with the results of its baseline assessment as well as its project workplan. DSAAPD will proceed to the implementation of its project upon the approval of ACL/AOA.

## Implementation Phase

After the completion of the planning phase exit conference, DSAAPD, in conjunction with project partners, will proceed to implement the five key areas of program development: 1) broaden the existing legal services program; 2) develop a pilot sensor technology program; 3) develop a training and consultation program; 4) expand the availability of respite vouchers; and 5) expand the availability of community integration services. Each of these areas was selected to address a known gap in Delaware's dementia-capable system of long-term services and supports. In the development and implementation of these services, DSAAPD will maintain a core principle of person-centeredness, making sure that programs address the individual needs and preferences of its participants.

Broaden legal services. Delaware currently operates a legal services program for older persons funded under Title III of the Older Americans Act. This statewide program provides support for a range of legal concerns including powers of attorney and living wills: consumer issues; housing problems; and benefits issues (such as Medicare and Medicaid). Unfortunately, the demand for services far exceeds the supply. Legal services have been identified as a specific unmet need among persons with ADRD and their caregivers. These issues were not only addressed through the development of the aforementioned Delaware Alzheimer's Disease Plan and Caregiver Support Blueprint, but also in a 2011 assessment of the legal needs of Older Delawareans. DSAAPD proposes to broaden the scope of the current legal services offered in the State to include a program that is tailored to meet these needs and also provide fast-track access for the target population. In particular, DSAAPD proposes to procure the services of specialists to provide expanded access to legal supports to persons with ADRD and their caregivers. The focus of this service will be to make available those legal supports most frequently-identified as needed by this population, such as the development of living wills, powers of attorney, and related documents, with an emphasis on making sure that such documents are developed before individuals reach advanced stages of ADRD. In addition, this

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ADRD-targeted service will provide legal supports to individuals with ADRD, caregivers, and others on issues such as financial exploitation, benefit eligibility, spousal impoverishment, meeting financial needs associated with raising children, and related concerns.

Develop a sensor technology program. DSAAPD proposes the development of a pilot sensor technology program to protect the health and safety of persons with ADRD who live alone. As part of their work on the recently-released *Caregiver Support Blueprint for Delaware*, the Family Caregiving Task Force's Innovation Committee carefully researched options for using technological advances to provide home monitoring. A review of currently-available assistive devices showed that there is a wide range of resources available to trigger warnings when movement patterns in a home might indicate that a frail elder could be in danger and require assistance. Examples of such devices include those which monitor the use of water, the opening and closing of a refrigerator, the use of a door, or which measure other movement of an individual around his/her house. Such devices can be enormously valuable in providing remote monitoring of the safety of an individual with ADRD who does not have a caregiver in the home. DSAAPD will issue a Request for Information (RFI) to enable assistive technology vendors to submit descriptions of available technologies, followed by a Request for Proposals (RFP), to procure specific monitoring systems. The service will begin during Year 2 of the project.

Develop a training and consultation program. DSAAPD currently provides training and support to Delaware's caregivers through contracts with five Caregiver Resource Centers located throughout the State. Feedback provided during the development of Delaware's *Alzheimer's Plan* indicated that persons who care for individuals with ADRD need specialized training and consultation, especially associated with behavior management, in order to cope with the enormous challenges associated with their caregiving responsibilities. DSAAPD proposes to coordinate with the CRCs statewide to provide evidence-based training to ADRD caregivers and to make consultation available to them on an ongoing basis. As part of this

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initiative, DSAAPD anticipates: 1) enlisting the support of the Caregiver Resource Center coordinators in reviewing and selecting currently-available evidenced-based ADRD caregiver training materials (such as The Savvy Caregiver, REACH II, and/or others); 2) procuring training materials; 3) conducting train-the-trainer sessions; 4) implementing the training and consultation for caregivers during Year 2 of the project.

Expand the availability of respite vouchers. For the past five years, DSAAPD has offered vouchers to family caregivers to purchase respite services. These vouchers are made available through the Lifespan Respite Program which, as the name implies, provides supports to individuals who provide care to persons of all ages. Vouchers are used by program participants to purchase respite services so that they can take a break from their caregiving responsibilities. This self-directed service model enables caregivers to schedule respite care at their own convenience, and importantly, use the vouchers to secure respite on an emergency basis, when needed. The demand for respite vouchers is demonstrated consistently and overwhelmingly by service waitlists. Families of persons with ADRD, along with families of persons with other needs, must vie for the opportunity to take advantage of this cost-effective and highly beneficial program. ADRD caregivers have voiced the need for expanded respite service availability and, in particular, for emergency respite care. Emergency respite care is needed, for example, when a primary caregiver is hospitalized unexpectedly or must be away from home to address an urgent family matter. DSAAPD proposes to use funds under this grant to expand Delaware's Lifespan Respite program to make vouchers available to additional ADRD family caregivers.

Expand the availability of community integration services. DSAAPD currently contracts for the provision of a unique program called Community Living, which affords opportunities for transportation and community integration for persons with disabilities. As part of this program, individuals identify community-based activities, resources, or events that are of interest to them and are then provided with transportation and personal care supports in order to participate. The program was originally designed to serve the needs of younger adults with disabilities who could benefit from active, rather than passive, home-based care and who needed opportunities to exercise personal choice in community involvement. Like many services in the State's long term services and support system, Community Living responds to a significant need, and demand has outpaced supply. As part of this project DSAAPD plans to make this same service available to persons with ADRD, not only to provide a needed break for caregivers, but also to afford persons with ADRD the opportunity to experience the benefits of community integration. To implement this initiative, DSAAPD will establish a special ADRD component within the existing Community Living program and carefully evaluate the impact of the service on both participants and caregivers.

#### Implementation supports

To support the development and implementation of these areas of program development, DSAAPD will carry out training and outreach strategies, each of which is described below.

Training strategy. DSAAPD will support the efforts of this project by ensuring that agency staff and staff of project partners have the opportunity to participate in a full range of dementiarelated training and training associated with the new programs and service being developed. In particular, DSAAPD will make extensive training available for staff of the Aging and Disability Resource Center's call center, who serve as the first point of contact for individuals who contact DSAAPD for assistance; Options Counselors, who assist individuals and families in making choices about their care; and case managers, who help individuals and families get connected with the services that they need. In addition, DSAAPD will make training opportunities available to other professionals in the State who come into contact with persons with ADRD and their caregivers on a regular basis and who could benefit from learning about the resources available through this project.

<u>Outreach strategy</u>. DSAAPD will carry out a comprehensive outreach strategy to ensure that individuals with ADRD and their families, service professionals, and other interested parties are aware of Delaware's ADRD project and know how to access available services. As part of this effort, DSAAPD will engage partners from around the state to employ a variety of media to make sure that the message is delivered. In particular, DSAAPD will focus on individuals in greatest need, including persons with low income, persons who live in rural areas, persons who are non-English speaking, and persons with developmental disabilities. The strategy will include the use of electronic resources such as websites and social networking; written materials; and face-to-face meetings, such as at health fairs, support group meetings, and other events. Outreach activities will be conducted throughout the project period.

## **Special Target Populations and Organizations**

DSAAPD's principal partner on this project is the Alzheimer's Association Delaware Valley Chapter, which co-leads the State's Alzheimer's Plan Steering Committee that will serve in an advisory capacity throughout the grant period. A letter of commitment from the Alzheimer's Association is included as part of this application. The Steering Committee will play an active role in the development of project plans and the review of implementation activities. Members of the committee include, in addition to DSAAPD and Alzheimer's Association leadership, representatives from Christiana Care Health Systems, University of Delaware, AARP, Division of Public Health, Department of Justice, and ADRD caregivers. Additional organizations in the public, private, nonprofit and educational sectors, including senior centers, churches, geriatric education centers, health care providers, and others, will be engaged to support the project in various capacities especially with regard to outreach activities to ensure that services are directed toward those in greatest need. As noted above, significant effort will be made to reach persons with low income, persons who live in rural areas, persons who are non-English speaking, and persons with developmental disabilities.

#### Outcomes

The following anticipated outcomes correspond with the five areas of program development described in the Proposed Intervention section above.

- Improved access to legal services among persons with ADRD and their caregivers.
- Decreased health and welfare risk among persons with ADRD who live alone.
- Improved knowledge of behavior management strategies among ADRD caregivers.
- Increased amount of time off among ADRD caregivers.
- Increased community engagement among persons with ADRD.

The activities proposed in this project are expected to have a measurable benefit for Delawareans with ADRD and their caregivers. DSAAPD will comply with reporting requirements of ACL/AOA and the Office of Management and Budget (OMB) and will submit reports related to these outcomes according to required schedules.

Importantly, it is expected that these activities as well as the anticipated outcomes would be easily replicated in other parts of the country. As described in the Dissemination section of this application, DSAAPD plans to make project-related information readily available to ensure that efforts carried out in Delaware have the broadest possible impact.

#### Project Management

DSAAPD plans to hire a Planner IV to serve in the capacity of Project Director. (This is an existing position within the agency that was recently vacated.) The individual selected to fill this position will meet all of the State of Delaware requirements for a Planner IV position, will report to DSAAPD's Planning Supervisor, and will receive active support from DSAAPD's Deputy Director and the agency's contract management team.

According to State requirements, a Planner IV "...is the expert level in a broad area of planning requiring the highest level of technical expertise. Positions at this level will report to top management/agency officials." Furthermore, to qualify, an individual must be "...acknowledged as expert (non-managerial) planning professional position by peers and management by being delegated to function as a recognized expert in the application, use and adaptation of guidelines related to a broad area of planning; positions are recognized by management and peers as

authoritative sources of expertise who possess a comprehensive knowledge in a broad area of planning and apply such knowledge to assignments; managers, peers, and users recognize and rely on position to provide guidance, direction, and instruction regarding the proper application and adaptation of standards (such as federal guides, rules and regulations), principles, concepts, techniques, systems and other guidelines related to the area of expertise." <sup>5</sup> Because the Project Director has not yet been selected, in lieu of a resume, a copy of the State's requirements for the Planner IV position is attached.

The Project Director will be responsible for project oversight including plan development; service procurement (Requests for Information and Requests for Proposals); contract development; program evaluation; fiscal monitoring; reporting; and communication with project partners.

As noted above, the Alzheimer's Association will co-lead the Alzheimer's Steering Committee, which will provide support in project planning and implementation. A letter of commitment from the Alzheimer's Association is attached.

#### Evaluation

The Project Director will oversee all aspects of project evaluation and will work in close coordination with DSAAPD's Contract Management Unit and Planning Unit. As a primary means of evaluation, a sample of participants and/or caregivers in each of the five proposed program areas (legal services, sensor technology, training/consultation, respite, and community integration) will be provided with a pre-enrollment questionnaire as well as a post-enrollment questionnaire in order to gauge service impact. Post-enrollment questionnaires will be administered either six months after initial enrollment or within three months after disenrollment, whichever comes first. As needed and appropriate, respondents will have questions read aloud

<sup>&</sup>lt;sup>5</sup> State of Delaware, Office of Management and Budget, Human Resources Management. "State of Delaware Class Specification Planner I, Planner II, Planner III, Planner IV, Planning Supervisor, Principal Planner, Manager of Planning, Chief of Planning." 30 June 2015.

http://www.jobaps.com/de/specs/classspecdisplay.asp?ClassNumber=MFEA04&LinkSpec=MFEA01.

#### Delaware Alzheimer's Disease Initiative

to them and/or be provided with assistance in understanding questions. DSAAPD will seek the support of outside resources, when needed, to assist in the administration of questions to non-English speaking participants. As a secondary means of evaluation, DSAAPD will conduct indepth interviews with a select group of service providers and caregivers. Results of both of these efforts (the questionnaires and in-depth interviews) are expected to measure the extent to which the initiatives have been successful achieving expected outcomes.

DSAAPD will enlist the support of a consultant in the development of pre-enrollment and post-enrollment questionnaires as well as questions for the in-depth interviews. DSAAPD's Planning Unit will assist in collecting data associated with each of the two methodologies, and the Project Director will be responsible for compiling and reporting on evaluation results.

As part of its standard quality assurance process, DSAAPD develops service specifications for contracted services. DSAAPD subsequently monitors contracts on a scheduled basis to ensure compliance and to assist providers in troubleshooting service delivery issues. In addition, service contractors provide written reports to DSAAPD on a quarterly basis. The Project Director will coordinate with DSAAPD's Contract Management Unit to ensure that these processes are carried out for services developed as part of this project and will compile these results.

DSAAPD will include the results of these efforts, including "lessons learned" in a final report prepared at the conclusion of the grant period.

#### Dissemination

DSAAPD will publish detailed information about the project, including the final project report, on its website for widest possible circulation. In addition, DSAAPD will participate in webinars, teleconferences, and other available venues in order to communicate lessons learned with other states. DSAAPD will gladly answer questions, provide support, and share work products with other states at any time upon request in order to facilitate project replication. Finally, DSAAPD will coordinate with the Alzheimer's Association Delaware Valley Chapter in order to disseminate information about the project throughout the ADRD advocacy network.

#### **Organizational Capability**

DSAAPD serves as the State Unit on Aging (SUA) for Delaware and also carries out the functions of a statewide area agency on aging (AAA). In addition, DSAAPD operates as the central advocate for adults with physical disabilities in Delaware. DSAAPD is one of 11 divisions within the Department of Health and Social Services (DHSS), a cabinet-level umbrella agency. Currently, DSAAPD employs 1,000+ staff persons, including staff in two state-operated long term care facilities.

DSAAPD's administrative structure is presented in the attached organizational chart. In its role as Delaware's SUA, AAA, and focal point for disabilities services, DSAAPD is responsible for carrying out a broad range of activities, including:

- Advocating on behalf of older persons and adults with physical disabilities to create awareness of the needs of these populations and to generate additional resources to meet these needs.
- Operating a statewide Aging and Disability Resource Center (ADRC).
- Operating two licensed long-term care facilities.
- Operating various home and community-based programs and services including the New Horizon Adult Day Center, the Community Services Program, the Delaware Senior Medicare Fraud Patrol Program, and the Nursing Home Transition Program.
- Contracting for the provision of a wide range of long term services and supports, including personal care, adult day services, respite, personal attendant services, and many others.
- Contracting for various services and supports for caregivers.
- Developing and implementing a variety of wellness and health promotion programs.

- Analyzing data, performing needs assessments, and developing and evaluating new services for older persons, adults with physical disabilities, and their families.
- Providing training to agency staff and staff in the aging and disabilities network on a range of topics related to the provision of services to older persons and adults with physical disabilities.

In carrying out these functions, DSAAPD maintains strong partnerships with agencies in the aging and disabilities networks throughout the State including hospitals, senior centers, service organizations, advocacy groups, and others. DSAAPD staff members participate in nearly 50 community boards, committees and task forces, working jointly on a range of issues including transportation, housing, emergency preparedness, health promotion, domestic violence, and Medicare fraud.

DSAAPD has a proven track record in managing large-scale projects and in fulfilling the obligations associated with federal grants. In recent years, for example, DSAAPD has successfully managed grants associated with developing and operating Delaware's Aging and Disability Resource Center, Senior Medicare Patrol Program, and Lifespan Respite Program.

Supports will be available across DSAAPD's organizational structure to ensure the success of this project. Staff units will directly support the Project Director by assisting in program evaluation activities, outreach, financial management, procurement, training, quality improvement, and contract monitoring, among others. These supports will supplement the program oversight provided by the Planning Supervisor.

As noted in the Project Management section above, DSAAPD will hire a Planner IV to serve in the capacity of Project Director. The person selected for this position must have a high level of competency required by the State of Delaware and must have the background needed to fulfill the specific tasks required as part of this project. In lieu of a staff resume, a copy of the State's requirements document for the Planner IV position is attached.

With regard to sustainability of this project, Delaware is committed to strengthening its home and community-based long term services and supports system and recognizes the need to take innovative approaches to incorporating new programs which fill gaps in the existing system as well as expanding the capacity of the system to meet growing demands. In general, the State has taken several approaches to addressing this need, all of which will be applied toward sustaining the progress achieved in this project. One approach has been to shift resources that had heretofore been used for facility-based care to augment funds available for community-based care. Second, DSAAPD has been engaged in an active effort to streamline existing home and community based services to create efficiencies in order to provide these services to more persons in need. Finally, DSAAPD regularly advocates on behalf of its constituent populations with outside organizations to ensure that resources are directed toward programs and services which meet the needs of these populations. DSAAPD anticipates that the evaluation component of this project will highlight the areas of program development which have been most effective in filling the gaps in its current dementia-capable system of services and supports and will employ such strategies to promote the availability of resources to ensure the continuation of those interventions.

## Delaware Alzheimer's Disease Initiative Workplan

**Measurable Outcome(s):** 1) improved access to legal services among persons with ADRD and their caregivers; 2) decreased health and welfare risk among persons with ADRD who live alone; 3) improved knowledge of behavior management strategies among ADRD caregivers; 4) increased amount of time off among ADRD caregivers; 5) increased community engagement among persons with ADRD

**Major Objectives:** 1) expand the availability of supportive services to persons with ADRD who live alone in a community setting; 2) expand the availability of supportive services to persons living with moderate to severe ADRD and their caregivers; 3) increase support available to family caregivers through the provision of training and consultation on behavior symptom management.

								Yea	ar 1					
Major Objectives	Key Tasks	Lead Person	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
All Objectives (Planning Phase)	Hire and orient project director	Planning Supervisor	х											
	Convene Steering Committee	Planning Supervisor, Project Director		х										
	Establish project pages on internet and intranet	DSAAPD Web Developer		х										
	Conduct a baseline assessment	Project Director (with support from DSAAPD Planning Unit)		x	x									
	Develop project workplan	Project Director (with support from Steering Committee)			x	х	х							
	Participate in planning phase exit conference	Project Director						х						
Objective 1: Expand supportive services for persons with ADRD who live alone	Develop Request for Information (RFI) for sensor technologies	Project Director (with support from DSAAPD Contracts Unit)							х	х				
	Issue RFI	Project Director (with support from DSAAPD Contracts Unit)									х			

								Yea	ar 1					
Major Objectives	Key Tasks	Lead Person	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
	Review information submitted by prospective vendors	Project Director (with support from DSAAPD Planning Unit)												x
	Select sensory technology(ies) to include in pilot	Project Director (with support from DSAAPD Planning Unit)												x
Objective 2: Expand supportive services	Review existing service specifications for legal services, lifespan respite and community living	Project Director (with support from DSAAPD Planning Unit)							x					
	Revise service specifications to include a targeted ADRD component	Project Director (with support from DSAAPD Planning Unit)								x				
	Evaluate the capacity of current vendors to provide ADRD targeted services	Project Director (with support from DSAAPD Contracts Unit)							x	x				
	Amend service contracts, as appropriate and/or select new contractors	Project Director (with support from DSAAPD Contracts Unit)								x	x			
Objective 3: Provide Caregiver Behavior Management Training and Consultation	Initiate service delivery Review currently- available evidence-based training materials for caregivers	Service Contractors Project Director (with support from DSAAPD Planning and Training Units)							x	x	X			
	Purchase training materials	Project Director (with support from DSAAPD Training Unit)									x			
	Conduct train-the-trainer sessions	Project Director (with support from DSAAPD										Х	Х	Х

								Yea	ar 1					
Major Objectives	Key Tasks	Lead Person	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
		Training Unit)												
All Objectives (Staff/Partner Training)	Develop training agenda(s) for staff/partner training	Project Director (with support from Steering Committee and DSAAPD Training Unit)							x	x				
	Develop and execute staff/partner training- related contracts	Project Director (with support from DSAAPD Contract Unit)									x			
	Schedule staff/partner training events	Project Director (with support from DSAAPD Training Unit)										x		
	Conduct staff/partner training	Training Contractor											х	х
All Objectives (Marketing/Outreach)	Reach out to community partners for assistance in developing outreach strategy	Project Director (with support from DSAAPD Planning Unit)							x					
	Develop outreach/marketing plan	Project Director (with support from DSAAPD Planning Unit)							x	x				
	Develop contract(s) to develop communications materials	Project Director (with support from DSAAPD Contracts Unit)									х			
	Execute communications contract(s)	Project Director (with support from DSAAPD Contracts Unit)										х		
	Initiate marketing/outreach activities	Outreach Contractor										х	х	x
All Objectives (Evaluation)	Develop and execute	Project Director (with							Х					

			Year 1											
Major Objectives	Key Tasks	Lead Person	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
	contract for evaluation contractor	support from DSAAPD Contracts Unit)												
	Develop pre and post questionnaires	Evaluation contractor								Х	Х			
	Pilot questionnaires	Evaluation Contractor										Х	Х	Х

			Year 2											
Major Objectives	Key Tasks	Lead Person	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
Objective 1: Expand supportive services for persons with ADRD who live alone	Issue sensor technology Request for Proposals (RFP)	Project Director (with support from DSAAPD Contracts Unit)	х											
	Review sensor technology proposals	Project Director (with support from DSAAPD planning and Contracts Units)				х								
	Select sensor technology contractor(s)	Project Director (with support from DSAAPD Planning and Contracts Units)					х							
	Execute sensor technology contract(s)	Project Director (with support from DSAAPD Contracts Unit)						х						
	Initiate sensor technology service	Sensor technology Contractor(s)							Х					
Objective 2: Expand supportive services	Continue operation of legal services, respite, and community living services	Service Contractors	х	x	х	х	х	х	x	х	х	х	Х	x
Objective 3: Provide Caregiver Behavior Management Training and Consultation	Update Caregiver Resource Center service specifications	Project Director (with support from DSAAPD Planning Unit)	х	x										
	Amend Caregiver Resource Center contracts as appropriate	Project Director (with support from DSAAPD Contracts Unit)			x	х								
	Initiate caregiver training and consultation services	Caregiver Resource Center Contractors					х							
All Objectives (Staff/Partner	Establish schedule for	Project Director (with	Х											

			Year 2											
Major Objectives	Key Tasks	Lead Person	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
Training)	refresher training/training for new staff/partners	support from Steering Committee and DSAAPD Training Unit)												
	Carry out staff/partner training on a scheduled basis	Project Director (with support from DSAAPD Training Unit)			x			х			x			х
All Objectives (Marketing/Outreach)	Continue to conduct outreach/marketing activities on an ongoing basis in accordance with outreach/marketing plan and in coordination with community partners	Project Director (with support from DSAAPD Planning Unit)	х	x	x	x	x	x	x	x	x	x	х	x
All Objectives (Evaluation)	Coordinate with contractors to administer pre- and post-enrollment questionnaires	Project Director (with support from DSAAPD Planning Unit and Contractors)	Х	х	x	x	x	х	х	х	х	х	Х	x
	Conduct in-depth interviews with a small sample of participants from each new/expanded service	Project Director (with support from DSAAPD Planning Unit)						х						x

			Year 3											
Major Objectives	Key Tasks	Lead Person	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12
Objective 1: Expand supportive services for persons with ADRD who live alone	Continue operation of sensor technology services	Service Contractors	х	х	Х	х	х	х	х	Х	х	х	х	x
Objective 2: Expand supportive services	Continue operation of legal services, respite, and community living services	Service Contractors	х	х	Х	х	х	х	х	Х	х	х	х	x
Objective 3: Provide Caregiver Behavior Management Training and Consultation	Continue operation of caregiver training and consultation services	Caregiver Resource Center Contractors	Х	х	Х	х	х	х	х	Х	х	х	Х	x
All Objectives (Staff/Partner Training)	Carry out refresher training and training for new/partner staff on a scheduled basis	Project Director (with support from DSAAPD Training Unit)			Х			х			х			x
All Objectives (Marketing/Outreach)	Continue to conduct outreach/marketing activities on an ongoing basis in accordance with outreach/marketing plan and in coordination with community partners	Project Director (with support from DSAAPD Planning Unit)	x	x	х	x	x	x	x	х	x	x	x	x
All Objectives (Evaluation)	Coordinate with contractors to administer pre- and post-enrollment questionnaires	Project Director (with support from DSAAPD Planning Unit and Contractors)	х	х	Х	х	х	х	х	Х	х	х	х	x
	Conduct in-depth interviews with a small sample of participants	Project Director (with support from DSAAPD Planning Unit)						х						x

## Budget Justification Delaware Alzheimer's Disease Initiative Year 1

Object Class Category	Fede	eral Funds	No	n-Federal Cash	Non-Federal In- Kind	Total	Justification
Personnel	\$	-	\$	25,243		\$ 25,243	Funds in this line represent salary for .50 FTE Planner IV
							position.
Fringe Benefits	\$	-	\$	13,495		\$ 13,495	Fringe benefits are broken down as follows:
							Pension 20.66%
							Worker's Comp 1.6%
							Unemployment Insurance .17%
							FICA 6.2%
							Medicare 1.45%
							Sub-total = 30.88%
							Health insurance \$5,700
							Total = 53.46%
Travel	\$	-	\$	-	\$-	\$ -	No funds are requested in this line.
Equipment	\$	-	\$	-	\$-	\$ -	No funds are requested in this line.
Supplies	\$	-	\$	-	\$-	\$ -	No funds are requested in this line.
Contractual	\$	300,000	\$	70,000		\$ 370,000	Federal:
							Evaluation Consultant: \$49,000
							Outreach Planning and Development: \$49,000
							Staff/Partner Training: \$27,000
							Legal Services: \$50,000
							Caregiver Training: \$25,000
							Lifespan Respite: \$50,000
							Community Living: \$50,000
							Match:
							Alzheimer's Day Services: \$70,000
							NOTE: Contractor Information will be made available once
							services are procured.
Other	\$	677	\$	226	\$-	\$ 903	Funds in this line are for a State-required audit.
Indirect Charges	\$	-	\$	-	\$-	\$ -	No funds are requested in this line.
Total	\$	300,677	\$	108,964	\$-	\$ 409,641	Total project costs for Year 1.

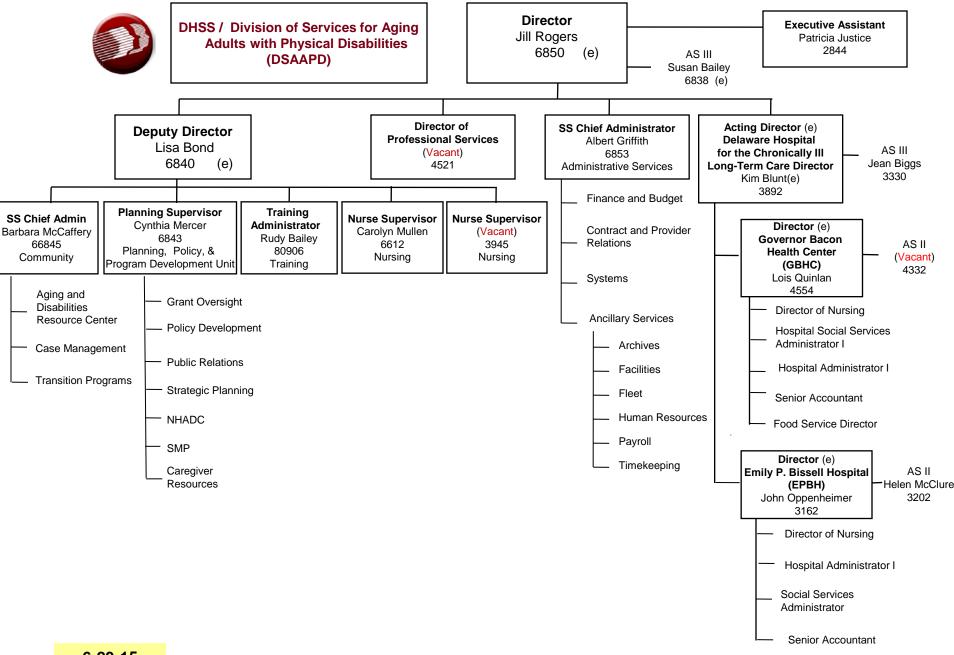
## Budget Justification Delaware Alzheimer's Disease Initiative Year 2

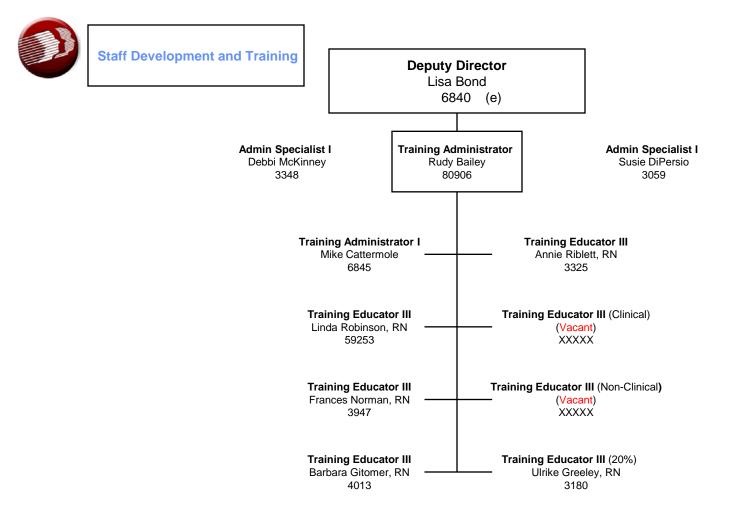
Object Class Category	Fede	eral Funds	No	on-Federal Cash	Non-Federal In- Kind	-	Гotal	Justification
Personnel	\$	-	\$	25,243		\$	25,243	Funds in this line represent salary for .50 FTE Planner IV
								position.
Fringe Benefits	\$	-	\$	13,495		\$	13,495	Fringe benefits are broken down as follows:
								Pension 20.66%
								Worker's Comp 1.6%
								Unemployment Insurance .17%
								FICA 6.2%
								Medicare 1.45%
								Sub-total = 30.88%
								Health insurance \$5,700
								Total = 53.46%
Travel	\$	-	\$	-	\$-	\$	-	No funds are requested in this line.
Equipment	\$	-	\$	-	\$-	\$	-	No funds are requested in this line.
Supplies	\$	-	\$	-	\$-	\$	-	No funds are requested in this line.
Contractual	\$	300,000	\$	70,000		\$	370,000	Federal:
								Outreach: \$20,000
								Staff/Partner Training: \$5,000
								Legal Services: \$50,000
								Sensor technology: \$75,000
								Caregiver Training: \$50,000
								Lifespan Respite: \$50,000
								Community Living: \$50,000
								Match:
								Alzheimer's Day Services: \$70,000
								NOTE: Contractor Information will be made available once
								services are procured.
Other	\$	677	\$	226	\$-	\$	903	Funds in this line are for a State-required audit.
Indirect Charges	\$	-	\$	-	\$-	\$	-	No funds are requested in this line.
Total	\$	300,677	\$	108,964	\$-	\$	409,641	Total project costs for Year 2.

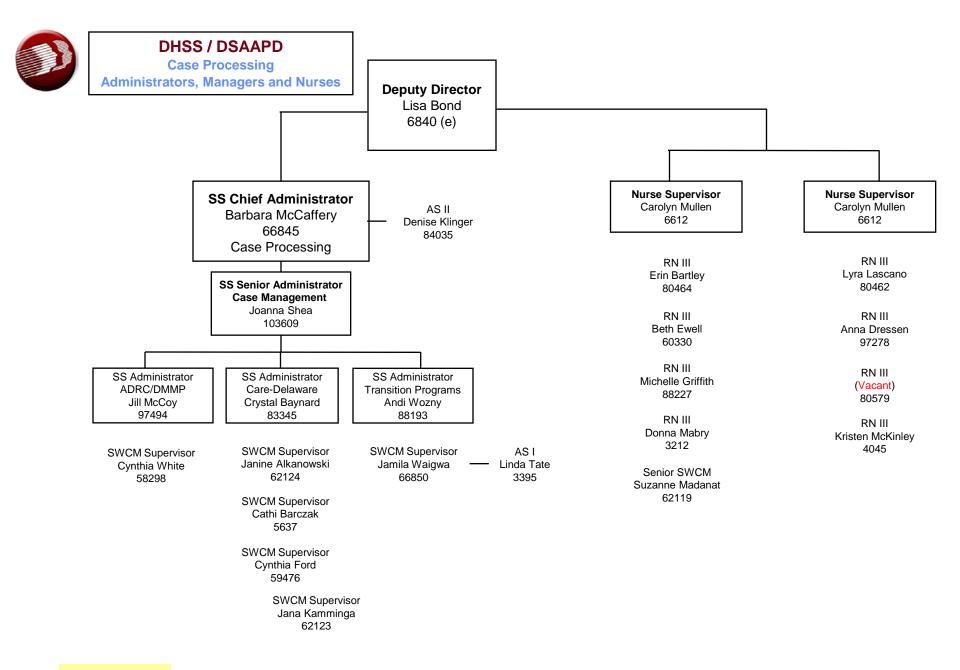
# Budget Justification Delaware Alzheimer's Disease Initiative Year 3

Object Class Category Fed		Federal Funds		on-Federal Cash	Non-Federal In- Kind	Total		Justification		
Personnel	\$	-	\$	25,243		\$	25,243	Funds in this line represent salary for .50 FTE Planner IV		
								position.		
Fringe Benefits	\$	-	\$	13,495		\$	13,495	Fringe benefits are broken down as follows:		
								Pension 20.66%		
								Worker's Comp 1.6%		
								Unemployment Insurance .17%		
								FICA 6.2%		
								Medicare 1.45%		
								Sub-total = 30.88%		
								Health insurance \$5,700		
								Total = 53.46%		
Travel	\$	-	\$	-	\$-	\$	-	No funds are requested in this line.		
Equipment	\$	-	\$	-	\$-	\$	-	No funds are requested in this line.		
Supplies	\$	-	\$	-	\$-	\$	-	No funds are requested in this line.		
Contractual	\$	300,000	\$	70,000		\$	370,000	<u>Federal</u> :		
								Outreach: \$20,000		
								Staff/Partner Training: \$5,000		
								Legal Services: \$50,000		
								Sensor technology: \$75,000		
								Caregiver Training: \$50,000		
								Lifespan Respite: \$50,000		
								Community Living: \$50,000		
								Match:		
								Alzheimer's Day Services: \$70,000		
								NOTE: Contractor Information will be made available once		
								services are procured.		
Other	\$	677	\$	226	\$-	\$	903	Funds in this line are for a State-required audit.		
Indirect Charges	\$	-	\$	-	\$-	\$	-	No funds are requested in this line.		
Total	\$	300,677	\$	108,964	\$-	\$	409,641	Total project costs for Year 3.		

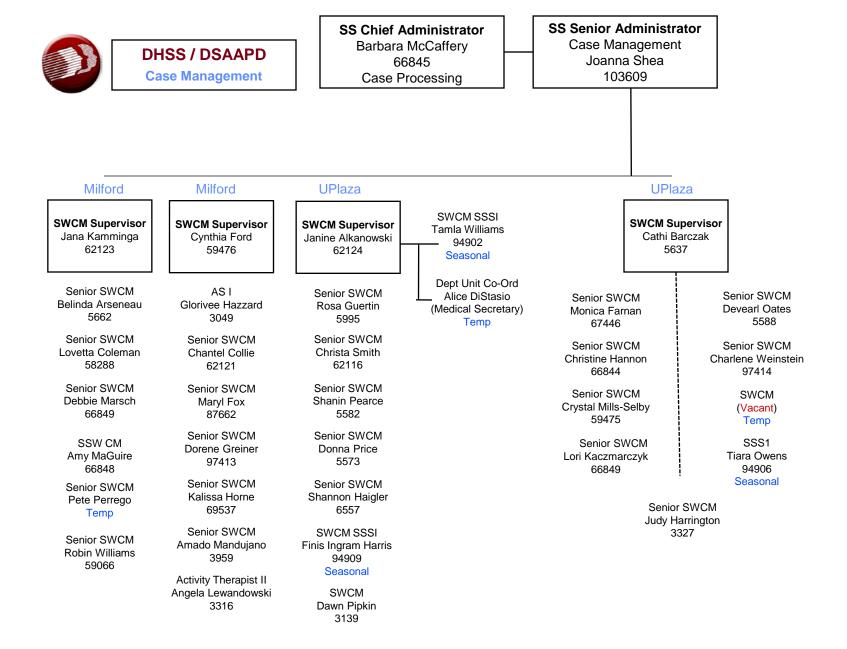
	Year 1				Year 2			Year 3	TOTAL					
	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total		
Personnel	\$ -	\$ 25,243	\$ 25,243	\$-	\$ 25,243	\$ 25,243	\$ -	\$ 25,243	\$ 25,243	\$ -	\$ 75,729	\$	75,729	
Description	Funds in this line represent salary for .50 FTE Planner IV position.													
		Year 1			Year 2			Year 3			TOTAL			
	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total		
Fringes	\$ -	\$ 13,495	\$ 13,495	\$-	\$ 13,495	\$ 13,495	\$-	\$ 13,495	\$ 13,495	\$-	\$ 40,485	\$	40,485	
Description	Funds in this line represent fringe costs at 33.08% plus health insurance at \$5700 for a total rate of 53.46%													
		Year 1		Year 2			Year 3			TOTAL				
	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total		
Travel	\$ -	\$-	\$ -	\$-	\$ -	\$-	\$-	\$-	\$-	\$-	\$ -	\$	-	
Description	No funds are	requested in	this line.											
	Year 1				Year 2			Year 3		TOTAL				
	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total		
Equipment	\$ -	\$-	\$ -	\$ -	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$	-	
Description	No funds are	requested in	this line.											
		Year 1		Year 2			Year 3			TOTAL				
	Federal	Match Total		Federal Match		Total Federal		Match Total		Federal	ederal Match Tota			
Supplies	\$ -	\$-	\$ -	\$ -	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$	-	
Description	No funds are requested in this line.													
		Year 1		Year 2			Year 3			TOTAL				
	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total		
Contractual	\$ 300,000	\$ 70,000 \$ 370,000		\$ 300,000	\$ 300,000 \$ 70,000 \$ 370,000					\$ 900,000 \$ 210,000 \$ 1,110,000			110,000	
	Federal funds		•					gal services, s	sensor techno	ology, caregiv	ver training,	respite	e, and	
Description	community li	ving. State m	atching fund	s are used to	re used to support Alzheimer's day s									
		Year 1	Year 1		Year 2		Year 3			TOTAL				
	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total		
Other	\$ 677	\$ 226	\$ 903	\$ 677	\$ 226	\$ 903	\$ 677	\$ 226	\$ 903	\$ 2,031	\$ 678	\$	2,709	
Description	Funds in this	line are for a	State-requir	ed audit.										
		Year 1		Year 2			Year 3			TOTAL				
	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total	Federal	Match	Total		
Indirect Charges	\$-	\$-	\$-	\$-	\$ -	\$-	\$-	\$-	\$-	\$ -	\$ -	\$	-	
Description	No funds are	•												
TOTALS	\$ 300,677	\$ 108,964	\$ 409,641	\$ 300,677	\$ 108,964	\$ 409,641	\$ 300,677	\$ 108,964	\$ 409,641	\$ 902,031	\$ 326,892	\$1,	228,923	

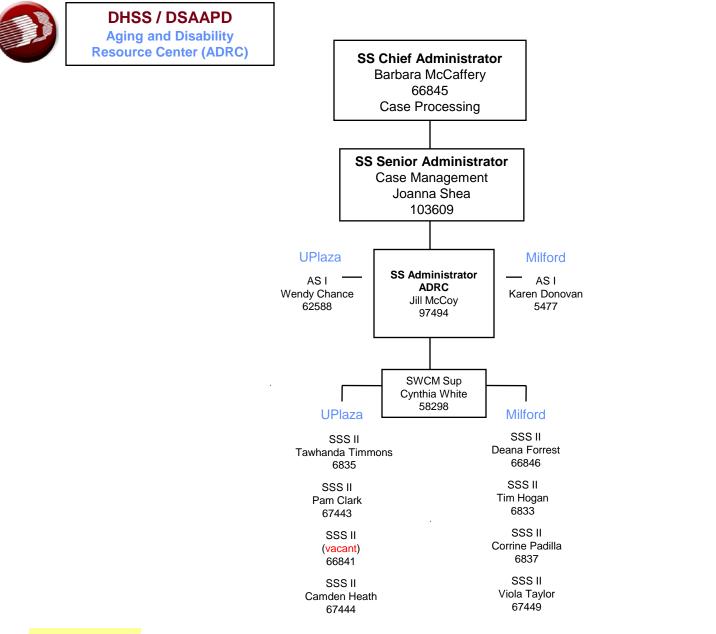


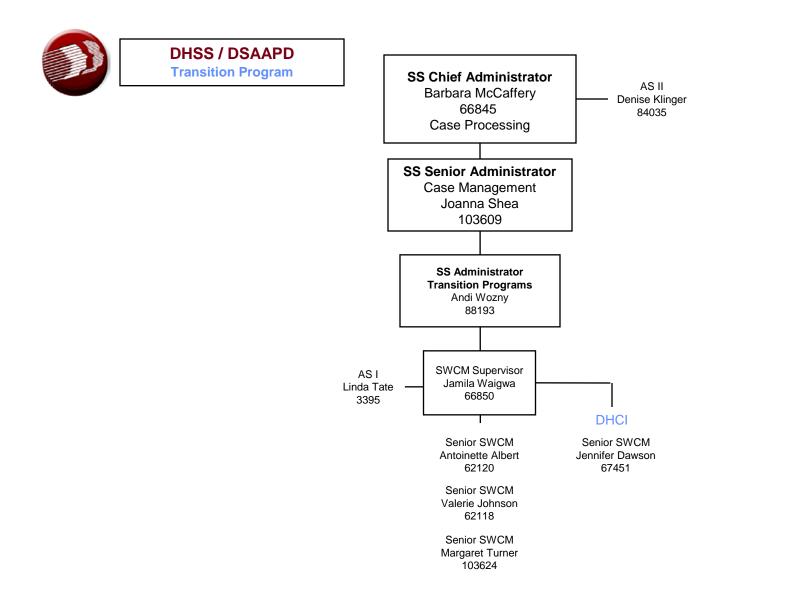




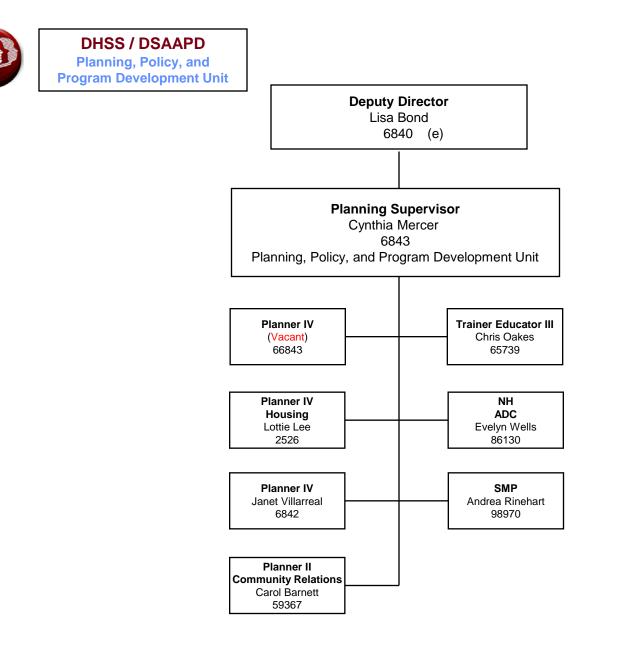
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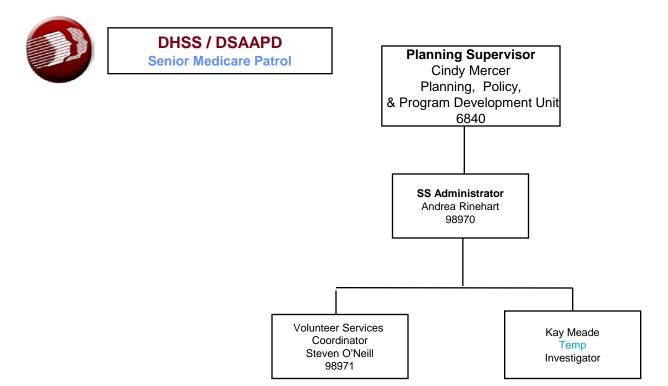


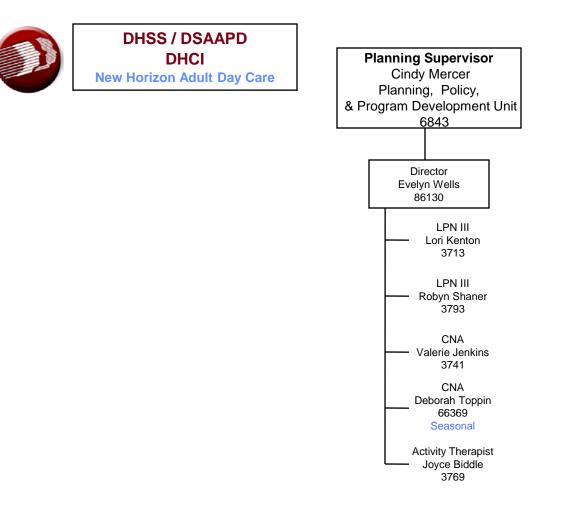


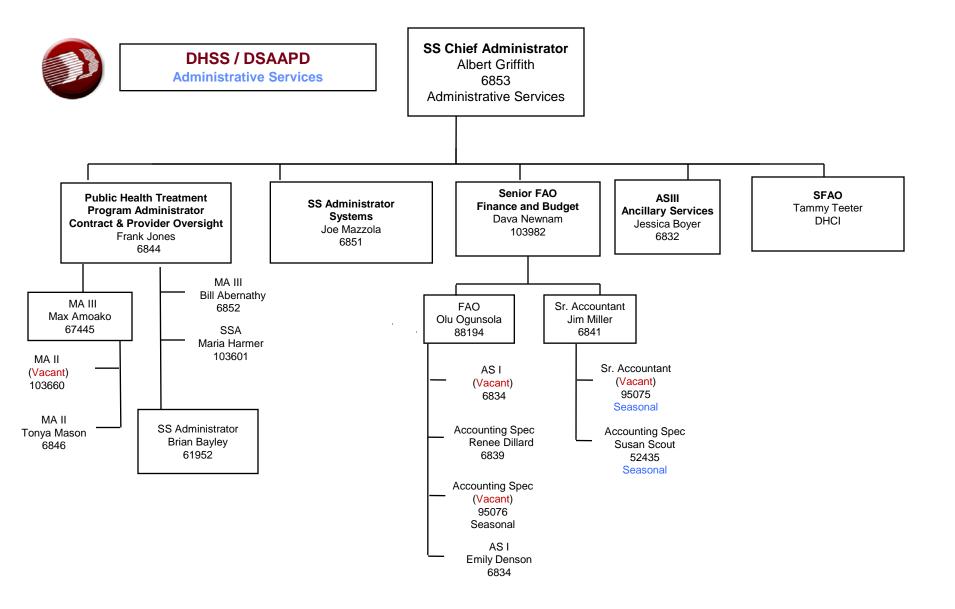


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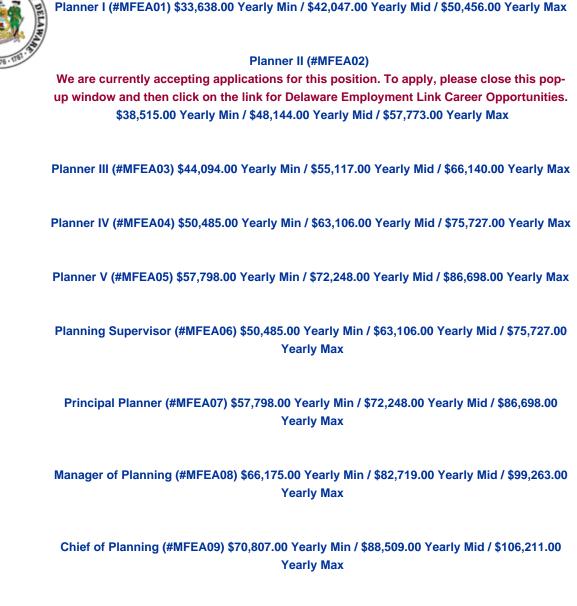








Office of Management and Budget/Human Resource Management





Email Me when a Job Opens for the above position(s)

#### **Description of Occupational Work**

This class series uses nine levels of work in the Engineering, Planning and Technical Services occupational group, Planning occupational series and describes full performance professional planning work. Full performance professional planning encompasses analyzing past and current trends, synthesizing the results with the present regulatory, social, economic, political, and environmental situation, conceptualizing and developing viable alternatives and recommendations, presenting the findings and recommendations to public officials and citizens, and evaluating the impact and outcomes of those recommendations.

Note: The career ladder incorporates levels I, II, III and IV; specifically, depending upon agency needs, positions can be classified up to the IV level (highest level in the career ladder). The Planner I level is to provide entry for hiring new employees into the class series but does not preclude hiring new employees at higher levels. To implement the career ladder, current employees are assigned to the level for which they meet minimum qualifications and promotional standards. Employees may be promoted through the career ladder in accordance with promotional

standards for those levels assigned to an agency. The promotional standards, a selection document under separate cover, set forth the criteria that defines and describes the complexity of work required at the various levels. Based on the level of work described at the IV level and agency needs, there would be opportunity for only a select number of positions to be filled at this level.

The Planner V, Planning Supervisor, Principal Planner, Manager of Planning and Chief of Planning, although not part of the career ladder, provides competitive opportunity for movement of employees; thus, there is a "dual career track" available.

#### **Essential Functions**

Essential functions are fundamental, core functions common to all positions in the class series and are not intended to be an exhaustive list of all job duties for any one position in the class. Since class specifications are descriptive and not restrictive, incumbents can complete job duties of similar kind not specifically listed here.

- Analyze and assess data, problems, and issues and their impact on programs, plans or the current environment.
- Define and evaluate alternative uses of resources, viable options/approaches and anticipated costs and benefits, consequences and outcomes using present and projected information.
- Develop recommended course of action for public and private decisions in formal plans and policies including
  policy statements, budget allocations, regulations and/or legislation to affect and facilitate change and reach
  objectives.
- Formulate plans and policies to meet the social, economic, and physical needs of communities.
- Develop, promote and market strategies for the implementation of plans, policies and programs.
- Build consensus with community leaders, customers, advocates, and other affected parties via negotiations, mediation and facilitation.
- Involve and educate special interest groups, customers, and public officials via variety of forums, e.g., seminars, workshops, conferences, newsletters, assessments, and analytical reports.
- Coordinate planning activities and policies across state, regional, county and local levels; integrate with other entities outside the state.
- Provide technical assistance, training and education for understanding and managing change.
- Design and manage the planning process.
- Systematically evaluate the impact of plan implementation and incorporate findings with the ongoing planning process.

#### Levels of Work

#### Planner I

This class describes first level planning work encompassing the full range of planning activities as described in Essential Functions.

- Performs full range of planning activities.
- Learns agency operations.
- Receives close supervision in agency processes and procedures.
- Responsible for less complex planning projects.
- Responsible for providing assistance to higher level planning staff on more complex projects.

• Regular contacts are typically with internal agency staff and with others outside the supervisory chain, regardless of the method of communication, for the purpose of coordinating and gathering information.

### Planner II

This class describes full performance planning work for projects of varying complexities including complex projects and providing assistance to higher level planning staff on the most complex projects.

- Full performance (full range of planning activities).
- Receives less supervisory direction and assistance.
- Responsible for full range of planning for projects of varying complexities including complex projects.
- Project leader on less complex projects (can include or be limited to contractual staff).
- Responsible for providing assistance to higher level planning staff on the most complex projects.
- Regular contacts are typically with internal agency staff and with others outside the supervisory chain, regardless of the method of communication, for the purpose of clarifying underlying rationale, intent, and motive by educating others on unfamiliar concepts and theories.

# Planner III

This class describes full performance planning work for the most complex planning projects that may include work at a project lead level.

- Full performance (full range of planning activities) for the most complex planning projects.
- Work at this level may include full performance project leaders (can include or be limited to contractual staff). Typical elements of direct control over other positions/employees by a project leader include assigning work, monitoring progress and work flow, checking the product for timeliness, correctness and soundness, scheduling work and establishing work standards.
- Receives general supervision supervisor does periodic review of progress.
- Regular contacts are typically with internal agency staff and with others outside the supervisory chain and agency, regardless of the method of communication, for the purpose of educating others on the benefits and intent of proper planning in order to gain support for projects and strategies.

### Planner IV

This class is the expert level in a broad area of planning requiring the highest level of technical expertise. Positions at this level will report to top management/agency officials.

- Technical expert in broad area of planning.
- Acknowledged as expert (non managerial) planning professional position by peers and management by being delegated to function as a recognized expert in the application, use and adaptation of guidelines related to a broad area of planning; positions are recognized by management and peers as authoritative sources of expertise who possess a comprehensive knowledge in a broad area of planning and apply such knowledge to assignments; managers, peers, and users recognize and rely on position to provide guidance, direction, and instruction regarding the proper application and adaptation of standards (such as federal guides, rules and regulations), principles, concepts, techniques, systems and other guidelines related to the area of expertise.
- Formulates policies to carry out and implement activities.
- Provide expert direction to management on planning activities on a statewide basis.
- Direct and oversee all activities related to a broad area of planning.
- Directly influence management decisions and the direction of a broad area of planning.
- Formulates strategies that support objectives and activities of a broad area of planning or changes in direction and new initiatives.
- May represent Cabinet Secretary at state, county and local levels at planning meetings.
- Note: This level does not preclude positions also having responsibilities as project leaders.

### Planner V

This class is the expert level in a broad area of planning requiring the highest level of technical expertise at the state, regional and national level. Positions at this level will report to top management/agency officials.

• Performs essential functions of the IV level.

- Acknowledged as expert (non managerial) planning professional at the state, regional and national level.
- Appointed by Cabinet Secretary to represent the Department at the national and regional level on boards and professional association committees to develop policy and professional standards.
- On a regular and continuing basis, represents Cabinet Secretary at state, regional and national levels at planning meetings and conferences.

## **Planning Supervisor**

This class is the full supervisory level.

- First line supervisor.
- Supervision is exercised over at least two or more merit, full time positions (per the Merit Rules), one of which
  must be in the professional planning series and cannot be limited to contractual staff. The elements of
  supervision include planning, assigning, reviewing, evaluating, coaching, training, and recommending hire, fire
  and discipline. Supervision must include responsibility, as needed, for providing documentation to support
  recommended corrective and disciplinary actions, signing performance plans and appraisals, and resolving
  informal grievances.
- Work at this level may include functioning as full performance project leader in addition to being a first line supervisor.
- Work at this level may include functioning as a technical expert in a specialized area of planning.
- May represent Cabinet Secretary at state, county and local levels at planning meetings.
- Regular contacts are typically with internal agency staff and with others outside the supervisory chain and agency, regardless of the method of communication, primarily for the purpose of educating others on the benefits and intent of proper planning in order to gain support for projects and strategies and to ensure compliance with requirements, goals and objectives of agency.

# **Principal Planner**

This class provides planning policy expertise at the State level. Positions at this level are found at the State Office of Planning Coordination with broad responsibilities for coordinating the State's overall planning policy or at a Department's Division level, reporting to a Division Director or Deputy Director, with responsibilities for functioning as the top management level of planning professional for an entire Division in representing the State's top officials in planning policies at the state, regional and national level.

- Staff Management/Supervision
- Manage the activities and operation of a planning unit or coordinate the State's overall policy development, implementation and evaluation with other planning staff at the State policy level. Administrative
- Determines goals and objectives of a planning unit or focus groups.
- Integrates State level plans with other state, federal, local agencies and the private sector.
- May be responsible for developing and monitoring budgetary or fiscal elements of operations, projects and/or programs. Planning Policy
- Formulates planning policy at the State level.
- Provides oversight and leadership for inter-agency and inter-governmental planning activities ensuring consistency with existing policy and regulatory requirements.
- Provides planning policy direction to agency officials, Governor's Office, Cabinet Committee on State Planning Issues, and the General Assembly.
- Formulates strategies that support objectives and activities of State planning/policy, including changes in direction and new initiatives.
- Regular contacts are typically with internal agency staff and with others outside the supervisory chain and agency, regardless of the method of communication, primarily for the purpose of providing leadership on State level planning policy issues and new initiatives.
- Note: This level does not preclude positions also having responsibilities as project leaders.

# Manager of Planning

This class is the management level providing comprehensive strategic and tactical planning for a Department to ensure appropriate public program services and infrastructure are developed and maintained. Positions at this level are employed in a centralized planning function for a Department which involves planning for the entire Department and responsibility for the integration of the Department's overall planning functions. Reports to an appointed official.

- Staff Management/Supervision:
- Directs planning staff through subordinate planner supervisors and other planning unit supervisory positions.
- Manages work in terms of what to accomplish how to do it is prescribed to subordinates only at the level of policies and general rules. Administrative:
- Administers multiple planning programs/projects providing leadership and direction in shaping a Department's objectives, long-range planning programs, proposed legislation, policies and emerging technologies/methodologies that impact the Department's overall planning functions.
- Determines operational, project and program goals and objectives; sets forth general policies.
- Responsible for developing and monitoring budgetary or fiscal elements of operations, projects and/or programs.
- Plans, organizes, staffs, and coordinates work operations with other Managers to ensure integration of the Department's planning functions. Planning Policy
- Provides advisory services to top department and state officials in a subspecialty area including formulating planning policy at the State level.
- Provides oversight and leadership for inter-agency and inter-governmental planning activities ensuring consistency with existing policy and regulatory requirements.
- Formulates strategies that support objectives and activities of State planning/policy, including changes in direction and new initiatives.
- Regular contacts are typically with internal agency staff and with others outside the supervisory chain and agency, regardless of the method of communication, primarily for the purpose of providing leadership on State level planning policy issues and new initiatives; advising management and others on planning issues; developing, negotiating and managing public/private partnerships, and ensuring compliance with regulatory requirements, goals and objectives of agency.

# Chief of Planning

This class is the management level providing direction on public policy issues to a Cabinet Secretary and the Governor's Office and the impact of such issues on social, economic, scientific, legal, diplomatic, environmental, and other issues of statewide, regional and national significance. A position at this level is the highest level planning professional resource for a Department and the State.

- Staff Management/Supervision:
- Directs planners and planning staff.
- Oversees the implementation of planning and resources management programs.
- Directs and coordinates overall planning function for specialty area or serves as principal contact for issues impacting on the State's overall plan for quality of life.
- Directs regulatory functions of planning programs.
- Oversees and determines appropriateness of planning proposals based on community need, cost, relationship to existing services, benefits and consequences to the public, and relevance to the changing environment for the planning specialty area.
- Oversees and directs major/State funding programs for planning initiatives.
- Serves as top agency representative to the Governor's Office and various councils. Planning Policy
- Provides planning policy direction to agency officials, the Governor's Office, Cabinet Committee on State Planning Issues, and the General Assembly.
- Provides direct staff support to a Cabinet Secretary or the Governor's Office in development of policies, programs and management plans.
- Develops, decides and implements department and/or state policy.
- Builds and achieves consensus among departments and other government agencies for strategic planning initiatives.
- Prepares policy position papers on complex and controversial issues requiring action of top State officials. Position papers typically require integration of governmental, budgetary, financial, program planning and policy analysis.
- Drafts legislation, executive orders, rules and regulations for planning programs and policies.
- Chairs departmental and gubernatorial committees, task forces and study groups.
- Regular work contacts with others outside the supervisory chain, regardless of the method of communication, are for the purpose of negotiating as an official state representative in order to obtain support or cooperation where there is no formal rule or law in requiring such action. Such negotiation has fiscal or programmatic

impact on an agency. In reaching settlements or compromises, the position does not have a rule or regulation to enforce but is accountable for the function.

#### Knowledge, Skills and Abilities

The intent of the listed knowledge, skills and abilities is to give a general indication of the core requirements for all positions in the class series; therefore, the KSAs listed are not exhaustive or necessarily inclusive of the requirements of every position in the class.

- Knowledge of the principles and practices of the planning profession.
- Knowledge of the areas of concentration, e.g., environmental, social, land use, health, emergency management, transportation, etc., as it applies to planning functions.
- Knowledge of historical and contemporary issues in the planning profession.
- Knowledge of the intergovernmental and inter-departmental planning activities.
- Knowledge of the principles and practices of project leadership and project management.
- Knowledge of the applicable laws, rules and regulations.
- Knowledge of public policy formulation and evaluation.
- Knowledge of state and federal funding sources and budgetary cycles, procedures.
- Skill in formulating problems and designing and conducting research.
- Skill in applying analytical methods including computer and statistical methods to planning problems.
- Skill in designing mechanisms for collecting and evaluating information such as surveys.
- Skill in building interpersonal relationships in order to work effectively with peers, customers, the public and state and federal officials.
- Skill in organizing and facilitating focus groups, meetings, symposium and other public forums.
- Ability to develop comprehensive plans and visualize their efforts.
- Ability to see issues in a global perspective and understand the relationship with other initiatives within and outside the agency.
- Ability to integrate various disciplines into the planning process.
- Ability to analyze and examine issues and options.
- Ability to mediate and facilitate group discussions.
- Ability to synthesize, interpret and simplify complex issues.
- Ability to be resourceful, use initiative and sound judgment in defining and preparing significant substantive elements of planning activities in the public interest.
- Ability to develop recommended courses of action and express ideas clearly, concisely, and effectively, both orally and in writing.

#### In addition to the above Knowledge, Skills and Abilities, the Planner V requires:

- Skill in developing national standards for the planning profession.
- Skill in public policy formulation and evaluation at the state, national and regional levels.

#### In addition to the above Knowledge, Skills and Abilities, the Planning Supervisor requires:

• Skill in the principles and practices of supervision.

# In addition to the above Knowledge, Skills and Abilities, the Principal Planner, Manager of Planning and Chief of Planning require:

- Knowledge of budget processes and fiscal policy at the state and federal level.
- Skill in the principles and practices of management and administration.
- Skill in the analysis and development of legislation.
- Skill in managing public/private partnerships.
- Skill in the principles and practices of producing and implementing public policy.

#### Job Requirements

#### JOB REQUIREMENTS for Planner IV

Applicants must have education, training and/or experience demonstrating competence in each of the following areas:

- 1. At least three years experience as a planner OR at least three years experience in a planning function.
- 2. Experience in having responsibility for a most complex planning project (complexity is to be determined based on variables such as discipline, population, fiscal impact, geographic area, social impact, planning horizon, public involvement, research and analysis, and the nature of the project team).
- 3. Experience in serving as a subject matter expert in the field listed in the selective.

_				
	CLASS: MFEA01	EST: 7/1/1998	REV: 1/1/1900	FORMERLY JOB CLASS: 76485
_	CLASS: MFEA02	EST: 7/1/1998	REV: 1/1/1900	FORMERLY JOB CLASS: 76486
-	CLASS: MFEA03	EST: 7/1/1998	REV: 1/1/1900	FORMERLY JOB CLASS: 76487
_	CLASS: MFEA04	EST: 7/1/1998	REV: 1/1/1900	FORMERLY JOB CLASS: 76488
_	CLASS: MFEA05	EST: 7/1/1998	REV: 1/1/1900	FORMERLY JOB CLASS: 76489
-	CLASS: MFEA06	EST: 7/1/1998	REV: 1/1/1900	FORMERLY JOB CLASS: 76490
_	CLASS: MFEA07	EST: 7/1/1998	REV: 1/1/1900	FORMERLY JOB CLASS: 76491
_	CLASS: MFEA08	EST: 7/1/1998	REV: 1/1/1900	FORMERLY JOB CLASS: 76492
-	CLASS: MFEA09	EST: 7/1/1998	REV: 1/1/1900	FORMERLY JOB CLASS: 76493

**Delaware Valley Chapter Headquarters** 399 Market Street, Suite 102 Philadelphia, PA 19106

215-561-2919 215-561-4663f Delaware Regional Office Tower Office Park 240 N. James St., Ste. 100-A Newport, DE 19804 South Jersey Regional Office 3 Eves Drive, Suite 310 Marlton, NJ 08053

302-633-4420 302-633-4494f 856-797-1212 856-797-1818f

# alzheimer's $\ref{eq:second}$ association<sup>®</sup>

#### July 1, 2015

To whom it may concern:

On behalf of the Alzheimer's Association Delaware Valley Chapter, I am writing to confirm our intent to participate in the Alzheimer's Disease Initiative grant, if awarded to the State of Delaware. Our agency has a long-standing multidimensional collaborative relationship with the Division of Services for Aging and Adults with Physical Disabilities, Department of Health and Social Services of the State of Delaware and we intend to partner with them on the proposed grant activities.

The Alzheimer's Association is dedicated to helping people with Alzheimer's disease, and their families, through education, advocacy, support and funding promising peer-reviewed scientific research. Our chapter programs and services include: A 24/7 Helpline (800.272.3900); consumer and healthcare provider education; care consultation; early stage services; support groups; safety services; multicultural outreach and advocacy. Our clinical Chapter staff are trained and experienced in providing these programs and service; and our service territory includes the entire state of Delaware, Southeastern PA and Southern NJ.

The Alzheimer's Association Delaware Valley Chapter supports the five initiatives in the Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) proposal. Broadening legal services for people with Alzheimer's disease and related disorders (ADRD), developing and piloting sensor technologies, training caregivers, adding respite services, and expanding community integration services are all needed by people with ADRD and their caregivers in Delaware. Our work throughout the Delaware Valley region confirms the need for these services DSAAPD proposes to provide. An important benefit of the proposed services is that they will be provided to individuals statewide.

The Alzheimer's Association Delaware Valley Chapter will support the activities of the grant by disseminating information about the project throughout the ADRD advocacy network, and we will also directly refer individuals in need of services to the DSAAPD's Aging and Disability Resource Center. When the DSAAPD prepares outreach and marketing materials, we can provide technical assistance. Assistance can also be provided in the development of planning of the grant's services that will be provided.

A key component of the partnership we commit to engage in is that we will convene the Implementation Steering Committee of the *State Plan to Address Alzheimer's Disease and Related Disorders* to provide members with information about the project and elicit feedback from them about implementation planning. I co-chair the Steering Committee with Cindy Mercer, Planning Supervisor from the DSAAPD and we expect to play an active role in the development of project plans and the review of implementation activities. The Steering Committee will serve in an advisory capacity throughout the three years of grant activities.

Sincerely. ate E. Macklin

Katie Macklin Executive Director Delaware Alzheimer's Association Delaware Valley Chapter <u>katie.macklin@alz.org</u>; 302-633-4420

Board of Directors Chair Greg Tigani Vice Chairs Chris Gruber Andrew L. Hunt Secretary Douglas L. Chaet, FACHE Treasurer Chad DeHart IV, CPA, CFE

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#### President & CEO Wendy L. Campbell

The official registration and financial information of Alzheimer's Disease and Related Disorder Association Delaware Valley Chapter may be obtained from the Commonwealth of Pennsylvania's Department of State by calling toll-free within Pennsylvania, 800-732-0999, and from New Jersey by calling the Attorney General of the State of New Jersey at 973-504-6215. Registration does not imply endorsement. -- United Way Member Agency In Delaware -- Member Community Health Charities Northeast



# DELAWARE HEALTH AND SOCIAL SERVICES

Division of Services for Aging and Adults with Physical Disabilities

July 2, 2015

To whom it may concern:

On behalf of the Delaware State Plan to Address Alzheimer's Disease and Related Disorders Implementation Steering Committee, I am writing to affirm my intent to participate in the Alzheimer's Disease Initiative grant if awarded to the Division of Services for Aging and Adults with Physical Disabilities, Department of Health and Social Services of the State of Delaware. I co-chair the Steering Committee with Katie Macklin, Executive Director of the Alzheimer's Association Delaware Valley Chapter. The Alzheimer's Association Delaware Valley Chapter and the Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) together with advocates, caregivers, and professionals from healthcare, education, and social services created the plan and are working to further its implementation. The link to the plan is: http://www.dhss.delaware.gov/dhss/dsaapd/files/alzheimers\_plan.pdf

After the Delaware State Plan to Address Alzheimer's Disease and Related Disorders was developed, a steering committee was formed to advance the implementation of the plan. The Implementation Steering Committee formed five work groups to address strategies in the five goals of the plan which are as follows: Promoting Public Awareness, Improving Service Delivery, Strengthening Caregiver Support, Achieving a Competent Workforce, and Improving Infrastructure.

The Steering Committee commits to provide members with information about the grant project and elicit feedback from them to improve planning of the the grant activities. The Steering Committee will play an active role in the development of project plans and the review of implementation activities. Throughout the three years of the grant, the Steering Committee will serve in an advisory capacity to DSAAPD regarding its Alzheimer's Disease Initiative.

Please contact me with any questions or if you require additional information.

Sincerely,

Mellin

Cindy Mercer Planning Supervisor <u>Cynthia.Mercer@state.de.us</u> 302-255-9381