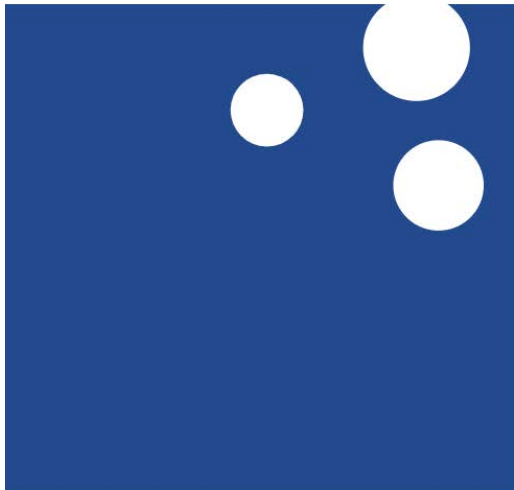


Caring4Cal Fund

Health Care and Access and Information

Request for Applications

Release Date: July 10, 2023





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I. Background

Overview and Context

The primary goal of the California Department of Health Care Access and Information (HCAI) is to ensure that all residents of California have fair and equal access to healthcare. This involves ensuring every community has an adequate health workforce, reliable healthcare facilities, and accessible health information.

To achieve this, HCAI has launched the Caring4Cal Fund, aimed at expanding, enhancing, and strengthening California's Home- and Community-Based Services (HCBS) providers through recruitment, training, and retention. The focus is on programs that plan to improve access to healthcare services for rural communities, children with complex medical conditions, individuals with disabilities, and geriatric care for aging adults.

By 2030, the elderly population in California is projected to grow by 87%, leading to an increased demand for Home and Community-Based Services (HCBS). This represents a 40% increase since 2014. Additionally, the population of individuals with disabilities in California, including children, is expected to rise by 258% by 2050. This significant increase in the population of people with disabilities will create a greater need for specialized services.

Considering these growing populations, the current available healthcare services are insufficient to meet their care needs. Consequently, there is a pressing requirement for innovative approaches to recruit, train, and retain a diverse range of eligible HCBS providers.

Eligible Providers for the HCAI Caring4Cal Fund include skilled providers providing person-centered care delivered to an in-home or community-based setting.

Licensed	Registered Nurses (RNs) Licensed Vocational Nurses (LVNs)
Certified	Certified Nursing Assistants (CNAs) Home Health Aides (HHAs)
Other skilled provider types (with licensure/certification)	Including but not limited to: Occupational Therapists, Physical Therapists, Speech Therapists, Respiratory Therapists, Clinical Social Workers
Other skilled provider types (with or without licensure/certification)	Including but limited to: Community Health Workers (CHWs) *Home settings only



The Challenge

HCBS providers play a crucial role in delivering high-quality care to individuals with functional limitations in various settings. Several factors, such as an aging population and an increase in chronic diseases, are contributing to a growing demand for eligible providers, adding strain to the existing workforce. This strain has resulted in staff shortages due to burnout, wage disputes, high turnover rates, and challenges in recruitment and retention which are creating a gap in the HCBS settings.

Turnover rates remain high across the nation for all eligible provider staff types.

Staff Type	National Turnover	Date	Home Health Specific	Comment
CNA	46% - 49%	2021		As high as 129.1%
HHA	37%	2020	37%	
LVN	29%	2020	34%	LVN turnover based on SNF turnover
RN	19%	2020	26%	141% for Skilled Nursing Facilities
Community Health Workers	12%	2021		

- Across California, most eligible HCBS providers work in institutional settings such as hospitals, nursing care facilities and ambulatory care.
- The workforce is predominantly women (83%), foreign-born workers (~40%), and individuals aged 50 to 64 (66%).

Trends in California’s aging population will also have a major impact on increasing demand for HCBS providers in the near future.

- By 2030, approximately one in four Californians will be aged 60 or above, amounting to around 10.8 million people.
- The majority of Californians aged 60 and above will be Black, Hispanic, Asian, Native Hawaiian or Pacific Islander, American Indian or Alaska Native, or Multiracial. This necessitates the need for culturally competent and linguistically appropriate services.
- It is projected that more than one million Californians will have self-care limitations by 2030, requiring assistance with transportation, cleaning, and tasks such as bathing.
- Older adults with chronic, complex, or progressive diseases, such as dementia, often prefer a congregate setting such as a long-term care or assisted living facility.



Why Home- & Community-Based Care Matters

Given these trends, it is critical to prioritize comprehensive care options that allow individuals to age in home or community settings while receiving support. In-home and community-based providers play a pivotal role in delivering preventive and proactive care to older adults, minimizing acute health events, hospital admissions, and costly interventions.

- HCBS are more affordable than institutionalized care as the need for full-time residential care is eliminated or delayed, resulting in reduced expenses for individuals and the healthcare system as a whole.
- HCBS can be key for people to realize their rights to autonomy, dignity, and health.
- HCBS offer personalized care plans tailored to meet individuals' specific needs, preferences and cultural backgrounds. This personalized approach leads to better outcomes and higher satisfaction for the individual receiving care.
- HCBS promotes autonomy, a sense of independence, and social connection, contributes to emotional well-being, and reduces the potential negative psychological impacts often associated with nursing home settings.

Advancing Solutions

There is an urgent need to recruit, train, and retain a diverse range of eligible HCBS providers to meet the growing demand. Growing the workforce will allow for greater provision of high quality HCBS care to these populations and will improve the health outcomes and overall quality of life for this large and growing population of Californians.

The HCAI Caring4Cal program seeks to recruit and train eligible HCBS providers to grow and enhance the HCBS workforce. Programs selected for funding will enhance providers' caregiving skills, contentment, job stability, and opportunities for career progression. They will contribute to improved health for older adults and individuals with disabilities across California and prevent needless institutionalization, including for those with severe and persistent behavioral and health issues.

Additionally, the state can leverage lessons learned from the funded programs to fortify the statewide HCBS network, and apply the knowledge gained from the providers, community-based organizations, and state collaborators to future initiatives.



II. The Caring4Cal Fund

The Caring4Cal Program will award approximately \$25 million in grants to support programs that **expand, enhance, and strengthen** the workforce of California’s HCBS providers. HCAI is seeking applicants who will provide sustainable and replicable solutions that:

- **Expand** the eligible provider workforce to grow in size and representation of the individuals receiving care through strategic outreach and recruitment.
- **Enhance** the eligible provider workforce through training and incentive opportunities that lead to workforce skills and upward mobility (certification or licensure)
- **Strengthen** the eligible provider workforce through training and skill building opportunities that improve quality of care, job satisfaction, and retention in the field.

HCAI is looking for equity-centered proposals that address program objectives and can be implemented as quickly as possible following grant approval.

The Caring4Cal Fund is a one-time funding grant. Funding requests will be capped at \$5 million. Note that the funding cap could change based on the number of applications submitted. Applicants are not guaranteed the funding amounts requested. Final grant amounts will depend on final application review and scoring.

The Caring4Cal program will target the recruitment and training of eligible workers providing services In-Home and Community Based settings in California, as outlined below.

Eligible	
Target Workforce Population	Home and Community Based Settings
<p>Home Health Aide (HHA) Certified Nursing Assistant (CNA) Licensed Vocational Nurse (LVN) Registered Nurse (RN) Community Health Worker (CHW)* Other, including but not limited to: speech therapists, occupational therapists and physical therapists</p> <p><i>Bolded job roles will be prioritized</i> *CHWs working in home settings only</p>	<p>Adult Day Care AIDS Waiver & Assisted Living Waiver Caregiver Resource Centers Community-Based Adult Services Home and Community-Based Alternatives Waiver Multipurpose Senior Services Program Private residences/homes Program for All Inclusive Care for the Elderly (PACE) Residential Care Facilities for the Elderly (RCFE) Other</p>



Not Eligible	
Workforce	Settings
IHSS Providers not interested in becoming an eligible provider type Prospective or current care workers not interested in becoming an eligible provider type in HCBS	Hospitals (e.g., rehabilitation long term care, and psychiatric hospitals) Nursing Home Inpatient Facility Outpatient Clinic Intermediate Care Facilities

Applicant Eligibility Requirements

Applicants may include, but are not limited to, home- and community-based providers, trade associations, direct care workforce training entities, community-based organizations, social enterprises, nonprofits, and adult education providers. Applicants may submit proposals as a single organization or on behalf of a consortium of organizations. Applicants must be in good standing and qualified to conduct business in California as verified by the [Secretary of State's website](#).

Applicants must demonstrate the following:

- Must have experience serving Californians in the last three years
- Must have experience training and/or recruiting eligible providers
- Based in the United States with authority to do business in California (e.g., possess a Certificate of Good Standing with the Secretary of State)
- A commitment to diversity, equity, and inclusion

Applicants applying in the Training Category must demonstrate that:

- Training materials are ready-to-go and curriculum has been successfully deployed to eligible providers (or those seeking licensure)
- Trainings are for eligible or prospective providers in home- and community-based facilities, not in hospitals, nursing homes, or other institutional settings
- Trainings are not solely for organization's own employees
- Trainings are provided for free to eligible providers
- All curricula have been approved by governing bodies, if applicable

If an applicant cannot demonstrate all of the above, applicants are encouraged to partner with organizations in developing a collaborative proposal that meets the RFA requirements.



Incentives for Training and Retention

A key motivator for providers will be the ability to earn incentives for completing courses, entering the profession, and staying in the profession. The Caring4Cal incentive program will be standard across grantees and offered to all eligible participants through an easy to use claims submission system on the Caring4Cal website. Applicants will not be required to administer any aspect of the incentive program, and should NOT include expenses for incentives within project budgets. However, applicants should notify participants and consider the availability of these incentives for their participants as they develop their Caring4Cal program design. Incentives will be available to eligible participants as follows:

Level 1 Jump Start	\$500	Completion of 15 hours of training
Level 2 Leap Forward	\$750	Completion of an additional 15 hours
Level 3 Recruitment & Retention	\$1500	Completion of Level 1 & Level 2, plus 4 months of working 40+ hours as an eligible provider OR Registration for licensing/certification exam and/or higher education to become provider

Focus on Equity and Access

The applicant must demonstrate how the proposal supports the development and expansion of a culturally diverse workforce trained to provide culturally appropriate care to serve California’s diverse and aging population. Programs should demonstrate cultural competency and promote equity and access to care along multiple dimensions, including a plan to increase access to health services for rural communities, children with complex medical conditions, individuals with disabilities, and geriatric care for aging adults for the Medi-Cal population.

The applicant must demonstrate how the project will address and advance equity along a variety of dimensions. Every proposal should include how the project will address barriers to entering the field and accessing training, including but not limited to: limited exposure to the field, difficulty paying for certification or licensure training, difficulty traveling to in-person trainings due to financial constraints, difficulty attending nearby in-person trainings offered at incompatible times, and a lack of trainings in their preferred language.



Reporting and Data Collection Requirements

All funded grantees will have reporting and data collection requirements that must be integrated into their program design, registration process, and participant interactions, including but not limited to:

Participant Intake Surveys	Collect demographic information and baseline provider perceptions, administered once to each participant at program intake
Learner Lists	Attendance list provided by grantee after each course completed, including course info, individual learner info, and demographic data
Training Inventories	Comprehensive course information spreadsheet, which grantees are required to keep up to date as courses are scheduled and adjusted, and which provide course information for display in the course catalog on the Caring4Cal website
Monthly Recruitment Reports	For grantees with a recruitment component, monthly reports detailing outreach and recruitment metrics
Progress Reports tied to Budget Milestones	Include program progress, successes, and challenges

All data collection and reporting will be provided in a templated format and is required to be collected using the template and definitions provided, and at the required cadence. Applicants should keep these requirements in mind during proposal development.



Proposal Components and Scope

Proposals should fall into one of the following funding categories:

- 1) recruitment of prospective eligible HCBS providers
- 2) training to build the HCBS workforce of eligible providers, or
- 3) both recruitment and training of eligible providers.

Although application scores will be normalized for comparison, projects proposing both recruitment and training will be prioritized. Applicants are encouraged to collaborate with partner organizations to propose projects whose scope includes both, where possible.

Recruitment

Recruitment to the HCBS eligible workforce can include one or more of the following:

- recruit new workers to the [eligible job roles](#) and appropriate licensing and certification pathways including including youth (16 to 24) and immigrants/refugees
- encourage current providers to pursue additional licensure and certifications

The applicant should describe a realistic approach for recruitment, including engaging individuals from communities that are traditionally left out in workforce development initiatives. Applicants should outline how recruitment will be defined and measured, as well as how it will be conducted in a culturally responsive and informed manner.

Applicants that 1) increase cultural and language diversity in the CNA-HCBS workforce, 2) increase access to health care in medically underserved areas, and/or 3) improve access to care for Medi-Cal patients will be prioritized .

Training

Training of current and/or prospective providers to enable and/or improve their ability to care for individuals in home and community-based settings. This includes:

1. licensure/certification courses for the identified [eligible job roles](#)
2. continuing education courses geared towards eligible providers
3. train-the-trainer courses related in home- and community-based settings
4. soft skills training related to healthcare in home- and community-based settings (e.g., cultural competency, communication, self-care)
5. other education specific to certain conditions or populations

Applicants are encouraged to develop proposals that increase accessibility and address the needs of the target direct care workforce population, including language level, digital literacy/access, and access to transportation and childcare.



Therefore, applicants are encouraged to offer one or more of the below training modalities anchored in adult-centered learning access to all Californians, including but not limited to:

- In-person trainings
- Asynchronous (self paced) virtual trainings
- Synchronous virtual trainings

Applicants with trainings in languages other than English as well as those that address the needs of specific populations of providers or recipients of care populations (e.g., language groups, race/ethnicity, medical shortage areas) will be prioritized.

Applicants should ensure courses are taught by (or designed by, for online/digital solutions) qualified training instructors with experience in training the eligible provider workforce.

The applicant should base training curricula on the needed and desired competencies and credentials of the eligible provider workforce matching the breadth, depth, and complexities of their roles, responsibilities, and lived experiences. To this end, applicants will be required to identify which core competencies the training will target, as outlined below:

Core Competencies

Physical Aspects of the Job	Emotional Aspects of the Job
Activities of daily living Body mechanics Emergency response (falls, incidents, fires) Food, nutrition, and meal preparation Housekeeping Infection control and cleanliness Physical safety and accident/injury prevention Rehabilitation and restorative care	Understanding cultural aspects of care End-of-life care, grief Managing stress Respecting differences/Inclusion of diverse perspectives Self-care Strengths- and solutions-focused practices Working in a team/Team building
Complexity of Population Served	Workplace Readiness & Professional Growth
Person-centered practices Abuse and neglect Crisis prevention & intervention Understanding aging Understanding developmental disabilities Understanding physical disabilities Understanding dementia and Alzheimer's	Behaving professionally & ethically Communication skills Documentation, delegation, and reporting Legal and ethical issues Principles of teaching & learning Problem-solving Role of the direct care worker Working in a team/Team building

Source: Collaborative Consulting Promising Practices Research Scan



Applicants should outline their outreach strategy to engage the target workforce population in the recruitment and/or training programs. This can include but is not limited to:

- Culturally-responsive outreach to ensure linguistic and cultural appropriateness
- Utilization of existing workforce networks that can outreach to the target workforce population via trusted sources, including colleagues and community members
- Utilization of social media to reach the target workforce

III. Application Information

Applicants are encouraged to use the online portal for proposal submission.

For organizations that cannot submit via the portal, the application must be submitted by email according to the outline below. All applications must include all information outlined here in *Registration and Organization Profile*, *Funding Category*, and *Project Overview*, answers for *Application Questions* (including training course template for applicants in the training category), and all budget and additional documentation detailed below.

Registration and Organization Profile

All organizations, including partners in a consortium, will be expected to provide basic information on both the organization itself and the main points of contact, including but not limited to:

- Whether the organization is California-based or has had a presence in California at some point in the past 3 years (required only for lead org in a consortium)
- Organization Type (nonprofit, for profit, educational institution, government agency)
- Organization Name, Address, & URL
- Contact information for the President/Executive Director
- Contact information for the person filling out this application

Lead applicants must be in good standing and qualified to conduct business in California as verified by the [Secretary of State's website](#), and must supply their certificate of good standing along with their application submission.

Funding Category

- Training
- Recruitment
- Training & Recruitment

Although application scores will be normalized for comparison, projects proposing both recruitment and training will be prioritized. Applicants are encouraged to collaborate with partner organizations to propose projects whose scope includes both, where possible.



Project Overview

- Project Title
- Org Size (based on 2022 revenue)
 - Up to \$1 million
 - \$1 million to \$5 million
 - More than \$5 million
- Amount of Funding Requested
- Proposed Project Locations, a County checklist will be provided in the portal
- Does the organization have an existing presence in these proposed locations?
If yes, describe experience in proposed locations. If not, in which locations does the organization currently work?
- Has the organization received funding from the State of California for similar projects? (List Name of Project(s), Location, Funding Amount, and Duration).
- Has the organization received other funding for this initiative? If so, please list the amount of funding, funding source and timeframe.
- Total 2022 Revenue
- For training projects, share the eligible providers who were trained in 2022 (number trained by job role).
- Is the organization in good standing with the state of CA according to the Secretary of State’s website at <https://bizfileonline.sos.ca.gov/search/business?> (Upload a good standing certificate.)

Application Questions	
<p>Organizational Background and Capacity Statement (400 words or less)</p>	<p>What is the mission and purpose of the organization?</p> <p>What kind of work does it do, and where?</p> <p>Outline:</p> <ul style="list-style-type: none"> ● The organization or consortium’s experience serving the eligible provider workforce and any specific past experience managing and/or training the eligible provider workforce population ● Subject matter expertise on issues impacting rural communities, children with complex medical conditions, individuals with disabilities, and aging adults



	<ul style="list-style-type: none"> • Experience working within the proposed geographies • Experience training and/or recruiting eligible providers?
<p>Project Overview (200 Words or less)</p>	<p>Give a brief overview of the project.</p> <ul style="list-style-type: none"> • What is the overall goal of the project? • Who does the project target (job titles, current/prospective workers, specific populations)? • What barriers and/or challenges does it seek to address?
<p>Target population and Location</p>	
<p>Target Population and Location</p>	<p>Indicate the anticipated percent of participants in each of the categories as listed: Urban/Rural, Race/Ethnicity, Language, LGBTQ+, and Gender Identity. Use estimates based on the population you currently serve or the population you plan to target with outreach and services:</p> <ul style="list-style-type: none"> • Urban/rural <ul style="list-style-type: none"> ○ % Urban % Rural • Race <ul style="list-style-type: none"> ○ % African American/Black/African % Hispanic/Latinx % White/Caucasian/European % Asian/Pacific Islander % American-Indian / Native-American / Alaskan-Native % Other • Language <ul style="list-style-type: none"> ○ % English % Spanish % Cantonese % Armenian % Vietnamese % Mandarin % Russian % Korean % Farsi % Tagalog % Arabic % Cambodian % Hindi % Hmong % Japanese % Laotian % Punjabi % Thai % Ukrainian % Other • Will your project specifically focus on members of the LGBTQ+ community, and/or people with marginalized sexual orientation and/or gender identity/expression? <ul style="list-style-type: none"> ○ If yes, applicant must ensure that the application narrative specifically details how those individuals will be outreached to and served.



Target Population and Location (100 words or less)	Describe the target population and the geographic location where the program will be implemented (city, county, or statewide; single site or multi-site).
Targeted Eligible Providers	Indicate which eligible current or prospective caregivers your project will target (using eligible providers in Overview above).
Training Program Details	
Training Output (Numbers)	Projected Number of Eligible Providers Trained - ## Total Hours of Training Offered In-person, Online, Instructor-Led - ##, ##, ## Total Hours of Online Self-Paced Training Offered - ## Total Number of Courses Offered - ##
Training Design (250 words or less)	<p>Provide an overview of the training design and delivery, including a rationale for the modalities and core competencies chosen.</p> <p>Outline the qualifications of the curriculum developers and instructors. Be clear about how the training approach addresses challenges outlined in the RFA including accessibility such as:</p> <ul style="list-style-type: none"> ● Training on different days and times ● Multilingual trainings and materials ● Trainings provided free of cost <p>Use this template to provide detailed information for each proposed course, existing and in development.</p> <p>Note: This fund is not intended for course/curriculum development. Other than minor adaptations for the project’s population, courses and curricula should be implementation-ready.</p> <p>For licensure and certification programs, certificates of approval from the certifying entity must be uploaded. For all other courses, provide details that describe readiness for implementation.</p>
Previous Training Experience (200 words or less)	Describe experience and provide success metrics of this approach. <ul style="list-style-type: none"> ● Where and with which modality have they been trained? ● How many workers have been trained? ● Was this approach demonstrated to be effective and how?



<p>Outreach Plan (150 words or less)</p>	<p>Describe how the target workforce will find out about the training courses. How will potential participants be reached and engaged? How is this outreach strategy culturally responsive and accessible for the participants targeted?</p>
<p>Recruitment Program Details</p>	
<p>Recruitment Output (Numbers)</p>	<p>Estimated Number Reached via Outreach Efforts - #### Estimated Number Recruited - ####</p>
<p>Recruitment Design (250 words or less)</p>	<p>How will the project recruit and engage current or new workers within the targeted job roles? Which job roles will be targeted?</p> <p>What channels will the project use for outreach and recruitment - in-person, events, email, social media, etc.? Discuss the reach of each channel. How will the proposed strategies be targeted to the job roles identified? Why will those strategies result in successful recruitment? How is the outreach and recruitment strategy culturally responsive and accessible for the target workforce?</p>
<p>Previous Recruitment Experience (250 words or less)</p>	<p>Provide an overview of prior experience with recruitment of and outreach to the eligible provider population.</p> <ul style="list-style-type: none"> ● What approaches to recruitment were used in the past? ● How many new workers were recruited? ● Were these approaches shown to be effective and how?
<p>Home- and Community-Based Services (150 words or less)</p>	<p>Describe how your recruitment and training strategies are designed to expand, enhance, and strengthen the workforce.</p> <ul style="list-style-type: none"> ● For recruitment, how will your outreach specifically message and target HCBS workers in HCBS settings referenced in Target Workforce Population and Programs/Settings? ● For training, how will your methods, content, and approach ensure that workers will work in a non-institutional setting?



<p>Equity (200 words or less)</p>	<p>Describe how the project’s approach, design, and implementation, will integrate equity. Describe how the solution contributes to the development of a workforce that can provide culturally appropriate care to serve the diversity of California’s populations.</p> <p>Describe which areas of equity the project will focus on and how:</p> <ul style="list-style-type: none"> ● Language and/or race ● Migrant, immigrant, and refugee populations ● Youth populations, age 16-24 ● Geography (medical shortage areas and rural areas)
<p>Timeline of Activities to be Supported</p>	<p>Provide a timeline and milestone of activities to achieve your goals during the project period using the template provided.</p> <ul style="list-style-type: none"> ● For training programs, be sure to demonstrate that your courses will be implemented within the first 30 to 60 days. ● If the project will scale to new locations and/or will add new trainings in later months, be clear on timing in the list of activities. <p>Email applicants: Use this template to attach your timeline information to your application.</p>
<p>Anticipated Risks (300 words or less)</p>	<p>Describe the project’s risk mitigation plan.</p> <p>What are the biggest challenges or risks that may be encountered?</p> <p>How will the project manage these risks and what measures will be taken to address any challenges?</p>
<p>Monitoring and Evaluation (200 words or less)</p>	<p>How will the project define and measure success?</p> <p>Describe what approaches will be used to track program data, how improvements will be made during the project term based on the tracked data, and what evaluation approaches will be used to demonstrate project success.</p>
<p>Sustainability Plan (200 words or less)</p>	<p>What is the approach to sustainability beyond the life of this funding to maintain the program or take it to the next phase?</p>



Budget Template: Instructions & Guidance

Please use the [budget template](#) focused on milestone-based billing with four milestones that will be the same for each applicant.

Milestone	Timeline	Deliverables & Key Notes
Milestone 1 Project Kickoff	September October	<p>Kickoff with start of courses and/or recruitment activities</p> <p>Timely submission of course lists and required reports, Some applicants may have progress against their total participant served goals (though this is not expected)</p> <p><i>This milestone includes program design and launch costs.</i></p>
Milestone 2 Initial Outreach & Program Launch	November December	<p>Applicants are expected to make ~20% progress towards the total served participant goal</p> <ul style="list-style-type: none"> The 20% is approximate. Applicants should create their own projections. <p>Timely submission of progress report, participant lists, courses, and other required reports</p>
Milestone 3 Mid-Project Check-In	January February	<p>Applicants are expected to have made ~60% more towards the total served participant goal (80% total)</p> <ul style="list-style-type: none"> The 60% is approximate. Applicants should create their own projections. <p>Timely submission of progress report, participant lists, courses, and other required reports</p>
Milestone 4 Program Wrap Up & Reconciliation	March April	<p>Applicants are expected to have reached their total served participant goal</p> <p>Timely submission of progress report, participant lists, courses, and other required reports</p> <p><i>This milestone should include costs related to final participant engagement as well as any activities related to communications and closing out of the program.</i></p> <p>Applicants will be asked to submit a budget and scope of work reconciliation at this time.</p>



For each milestone provided above, applicants will provide the projected costs for that portion of the work including:

- **Program personnel costs** inclusive of consultants & contractors. This includes an hourly rate per job class. The hourly rate must be inclusive of all costs related to personnel such as salary, benefits, fringe, travel, materials, supplies, and technology (computers, phones, peripherals, etc). The hourly rate should not include any staff or equipment that are included in indirect costs.
- **Other direct program costs.** This includes program-specific software and materials, as well as marketing and outreach materials. Do not include equipment for staff or staff travel here as this should be included in the staff hourly OR as part of the indirect cost rate.
- **Indirect costs.** Grantees may include 15% for indirect costs, which include accounting and legal expenses, administrative salaries, office expenses, rent, telephone expenses, utilities, and general expenses not related to the grant.

In addition, the budget should include the expected number of participants to be engaged at the time of each milestone. Progress reports will be required before payment is released.

For a consortium application, the lead applicant must complete the Applicant Budget. Each other organization in the consortium requesting \$25,000 or more must also provide a detailed budget. See the budget template for complete instructions.

Budget Narrative

Each grantee will be asked to submit a budget narrative with their applications. The budget narratives must tie directly to the milestone scopes of work and include:

- description of each personnel job class (management, specialist, support, consultant), and comprehensive rate, number of hours for that class, list description of what the personnel will be doing related to program delivery at each milestone. Increases to the personnel rate will not be allowed once the grant is awarded.
- explanation of each contractor and consultant and their role as well as the procurement process for each. See sample [procurement policy here](#).
- explanation of the % of total participants engaged for each milestone
- explanation of other direct costs related to program delivery by item/cost

For programs that are part of a consortium, each partner organization should provide a Budget Narrative document similar to what the lead organization is providing.



Request for Additional Information

Applicants must provide the following:

- Letters of Support: Minimum of one, maximum of two, each of which cannot exceed two pages and must include the endorsers' qualifications. Letters of support should be from partner agencies, funders, and/or other external entities that can speak to the quality of the applicant's work.
- References: Please provide contact information for up to three organizations.
- Financial Statements
 - a. Prior year financial statements. Provide audited statements if available.
 - b. Operating budget (current year)
- Documentation and status of other related awards received
- Resumes for top 5 key positions
- Certificate of good standing with the State of California

Certifications

All Applicants must sign the following statement:

I understand that Cell-Ed/HCAI may share this application, internally or externally, as part of the due diligence process. Cell-Ed will obtain the requisite non-disclosure agreements and conflict of interest forms prior to sharing information with reviewers during the due diligence process. By submitting this application, I certify that the answers to the questions are accurate to the full extent of my knowledge.

Submission of false information may be grounds for disqualification of an application.

Submission Guidelines

All grant applications must be submitted through the online portal at https://webportalapp.com/sp/login/cell_ed_hcai.

If for any reason an organization cannot submit their application through the online portal, applicants must contact the Caring4Cal Fund at Fund@caring4cal.org.

Applicants are encouraged to apply early

All applications must be RECEIVED no later than 11:59 PM PDT Aug 11, 2023.



IV. Application Evaluation Framework

Eligibility Check

Applications will be reviewed for eligibility, completeness, and alignment with RFA requirements using the rubric below.

Minimum Qualifications	YES	NO
Application Information		
Applicant has submitted all requested registration and organization information (i.e., name, type of organization, contact information).		
Applicant has uploaded Certificate of Good Standing (Lead org only)		
Applicant has identified the funding category of the proposed project.		
Applicant has submitted all requested information in project overview (i.e., project title, amount of funding requested, project locations and existing presence in those locations, other funding received from the State of California, other funding sources received for the proposed project, and total 2022 revenue).		
Template Uploads		
Applicant has provided a complete training template.		
Applicant has provided a complete timeline template.		
Budget		
Applicant has provided a complete budget template, including budget worksheet and budget narrative.		
Additional Information		
Applicant has provided no more than two letters of support.		
Applicant has provided contact information for at least one and up to three organizations to serve as a reference.		
Applicant has provided prior year financial statements and current year operating budget.		
Applicant has provided resumes for key positions.		
Certifications		
Applicant has signed the statement certifying all information included in the application is accurate.		
Applications that make it through the initial review for eligibility, completeness, and alignment with RFA requirements will be sent to a panel of experts for review.		



Project Scope and Budget Reasonableness Screening Rubric

A review panel will review and score all applications using the following rubric. The Caring4Cal team will prioritize applications that: 1) increase cultural and language diversity in the HCBS workforce, 2) increase access to health care in medically underserved areas, and/or 3) improve access to care for Medi-Cal patients. Applicants should make sure that any specific project alignment with these priorities is made clear in the application narrative.

Yes	no concerns
Possibly	minor concerns
Possibly	major concerns
No	red flag

Category	Questions
Project Scope	Is the applicant targeting eligible populations?
	Is the applicant proposing to conduct their work in eligible settings, and are they appropriately targeting the HCBS workforce and settings?
	Do the proposed trainings fit within the objectives of the RFA (right competencies, job roles, approved training methodologies, approved by state licensing board if necessary)?
	Are the proposed trainings and/or recruitment strategies ready to implement within 30 to 90 days?
	Have the trainings and training methodologies been previously proven and implemented?
	Does the organization's or consortium's previous reach predict success for the project as proposed?
	Given answers above and the work plan provided, is this project doable within the timeline provided?



Budget	Does the requested budget fall within a reasonable range for cost-effectiveness in terms of participants served and hours of training proposed per participant?
	Is the budget reasonable when compared to similar projects (auto-flag top 1/3rd of budget to participant served budget for fiscal review)?
	What percentage of the prior/current year budget does the requested budget represent? If the percentage is high, does the applicant justify the size of the project in their narrative?
	Given answers above, and the work plan and budget provided, does the budget demonstrate understanding of the project scope and work plan?

External Review Rubric

For each question, the answer will receive 1, 3, or 5 points.

1	Answer provides little to no detail
3	Answer provides some detail but is not supported by extensive information
5	Answer provides in-depth detail and fully responds to the question with examples

Category	Judging Criteria
Organization Background & Experience	Does the applicant have the required experience providing training to the targeted workforce, subject matter expertise, and experience working in the proposed geographies?
	If the application is recruitment only, does the applicant have direct experience with and access to a relevant target population?
	How well does the applicant describe how it can deliver on the project?
Training Design & Impact	Does the application describe how the proposed training design overcomes barriers within the target workforce?
	How strong is the rationale, modalities, and qualifications of the instructors/curriculum designers?



	<p>Does the applicant have previous experience with similar training approaches? Were the approaches effective, successful, and relevant to the training being proposed in the current project?</p>
	<p>Does the proposal outline a framework to improve the skill set and the retention of the target direct care workforce?</p> <p>Does the application describe an approach and timeline to both measure and achieve that impact?</p>
Recruitment Design & Impact	<p>Does the application describe how the proposed recruitment design will effectively engage workers for the job roles targeted?</p> <p>How strong is the rationale for the outreach channels proposed?</p>
	<p>Does the applicant have previous experience with similar recruitment approaches to support the success of this project?</p> <p>Were the approaches effective, successful, and relevant to the recruitment being proposed in the current project?</p>
Home- and Community-Based Services (HCBS)	<p>Does the application provide a clear description of how its programming will seek to target HCBS in particular with its recruitment and training approaches?</p> <p>Are the proposed approaches realistic and effective?</p>
Equity	<p>Does the application describe how the proposal contributes to the development of a culturally diverse workforce?</p> <p>Does the application describe how the proposal will contribute to providing culturally appropriate care?</p>
	<p>Does the application’s solution effectively integrate principles and practices of equity?</p> <p>If the project proposes recruitment, are the outreach strategies described culturally responsive and accessible for the target workforce?</p>



	<p>Does the application describe how the training approach addresses accessibility considerations?</p> <p>Does the training approach include multiple accessibility considerations that are applicable for their target workforce?</p>
Capacity	Has the applicant described its capacity to undertake the project with the budget proposed?
	Does the application anticipate challenges or risks, and does it suggest realistic and effective measures to address them?
	<p>Does the application propose a reasonable timeline and do the milestones seem achievable in the time allotted?</p> <p>Is the application’s approach to evaluating and tracking success reasonable and well-organized as it pertains to the project’s milestones and goals?</p>

Timeline

RFA Release	July 10
Webinar Registration Deadline	July 17
Webinars for Prospective Applicants	July 17 July 19
First Round of FAQs Posted on Website	July 26
Final Questions Due	August 7
Final Answers Posted	August 9
Final Date to Submit Application	August 11 by 11:59PM PDT
Notice of Awards	September
Start Date of Agreements	Rolling
End Date of Agreements	May 31, 2024



About Us

HCAI

The California Department of Health Care Access and Information (formerly the Office of Statewide Health Planning and Development), or HCAI, is committed to expanding equitable access to health care for all Californians — ensuring every community has the health workforce they need, safe and reliable health care facilities, and health information that can help make care more effective and affordable.

Cell-Ed

HCAI partnered with Cell-Ed as a Third Party Administrator for the Caring4Cal Fund. Launched in 2014, Cell-Ed is a global social enterprise. Through 1000+ partners in education, workforce, and health, Cell-Ed has reached over a million people in 54 countries and certified nearly 200,000 learners. We aim to reach millions more.