



State Plan Committee Meeting Agenda

Thursday, Nov. 30, 2023, 1:30 p.m.
2400 N. Lincoln Blvd, Sequoyah Bldg., Room 513,
Oklahoma City, OK 73107

<https://zoom.us/j/95983884924?pwd=L0d5K0VidlYxSWRQKzRUN1JGSjdyUT09>

DDCO Officers

Chair

Sharon Garrity

Vice Chair

Vacant

Secretary

Mark Lewis, Norman

Parliamentarian

Vacant

DDCO Staff

Planning & Grants Director

John Houston

Administration Officer

Alissa Patterson

Advocacy Training

Coordinator

Bradley Mays

Self-Advocacy

Training

Coordinator










Morgan Davis

Comptroller

Dawnmarie Kroft

Executive Director

Jenifer Randle

- I.   Call to Order & Roll Call – Michelle Kelley, State Plan Chair
- II.  Discussion and Possible Voting: Review Meeting minutes of Sept. 29, 2023, State Plan meeting.
- III.   Discussion and Possible Voting*: Old and New Items
 - A. Funding proposals presentations— John Houston
10 minutes each presentation, 5–10-minute question period
 1. Autism Foundation of Oklahoma (pp 9-23)
 2. Oklahoma Autism Center (pp 24-42)
 3. Sooner Success (pp 43-70)
 - B. Committee discussion & funding recommendations
 1. Autism Foundation of Oklahoma
 2. Oklahoma Autism Center
 3. Sooner Success
- IV.   Other New Business *
- V.  Announcements
- VI.  * Adjournment

State Plan Committee Members: Michelle Kelley, Committee Chair, Shelley Greenhaw, Committee Vice Chair, RoseAnn Duplan, Wanda Felty, Janie Fugitt, Sharon Garrity, Lori Hauge

State Plan Committee Minutes
Developmental Disabilities Council of Oklahoma

DATE: Friday, September 29, 2023

TIME: 1:30 PM

PLACE: 2400 N. Lincoln Blvd, Sequoyah Bldg. Rm. 310, Oklahoma City, Oklahoma 73105

BE IT REMEMBERED that on Friday, September 29, 2023, at 1:30 pm, the State Plan Committee met at 2400 N. Lincoln Blvd, Sequoyah Bldg. Rm. 310, Oklahoma City, Oklahoma 73105 in accordance with the Open Meetings Act.

NOTICE of the schedule for all regular and special meetings of the DDCO State Plan Committee for the calendar year 2023 have been given in writing to the Oklahoma Secretary of State and public notice and agenda having been posted on the Council's website at or before 12:00 pm on Thursday, September 28, 2023, in accordance with the Oklahoma Open Meetings Act, 25 O.S. Section 311.

I.  **CALL TO ORDER:** Michelle Kelley called the meeting to order at 1:49 P.M.

II.  **ROLL CALL:**

Present:	Michelle Kelley	State Plan Committee Chair
	Shelly Greenhaw	State Plan Committee Vice Chair
	Janie Fugitt	ATO Chair
	Sharon Garrity	Council Chair
	RoseAnn Duplan	Designee for Melissa Sublett
	Wanda Felty	Designee for Dr. Valerie Williams
	Alicia Murie	Parliamentarian


Absent:	Lori Hauge	Committee Member
	Alicia Lincoln	Committee Member

Guests:	Dr. Kami Gallus	Oklahoma State University
	Terry Yarberry	Pervasive Parenting Center


Staff:	John Houston	Planning & Grants Director
	Bradley Mays	Advocacy Training Coordinator
	Morgan Davis	Self-Advocacy Training
	Alissa Patterson	Administrative Officer
	Jenifer Randle	Executive Director


By roll call, having determined there were sufficient members to make a quorum, business was conducted.

III.  **Review of the Minutes of the State Committee Meeting of March 31, 2023.**

 DISCUSSION: The minutes from March 31, 2023, were reviewed.


ACTION: Motion by Ms. Murie and seconded by Ms. Felty to approve the March 31, 2023, State Plan Committee meeting minutes as corrected.

 **AYES:** Shelley Greenhaw, Janie Fugitt, RoseAnn Duplan, Michelle Kelley, Sharon Garrity, Wanda Felty, Alicia Murie


 **NAYS:** none

MOTION: Carried 

IV.  **Review of the Minutes of the State Committee Meeting of June 30, 2023.**

 DISCUSSION: The minutes from June 30, 2023, were reviewed.

ACTION: Motion by Ms. Murie and seconded by Ms. Fugitt to approve the June 30, 2023, State Plan Committee meeting minutes as corrected.


 **AYES:** Shelley Greenhaw, Janie Fugitt, RoseAnn Duplan, Michelle Kelley, Sharon Garrity, Wanda Felty, Alicia Murie

 **NAYS:**

MOTION: Carried 

V.  **Discussion and Possible Voting: Old and New Items**

A. Funding proposals presentations:

1.  Mr. Houston introduced **Dr. Kami Gallus with Oklahoma State University, Center for Developmental Disabilities, presented a funding request to support the hiring of a Community Education and Engagement Coordinator staff position.** This would help the Center reach a larger audience.

Dr. Gallus provided background information of the Center for Developmental Disabilities to the committee. The work done by the center includes Opportunity Orange Scholars, OSU Unified, Self-Determination Training, and the Oklahoma National Core Indicators. The request is to expand the programs the center has, extending the Center's reach to Oklahoma.

Ms. Murie asked Dr. Gallus if she'd heard of Rev Up, a national committee to increase voter engagement among persons with disabilities. Dr. Gallus had not. Ms. Murie is interested in working with OSU and the Center in voting engagement.


Ms. Duplan asked Dr. Gallus to discuss the budget request. Dr. Gallus explained the budget would cover one year salary of this position and travel around Oklahoma. Cost share from OSU would include the onboarding of the staff member as well as learning the self-determination training, to be able to take that outside of Payne County (where the Center is located).

Ms. Greenhaw asked for clarification as to budget line items. Dr. Gallus explained the amount requested is \$97,160, which includes salary, benefits, in-state travel, and office set up. Dr. Gallus explained they would be housed on the OSU campus.

Ms. Felty asked for further clarification to the proposal, asking if this was a position for the current programs the Center has or its own programs. Dr. Gallus explained it would be across all programs because they are interconnected. The programs that would benefit most initially is the Self-Determination training and then Opportunity Orange Scholars (OOS). The Center would like to be more of a resource outside of Payne County. Ms. Felty asked Dr. Gallus if the Center's program participants were Oklahoma residents. Dr. Gallus said participants were, however, the OOS program could have students in other states, due to the interest from students in other states for post-secondary opportunities.

Ms. Greenhaw asked Dr. Gallus if the Self-Determination training was done in Stillwater. Dr. Gallus explained in the beginning it was done in Stillwater. Due to the pandemic, they did move it to a virtual format. They do offer the training both now. Ms. Greenhaw asked a follow up, wondering if OSU-Oklahoma City would be a possibility for a site for in-person training. Dr. Gallus said that could be a possibility.

Ms. Duplan asked Dr. Gallus about sustainable planning, not seeing it covered. Dr. Gallus did say they would be able to flesh that out more for the Council.

2.  Mr. Houston introduced **Terry Yarbery with the Pervasive Parenting Center presented a funding request for a third Youth Expedition Summit to be held in northeastern Oklahoma, in Poteau** (Kodey Toney, the Center's Director was unavailable). Ms. Randle provided background information on the Youth Summit, including this activity has been budgeted (in April of 2023) by the Council. The Youth Expedition is a summer camp for youth with developmental disabilities. They help kids with transitioning into a college setting. They also offer a resource session for parents. This project is requesting \$22,500 for June 2024.

The committee discussed sustainability of projects and how to support the work the Council does contract with partners and how to sustain the work. Ms. Kelley

mentioned the Center for Non-Profits could be helpful.

Ms. Yarbery provided background information about the Summit. The first summit was 2 days, and they extended the next one (2023) to 3 days. This second Summit had 33 students stayed on campus and there were 15-20 commuters. Participants have asked for the summit to be longer.

Ms. Felty asked if all participants had developmental disabilities or other. Ms. Yarbery responded there were a larger number of participants with autism, but all disabilities were included.

Ms. Greenhaw asked if funding went away, what other funding would they be seeking to be able to continue and/or grow the program. Ms. Yarbery mentioned that Mr. Toney (the director of the center) was working on a grant to expand their social program and the Summit. Ms. Yarbery mentioned their board wants to continue this work and they would find funding.

Ms. Duplan asked if this work would qualify for a 10% match. Ms. Randle answered because the work is in a designated poverty county, the Council could fund up to 90% of the project.

Ms. Randle asked if she was familiar with the initial conversations of duplicating the Summit in western Oklahoma. Ms. Yarbery responded she was a little.

B.   **Committee discussion & funding recommendations:**


1. DISCUSSION: Ms. Kelley started the discussion of the two funding requests with the Youth Expedition Summit, since this was a project, the Council had funded before and the amount was the same. There are questions about the sustainability of the activity. Ms. Yarbery mentioned they were anticipating some funding, but not in place. Ms. Felty said she had heard it different, that the Center was working on something.


Ms. Felty asked about participants of the summit, wanting to confirm the participants had a developmental disability.

She mentioned they would This event is offered for all types of disabilities, including developmental disabilities. This program will have to look for other funding sources if the council can no longer fund the project.

Ms. Felty pointed out that the Center's match was higher than the 10%, according to his budget, showing a 23% match in funding and this shows a form of sustainability.

ACTION: Ms. Duplan moved to approve the funding request from Pervasive Parenting Center, seconded by Ms. Greenhaw.

 **AYES:** Shelley Greenhaw, Janie Fugitt, RoseAnn Duplan, Michelle Kelley, Sharon Garrity, Wanda Felty, Alicia Murie

 **NAYS:** none

MOTION: Carried 

2. **DISCUSSION:** Ms. Kelley began the discussion regarding the Community Education and Engagement Coordinator with Oklahoma State University, Center for Developmental Disabilities.

Ms. Felty mentioned it seemed like this was a request to grow their work, but they want the Council to fund the position for their work. That would be like... Chesapeake saying we have a new program, and we want you to fund the coordinator to start it up.

Ms. Randle asked how it was different than our other projects. The Council funds staff with the Oklahoma Autism Center. Ms. Felty said this request seems more like it's Outreach for OSU's programs, with the only measurable outcome being programs they already have.

Ms. Fugitt said it sounded like to her it was a project to replicate their programs, like the Self-Determination Training, in other parts of the state.

Ms. Felty said it wasn't what it sounded like, that when Dr. Gallus got to the end of the presentation, she said people would be driving in to participate in their programs. Ms. Greenhaw and Ms. Duplan said the position sounded like it would be to hire someone to market the programs that currently exist at the center, bringing people to OSU.

Ms. Duplan mentioned when Ms. Greenhaw asked if using the OSU-Oklahoma City campus, it didn't seem like it was in the Center's thinking. She reiterated that it sounded like they were recruiting and expanding the existing programs that were on the OSU Campus. Ms. Duplan also mentioned on their logic model, it states the goal is to increase enrollment in their programs.

Ms. Randle reminded the Committee we can go back to the Center and ask for what we want.

Ms. Duplan said it looks like the position is for a recruiter for their programs.

Ms. Kelley asked what the committee recommendation would be. Ms. Felty mentioned she wasn't sure she would want to script it that much.

Ms. Randle stated we could tell the Center that the Council is not interested in what we believe is a recruiting position solely for OSU. The Council would rather see a proposal that is more encompassing of the state.

Ms. Duplan reminded what would be the outcomes of the proposal. What would be provided to the community?

Ms. Felty's concern is funding a position for their projects. It is not a project the Council helped to create, a "badge to hang on our wall."

Ms. Kelley asked the committee, when the council funds certain projects, are there any holes or areas we could hold the Center too, for their two projects. Ms. Randle mentioned the Council did that with NCDDET. Ms. Felty pointed out that NCDDET is creating a training.


Ms. Randle stated staff could discuss the request with the Center that it appears the funding request is for a recruiting position for OSU, supplementing already created work and remind them the Council cannot supplement already created work. Staff would encourage the Center to request funding from the Council that was a revision of the work they have started that will benefit Oklahomans (with developmental disabilities).


Ms. Kelley and Ms. Greenhaw both stated we like what they're doing. Ms. Kelley mentioned her students attend school at Trinity and there were schools that would readily have them come or other communities that they don't readily have the resources to have things like this.


Mr. Houston added it would change the request if OSU would go out to communities.

Ms. Fugitt asked if we can provide feedback to the Center. Ms. Felty mentioned yes, but this seems like a remake not a revision. Ms. Duplan mentioned yes, we could provide feedback about why the committee didn't feel it was appropriate and that what Ms. Randle said was a good explanation (*the Council appreciates the work they do. The proposal is supplementing already existing work which the Council cannot do. They can resubmit a proposal includes a revision of their work or brand-new work and a new proposal*).

ACTION: Ms. Kelley moved to decline the funding request from Oklahoma State University, Center for Developmental Disabilities and seconded by Ms. Murie.

 **AYES:** Shelley Greenhaw, Janie Fugitt, RoseAnn Duplan, Michelle Kelley, Sharon Garrity, Wanda Felty, Alicia Murie

 **NAYS:** none

MOTION: Carried 

VI.  **Other New Business**

Listening sessions discussion. Ms. Randle clarified for the committee this is a discussion with committee members about having listening sessions throughout Oklahoma.

VII.  **Announcements**

Ms. Murie brought promotional items representing Rev Up.

VIII.  **Adjournment**

Ms. Kelley ended the State Plan Committee meeting with a question for Committee Members and Staff to think about: “What are three positive things people say about you.”

The meeting was adjourned at 3:03 pm

FY 25 Funding

Project: LEAD - Learn. Educate. Accept. Develop

Organization: [Autism Foundation of Oklahoma](#)

Proposal Description:

Neurodiversity training project through AFO, designed to enhance employer knowledge to better understand the challenges and barriers people with autism face in reaching gainful employment as well as how to create a more inclusive and accommodating workplace.

Target:

AFO intends to offer neurodiversity in the workplace training and consultation services to employers and individuals across the state. Specifically increasing employment opportunities for young adults with autism and intellectual/developmental disabilities

Hosted/Method:

LEAD stands for Learn, Educate, Advance, and Develop and is a training series designed to raise awareness of neurodiversity, educate employers on the benefits of a neurodiverse workforce, and aid employers in building inclusive work environments for individuals with neurological differences.

Duration/Time:

Module Trainings supplied online and in person.

Trainings can be scheduled, and Online training is ongoing.

Impact:

Employer commitment to diversity and inclusion in the workplace concerning those with disabilities will have a significant impact on long-term, meaningful employment for Oklahomans with autism and/ or I/DD and their families.

Funding requested for FY25 (Including Match) (Year 4)

Total Required Match	25%	\$42,000
Total Council Funding Requested		\$125,000
Total Project Costs		\$167,000

Request(s):

None at this time.

[View results](#)

Respondent


9 Anonymous

85:30

Time to complete

Part 1 - Contact Information

1. What is today's date?

2. Full Legal Name *

3. Mailing Address *

4. City *

5. State *

6. Zip *

7. Email *

8. Phone number *

9. Website

State Plan Goals

To qualify for funding, projects must meet the goals in the 5 Year DDCO State Plan. The state plan is available for review <https://oklahoma.gov/ddco/about/state-plan.html>.

10. Select the goal your project will be addressing. *

- Goal 1: Advocacy and Self-Advocacy Skills Improvement Individuals with developmental disabilities and their families will be skilled and empowered advocates and leaders in individual and systems change advocacy.
- Goal 2: Good Lives Across the Lifespan Individuals with developmental disabilities, their families and caregivers will have increased access to quality, long-term, individualized supports and services across the lifespan in the home and community of their choice.
- Goal 3: Community Awareness and Inclusion People with developmental disabilities and their families will experience increased inclusion and integration so that they may fully participate in all aspects of the community.

Part 2 - Disclosure of Potential Conflict of Interest

The State of Oklahoma prohibits persons and organizations from participating in the development of a competitive contract (See page 2) where they may receive an actual or perceived benefit. The following questions assist us in making this determination.

11. Does this application specify a person or organization that will complete any part of the work described within the proposal or application ? *

- Yes
- No

12. Do you have any personal, professional or financial relationships with the organizations listed in 9 above ? *

- Yes
- No

13. If you answered yes to either question 9 or 10 above, please explain in detail. Identify names and relationships as necessary.

Proposal

The DDCO thoughtfully reviews complete and materially accurate submissions at the committee level. The information provided in Part III will assist committee members in understanding your application and any expectations for DDCO.

14. Provide a written overview of the proposal. *

In the United States, adults with Autism Spectrum Disorder (ASD) experience incredibly high unemployment and underemployment rates compared to adults with other disabilities and the general population. This significant disparity indicates a clear need to address the issue of employment opportunities for individuals on the autism spectrum. According to recent data from the CDC, autism now affects 1 in 36 children in the United States. A staggering 35 percent of young adults with autism have never held a job or received postgraduate education after high school. Compared to their peers with other disabilities, young adults with autism have the lowest unemployment rate. Nearly 42% of autistic adults never work for pay during their early 20's. (Roux et al., 2015).

LEAD, a Neurodiversity in the Workplace training project through AFO, is designed to enhance employer knowledge and better understand the challenges and barriers people with autism face in attaining and maintaining gainful employment and how to create a more inclusive and accommodating workplace. LEAD stands for Learn, Educate, Advance, and Develop and is a training series designed to raise awareness of neurodiversity, educate employers on the benefits of a neurodiverse workforce, and assist employers in building inclusive work environments for individuals with neurological differences. AFO will recognize employers who have completed all LEAD training modules with a certificate of completion and a digital badge to share on any online platform. AFO will only award certificates of completion to organizations that complete all training modules with at least 70% of the human resources department and/or management team participating. In addition to providing training on neurodiversity in the workplace, AFO intends to create an online job posting board comprised of a network of employers who have completed the training. Oklahoma has no active job boards highlighting employment opportunities for autistic individuals, with employers committed to a neuro-inclusive workplace. AFO intends to combine local and state job postings with the national networks to create a comprehensive list of all employment opportunities for autistic job seekers.

LEAD is offered directly to employers to address the issue of high unemployment rates for working-age individuals on the autism spectrum and those with intellectual or developmental disabilities (I/DD). Opportunities for gainful employment play a vital role in ensuring that individuals with autism or I/DD can fully participate in all aspects of society. Increased access to employment opportunities helps strengthen the confidence and autonomy of autistic adults, allowing them the resources and independence to engage in community-based social activities that may help increase their sense of belonging and inclusion. The benefits of gainful employment may lead to improved health, lower levels of discrimination and harassment, increased economic well-being, and greater personal dignity.

The main goal of the LEAD project is to address high unemployment rates through a training series developed on neurodiversity in the workplace provided directly to employers within the state. The training series will assist employers in effectively including and accommodating individuals with autism and intellectual and developmental disabilities across all aspects of the employment process, including recruitment, interviewing, hiring, onboarding, employment retention, and workplace accommodations. The training will also assist employers in better understanding the benefits of hiring a neurodiverse workforce. In addition to the training, AFO will provide ongoing consultation on creating and implementing neurodiversity hiring initiatives for employers. Through providing training, consultation, and a website page of job postings, AFO foresees increased employment opportunities for individuals with autism and I/DD.

Roux, A.et al. (2015). Young Adults on the Auti

15. Has a needs assessment been completed? If no, why not?

Yes

16. Provide a list of all people and organizations proposed to work on the project. *

Kyle Britt
Emily Scott
Jennifer Winfrey
Carley Dummitt

17. Describe the experience and qualifications of the persons and or organization proposed to provide goods and services associated with the proposal. *

Kyle Britt is AFO's Workforce Development Coordinator and is leading this project. He holds his MA in Human Resources from Ottawa University and is a Certified Autism Specialist. Kyle has previously worked in vocational rehabilitation and has many years of experience assisting and advocating for individuals with disabilities to obtain gainful employment.

Emily Scott is AFO's Executive Director and holds her MA degree from the University of Oklahoma in Administrative Leadership and an MS degree in Nonprofit Management from Louisiana State University. She is a Certified Nonprofit Professional (CNP) and Certified Autism Specialist (CAS). Emily has over 15 years of nonprofit experience in volunteer and executive leadership roles.

Jennifer Winfrey is a Certified Grants Management Specialist with expertise in federal grants and state contracts. She has an MBA and over 18 years of experience in nonprofit accounting and grant management. Jennifer serves as AFO's financial consultant and will be responsible for billing and fund appropriation.

Carley Dummitt is the Marketing and Community Outreach Coordinator for AFO. Carley has a BAS in Public Policy and Administration from St. Petersburg College. Drawing on her own experiences with Asperger's, Carley strives to shatter the stigma surrounding autism and raise awareness about the beauty and diversity of neurodiversity.

18. Describe how the proposal will help DDCO meet the goals in the 5 Year DDCO State Plan found at www.okddc.ok.gov *

AFO's anticipated outcomes are to increase employer knowledge of autism and intellectual and developmental disabilities to decrease the number of neurodiverse adults who are unemployed or under-employed in Oklahoma. Employers participating in the training will better understand the benefits of employing individuals with autism and I/DD and how to support their growth in the workplace. Additionally, by providing neurodiversity inclusion consultation to employers, AFO aims to increase successful long-term employment outcomes for individuals with autism and/or intellectual/developmental disabilities.

19. Define the benefitting population targeted by describing the age, region, familial status, learning or support needs, type of disability. *

AFO intends to offer neurodiversity in the workplace training and consultation services to employers and individuals across the state. The focus will specifically target increasing employment opportunities for young adults with autism and intellectual/developmental disabilities transitioning into the workforce.

20. Describe the impact on the target audience ? *

Through education on neurodiversity in the workplace and ongoing consultation, AFO expects employers to include the disability community in their diversity and inclusion plans. Employer commitment to diversity and inclusion in the workplace concerning those with disabilities will have a significant impact on long-term, meaningful employment for Oklahomans with autism and/ or I/DD and their families.

21. Describe the impact on people with disabilities ? *

Increasing access to employment opportunities for autistic adults helps strengthen their confidence and autonomy, giving them the resources and independence to engage in community-based social activities that may help increase their sense of belonging and inclusion. These benefits lead to improved health, lower levels of discrimination and harassment, increased economic well-being, and greater personal dignity. Individuals who support themselves through gainful employment rely less on their families/caregivers and government assistance (Streeby, 2017). Streeby, K. (2017). Labor of Love. Autism Empowerment.

22. Is the proposal a duplication or expansion of work already being done in Oklahoma or elsewhere ? If yes, describe what is being duplicated and what makes this project unique or different. *

To our knowledge, no other organizations in the state are offering employment training similar to AFOs.

23. Will the proposed project use current best practices in the field of developmental disabilities ? If yes, explain what they are and how they will be incorporated. Please cite source material.

*

Yes, this project will closely follow and incorporate the "Top 10 Promising Practices on DCLC" <https://itacchelp.org/wp-content/uploads/2022/02/Top-10-Promising-Practices-on-Diversity-by-and-for-DD-Councils.pdf>.

24. When the work is complete, how will it have provided systems change to programs or services for people with developmental disabilities? *

AFO will develop a plan and infrastructure to provide ongoing technical assistance to employers who complete our training series, including requests for workplace accommodations assistance, job coaching, sensitivity training, and navigating unique employee situations and circumstances not covered in our training.

25. Will the proposal be implemented or offered statewide? If no, define the counties and cities served and the rationale for why these locations were selected.

*

Yes

Performance Measures

The DDCO is required to provide performance measure reports to evaluate the effectiveness of our activities. As a result, DDCO requires contracted vendors to submit performance measure reports prior to receiving final payment. Performance reports include actual counts and / or the collection of survey information. As a required component of the application, provide projected data for the following performance measures. (Not all measures are applicable. You may identify measures not applicable to this application as "N/A to this activity") All contractors will be required to collect baseline data to evaluate outcomes.

26. INDIVIDUAL & FAMILY ADVOCACY: The number of people with developmental disabilities who participated in Council supported activities designed to increase their knowledge of how to take part in decisions that affect their lives, the lives of others, and or systems.

The value must be a number

27. INDIVIDUAL & FAMILY ADVOCACY: The number of family members who participated in Council supported activities designed to increase their knowledge of how to take part in decisions that affect the family, the lives of others, and or systems.

The value must be a number

28. INDIVIDUAL & FAMILY ADVOCACY: After participation in Council supported activities, the percent of people with developmental disabilities who report increasing their advocacy as a result of Council work.

100

The value must be a number

29. INDIVIDUAL & FAMILY ADVOCACY: After participation in Council supported activities, the percent of family members who report increasing their advocacy as a result of Council work.

The value must be a number

30. INDIVIDUAL & FAMILY ADVOCACY: The percent of people who are better able to say what they want or say what services and supports they want or say what is important to them.

The value must be a number

31. INDIVIDUAL & FAMILY ADVOCACY: The percent of people who are participating now in advocacy activities.

The value must be a number

32. INDIVIDUAL & FAMILY ADVOCACY: The percent of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.

The value must be a number

33. INDIVIDUAL & FAMILY ADVOCACY: The percent of people with developmental disabilities satisfied with a project activity.

The value must be a number

34. INDIVIDUAL & FAMILY ADVOCACY: The percent of family members satisfied with a project activity.

The value must be a number

35. SYSTEMS CHANGE: The number of policy and or procedures created or changed.

The value must be a number

36. SYSTEMS CHANGE: The number of statutes and or regulations created or changed.

The value must be a number

37. SYSTEMS CHANGE: The number of promising practices created.

The value must be a number

38. SYSTEMS CHANGE: The number of promising practices supported through Council activities.

The value must be a number

39. SYSTEMS CHANGE: The number of best practices created.

The value must be a number

40. SYSTEMS CHANGE: The number of people trained or educated through Council systemic change initiatives.

The value must be a number

41. SYSTEMS CHANGE: The number Council supported systems change activities with organizations actively involved.

The value must be a number

42. SYSTEMS CHANGE: The number of Council efforts that led to the improvement of best or promising practices, policies, procedures, statute, or regulation changes.

The value must be a number

43. SYSTEMS CHANGE: The number of Council efforts that were implemented to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities and their families participate in the design of and have access to needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life.

The value must be a number

44. SYSTEMS CHANGE: The number of policy, procedure, statute, or regulation changes improved as a result of systems change.

The value must be a number

45. SYSTEMS CHANGE: The number of policy, procedure, statute, or regulation changes implemented.

The value must be a number

46. SYSTEMS CHANGE: The number of promising and/or best practices improved by systems change activities.

3

The value must be a number

47. SYSTEMS CHANGE: The number of promising and/or best practices that were implemented.

2

The value must be a number

Additional Requirements for funding

48. FINANCIAL INFORMATION: Include a detailed revenue and expenditure budget, in a proper accounting format, detailing the total costs and revenues of the proposal.

Identify the amount requested from DDCO within the context of the budget. DDCO requires a match of 25%. Specify the source of this match.

Identify projected funding sources not currently in place.

Provide a narrative explaining each category of expenditure and source or revenue associated with the project. Revenue sources include but are not limited to conference registration fees, third party grants, booth rentals, in-kind contributions, etc.

If space does not permit the details necessary, please email to John.Houston@okdhs.org and include the Project Name in the subject line. *

Budget emailed to John.Houston@okdhs.org

49. STATEMENT OF WORK: Provide a proposed statement of work for the contractual requirements detailing the goods and services you will provide in exchange for DDCO funding. *

With the following activities, AFO aims to create a project to address the goal of increasing the practice of hiring people with autism and I/DD:

- Provide neurodiversity inclusion in the workplace training and ongoing consultation to 20 large, mid-size, and small employers in Oklahoma.
- Develop and maintain an autism and I/DD inclusive job posting board comprised of a network of employers committed to inclusion in the workplace.

50. Sustainability Plan (Required for recurring requests).

Typically, DDCO will fund an activity for a maximum of five (5) years. Projects continuing for more than five years are expected to be self-sustaining by the end of the contract period. Include a detailed plan and timeframe for the project to become self-sustainable, including projected budgets, identified partners, and annual funding goals for each year.

AFO will develop a plan and infrastructure to provide ongoing technical assistance to employers who complete our training series, including requests for workplace accommodations assistance, sensitivity training, and navigating unique employee situations and circumstances not covered in our training. To sustain this piece and future modules beyond this proposal, AFO will charge participant fees to employers, continue our grant-making efforts with other agencies and nonprofits, and engage in direct fundraising activities such as special events and annual giving campaigns.

51. Logic Model (Required for contracts in excess of \$5,000)

A logic model is a tool used by DDCO to evaluate the effectiveness of the program. An example is included, or you may use one of the many formats found by Googling "logic model."

Inputs: Staff time for program development, employers who will participate in the program, employers seeking consultation in the development and implementation of neurodiversity hiring initiatives, developing autism and I/DD inclusive job posting network.

Activities: Providing neurodiversity in the workplace training and ongoing consultation to 20 Oklahoma employers, developing and maintaining an autism and I/DD inclusive job board.

Outputs: Delivery of training and consultation provided to 20 employers, active autism and I/DD inclusive job posting board

Outcomes: Increase employment opportunities for autistic adults by providing training, consultation, and resources to Oklahoma's employers; additionally, supporting employers in sustaining impactful neurodiversity hiring initiatives, active autism and I/DD inclusive job posting board for Oklahoma employers committed to disability inclusion in the workplace.

Impacts: Increased access to attainable and sustainable employment opportunities for autistic individuals and individuals with I/DD.

52. Are you a registered vendor with the State of Oklahoma: *

- Yes
- No

53. Is the proposed vendor applicant an IRS Registered 501(c)3: *

- Yes
- No

54. Is the proposed vendor a Government entity: *

- Yes
- No

55. If yes, in question 52, provide form of government and name of entity

56. Is the proposed vendor a tribal nation: *

- Yes
- No

57. If yes in Question 53, list tribe.

58. Is the proposed vendor a sole proprietor: *

- Yes
- No

59. Is the proposed vendor a registered partnership? *

- Yes
- No

60. Is the proposed vendor a registered corporation? *

- Yes
- No

61. Social Security or FEI Number: *

The value must be a number

Contact information

62. Name of individual with contract signatory authority / title / Phone number / email address *

63. Primary Contact: Name of individual to contact regarding contract performance & operations / Title / Phone number / E-mail address *

64. Legal Notices: Name of individual to send legal notices / Title / Phone number / E-mail Address *

65. Finance Contact: Name of individual responsible for finance and accounting / title / phone number / e-mail address *

Increasing Neurdiversity in the Workplace

Year 4 Budget

July 1, 2024 - June 30, 2025

	Year 4 Request	Match	Total
Project Income			
DDCO Request	125,000		125,000
Fundraising/Foundation grants		29,500	23,000
In-Kind Services		12,500	12,500
Total Project Income	125,000	42,000	167,000
Expenses			
Salary			
Executive Director	9,333	9,333	18,666
Project Coordinator	60,637	-	60,637
Project Asst/Resources	-	4,500	4,500
Outreach/Communications	5,250	7,875	13,125
Total Salary	75,220	21,708	96,928
Fringe (25%)	18,805	5,427	24,232
Contractual			
Grants Management Specialist	3,000	-	3,000
Subject Matter Experts (Workforce Comm)	-	8,000	8,000
Total Contractual	3,000	8,000	11,000
Supplies			
Program Supplies	500	-	500
Software	1,000	-	1,000
Total Supplies	1,500	-	1,500
Other			
Postage	100	-	100
Stipend-Self Advocates	3,000	-	
Printing	250	-	250
Marketing	3,500	-	3,500
Training/Meeting Space		2,500	2,500
Education Outreach and Training	3,262	-	3,262
Total Other	10,112	2,500	12,612
Travel (in-state)	5,000	547	5,547
Total Direct Costs	113,637	38,182	151,819
Indirect Costs (10% MTDC)	11,363	3,818	15,181
Total Program Costs	125,000	42,000	167,000
Net Revenue over Expenses	0	(0)	0
Match Percentage		25%	

Budget Justification
July 1, 2024 – June 31, 2025

The Autism Foundation of Oklahoma respectfully requests funding in the amount of **\$125,000** for the Developmental Disabilities Council of Oklahoma. Non-federal funds for a total of **\$42,000** will be provided by the Autism Foundation of Oklahoma as matching for the purpose of this proposed project.

Personnel

Requested: \$75,220 **Match: \$21,708** **Total: \$96,927**

Executive Director, Emily Scott

.10 FTE Requested, .10 FTE Match with fundraising funds

Requested: \$9,333 Match: \$9,333

The Executive Director will direct all aspects of project administration and supervise project personnel. Ms. Scott will oversee personnel recruitment, budget management, ensure time sensitive deadlines and projections are met and meet with team members to guide project activities and plan for needs.

Project Coordinator, Kyle Britt

1.0 FTE Requested

Requested: \$60,637

The Project Coordinator will provide day to day management of the project. Mr. Britt will ensure collaboration and coordination with partners, will meet with team members to plan training session and activities, and provide training and technical assistance to participating places of employment. The Project Coordinator will report to the Executive Director.

Outreach and Communications Coordinator, Carly Dummitt

.10 FTE Requested, .15 FTE Match with fundraising funds

Requested: \$5,250 Match: \$7,875

The Outreach and Communications Coordinator will attend community events to promote and provide information about the employer trainings. Ms. Dummitt will also be responsible for marketing of upcoming training opportunities.

Fringe Benefits

Requested: \$18,805 **Match: \$5,427** **Total: \$24,232**

Funds are requested at the rate of 25% of salary. The Autism Foundation of Oklahoma’s fringe benefit package includes payroll taxes, workers compensation, health insurance allowance and paid leave benefits such as annual leave and holidays.

Contractual

Requested: \$3,000

Match: \$8,000

Total: \$11,000

Grant Management Specialist, Jennifer Winfrey

Requested: \$3,000

Jennifer Winfrey is a Certified Grants Management Specialist with expertise in federal grants and state contracts. She will handle expense tracking, budget monitoring, and finance reporting. Jennifer Winfrey will advise project staff on following 2 CFR 200, Uniform Guidance, and ensure compliance.

Subject Matter Experts, AFO Workforce Development Committee

Match: \$8,000

The Autism Foundation of Oklahoma's Workforce Development Committee will provide advisory in quality programming. The volunteer committee has expertise in programs for individuals with developmental disabilities, autism, and human resources.

Supplies

Requested: \$1,500

Match: \$0

Total: \$1,500

Supplies include notebooks, pens, pencils, paper, computer supplies, printer supplies and desk supplies **\$500**. Software and digital application purchases are estimated at **\$1,000**.

Other

Requested: \$10,112

Match: \$2,500

Total: \$12,612

Other funds are requested for postage, printing, marketing **\$3,850**. Funding for educational outreach and training materials is estimated for **\$3,262**. Stipends will be provided to self-advocates who assist with training for **\$3,000**. Training and meeting space will be provided in-kind for **\$2,500**.

Travel

Requested: \$5,000

Match: \$547

Total: \$5,547

In-state travel is required to meet project objectives set forth in the work plan. Mileage and per diem will be reimbursed using the prevailing federal GSA rate. Other costs may include parking and local toll charges.

Indirect Costs

Requested: \$11,363

Match: \$3,818

Total: \$15,181

The indirect cost is based on the Office of Management and Budget Guidance of the approved de minimis rate of 10% of modified total direct costs, excludes lease.

FY 25 Funding

Project: Building Capacity for Autism

Organization: [Board of Regents of the University of Oklahoma Health Sciences Center, Oklahoma Autism Center](#)

Proposal Description:

Early Access team has focused on increasing parent engagement in developmental monitoring and has added another level of diagnostic training to directly address long waitlists. The work in progress under the existing contract is to increase availability of developmental monitoring, screening, and diagnostic testing.

Target:

Children /w autism and other developmental disabilities.

Hosted/Method:

Our focus for this proposal will be to use our success in networking with and training organizations to build long-term and sustainable relationships focused on building capacity to identify and support young children with autism and other developmental disabilities.

Duration/Time:

Ongoing

Impact:

- 1) Children with autism will be found at a younger age,
- 2) Families will have referral and resource information, so they are better equipped to advocate for their children, and
- 3) Children will receive proper early intervention during critical early years of development (before school age) which can have a significant impact on a child's ability to learn new skills, as well as reduce the need for costly interventions over time.

Funding requested for FY25 (Including Match)

Total Costs		\$135,024
Total Match		\$45,715
Total Project Costs		\$180,739

Request(s):

None at this time.

[View results](#)

Respondent

10 Anonymous

15:57

Time to complete

Part 1 - Contact Information

1. What is today's date?

2. Full Legal Name *

3. Mailing Address *

4. City *

5. State *

6. Zip *

7. Email *

8. Phone number *

9. Website

State Plan Goals

To qualify for funding, projects must meet the goals in the 5 Year DDCO State Plan. The state plan is available for review <https://oklahoma.gov/ddco/about/state-plan.html>.

10. Select the goal your project will be addressing. *

- Goal 1: Advocacy and Self-Advocacy Skills Improvement Individuals with developmental disabilities and their families will be skilled and empowered advocates and leaders in individual and systems change advocacy.
- Goal 2: Good Lives Across the Lifespan Individuals with developmental disabilities, their families and caregivers will have increased access to quality, long-term, individualized supports and services across the lifespan in the home and community of their choice.
- Goal 3: Community Awareness and Inclusion People with developmental disabilities and their families will experience increased inclusion and integration so that they may fully participate in all aspects of the community.

Part 2 - Disclosure of Potential Conflict of Interest

The State of Oklahoma prohibits persons and organizations from participating in the development of a competitive contract (See page 2) where they may receive an actual or perceived benefit. The following questions assist us in making this determination.

11. Does this application specify a person or organization that will complete any part of the work described within the proposal or application ? *

- Yes
- No

12. Do you have any personal, professional or financial relationships with the organizations listed in 9 above ? *

- Yes
- No

13. If you answered yes to either question 9 or 10 above, please explain in detail. Identify names and relationships as necessary.

Proposal

The DDCO thoughtfully reviews complete and materially accurate submissions at the committee level. The information provided in Part III will assist committee members in understanding your application and any expectations for DDCO.

14. Provide a written overview of the proposal. *

Children with autism and other developmental delays who receive early intervention show significant improvements in long-term outcomes. Significant barriers remain for families seeking these important services for their child. Families encounter long waiting lists (often over 12 months) for diagnostic services due to limited trained providers and increased numbers of children needing this service. This significantly impedes access to timely supports critical to reduce the stress and isolation that can be experienced by families of children with autism.

Early Access has worked to improve early identification practices in Oklahoma over the past 12 years. These efforts have included establishing a network of Community Screening Partners trained in screening and sharing resources with families. More recently, the Early Access team has focused on increasing parent engagement in developmental monitoring and has added another level of diagnostic training to directly address long waitlists. The work detailed in this proposal will continue and expand work in progress under the existing contract to increase availability of developmental monitoring, screening, and diagnostic testing.

Accurate autism diagnosis requires training and knowledge of behavioral symptoms and co-occurring developmental conditions in young children. A potential solution to address access is to train those who regularly diagnose other childhood conditions. This proposal will continue tackling the need for trained clinicians by expanding partnerships with health or mental health agencies and psychologists (emphasizing rural and other underserved communities) to provide training in high-quality autism diagnostic evaluation, including the ADOS-2, which is the gold standard for identifying autism at all ages.

Our focus for this proposal will be to leverage our success in networking with and training organizations to build long-term and sustainable relationships focused on building capacity to identify and support young children with autism and other developmental disabilities.

Examples of previous successes we hope to replicate under the proposed contract include an ongoing partnership with Oklahoma Department of Health, with whom we are now contracted to conduct quarterly trainings in developmental monitoring after establishing a relationship through free trainings offered through our work with the Council. Similarly, we are in the process of growing our partnership with the Chickasaw Nation Pediatric Collaborative, with quarterly trainings scheduled to reach all staff who support individuals with autism, including all newly hired pediatric staff. Because of this established and continuing partnership, we have created a new connection with the Choctaw Nation of Oklahoma. As they work to identify grant funding to increase their capacity to serve individuals with autism, because of DDCO funding, we are able to offer our multi-level training free of charge. We have plans to implement the first two levels of training this spring, and we intend to continue this partnership by providing our level three screening training along with identifying their internal capacity for developing a team to train on high-quality, comprehensive team-based autism evaluation practices. Their team has expressed interest in all levels of training we currently offer, and they have indicated they have the internal capacity to be able to assemble a team of qualified professionals to conduct autism evaluations. They have also indicated plans to seek grant funding to promote longer-term sustainability. Continued support from the council will allow us to replicate these successful partnerships by providing free initial training to new partners, leading to more sustainable long-term partnerships in the future.

15. Has a needs assessment been completed? If no, why not?

Yes, we have previously administered a needs assessment of pediatric evaluation providers across the state.

16. Provide a list of all people and organizations proposed to work on the project. *

Bonnie McBride, PhD, BCBA-D; Kathryn Moore, PhD; Seth Kastner, BS; Jeanne Buchanan, BS; Gina Bryan, MSW

17. Describe the experience and qualifications of the persons and or organization proposed to provide goods and services associated with the proposal. *

The Early Access Program, through the Oklahoma Autism Center, has access to the expertise and resources of the OU Child Study Center (CSC) within the Department of Pediatrics at OUHSC. The CSC brings approximately 50 years of service to Oklahoma and engages in multiple activities that establish a foundation for a sustained statewide program. The CSC provides evaluation, treatment and services for children with special needs who have a wide range of developmental disabilities and behavioral problems.

A staff that includes developmental behavioral pediatricians, child psychologists, speech-language pathologists, physical therapists, occupational therapists, and clinical social workers conducts programs and clinics at CSC. The CSC also implements a model to include Family Partners on clinic teams. The CSC has a demonstrated capacity to establish a project, grow that project into a program and then secure ongoing support that sustains and extends it. For example, two other ongoing programs of the CSC (the MESA Program, formerly known as Project PEAK, and Sooner SUCCESS) have received funding from the DD Council.

The CSC is also well positioned to develop, coordinate and provide ongoing support for a statewide, community-based system of services for children with ASD. The Oklahoma Autism Center (OAC) at the CSC specializes in early intervention, consultation and professional development in the area of autism and related disabilities. OAC currently includes: 1) evidence-based early intervention services (Early Foundations), 2) school support services and training in ASD (MESA Program), 3) Autism awareness and early identification (Early Access), and 4) research on community-based interventions for young children with ASD.

18. Describe how the proposal will help DDCO meet the goals in the 5 Year DDCO State Plan found at www.okddc.ok.gov *

This project closely aligns with the DDCO Mission by creating systems change in the identification and service provision for children with autism and other developmental disabilities. Through collaborations and partnerships this project will improve services and support systems for children at risk for autism and other developmental disabilities as well as their families. By adding another level of training, the Early Access Program will build the capacity of partners to assist in the identification of children with autism. The project is family-centered and designed to promote inclusion for children with autism. The work of the Early Access Program seeks to promote the long-term wellbeing of Oklahomans with disabilities by creating systems change around early identification and improved supports for children with developmental delays in early childhood programs, aligning with Goal 2 of the DDCO State Plan. In order to achieve "Good Lives Across the Lifespan" it is important that children and families have access to high quality early identification in order to receive needed supports and services as early as possible. In the long-term, we also believe this work will also benefit community awareness and inclusion (Goal 3, particularly in the context of Objectives 3 and 4) by both targeting rural community providers for education in awareness and early identification and by decreasing the average age of identification and diagnosis so that children have greater opportunities for individual supports and inclusion early in life—which can be an important predictor of inclusion across the lifespan.

19. Define the benefitting population targeted by describing the age, region, familial status, learning or support needs, type of disability.

*

The target population that will be helped includes children, birth to age 18, at risk for a developmental disability including autism, and their families. All regions of the state will benefit, but emphasis will be placed on rural and underserved populations, including Native American tribes throughout the state as well as the Latino community.

20. Describe the impact on the target audience ?

*

Early Access proposes to bring about systems change by working with agencies and programs that already provide health care services or mental health care for young children and families. This will be done by imbedding developmental monitoring, screening and effective diagnostic services into existing service structures. Successful implementation will allow existing service providers within local communities to expand their services to provide efficient responses to developmental concerns. These expanded services will be integrated and tailored to the individual community and will result in long-term and sustainable changes in service delivery. These changes will allow children to be identified and receive appropriate intervention at a younger age, and families will be supported throughout the process.

21. Describe the impact on people with disabilities ?

*

By working within existing systems, we will be able to bring about changes in practice and improve ongoing services and outcomes for children at risk for autism and their families. The impact will be: 1) children with autism will be identified at a younger age, 2) families will have referral and resource information so they are better equipped to advocate for their children, and 3) children will receive appropriate early intervention during critical early years of development (before school age) which can have a significant impact on a child's ability to learn new skills, as well as reduce the need for costly interventions over time.

22. Is the proposal a duplication or expansion of work already being done in Oklahoma or elsewhere ? If yes, describe what is being duplicated and what makes this project unique or different.

*

This proposal is an expansion of work being done under our current contract with the DDCO. We are expanding current work by continuing to identify new screening and diagnostic partners and adding a training emphasis on early identification of autism for children under age three.

23. Will the proposed project use current best practices in the field of developmental disabilities ? If yes, explain what they are and how they will be incorporated. Please cite source material.

*

The Early Access Program is committed to using evidence-based practice or best practice in the field of autism and other developmental disabilities in all steps of early identification. We will incorporate recommended practices in the area of developmental monitoring, screening and evaluation from sources such as the American Academy of Pediatrics (AAP)* and the CDC www.cdc.gov/Autism. This proposal is developed around the key evidence-based practice of using developmental monitoring, early screening, and evidence-based evaluation tools (Hyman et al., 2020) to ensure timely access to proven interventions and support for families. Strong consensus indicates that increasing the engagement of parents in this process is vital to reducing delays in early identification and improving outcomes for children and families (e.g. AAP, 2003; Green & Palfrey, 2002; Oberklaid et al., 2002). This practice helps bridge the gap and strengthen collaboration between informed professionals and families.

The Early Access Program incorporates parent-engaged developmental monitoring into the program by utilizing the CDC’s “Learn the Signs. Act Early.” parent-friendly materials that are research-based**, free, easily accessible and customizable. The screening model developed in the early years of the project continues to utilize best practices by selecting high quality instruments and implementing a screening process with low barriers of entry to professionals and families (AAP, 2006). For autism diagnostic evaluations, team-based evaluations by multidisciplinary providers with particular expertise in ASD are considered best practice to address multiple domains of functioning and gather multiple sources of data to inform diagnostic decision making and treatment planning.*** When combined with a parent/caregiver interview, cognitive/developmental testing, language assessment, and medical evaluation, the Autism Diagnostic Observation Schedule, Second Edition (ADOS-2) is considered the gold standard for identifying autism at all ages given its standardized administration and attention to complex aspects of social behavior.***

*Hyman,SL, Levy,SE., Meyers, SM (2020). Identification, Evaluation, and Management of Children with Autism Spectrum Disorder. Pediatrics, 145(1) e20193447; DOI: https://doi.org/10.1542/peds.2019-3447.

**Zubler, J. M., Wiggins, L. D., Macias, M. M., Whitaker, T. M., Shaw, J. S., Squires, J. K., ... & Lipkin, P. H. (2022). Evidence-Informed Milestones for Developmental Surveillance Tools. Pediatrics.

*** Huerta, M., & Lord, C. (2012). Diagnostic evaluation of autism spectrum disorders. Pediatric clinics of North America, 59(1), 103–xi. https://doi.org/10.1016/j.pcl.2011.10.018.

24. When the work is complete, how will it have provided systems change to programs or services for people with developmental disabilities? *

This project proposes to bring about systems change by working with agencies and programs that are already serving young children and families.

This will be done by continuing to imbed developmental monitoring and effective early identification practices into existing early childhood systems, continuing to train new and existing screening partners, and training providers to conduct quality autism diagnostic evaluations.

Successful implementation will allow existing service providers within local communities to expand their services to provide efficient responses to developmental concerns, including reduction in wait time for families needing an evaluation that provide an autism diagnosis which may be required to access services and supports for their children. These expanded services will be integrated and tailored to the individual community and will result in long-term and sustainable changes in service delivery. This will have a significant impact on outcomes for people with disabilities who are able to receive appropriate early intervention services.

25. Will the proposal be implemented or offered statewide? If no, define the counties and cities served and the rationale for why these locations were selected.

*

Yes

Performance Measures

The DDCO is required to provide performance measure reports to evaluate the effectiveness of our activities. As a result, DDCO requires contracted vendors to submit performance measure reports prior to receiving final payment. Performance reports include actual counts and / or the collection of survey information. As a required component of the application, provide projected data for the following performance measures. (Not all measures are applicable. You may identify measures not applicable to this application as “N/A to this activity”) All contractors will be required to collect baseline data to evaluate outcomes.

26. INDIVIDUAL & FAMILY ADVOCACY: The number of people with developmental disabilities who participated in Council supported activities designed to increase their knowledge of how to take part in decisions that affect their lives, the lives of others, and or systems.

The value must be a number

27. INDIVIDUAL & FAMILY ADVOCACY: The number of family members who participated in Council supported activities designed to increase their knowledge of how to take part in decisions that affect the family, the lives of others, and or systems.

The value must be a number

28. INDIVIDUAL & FAMILY ADVOCACY: After participation in Council supported activities, the percent of people with developmental disabilities who report increasing their advocacy as a result of Council work.

The value must be a number

29. INDIVIDUAL & FAMILY ADVOCACY: After participation in Council supported activities, the percent of family members who report increasing their advocacy as a result of Council work.

The value must be a number

30. INDIVIDUAL & FAMILY ADVOCACY: The percent of people who are better able to say what they want or say what services and supports they want or say what is important to them.

The value must be a number

31. INDIVIDUAL & FAMILY ADVOCACY: The percent of people who are participating now in advocacy activities.

The value must be a number

32. INDIVIDUAL & FAMILY ADVOCACY: The percent of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.

The value must be a number

33. INDIVIDUAL & FAMILY ADVOCACY: The percent of people with developmental disabilities satisfied with a project activity.

The value must be a number

34. INDIVIDUAL & FAMILY ADVOCACY: The percent of family members satisfied with a project activity.

The value must be a number

35. SYSTEMS CHANGE: The number of policy and or procedures created or changed.

The value must be a number

36. SYSTEMS CHANGE: The number of statutes and or regulations created or changed.

The value must be a number

37. SYSTEMS CHANGE: The number of promising practices created.

The value must be a number

38. SYSTEMS CHANGE: The number of promising practices supported through Council activities.

The value must be a number

39. SYSTEMS CHANGE: The number of best practices created.

The value must be a number

40. SYSTEMS CHANGE: The number of people trained or educated through Council systemic change initiatives.

The value must be a number

41. SYSTEMS CHANGE: The number Council supported systems change activities with organizations actively involved.

The value must be a number

42. SYSTEMS CHANGE: The number of Council efforts that led to the improvement of best or promising practices, policies, procedures, statute, or regulation changes.

The value must be a number

43. SYSTEMS CHANGE: The number of Council efforts that were implemented to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities and their families participate in the design of and have access to needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life.

The value must be a number

44. SYSTEMS CHANGE: The number of policy, procedure, statute, or regulation changes improved as a result of systems change.

The value must be a number

45. SYSTEMS CHANGE: The number of policy, procedure, statute, or regulation changes implemented.

The value must be a number

46. SYSTEMS CHANGE: The number of promising and/or best practices improved by systems change activities.

The value must be a number

47. SYSTEMS CHANGE: The number of promising and/or best practices that were implemented.

The value must be a number

Additional Requirements for funding

48. FINACIAL INFORMATION: Include a detailed revenue and expenditure budget, in a proper accounting format, detailing the total costs and revenues of the proposal.

Identify the amount requested from DDCO within the context of the budget.
DDCO requires a match of 25%. Specify the source of this match.

Identify projected funding sources not currently in place.

Provide a narrative explaining each category of expenditure and source or revenue associated with the project. Revenue sources include but are not limited to conference registration fees, third party grants, booth rentals, in-kind contributions, etc.

If space does not permit the details necessary, please email to John.Houston@okdhs.org and include the Project Name in the subject line. *

49. STATEMENT OF WORK: Provide a proposed statement of work for the contractual requirements detailing the goods and services you will provide in exchange for DDCO funding. *

PROJECT TITLE: EARLY ACCESS

INTRODUCTION

This proposal would be a continuation and expansion of the Early Access Program's efforts to address the ongoing need for increasing early identification and assessment capacity related to autism and other developmental delays.

SCOPE OF WORK

The Early Access Program's primary goal for the next phase of implementation is to continue and expand our systems change efforts to increase early identification of children at risk for autism and other developmental disabilities and to increase the capacity of communities and providers to offer effective early identification services. These efforts will build on our existing collaborations with community screening partners (e.g., Oklahoma State Department of Health, Chickasaw Nation and others).

Our efforts will focus on developing and providing training to professionals who already provide diagnostic evaluations for other childhood disorders by offering evidence-based autism evaluations as well. The goal is to reduce wait time for receiving an evaluation and thus improve access to needed services and resources. We will begin with targeting agencies that provide developmental screening and diagnostic services generally, as well as those agencies who have received training on autism screening through Early Access. The training in diagnostic evaluation will emphasize the use of evidence-based diagnostic tools for autism including the Autism Diagnostic Observation Schedule, Second Edition (ADOS-2), considered the gold standard observation tool for autism identification.

In addition, the project will continue the ongoing work of supporting existing Community Screening Partners (CSP) by providing updates and technical assistance, and to also continue to disseminate information on family engaged developmental monitoring.

As part of our efforts to target underserved populations, the project will have a particular emphasis on building capacity for early identification of ASD for Oklahoma's tribal communities. This will include continued and expanded collaboration with current partners at the Oklahoma City Indian Clinic, Chickasaw Nation, the Delaware Tribe of Indians, the Citizen Potawatomi Nation, and the Peoria Tribe of Indians of Oklahoma.

PERIOD OF PERFORMANCE

This proposal will build on previous work by incorporating a new level of capacity building to begin July 1, 2024 and end June 30, 2025.

PLACE OF PERFORMANCE

The work will be performed at the Oklahoma Autism Center site as well in community locations throughout the state. Exact locations in the local communities will be determined as events are scheduled. There may be a need for facility rental in some instances, but others may be provided as in-kind support.

WORK REQUIREMENTS

This proposal will focus on providing advanced training early childhood professionals so that they can successfully incorporate autism screening diagnostic evaluations into their daily practice.

Work to be accomplished to meet project objectives includes:

- Identify additional health and mental health hub organizations and private diagnostic providers
- Facilitate training of providers in ADOS-2
- Continue to support existing CSP network
- Train new CSPs statewide as partners are identified
- Promote parent engaged developmental monitoring in healthcare and other early childhood systems
- Collect and summarize data on the effectiveness of the project

ACCEPTANCE CRITERIA

Both parties will agree upon the acceptance of the following deliverables:

- Partners and stakeholders identified and engaged
- Partners trained in all steps of early identification (monitoring, screening, evaluation and referral)
- ADOS-2 training received by providers in Oklahoma
- Children screened for autism and referred for appropriate services
- Providers trained to work with families in developmental monitoring practices
- Communities' increased capacity for early identification of autism and other developmental disabilities

50. Sustainability Plan (Required for recurring requests)

Typically, DDCO will fund an activity for a maximum of five (5) years. Projects continuing for more than five years are expected to be self-sustaining by the end of the contract period. Include a detailed plan and timeframe for the project to become self-sustainable, including projected budgets, identified partners, and annual funding goals for each year.

We will continue with our previously developed 2021-2026 sustainability plan which has been updated and emailed as an attachment to this application.

51. Logic Model (Required for contracts in excess of \$5,000)

A logic model is a tool used by DDCO to evaluate the effectiveness of the program. An example is included, or you may use one of the many formats found by Googling "logic model."

An updated Logic Model has been emailed as an attachment to this application.

52. Are you a registered vendor with the State of Oklahoma: *

Yes

No

53. Is the proposed vendor applicant an IRS Registered 501(c)3: *

Yes

No

54. Is the proposed vendor a Government entity: *

Yes

No

55. If yes, in question 52, provide form of government and name of entity

State University, Board of Regents of the University of Oklahoma HSC

56. Is the proposed vendor a tribal nation: *

Yes

No

57. If yes in Question 53, list tribe.

58. Is the proposed vendor a sole proprietor: *

Yes

No

59. Is the proposed vendor a registered partnership? *

Yes

No

60. Is the proposed vendor a registered corporation? *

Yes

No

61. Social Security or FEI Number: *

731563627

The value must be a number

Contact information

62. Name of individual with contract signatory authority / title / Phone number / email address *

Jane C. Yaciuk, PhD, CRA
Lead Contract/Grant Administrator
Telephone: (405) 271-2090
Email: Jane-Yaciuk@ouhsc.edu

63. Primary Contact: Name of individual to contact regarding contract performance & operations / Title / Phone number / E-mail address *

Name: Kathryn Moore, PhD
Title: Assistant Professor
Telephone: (405) 271-5700, ext. 45132
Email: Kathryn-Moore@ouhsc.edu

64. Legal Notices: Name of individual to send legal notices / Title / Phone number / E-mail Address *

Ashley Krukowski, MPA, CRA
Title: Associate Vice President of Research
Telephone: (405) 271-2090
Email: ashley-krukowski@ouhsc.edu

65. Finance Contact: Name of individual responsible for finance and accounting / title / phone number / e-mail address *

Tamara Franklin
Title: Asst. Vice President of Research Financial Services
Telephone: (405) 271-2177
Email: gca@ouhsc.edu

BUDGET NARRATIVE
Early Access: Building Capacity for Autism
Identification July 1, 2024 – June 30, 2025

Personnel

PI/Project Director and Psychologist - Kathryn Moore, PhD
12% (1.08 CM) Total Effort: 7% paid funds, 5% matching funds
Council Funds Requested \$6,367 In-Kind Matching Funds (OUHSC) \$4,548
Dr. Moore will direct the project and assist with presentations in Autism Spectrum Disorder (ASD) and early identification to community partners. Dr. Moore will oversee all project activities.

CDC Act Early Ambassador-Bonnie McBride, PhD, BCBA
5% (0.45 CM) Total Effort: 0% paid funds, 5% matching funds
Council Funds Requested \$0.00 In-Kind Matching Funds (OUHSC) \$5,116
Dr. McBride will provide support and assistance as well as connect the project with the National CDC developmental health promotion program.

Outreach and Project Evaluation Coordinator - Seth Kastner*
65% (5.85 CM) Total Effort: 50% paid funds, 15% matching funds
Council Funds Requested \$29,651 In-Kind Matching Funds (OUHSC)\$8,895
Mr. Kastner will coordinate education and evaluation components of the project. He will conduct training on selection and administration of developmental monitoring and screening instruments. Mr. Kastner will oversee data collection and review and evaluate project operations and outcomes. He will also assist with autism and developmental screenings.

Clinic Operations and Family Coordinator - Jeanne Buchanan*
65% (5.85 CM) Total Effort: 55% paid funds, 10% matching funds
Council Funds Requested \$32,607 In-Kind Matching Funds (OUHSC) \$5,928
Ms. Buchanan will coordinate community outreach. In addition, she will oversee the organization and planning of meetings, training and autism and developmental screenings. She will also conduct training and administer autism and developmental screenings and provide family focused resources for our partners.

Financial and Contract Support Coordinator - Gina Bryan*
10% (0.9 CM) Total Effort: 5% paid funds, 5% matching funds
Council Funds Requested \$2,631 In-Kind Matching Funds(OUHSC) \$2,631
Ms. Bryan will assist with budget and contract management, purchasing supplies, and provide overall fiscal support for the project. Ms. Bryan will devote 0.9 CM of a 0.75FTE appointment with the University of Oklahoma Health Sciences Center (OUHSC) toward the goals of this project.

*To accommodate university-level discretion for yearly cost of living/merit increases, a 3% raise has been included for all full-time staff (not including faculty) that have been employed for over a year.

TOTAL PERSONNEL: \$98,375

Council Funds Requested \$71,256

Matching Funds \$27,119

FRINGE BENEFITS

Employee benefits are calculated at the University of Oklahoma Health Sciences Center FY24 rates of 33.9% for professional and full-time staff and 30.1% on Matching. Fringe benefit rates will be applied in strict accordance with the University's approved DHHS rates.

TOTAL FRINGE: \$32,319

Council Funds Requested \$24,156

Matching Funds \$8,163

TRAVEL

In-state will be necessary for training leadership meetings and training and awareness activities. Travel expenses include lodging, mileage, and per diem for faculty, staff, and consultants/partners. Mileage and per diem will be paid at the current federal rate.

TOTAL TRAVEL \$250

Council Funds Requested \$250

Matching Funds \$0.00

OTHER

Professional Services

To complete the activities of the project the following outside Independent Contractor will be used.

Project Facilitator - Margaret Bergant

Council Funds Requested \$10,500 In-Kind Matching Funds (Bergant Consulting) \$1,000

Ms. Bergant will provide professional services to the project in the areas of group facilitation, early intervention, and strategic planning.

TOTAL PROFESSIONAL SERVICES: \$11,500

Council Funds Requested \$10,500

Matching Funds \$1,000

Supplies

Funds are requested for materials and supplies such as folders, pens, printer supplies, clipboards, paper, post its, staples, binders, jump drives, paper clips, portfolios, ADOS protocols, developmental monitoring and screening tools, laptop/computer supplies, mailing labels, and other desk supplies are necessary for project operations.

TOTAL SUPPLIES: \$500

Council Funds Requested \$500

Matching Funds \$0.00

Other/Printing

Printing and duplication of training materials, awareness materials, resources, reports, brochures, posters, and flyers. Funds are also requested for the printing of promotional items for awareness activities. Other costs include phone, copy, internet, server, and postage expenses.

TOTAL OTHER/Printing: \$500

Council Funds Requested \$500

Matching Funds \$0.00

TOTAL OTHER \$12,500

Council Funds Requested \$11,500

In-Kind Matching Funds (OUHSC) \$1,000

Indirect Costs

For this project we are subject to the Off-Campus Rate of 26%. Per the University our Indirect Cost rate for Research Grants and Contracts is calculated at 45% for On-Campus and 26% for Off-Campus. Indirect Costs are calculated on a modified total direct cost base (MTDC). All salaries and wages, fringe benefits, materials and supplies, services, travel and subgrants and subcontracts up to \$25,000 of each subgrant and subcontract. Equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs as well as the portion of each subgrant and subcontract in excess of \$25,000 shall be excluded from modified total direct costs.

Total Indirect Costs (26%) \$37,295

Council Funds Requested (26%) \$27,862

In-Kind Matching Funds (OUHSC) (26%) \$9,433

TOTAL PROJECT COSTS: \$180,739

COUNCIL FUNDS REQUESTED: \$135,024

MATCHING FUNDS: \$45,715

FY '25 DDCO Early Access
 PI: Kathryn Moore, Ph.D.

Includes 3% cost of living raise

July 1, 2024 - June 30, 2025

DDCO BUDGET					
Personnel	FTE	Effort	Requested Salary	Fringe	Total
Kathyn Moore	1.00	7%	\$6,367.00	\$2,158.00	\$8,525.00
Bonnie McBride	1.00	0%	\$0.00	\$0.00	\$0.00
Seth Kastner	1.00	50%	\$29,651.00	\$10,052.00	\$39,703.00
Jeanne Buchanan	1.00	55%	\$32,607.00	\$11,054.00	\$43,661.00
Gina Bryan	0.75	5%	\$2,631.00	\$892.00	\$3,523.00
	1.00	0%	\$0.00	\$0.00	\$0.00
TOTAL PERSONNEL & FRINGE		117%	\$71,256.00	\$24,156.00	\$95,412.00

Supplies & Operating Expenses

Travel		\$250
Contracts		\$10,500
Printing/Copies/Postage		\$500
Room Rental		\$0
Materials/Supplies		\$500
TOTAL SUPPLIES & OPERATING EXPENSES		\$11,750

MATCH BUDGET

Personnel	FTE	Effort	Requested Salary	Fringe	Total
Kathyn Moore	1.00	5%	\$4,548.00	\$1,369.00	\$5,917.00
Bonnie McBride	1.00	5%	\$5,116.00	\$1,540.00	\$6,656.00
Seth Kastner	1.00	15%	\$8,895.00	\$2,678.00	\$11,573.00
Jeanne Buchanan	1.00	10%	\$5,928.00	\$1,785.00	\$7,713.00
Gina Bryan	0.75	5%	\$2,631.00	\$792.00	\$3,423.00
TOTAL PERSONNEL & FRINGE			\$27,118.00	\$8,164.00	\$35,282.00

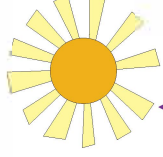
Supplies & Operating Expenses

Contracts		\$1,000
TOTAL SUPPLIES & OPERATING EXPENSES		\$1,000

Total Direct Costs					\$107,162
Total Indirect Costs			26%		\$27,862
TOTAL COSTS					\$135,024

TOTAL REQUIRED MATCH			25%		\$45,185
TOTAL MATCH					\$36,282
Total Indirect Costs			26%		\$9,433
TOTAL MATCH					\$45,715

TOTAL PROJECT COSTS					\$180,739
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Early Access

Logic Model 2024-2025



Oklahoma
Autism Center

LONGTERM OUTCOMES
-Shorter diagnostic waitlists
-Earlier diagnosis/services
-Improved quality of life
for individuals with ASD



FOUNDATIONAL ACTIVITIES:

- Needs assessment, new resources, and technical assistance for existing and new Community Screening Partners and other clinicians
- Identification of and networking with new partners at organizations providing diagnostic services in rural-hub areas

Below is the entirety of the Early Access Sustainability Plan submitted with our proposal. Recent pertinent examples of sustainability related activities that we would like to highlight include the following:

- 1) We have been successful securing additional funding to provide additional free training and support for targeted communities in southwest Oklahoma with support from the McCasland Foundation. Continuing to seek out such funding will help ensure that we are able to maximize the resources, training model and expertise we have developed with the support of the Council.
- 2) As our training and promotion model is already established we have recently been able to provide additional trainings as part of our fee-for-service offerings for organizations with appropriate professional development budgets. This will ensure that we are able to continue utilizing the development work we have done thus far, but we will also continue to seek additional funding from the DCCO and other potential partners as that is key to continuing to be able to offer services to targeted organizations and communities at no cost, in line with our diversity goals. Current ongoing fee-for-services trainings are being conducted via a contract with the Oklahoma Department of Health and a contract is in development with the Chickasaw Nation.

Early Access
Sustainability Plan
2021-2026

As the Early Access Project expands its scope beyond developmental monitoring and screening to include training and support for timely autism diagnostic evaluations, we have highlighted several areas through which to address sustainability of our efforts:

Leveraging Partnerships

- Taking advantage of overlapping goals with other projects/programs at the Oklahoma Autism Center
- Sharing resources and opportunities with external partners

Funding Diversification

- Applying for discrete activity funding from private foundations, etc.
- Accepting fee-for-service trainings etc. for organizations with budgets for it

Activities with Built-In Resiliency/Sustainability

- Deliverable resources that will outlive funding streams (e.g. resource and training kit that can be utilized independently by partner agencies for new staff in the future)
- Persistent systems change activities (i.e. embedding training, developmental monitoring, and screening services in partner agency policies and procedures)

Proposed Budgetary Timeline

	Total Budget	Proposed ODDC Funding	Additional Funding Details	Training Revenue	Sustainability Activity Examples
Year 1	200,000	100,000-133,000	LTSAE (CDC/AUCD) Covid Response	0	In-house ADOS trainer certification (in-progress)
Year 2	200,000	100,000	Renewed LTSAE (CDC/AUCD); McCaslin Foundation	5,000-10,000	In-house ADOS trainer certification (completed)
Year 3	200,000	100,000-133,000	Private Foundation Partner Agency(s)	5,000-10,000	Creation of ongoing training and resource kit for partner agencies
Year 4 (Proposed Contract)	200,000	100,000-133,000	Private Foundation Partner Agency(s)	10,000-15,000	Disseminate ongoing training and resource kit for partner agencies
Year 5	200,000	100,000-133,000	Private Foundation Partner Agency(s)	10,000-15,000	Work with agency leadership to shape policy for sustainability

FY 25 Funding

Project: Sooner Success Family Respite Weekends

Organization: [OUHSC, Sooner Success](#)

Proposal Description:

The goal of this proposal is to expand the current respite options available in Oklahoma for those identified as primary caregivers of children and adults with I/DD by allowing them to experience respite as well as assist them in identifying ongoing ways to incorporate respite into their daily lives.

Target:

Age

Caregivers accessing respite have been providing care for individuals from infants to age 90

Culture

American Indian or Alaska Native - 17.5%

Asian or Asian American - 2.3%

Black or African American - 18.2%

Native Hawaiian or other Pacific Islander - 0.7%

White - 73.2%

Ethnicity

Hispanic or Latino - 11.9%

Not Hispanic or Latino - 88.1%

Type of disability

Cognitive impairment and/or Dementia - 9.9% Intellectual/Developmental Disabilities (I/DD) - 57%

Mental Illness (MI) and or substance use disorder - 7.3%,

Physical Disabilities - 23.5%

Traumatic Brain Injury (TBI) - 6.3%

Other - 38.1%

No Known Disability - 6.0%

Hosted/Method:

In addition, by increasing the access of families to respite services through our retreats as well as our use of the ARCH Life Course Respite Tools, caregivers can enjoy the benefits of respite in this moment as well as moving forward. Just a few of those benefit include:

- Preventing family caregiver burnout
- Preventing adverse health outcomes experienced by the family caregivers due to high stress levels
- Feeling refreshed and renewed
- Providing time for activities the family caregiver enjoys, whether it be

reading, gardening, taking a walk, and so on.

- Time for family caregivers to maintain social relationships with friends and other family members to avoid isolation and depression.
- Time for the caregiver to maintain their own lives; to run errands, see their own doctors, and possibly attend support groups with other caregivers.

Duration/Time:

- Four Weekend Respite events
- Sibshop camp
- 1 on 1 service navigation
- Self-care navigation materials

Impact:

We anticipate family members participating in the respite activities above will experience reduced symptoms of caregiver burnout, increased energy to participate in life activities beyond caregiving, better access to desired services and supports, strengthened relationships within the family unit as a whole, options to pursue more frequent respite moving forward and reduced symptoms of chronic stress.

Funding requested for FY25 (Including Match)

Total Match		\$39,253
Total Requested funds		\$117,585
Total Project Costs		\$156,838

Request(s):

None at this time.



Developmental Disabilities
Council of Oklahoma

P. O. Box 25352
Oklahoma City, OK 73125-9975
staff@okddc.ok.gov
www.okddc.ok.gov
(405) 521-4984

Unsolicited Proposal

&

Application for Contract Funding

**Read this entire publication prior to
starting the application.**

General Information

The Developmental Disabilities Council of Oklahoma (DDCO) welcomes unsolicited proposals and applications for contracts to fund activities to advance the independence, productivity, and inclusion of individuals with developmental disabilities and their families.

- All proposals and applications must be for activities currently included, or eligible for inclusion, in the 5 Year DDCO State Plan found at <https://oklahoma.gov/ddco/about/state-plan.html>.
- Applications must be complete for consideration by the Council.
- Incomplete applications will not be considered.

The Council does not provide grants. All funding is provided through a contract in which the vendor agrees to perform specific duties. DDCO requires all contractors to contribute matching funding that is not derived from federal sources. Matching funds are expected to equal or exceed 25% of the total activity costs. An exception to this rule is made for projects specifically serving a designated poverty area. In those situations, the Council expects a contractor to contribute a minimum of 10% of the total activity costs. Other exceptions to the 10% or 25% match requirement may be negotiated but are rarely approved. The required match may be in the form of cash, direct expenditures, indirect expenditures, or in-kind contributions, but may not include any direct or indirect federal funds.

Federal law prohibits the Council from investing in real property, building enhancements, vehicles, or vehicle enhancements. Generally, any equipment purchased via a Council contract should be an item that could be returned to the Council in the event of contract cancellation.

The Council does not consider grant applications that would provide any item solely for the use of a single individual – such as a wheelchair or other personalized assistive technology.

Proposals for a contract of \$5,000 or less:

- Proposals for contracts less than \$5,000 can be approved by the Executive Committee.
- Applications received prior to the last day of the month are reviewed at the next scheduled meeting, usually the following month.
- The applicant will be notified by email within ten business days of meeting of the decision.
- A resulting contract will have an effective start date of no less than 45 days from the approval date.
- Per Oklahoma Statute, no funding will be reimbursed for any good or service purchased prior to the effective start date of a contract.

Proposals for a competitive contract more than \$25,000:

- Per Oklahoma statute, proposals from non-governmental entities more than \$25,000 must be competitively bid. Governmental entities include state agencies, local government agencies, tribal governments, public school districts, or public colleges and universities. Non-governmental organizations include, but are not limited to, not-for-profit corporations and for-profit corporations. Individual persons are also non-governmental organizations for this purpose.
- All state purchasing, including competitive contracting, is managed by the Oklahoma Office of Management and Enterprise Services. Questions regarding the competitive bidding process should be directed to the Central Purchasing Division at the Office of Management and Enterprise Services. The website for purchasing guidelines is <https://oklahoma.gov/omes/services/purchasing.html>.
- DDCO is prohibited from having any contact with persons or organizations submitting proposals **that are subject to competitive bidding**. If you or your organization is submitting a response for a competitive contract or is part of any other organization's proposal for a contract, please DO NOT discuss or disclose any information about your proposal with any DDCO member or staff.
- General Timelines:
 - Proposals received between May 1 and October 31 are evaluated by a committee, and if approved, a recommendation is forwarded to the full Council for a decision in January. If approved by the Council, contracts may become effective March 1 or April 1.
 - Proposals received between November 1 and April 30 are evaluated by a committee, and if approved, a recommendation is forwarded to the full Council for a decision in July. If approved by the Council, contracts may be effective September 1 or October 1.
- The applicant shall be notified by email within ten business days of a final decision.
- Per Oklahoma Statute, no funding shall be reimbursed for any good or service purchased prior to the effective date of a contract.

If you have questions, contact DDCO through email: staff@okddc.ok.gov and John.Houston@okdhs.org, or call (405) 521-4984.

REQUIRED SUBMISSION DOCUMENTS

UNSOLICITED PROPOSAL

&

APPLICATION FOR CONTRACT FUNDING

PART I – Contact Information

Full Legal Name of Organization: Board of Regents University of Oklahoma Health Science Center

Mailing Address: 865 Research Parkway, URP865-450

City: Oklahoma City State: OK Zip: 73104-3609

Email: oranoa@ouhsc.edu

Phone: 405-271-2090 FAX: 405-271-8651

Website: http://soonersuccess.ouhsc.edu

For DDCO Use Only:

Date Received: _____

Reviewed by: _____

PART II – Contract Limitations & Conflict of Interest

The Oklahoma Office of Management and Enterprise Services has established policy for the purchase of goods or services by a state agency. A contract with DDCO represents such a purchase. As part of the Council’s compliance with the Central Purchasing Act, staff must ensure no collusion or conflict of interest exists between the Council and any individual or organization entering into a contract. Entities of State Government are exempt from the Central Purchasing Act.

Please read below, check appropriate boxes, then sign and return the page with your packet.

A1 I am submitting this proposal on behalf of an entity of State Government.

Yes No

If “Yes,” this form needs only to be signed at bottom of the page, if “No” continue to A2.

A2 I understand and agree that submission of this proposal on behalf of myself as an individual, or on behalf of an organization of which I am a part that is NOT an entity of State Government, creates the following restrictions for proposals more than \$5,000:

- Prohibits persons, whether as individuals or as an affiliate or an organization, from participating in the development of a competitively bid contract, including, but not be limited to, writing a scope of work or developing a project outline.
- Causes myself and my organization to be ineligible to respond to any resulting ITB, RFP, or other competitive purchasing methodology defined in the Central Purchasing Act.

I understand and agree to the restrictions as outlined in A2 above: Yes

A3 Do you, or does your organization, have personal, professional, or financial relationship with any members or staff of the Developmental Disabilities Council of Oklahoma? This disclosure does not necessarily create a real or perceived conflict of interest, but disclosure of such relationships is required.

Yes No

If “Yes”, please attach a separate page detailing the relationship(s).

A4 Under penalty of perjury, I attest the above representations are complete and correct.

Signature of Applicant

Date

Jane C. Yaciuk, PhD, CRA, Ld Contract/Grant Admin-ORA
Printed Name

PART III - Proposal

The DDCO reviews complete and materially accurate submissions. The information provided in Part III will assist committee members in understanding your application and any expectations for DDCO. Provide responses to the following questions on a separate attachment.

B1 Provide a written overview of the proposal. (750 words or fewer)

The goal of this proposal is to expand the current respite options available in Oklahoma for those identified as primary caregivers of children and adults with I/DD by allowing them to experience respite as well as assist them in identifying ongoing ways to incorporate respite into their daily lives. The caregiver group will include parents, single individuals and any others in the caregiver category who are caring for a loved one with I/DD. All caregivers supporting an individual with I/DD will be eligible, regardless of their current status in seeking support services for their care receiver.

Our respite retreats offer a longer respite opportunity for caregivers, but just as important our staff teach them how to utilize respite vouchers and how to identify potential respite providers within their unique situation, allowing them to integrate respite into their routine more frequently moving forward. The weekend format also offers the chance for social connection with other family caregivers.

Each respite retreat would include the following components:

- A **respite voucher** to cover the cost of providing a substitute caregiver for their loved one with I/DD of any age, in the caregiver's choice of setting.
- **Meals and lodging** for all caregivers during the weekend retreat. In Urban settings this would be Friday night through Saturday afternoon and in rural settings this would include Friday night through Sunday morning.
- **Social connection** – Each retreat will include group activities designed to encourage connection between the caregivers and parent to parent mentoring/support. Examples might include: mixers, group dining arrangements, art experiences, games/recreational activities, etc.
- Surprises - Drawings for **door prizes focused on self-care** or utilizing local recreational opportunities will be incorporated into all retreats.
- A **gift bag of self-care items** and **self-care educational materials** will be provided for each couple/single parent.
- **Down time** – We believe the most fundamental type of self-care is the opportunity to simply relax, catch your breath and be present with our own thoughts. Each retreat will incorporate some unstructured time to relax or strengthen partner relationships. To ensure options for caregivers, each retreat site will offer indoor and outdoor activity suggestions. Each caregiver will have the option to participate in as much as they want as well as the option to decline activities and simply be, if that's what they need in the moment.
- Whole family support – Prior to their retreat each caregiver will receive a **1 on 1 service navigation session with a Sooner SUCCESS staff member to ensure that the family has access to the resources, and supports across the lifespan that would benefit their family's unique needs.**

- The service navigation will also include the use of **life course tools created by the ARCH National Respite Network to help each family identify ongoing respite resources and supports.**
- **A DDCO board member will also be invited to share about the activities and programs of the Council** with the group and DDCO handouts/materials will be disseminated.
- **Bilingual staff will be available to assist** caregivers who are Spanish speaking.

Assessment: Intention will be put into making each retreat available to diverse populations within our state and pre and post-weekend surveys will be completed with participants to determine the impact of the respite on their stress level as well as their satisfaction with the content and implementation of the retreat.

A multi-night Respite/Sibshop camp for children with special needs and their typically developing siblings. This would provide a multi-night camp for individuals with intellectual and developmental disabilities, plans would include the possibility of ages 8-25, this will be held in partnership with the Cavett Kids Foundation at no cost to the family.

- The children would enjoy **camp activities** in combination with custom **Sibshop activities** geared especially for children who have siblings with special needs.
- While the kids are enjoying camp, family caregivers will have the opportunity to enjoy 3 days of **respite and relaxation.**
- **Self-care educational materials** will be provided to family caregivers.
- **A 1 on 1 service navigation session with a Sooner SUCCESS** staff member to ensure that the family has access to resources, and supports across the lifespan that would benefit their family’s unique needs.
- **Pre and post-camp surveys** will be completed by each participating family.
- **Bilingual staff will be available** to assist campers who are Spanish speaking.

B2 Has a needs assessment been completed?

Yes No If no, why not?

In a survey conducted by the Oklahoma Respite Resource Network, 88% of caregivers agreed that respite allowed their loved one to remain at home, 98% of caregivers stated that respite made them a better caregiver, 98% of caregivers said respite increased their ability to provide a less stressful environment, and 79.5% of caregivers said respite contributed to the stability of their marriage. Those findings will be included with our application for your review.

Assessment results from year one and two of offering Caregiver Respite Retreats revealed that 97.8% of our participating caregivers reported that the retreat reduced the stress level in their family. 78% of them reported that they would not have access to respite without the weekend retreat process offered by Sooner SUCCESS.

B3 Provide a list of all people and organizations proposed to work on the project.

Sooner SUCCESS

Children’s Health Foundation

Cavett Kids Foundation The Cavett Kids Foundation hosts camps for kids with chronic and life-threatening conditions. The programs are designed to allow kids to have fun while also

connecting to other kids with similar conditions. Their mission is to develop Character, Coping, and Connection for kids living with chronic and life-threatening illnesses.

DHS Aging Services Lifespan Respite Grant

Oklahoma State Department of Health – Sibling Support Project

Potential partners that would be identified in each region include retreat venues and catering vendors as well as speakers and activity experts to provide a full and varied experience for the caregivers.

Potential retreats sites we could utilize include:

- Bed and Breakfasts
- Cabins/Lodges in natural settings
- Urban locations close to recreation centers
- Conference & hotel event centers

B4 Describe the experience and qualifications of the persons and or organization proposed to provide goods and services associated with the proposal.

Sooner SUCCESS, (State Unified Children’s Comprehensive Exemplary Services for Special Needs) is a program established over 20 years ago, under the Child Study Center, a division of the section of Developmental and Behavioral Pediatrics at the University of Oklahoma Health Sciences Center. Sooner SUCCESS remains on the fore-front of systems design, family advocacy, policy change and community engagement specifically for families that have been impacted by disability. Sooner SUCCESS is a community-based service available to anyone and any family in Oklahoma that need services and connections to programs in their community that will meet their unique needs.

The primary mission of Sooner SUCCESS is to support and empower parents/caregivers of children with disabilities and support the development of inclusive communities. The years of extensive and in-depth experience working with parents who feel their family's needs have been dismissed or marginalized due to disability drive Sooner SUCCESS in this mission.

The organizational structure and management model of Sooner SUCCESS creates a continuous loop of communication with families and collaboration with providers that serve in the community. This is accomplished through one-on-one service navigation to families in need and development of community coalitions with a mission to identify and address local service gaps whenever possible. Regional teams serving as technical assistance hubs that share resources and ideas to identify and resolve similar problems occurring in multiple communities statewide. And lastly, our state level interagency council brings together decision makers from multiple disciplines to respond to emerging trends indicating the need for change at the policy and procedure level. At each of these levels, Sooner SUCCESS has assembled partnerships and a continuing history of successful collaboration allowing new projects to coalesce smoothly and move into implementation efficiently.

Sooner SUCCESS in partnership with OKDHS Aging Services, administers the Lifespan Respite Voucher Program as well as the Systems of Care Respite Program in partnership with the Oklahoma State Department of Mental Health and Substance Abuse Services. In the last year Sooner SUCCESS has also developed a partnership with the Oklahoma State Department of Health to improve supports for typically developing siblings in families impacted by disability. Sooner SUCCESS works in tandem with Aging Services, Developmental Disabilities Services, Oklahoma State Department of Mental Health and

Substance Abuse Services and other state programs to increase access to respite. This care coordination model to serve caregivers across the lifespan through the Oklahoma Caregiver Coalition has improved access to not only respite, but other essential resources for family caregivers that have a loved one with a disability.

This comprehensive approach along with expertise, data management, infrastructure and community partnerships put Sooner SUCCESS in an advanced position to provide supports to families raising a child with special needs.

B5 Describe how the proposal will help DDCO meet the goals in the 5 Year DDCO State Plan found at <https://oklahoma.gov/ddco/about/state-plan.html>.

We believe this proposal will support DDCO State Plan Goal 2, Objective 2

Goal 2, Objective 2: Oklahomans with developmental disabilities and their families will have increased access to resources, services and supports across the lifespan that will allow them to live their best lives.

Our project intentionally includes a 1 on 1 service navigation session with our seasoned staff who can help each family identify resources, services, and support that might benefit their family.

In addition, by increasing the access of families to respite services through our retreats as well as our use of the ARCH Life Course Respite Tools, caregivers can enjoy the benefits of respite in this moment as well as moving forward. Just a few of those benefit include:

- Preventing family caregiver burnout
- Preventing adverse health outcomes experienced by the family caregivers due to high stress levels
- Feeling refreshed and renewed
- Providing time for activities the family caregiver enjoys, whether it be reading, gardening, taking a walk, and so on.
- Time for family caregivers to maintain social relationships with friends and other family members to avoid isolation and depression.
- Time for the caregiver to maintain their own lives; to run errands, see their own doctors, and possibly attend support groups with other caregivers.

Individuals with I/DD will also enjoy benefits:

- Experience temporary break from their family caregiver
- Engaging in new activities and environments
- A break from their typical day to day routines
- Potentially learning self-independent skills Family

caregiver will avoid the symptoms of chronic stress:

- Anxiety

- Depression
- Digestive problems
- Headaches
- Muscle tension and pain
- Heart disease, heart attack, high blood pressure and stroke
- Sleep problems
- Weight gain
- Memory and concentration impairment

B6 Define the characteristics of the benefitting population by describing the age, geographic region, culture, language, support needs, type of disability, and the like.

This is data compiled by Sooner SUCCESS in facilitating access to respite for caregivers during calendar year Sept 1,2022 to Aug 30, 2023.

Number served: 302

Age: Caregivers accessing respite have been providing care for individuals from infants to age 90

Geographic region – Counties served

Counts/frequency: Alfalfa County (1, 0.3%), Beckham County (2, 0.7%), Blaine County (1, 0.3%), Bryan County (1, 0.3%), Canadian County (21, 7.0%), Carter County (5, 1.7%), Cherokee County (2, 0.7%), Cleveland County (35, 11.6%), Comanche County (2, 0.7%), Cotton County (1, 0.3%), Creek County (4, 1.3%), Custer County (0, 0.0%), Delaware County (2, 0.7%), Garfield County (24, 7.9%), Garvin County (1, 0.3), Haskell County (1, 0.3%), Hughes County (2, 0.7%), Jackson County (1, 0.3%), Jefferson County (1, 0.3) Kay County (11, 3.6%), Kiowa County (1, 0.3%), Le Flore County (2, 0.7%), Lincoln County (7, 2.3%), Logan County (6, 2.0%), Major County (1, 0.3%), Mayes County (1, 0.3%), McClain County (7, 2.3%), McCurtain County (1, 0.3%), Muskogee County (3, 1.0%), Oklahoma County (67, 22.2%), Okmulgee County (2, 0.7%), Osage County (3, 1.0%), Payne County (4, 1.3%), Pittsburg County (1, 0.3%), Pontotoc County (1, 0.3%), Pottawatomie County (6, 2.0%), Rogers County (7, 2.3%), Seminole County (1, 0.3%), Stephens County (4, 1.3%), Tulsa County (41, 13.6%), Wagoner County (6, 2.0%), Washington County (2, 0.7%), Washita County (2, 0.7%), Woodward County (4, 1.3%)

Culture

American Indian or Alaska Native - 17.5%
 Asian or Asian American - 2.3%
 Black or African American - 18.2%
 Native Hawaiian or other Pacific Islander - 0.7%
 White - 73.2%

Ethnicity

Hispanic or Latino - 11.9%

Not Hispanic or Latino - 88.1%

Type of disability

Cognitive impairment and/or Dementia - 9.9%

Intellectual/Developmental Disabilities (I/DD) - 57%

Mental Illness (MI) and or substance use disorder - 7.3%,

Physical Disabilities - 23.5%

Traumatic Brain Injury (TBI) - 6.3%

Other - 38.1%

No Known Disability - 6.0%

In year 1 of this project, retreats were held in Ringwood, OK (Major County), Tulsa, Oklahoma City, and Sulphur, OK (Murray County).

In year 2 of the project, retreats were planned in 3 new areas and 1 returning venue, all of these sites targeted counties that the Developmental Disabilities Council had identified as high poverty areas. Sites included:

1. Edmond – serving caregivers from Payne, Logan, Lincoln and Ok County
2. Roman Nose State Park – serving caregivers from Grady, Kay, Blaine, Garfield, Canadian, Major, Kingfisher, and Cleveland Counties.
3. Muskogee – serving caregivers from Muskogee, Tulsa, Wagoner, Rogers, and Canadian Co.
4. Sulphur – which last year was very centrally located and served caregivers Cleveland, McClain, Grady, LeFlore, Pontotoc, Stephens, Comanche, Pottawatomie, Carter, and Jackson

We intentionally set out to reflect the racial makeup of Oklahoma:

The 5 largest ethnic groups in Oklahoma are White (Non-Hispanic) (64.9%), American Indian & Alaska Native (Non-Hispanic) (7.31%), Two+ (non-Hispanic) (7.23%), Black or African American (Non-Hispanic) (7.14%), and White (Hispanic) (6.25%). Source: DATA USA: Oklahoma

The demographics of the caregivers we served:

Black or African American - 8.3%

American Indian or Alaska Native - 11.1%

Hispanic or Latino - 9.7%

Caucasian - 66.7%

Multiracial or Biracial - 4.2%

In year 3 of the project, we are implementing retreats targeting 4 new areas to serve a new set of caregivers (these areas could change due to findings/data during planning stage but are currently being considered):

1. Northwest Oklahoma - Woodward or Woods County and out into the panhandle. (This area is not considered high poverty, but is an extremely resource challenged area.)
2. Tulsa County, which could include participants from Tulsa and Muskogee counties.
3. Kiowa County, which could include participants from Kiowa, Caddo, Greer, Beckham, and Harmon counties
4. McCurtain County, which could include participants from McCurtain, Choctaw, Pushmataha, and LeFlore Counties.

In year 4 of the project, we are returning to our higher population urban areas to increase our reach and impact on these communities. Since year one we have expanded our reach into groups such as the Hispanic community by our intentional hiring and expansion of our bilingual team. This allows us to reach deeper into this community and identify more caregivers in need of support. For our rural regions we will work to identify counties where we have not yet served any caregivers and seek to reach those who may be falling through the cracks. We will use a targeted social media campaign to intentionally seek out caregivers in these counties.

B7 Describe the expected impact on the target audience described above.

We anticipate family members participating in the respite activities above will experience reduced symptoms of caregiver burnout, increased energy to participate in life activities beyond caregiving, better access to desired services and supports, strengthened relationships within the family unit as a whole, options to pursue more frequent respite moving forward and reduced symptoms of chronic stress.

B8 Describe the expected, broad impact on people with developmental disabilities.

We anticipate individuals with I/DD participating in the respite activities above will participate in new social and recreational experiences; reduce overall social isolation; have improved access to supports; and benefit from a healthier and more energized family caregiver.

B9 Is the proposal a duplication, continuation, or expansion of work being done in Oklahoma or elsewhere?

Yes No

If yes, describe what is being duplicated and what makes this project unique or different.

We see this proposal as an expansion of our work providing weekend retreats in years 1, 2, and 3 as well as our efforts under the Lifespan Respite Voucher program that we administer in conjunction with the DHS Aging Services division and the Respite Voucher program that we administer for ODMHSAS for their Systems of Care participants. The camp portion of the proposal will expand on our efforts to enhance sibling support to better serve the entire family unit. All of the programs provide caregiver respite, but the weekend retreats offer the additional benefits of extended respite, service navigation on both resources and planning to support more consistent respite, and the peer to peer support that occurs when caregivers are in a supportive, relaxing environment together.

B10 Will the proposed project use current best or promising practices in the field of developmental disabilities?

Yes No

If yes, explain what they are and how they will be incorporated. Please cite source material.

Providing respite is, in and of itself, considered a best practice resource for those with full time caregiver responsibilities. The Administration for Community Living recommends “coordinated systems of community-based respite for family caregivers of children or adults regardless of special need”

In addition, our program will integrate the use of Life Course Tools for Respite as recommended by the ARCH National Respite Network and Resource Center

<https://archrespite.org/consumer-information/lifecourse-tools-for-respite>

The inclusion of Sibshop activities in our sibling camp is also a best practice. In the spring of 2005, University of Washington colleagues Amanda Johnson and Susan Sandall conducted an online survey of adults (ages 18-34, n=30) who had participated in Sibshops as children, and confirmed that when it comes to the lasting impact of Sibshops, there's lots of good news to share.

Here are just a few of their findings:

- Over 90% of the respondents said Sibshops had a positive effect on the feelings they had for their siblings;
- Sibshops taught coping strategies to over 67% of respondents;
- 75% reported that Sibshops affected their adult lives; and
- 94% said they would recommend Sibshops to others.

The authors state that the “results show that many aspects of the Sibshop program appeared to serve as protective factors for siblings of individuals with disabilities, a population who is frequently considered at-risk” and the “study shows that these positive results last into adulthood.” The study concluded, “The positive effects of the Sibshop program are not only apparent, but enduring.”

Johnson, A. B., & Sandall, S. (2005). *Sibshops: A Follow-Up of Participants of a Sibling Support Program*. University of Washington, Seattle

B11 When the work is complete, how will it have provided capacity building or systemic change to programs or services for people with developmental disabilities?

The caregiver weekend retreats and sibling camp have already demonstrated models with established costs that can be replicated or repeated for future groups. By incorporating the ARCH respite life course tools, we can also help caregivers generate new ideas for ways to incorporate more respite into their normal day to day routines. And by seeking out new caregivers each year of the project with an intentional focus on serve diverse populations we ensure that we raise awareness about the importance of respite for family caregivers and the existence of multiple respite voucher programs within our state to support such self-care.

B12 Will the proposal be implemented or offered statewide?

Yes No

If no, define the counties and cities served and the rationale for why these locations were selected.

No caregiver will be turned away due to their location; however, marketing efforts will be focused in the areas identified above.

Include all supporting documentation and provide any additional information you would like considered by the DDCO.

XPART IV – Performance Measures

The DDCO is required to provide performance measure reports to evaluate the effectiveness of our activities. As a result, DDCO requires contractors to submit performance measure reports annually, at the request of Council staff. Please note that regardless of contract dates, **performance measures must be reported within the period of October 1 – September 30** that is inclusive of a contract period. Performance reports include actual counts and / or the collection of survey information, including baseline measures. As a required component of the application, indicate on the list below on the line to the left of the measure data you expect to collect during the proposed work of the contract. Not all measures are applicable. You may identify measures not applicable to this application as “N/A” in line to the left of the measure.

The Council reviews this information carefully. Proposers are strongly encouraged to consider data elements their proposals CAN collect and to *minimally* use “N/A.”

These measures and their definitions are listed on the Council’s website:

<https://oklahoma.gov/ddco/about/state-plan.html>.

INDIVIDUAL & FAMILY ADVOCACY

IFA 1.1 The number of people with developmental disabilities who participated in the contractor’s project activities designed to increase their knowledge of how to take part in decisions that affect their lives, the lives of others, and or systems.

IFA 1.2 The number of family members who participated in the contractor’s project activities designed to increase their knowledge of how to take part in decisions that affect the family, the lives of others, and or systems. **Life course respite tools, service navigation**

IFA 2.1 After participation in the contractor’s project activities, the percentage of people with developmental disabilities who report increasing their advocacy because of Council work. This measure will require a baseline percentage and post-activity percentage.

IFA 2.2 After participation in the contractor’s project activities, the percentage of family members who report increasing their advocacy because of contractor’s work. This measure will require a baseline percentage and post-activity percentage. **DDCO consumer survey**

IFA 2.2.1 The percentage of people who are better able to say what they want or say what services and supports they want or say what is important to them. Percentage derived from total number of people who received a service or support because of the contractor’s activities. This measure will require a baseline percentage and post-activity percentage. **DDCO Consumer Survey**

IFA 2.2.2 The percentage of people who are participating now in advocacy activities. Percentage derived from total number of people who received a service or support because of the contractor’s activities. This measure will require a baseline percentage and post-activity percentage.

IFA 2.2.3 The percentage of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions. Percentage derived from total number of people who received a service or support because of the contractor's activities. This measure will require a baseline percentage and post-activity percentage. *Note: The names of these boards/organizations must be reported.*

IFA 3.1 The percentage of people with developmental disabilities satisfied with a project activity. Percentage derived from total number of people who received a service or support because of the contractor's activities. **DDCO Consumer Survey**

IFA 3.2 The percentage of family members satisfied with a project activity. Percentage derived from total number of people who received a service or support because of the contractor's activities. **Post retreat survey**

SYSTEMS CHANGE

SC 1.1.1 The number of policy and or procedures created or changed.

SC 1.2.1 The number of statutes and or regulations created or changed.

SC 1.3.1 The number of promising practices created.

SC 1.3.2 The number of promising practices supported through Council activities.

SC 1.3.3 The number of best practices created.

SC 1.4.1 The number of people trained or educated through Council systemic change initiatives.

SC 1.5.1 The number of Council supported systems change activities with organizations actively involved.

SC 2.1 The number of Council efforts that led to the improvement of best or promising practices, policies, procedures, statute, or regulation changes.

SC 2.2 The number of Council efforts that were implemented to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities and their families participate in the design of and have access to needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life.

SC 2.1.1 The number of policy, procedure, statute, or regulation changes improved as a result of systems change.

SC 2.1.2 The number of policy, procedure, statute, or regulation changes implemented.

_____ **SC 2.1.3** The number of promising and/or best practices improved by systems change activities.

_____ **SC 2.1.4** The number of promising and/or best practices that were implemented.

DEMOGRAPHIC INFORMATION

The Council’s federal funders also require demographic information about the people who participated in the activities funded by the Council. This information should be collected from persons who implement the activity; any advisory committee members involved in the activity; participants in any conference, training or similar event; and any “service” or “support” recipients. Data will be collected in the areas of Race/Ethnicity, Gender, Disability Experience, and Geography. Following is the EXACT format required by the Council and its federal funders:

RACE/ETHNICITY:

- White, alone
- Black or African American alone
- American Indian or Alaskan Native alone
- Hispanic/Latino
- Asian alone
- Native Hawaiian & Other Pacific Islander
alone
- Two or more races
- Race Unknown

SEXUAL ORIENTATION:

- Lesbian or gay
- Straight, that is, not gay or lesbian
- Bisexual
- Two-Spirit
- Uses a different term
- Don’t know
- Prefers not to answer

GENDER:

- Female
- Male
- Other

GENDER IDENTITY (What sex were you assigned at birth):

- Female
- Male
- Don’t know
- Prefer not to answer

DISABILITY EXPERIENCE:

- Individual with a Developmental Disability
- Family Member of an Individual with a
Developmental Disability
- Other

CURRENT GENDER:

- Female
- Male
- Transgender
- Two-Spirit
- Uses a different term
- Don’t know
- Prefer not to answer

GEOGRAPHY:

- Urban
- Rural

In addition to these measures, consumer satisfaction data will also be required annually – in formats provided by the Council. Please discuss this with Council staff upon completion of any signed contract.

PART V – Additional Requirements for Contract Funding

Financial Information (Required for all submissions)

Proposals must include a detailed revenue and expenditure budget, in a proper accounting format, detailing the total costs and revenues of the proposed project. This budget must include:

- The amount requested from DDCO within the context of the budget.
- Identification of funding not currently in place.
- A segregated and detailed account of matching funds to be contributed to the project, and their source.
- A narrative explaining each category of expenditure and source, or revenue associated with the project. Revenue sources might include conference registration fees, third party grants, booth rentals, in-kind contributions, etc.

Please note, our federal funding requires specific cost identification for all expenditures associated with the project identified within the terms of the contract. In addition, DDCO funds must be the funding of “last resort.” If net proceeds from the project exceed total expenditures and generate a profit, the DDCO reimbursement shall be limited to the lesser of the contract amount or the amount required to break-even.

A Statement of Work (SoW) is required for all submissions

Provide a proposed statement of work for the contractual requirements detailing the goods and services you will provide in exchange for DDCO funding. An example of the format is included.

A Sustainability Plan is required for activities that will continue beyond one year

For projects / activities expected to continue indefinitely, sustainability plans must be included. Typically, DDCO will fund an activity for a maximum of five years. Include a detailed plan and timeframe for the project to become sustainable, including projected budgets, identified partners, annual funding goals for each year, or other such indicators that a project or activity will continue. Sustainability is not solely focused on financial support.

For example, a project to train teachers on positive IEP strategies result in a policy change within a school district or a change in teacher certification requirements. This sustainability proves systems change.

Proposals for activities such as studies that would not continue past a project period do not require sustainability plans.

connections and awareness about the importance of respite for family caregivers and establish caregiver interest in respite and utilizing the appropriate state respite voucher program. Over time we would document a model for effective respite retreats and caregiver education and then seek out additional grant funding that could be used to fund additional efforts within the state. Currently, we are looking at our Lifespan Respite Enhancement grant to see if weekend respite retreats can be written into it as a respite option and education venue during the next funding cycle. We are also incorporating respite and sibling support efforts and funding into our work with the Oklahoma State Department of Health. We would also continue to work with individual family caregivers using the life course tools to help them identify new options for personal respite and assist them in accessing the respite voucher program appropriate for their unique situation to assist them in paying for the respite provider.

Logic Model (Required for contracts in excess of \$5,000)

A logic model is a tool used by DDCO to evaluate the effectiveness of the program. An example is included, or you may use one of the many formats found by Googling “logic model.”

Are you a registered vendor with the State of Oklahoma in the OMES Supplier Portal: Yes No

If the Council approves funding, you will be required to be a registered vendor. You can learn more about becoming a vendor online: <https://oklahoma.gov/omes/services/purchasing/supplier-portal/supplier-and-payee-training.html>.

Legal Entity

Is the proposed vendor applicant an IRS Registered corporation?

Yes No

If yes, which type: _____

Is the proposed vendor a government entity:

Yes No If yes, provide form of government and name of entity:

Agency of the state of Oklahoma: Board of Regents of the University of Oklahoma Health Sciences Center

Is the proposed vendor a Tribal Nation:

Yes No If yes, name Tribe(s) _____

Is the proposed vendor a sole proprietor: Yes No

Is the proposed vendor a registered partnership: Yes No

Social Security or FEI Number: 73-1563627

Authorized Signer

Name of individual with contract signatory authority:

Jane C. Yaciuk, PhD, CRA

Title: Lead Contract/Grant Administrator

Telephone: 405-271-2090

Email: Jane-Yaciuk@ouhsc.edu

Primary Contact

Name of individual to contact regarding contract performance & operations:

Aietah Stephens

Title: Director – Sooner SUCCESS

Telephone: 405-271-5700 ext 47803

Email: aietah-stephens@ouhsc.edu

Legal Notices

Name of individual to send legal notices:

Ashley Krukowski

Title: Assoc. Vice President of Research

Telephone: 405-271-2090

Email: Ashley-Krukowski@ouhsc.edu

Finance Contact

Name of individual responsible for finance and accounting:

Tamara Franklin

Title: Asst. Vice President of Research Financial Services

Telephone: 405-271-2177

Email: tamara-franklin@ouhsc.edu

Please ensure your proposal is complete. Incomplete proposals will not be forwarded for consideration.

Applicants will be notified by email within 10 business days of a decision per the specific timeframes in General Information.

If you have questions or need assistance, contact us through email at John.Houston@okdhs.org.

Submit application and all required information by email to:

John.Houston@okdhs.org

ATTACHMENT A

Scope of Work

OUHSC – Sooner SUCCESSS Respite Events

DELIVERABLE 1

Vendor will research and compile an updated packet of information on the importance of self-care along with activities and strategies that can be used to mitigate the stress of caregiving. Packets will be disseminated to caregivers at each regional retreat and during drop off of participants at the respite/sibshop camp event.

DELIVERABLE 2

Vendor will host 4 weekend retreat respite events for caregivers in regional locations to serve Northwest, Northeast, Central, Southern Oklahoma caregivers. Each participating caregiver will receive:

- **A respite voucher** to cover the cost of providing a substitute caregiver for their loved one with I/DD of any age, in the caregiver's choice of setting.
- **Meals and lodging** for all caregivers during the weekend retreat.
- **Social connection** – Each retreat will include group activities designed to encourage connection between the caregivers
- **A gift bag of self-care items and self-care educational materials** will be provided for each couple/single parent.
- **Down time or optional relaxation and recreational activities**
- **A 1 on 1 service navigation session with a Sooner SUCCESS staff member to ensure that the family has access to the resources, and supports across the lifespan that would benefit their family's unique needs** including the use of life course tools created by the ARCH National Respite Network to help each family identify ongoing respite resources and supports.
- **Information about the activities and programs of the Council**
- **Bilingual staff as needed to assist** caregivers who are Spanish speaking.
- **A post camp survey of consumer satisfaction**

DELIVERABLE 3

Vendor will host a respite/sibshop camp for children with special needs and their typical siblings. Participants will attend a multi-night camp for kids with intellectual and developmental disabilities, ages 8-25, in partnership with the Cavett Kids Foundation at no cost to the family.

- The children would enjoy **typical camp activities** in combination with **custom SibShop activities** geared especially for children who have siblings with special needs.

- While the kids are enjoying camp, caregivers will have the opportunity to enjoy **3 days of respite and relaxation**.
- **Self-care educational materials** will be provided to caregivers at camp drop off.
- **A 1 on 1 service navigation session** with a Sooner SUCCESS staff member to ensure that the family has access to resources, services and supports across the lifespan that will allow them to live their best lives.
- **A post-camp satisfaction survey** will be completed by each participating family.

DELIVERABLE 4

- Develop and provide three (3) quarterly reports to ODDC detailing all activities and reports cited in the scope of work. First quarterly report shall be submitted thirty (30) days after the end of the quarter. (Oct 15, 2024, Jan 15, 2025, and April 15, 2025)
- Develop and provide a 4th quarter and final report summarizing contract activities and reporting requirements. The Final Report shall be submitted thirty (30) days after the contract ends (July 30, 2025).

Logic Model for DDCO Funds

INPUTS	ACTIVITIES/SERVICES	OUTPUTS	SHORT TERM OUTCOMES	INTERMEDIATE OUTCOMES	LONG TERM OUTCOMES
Collaboration between Sooner SUCCESS, Children's Hospital Foundation, and select Retreat Centers/local vendors	Caregivers for individuals with I/DD of all ages will participate in a Friday to Sunday retreat experience	Reduced caregiver stress and burnout; strengthened relationships, increased peer connection and reduced sense of isolation	Building community awareness about respite and caregiver stress. Building interest and skill in using the state's various respite voucher programs.	1 on 1 service navigation session with a Sooner SUCCESS staff member to ensure that the family has access to resources, services and supports	Participation in weekend retreat resulting in reduced stress, reduced isolation, and improved awareness of self-care strategies and voucher programs
Collaboration between Sooner SUCCESS and Cavett Kids Foundation	Children with I/DD ages 8-25 and their siblings will participate in a multi-night respite/sibshop camp	Reduced caregiver stress and burnout; increased peer connections and socialization for camp participants	Building community awareness about respite and caregiver stress as well as need for sibling support.	1 on 1 service navigation session with a Sooner SUCCESS staff member to ensure that the family has access to resources, services and supports	Participation in respite/sibshop camp by children with I/DD and their siblings. Respite opportunity for caregiver(s) resulting in reduced stress and improved awareness of self-care strategies.
Sooner SUCCESS	Develop educational materials for caregivers on self-care Develop agenda for sibling camp experience	Educational packet for caregivers outlining ways they can utilize self-care activities and strategies to help manage the stress of caregiving	Research topic and develop packet Plan accessible camp agenda to serve both campers with I/DD and their siblings.	Share packets with caregivers at weekend retreats and camp drop off.	Participating caregivers will have activities and strategies they can use to mitigate the stress of caregiving.

**Sooner SUCCESS
BUDGET JUSTIFICATION
07.01.24 – 06.30.25**

PERSONNEL

Executive Director: The Executive Director provides administrative leadership to the project. She is responsible for the overall administration of the project, the implementation of the project plan, the supervision of the Regional Coordinators, and the Business Accountant, the Graduate Research Assistant, and fulfilling reporting requirements. The Executive Director is also the Principal Investigator, this position is supported at 1% effort (.12 CM) with no cost share.

Regional Coordinator: The Regional Coordinators are supported on this project: Regional Coordinators are responsible for project implementation in their respective Regions. This will include implementation of the Respite Retreats. Regional Coordinators will work under the direction of the PI and assist with project requirements in the regions and administering all aspects of the project at the regional level. 3 Regional Coordinators will be on this project, 1 position supported at 9% paid effort with 7% cost share (1.92 CM), and 2 positions supported at 7% paid effort (0.84 CM each).

Special Program Coordinator: 1 County Coordinator is supported on this project. The County Coordinator assigned responsible for project implementation in their respective counties. The Special Program Coordinator will be responsible to the Regional Coordinator. To maintain an understanding of the needs of those Sooner SUCCESS serves staff communicate regularly with parent groups and participate in activities involving family advocates. Since Sooner SUCCESS collects information on service needs and especially gaps in service provision Sooner SUCCESS staff serve on committees and agency workgroups addressing these needs. This position is supported at 7% effort (0.84 CM) supported by Council funds with no cost share.

Program Coordinator/Business Accountant/Admin: Program Coordinator/Business Accountant/Admin on this project is responsible to help process project payment expenditures once approved by the Principal Investigator. This position will also assist in providing the budget activity reports as needed. This position is supported at 5% paid effort (0.60 CM).

Fringe benefits will be applied in strict accordance with the University's approved DHHS rates.

Personnel costs total \$33,720 for this project. These amounts include fringe benefits as applicable of the staff on the project. All of these positions are 1.0 FTE for 12 months.

*3% raise has been included for all full-time staff (not including faculty) that have been employed for over a year. This pay increase is decided upon at the University level, it generally takes place at the start of the state fiscal year.

SUPPLIES/OTHER

Supplies for retreat/camp activities, materials for caregiver self care bags, retreat evening activity and door prizes, snacks/light food items are supported at \$7,000

Other:

Retreat Meals and Snacks are supported at \$12,200. Printing/ Postage is supported at \$2,000. Room Rental for retreat space is supported at \$2,800 (with no IDC).

Respite Vouchers, Fiscal Agent Vendor: Woven Life will be the Fiscal Agent for Respite Voucher payments will be issued to approved Respite Care Providers and the fiscal agent for the voucher payments. The Administrative Fee is 15% of the allocated Respite Funding Amount. Respite Vouchers is supported at \$25,000 and Fiscal Agent Administrative Fee is supported at \$3,750 totaling \$28,750.

SUPPLY/OTHER TOTAL: \$52,750

Lease/workspace (cost share): Sooner SUCCESS state team office is located at the University of Oklahoma Health Sciences Center in Oklahoma City. Sooner SUCCESS will report the monthly costs of \$2,686.19 lease amount to count towards cost share obligations. These lease costs are not covered by federal funding therefore are allowed to be reported towards cost share, this amount to be cost shared is projected to be \$32,234.

TRAVEL

Travel will be used to support the Respite Retreats' Lodging costs for the hotels and selected lodging sites for program personnel and family caregivers participating in the Retreats. In-State mileage expenses for Program staff, to travel to and from each of the Respite Retreats to implement the program. The travel will be reimbursed at actual and reasonable costs based on the established State mileage rate. Travel is supported at \$13,000.

INDIRECT COSTS

Funds contracted to the University of Oklahoma Health Sciences Center will incur the 26% indirect cost rate. Indirect paid costs are \$23,686, and indirect cost share costs are \$1,448.

FY '25 DDCO Sooner SUCCESS
 PI: Aietah Stephens

Includes 3% cost of living raise

July 1, 2024 - June 30, 2025

DDCO BUDGET					
Personnel	FTE	Effort	Requested Salary	Fringe	Total
Aieah Stephens	1.00	1%	\$789.00	\$268.00	\$1,057.00
Lisa Simmons	1.00	9%	\$5,505.00	\$1,866.00	\$7,371.00
Lori Wathen	1.00	7%	\$4,244.00	\$1,439.00	\$5,683.00
Lisa DeBolt	1.00	7%	\$4,245.00	\$1,439.00	\$5,684.00
Eva Smith	1.00	7%	\$4,282.00	\$1,452.00	\$5,734.00
Cooper Turman	1.00	5%	\$1,957.00	\$663.00	\$2,620.00
TOTAL PERSONNEL & FRINGE	TOTAL	36%	\$21,022.00	\$7,127.00	\$28,149.00

Supplies & Operating Expenses

Travel					\$13,000
Respite Vouchers					\$28,750
Respite Retreats/Camps					\$12,200
Printing/Copies/Postage					\$2,000
Room Rental for Retreats					\$2,800
Materials/Supplies					\$7,000
TOTAL SUPPLIES & OPERATING EXPENSES					\$65,750

MATCH BUDGET

Personnel	FTE	Effort	Requested Salary	Fringe	Total
Aieah Stephens	1.00	0%	\$0.00	\$0.00	\$0.00
Lisa Simmons	1.00	7%	\$4,282.00	\$1,289.00	\$5,571.00
Lori Wathen	1.00	0%	\$0.00	\$0.00	\$0.00
Lisa DeBolt	1.00	0%	\$0.00	\$0.00	\$0.00
Eva Smith	1.00	0%	\$0.00	\$0.00	\$0.00
Cooper Thurman	1.00	0%	\$0.00	\$0.00	\$0.00
			\$4,282	\$1,289	\$5,571

Supplies & Operating Expenses

Lease			\$2686.19*12		\$32,234
TOTAL SUPPLIES & OPERATING EXPENSES					\$32,234

Total Direct Costs					\$93,899
Total Indirect Costs			26%		\$23,686
TOTAL COSTS					\$117,585

TOTAL REQUIRED MATCH			25%		\$39,210
TOTAL MATCH					\$37,805
Total Indirect Costs			26%		\$1,448
TOTAL MATCH					\$39,253

TOTAL PROJECT COSTS					\$156,838
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