

**FY 2018/19 DISPARITY FUNDS PROGRAM  
APPLICANT CHECKLIST**

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**CBOs:**

1. ☒ 2018 Disparity Funding Proposal, Proposal Cover Page (Attachment A)
2. ☒ 2018 Disparity Funding Proposal, Project Information (Attachment B)
3. ☒ Schedule of Development/Activities Worksheet (Attachment C)
4. ☒ Project Measures Worksheet (Attachment D)
5. ☒ Budget Worksheet (Attachment E)
6. ☒ Letter(s) of support (data sharing, collaboration/shared projects), as applicable
7. ☐ Optional: Supporting documentation about the organization (e.g., verification of the organization's employer identification number (EIN) status, business registration, board minutes, or any other relevant documents).
8. ☐ UCs and CSUs: A completed Model Agreement

**Regional centers (New Proposal Requests):**

1. ☐ 2018 Disparity Funding Proposal, Proposal Cover Page (Attachment A)
2. ☐ 2018 Disparity Funding Proposal, Project Information (Attachment B)
3. ☐ Schedule of Development/Activities Worksheet (Attachment C)
4. ☐ Project Measures Worksheet (Attachment D)
5. ☐ Budget Worksheet (Attachment E)
6. ☐ Letter(s) of support (data sharing, collaboration/shared projects), as applicable

**Regional Centers (Continuation Requests):**

1. ☐ Budget Worksheet (Attachment E)
2. ☐ Request for Funding to Continue an Approved Project (Attachment F)

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PROPOSAL COVER PAGE**

**Note:** Complete this form for **each** proposed project. Please refer to the Proposal Submission Instructions for clarification for any of the following questions.

**Section I. Grantee Information and Cover Sheet**

Please check the box that describes your organization		
<input type="checkbox"/> Regional Center (RC)	<input type="checkbox"/> Community Based Organization (CBO), 501(c)(3)	<input checked="" type="checkbox"/> CBO, non-501(c)(3) <input type="checkbox"/> EIN or <input checked="" type="checkbox"/> No EIN

<b>a. Name of organization/Group</b>	<b>b. Date</b>
Native American Training and Technical Assistance (NATTA)	10/02/18
<b>c. Primary contact (Name)</b>	
Daniel Lopez	
<b>d. Mailing address</b>	
P.O. Box 25, Oak Run, CA, 96069	
<b>e. Primary e-mail address</b>	<b>f. Primary phone number</b>
daniellopez96069@gmail.com	530-472-1058
<b>g. Secondary contact email address</b>	<b>h. Secondary contact phone number</b>
nattadirector96069@gmail.com	530-472-1057
<b>i. Brief description of the organization/group (organization type, group mission, etc.).</b>	
NATTA is a parent-based, community organization. Our organization has been in existence for over twenty years. NATTA is one of very few Native American consulting trainers in the developmental disabilities community. Our mission is to create in-roads to accessing services for Native Americans with special needs.	

**Section II. Proposal Summary**

<b>a. Project title</b>	Our Wounded Eagles
<b>b. Total amount requested</b>	\$ 252645
<b>c. Projected number of individuals impacted</b>	118-489
<b>d. Duration of project (months)</b>	12 months    Start date: 01/01/19    End date: 12/31/19
<b>e. RC(s) in the project catchment area(s)</b>	1 Target zip code(s) for Los Angeles County*:
<b>f. Did your organization receive funding for a project in FY 2017/18?</b>	<input checked="" type="checkbox"/> Yes** <input type="checkbox"/> No **If yes, provide the grant number and answer questions "f1" and "f2." If no, skip to question "g."  Grant # (CBOs only): 17-C40
<b>f1. What is the current status of your project?</b>	Ongoing
<b>f2. How is this proposal different from your current project?</b>	Phase 2 will: Expand outreach to targeted rural communities with a focus on self determination; Trainings in advocacy and self determination in tribal communities

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PROPOSAL COVER PAGE**

	and develop advocacy teams from those trainings; Provide video training and education about services and self-determination to remote, rural communities where internet and cell phone service is sparse; Develop a parent resource network in rural, tribal communities; Outreach and training with parents specific to self advocacy and self determination with the regional center, school system, and other public agencies
<b>g. Will you be working with one or more CBO(s)?</b>	<input type="checkbox"/> Yes*** <input checked="" type="checkbox"/> No
<b>h. Will the project require aggregate data from the RC(s)?</b>	<input checked="" type="checkbox"/> Yes*** <input type="checkbox"/> No

\*Zip code information for Los Angeles County can be found at:

<https://www.dds.ca.gov/RC/regionMap.cfm?view=laCounty>

\*\*\*If yes, please provide letter(s) indicating that the CBO(s) and/or RC(s) have reviewed the proposal and are in support of collaboration.

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PROJECT INFORMATION**

<b>1. Project title</b>
Our Wounded Eagles
<b>2. Select the target group(s) the project intends to serve and provide a description of each group. Check all that apply.</b>
<input checked="" type="checkbox"/> Ethnicity: Native American <input type="checkbox"/> Language(s): <input type="checkbox"/> Age group(s): <input checked="" type="checkbox"/> Socioeconomic: Poor and working class <input checked="" type="checkbox"/> Other: Rural
<b>3. Which area(s) of focus does the project meet? Check all that apply.</b>
<input checked="" type="checkbox"/> 1. Increase access to information about services available through the RC system and processes to receiving those services. <input type="checkbox"/> 2. Provide assistance during the intake process. <input checked="" type="checkbox"/> 3. Empower consumers to advocate for needed services. <input checked="" type="checkbox"/> 4. Increase access to services that meet the cultural and linguistic needs of consumers and their families. <input checked="" type="checkbox"/> 5. Other (explain): Increase access to services in rural, tribal communities
<b>4. Project Type. Check all that apply.</b>
<input type="checkbox"/> Translation (equipment, translator services, translating brochures or materials, etc.) <input checked="" type="checkbox"/> Outreach (community events, website or social media design, materials, etc.) <input type="checkbox"/> Workforce capacity (staff training, incentives for bilingual employees, etc.) <input checked="" type="checkbox"/> Parent education (online or in person trainings, workshops, etc.) <input type="checkbox"/> Promotores (para professionals to help develop relationships and trust with the Regional Center) <input checked="" type="checkbox"/> Family/consumer support services (1:1 coaching, enhanced case management, service navigation, etc.) <input checked="" type="checkbox"/> Other: Community education that teaches individuals, parents, and community members how to access regional center services
<b>5. What experience does the organization/group have working with the target population?</b>
Our Wounded Eagles is staffed by tribal members who have lived and worked in the Native community their entire lives.
<b>6. Explain how the target population(s) are underserved using POS data or other data as supporting evidence.</b>
The Native community at Far Northern is underserved in two areas. First, POS data for 2016-17 reveals that Native people make up about 1.7% of FNRC's client population. In contrast, US Census data for 2017 states the native community in the 9 county FNRC catchment area is 3.2% of the total population. Taking the assumption that the client profile of regional centers should be reflective of their communities, FNRC is serving a little more than half of the proportion of Native Americans with developmental disabilities. Secondly, although general POS data seems to show POS usage for FNRC Native American clients similar to that of white clients. This is misleading

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PROJECT INFORMATION**

because according to FNRC POS data, 10 Native American clients represented over 45% of all funds FNRC spent on Native American clients in 2017 and about a third of all Native FNRC clients received less than a \$1,000 worth of services all year.

**7. How will the project address the identified POS disparity?**

This project will address the identified POS disparity by providing education about regional center and other public services to the rural native tribes spread across the FNRC catchment area. This will be accomplished through four regional gatherings providing speakers and presenters discussing regional center services and to provide communities a pathway to greater understanding of available services. In addition, the new Coordinator of Outreach will receive extensive training from FNRC regarding eligibility and will return to the native communities to provide outreach and information on a variety of possible points of entry into the regional center system (schools, Head Start, hospitals, clinics, etc).

**8. How is the proposed project unique or different from a current effort (e.g., strategies, activities, goal) in this catchment area? If the project is similar to a current effort, how will the proposed project expand on the current effort?**

This program is unique because it is local, it is based in rural California, it is staffed by parents and members of the Native American community, and because it is the first of its kind in this catchment area.

**9. How did your organization collect input from the community and/or target population to design the project?**

This project grew organically out of need in rural, Native communities in the Far Northern catchment area. Writing the first grant, we identified that our area was part of the larger racial and ethnic disparity in the regional center system. Our target population lives in largely rural, lower socioeconomic areas where the challenges of racism, poverty, the digital divide, and unemployment compound the inequality of lack of services for disabled individuals and their families.

In phase two, we plan to use the quantitative and qualitative data we collected in focus groups and surveys to expand targeted outreach that will result in advocates who are trained to serve tribal communities with a focus on self determination. We believe that self determination is an integral part of the training and workshops we offer to advocates, community members, and parents. In addition, these trainings will be videotaped and offered as workshops in isolated rural communities where it is difficult for service providers to travel to. In using in-person and video tape trainings this way, we will be able to promote self-determination and help develop parent networks that are a vital support for rural parents as they engage public agencies to advocate for their children.



**DISPARITY FUNDING PROPOSAL – SCHEDULE OF DEVELOPMENT/ACTIVITIES WORKSHEET**

Completed worksheets shall be submitted with the funding proposal. List all key staff and activities, and identify the quarter that each activity will occur. More than one copy of each worksheet may be submitted if additional space is required. *Please see Attachment C-1 for a sample worksheet.*

<b>Project Title:</b> Our Wounded Eagles									
		<b>2018</b>	<b>2019</b>				<b>2020</b>		
		<b>Q4</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>
<b>Activity</b>	<b>Staff</b>	<b>10/1/18-12/31/18</b>	<b>1/1/19-3/31/19</b>	<b>4/1/19-6/30/19</b>	<b>7/1/19-9/30/19</b>	<b>10/1/19-12/31/19</b>	<b>1/1/20-3/30/20</b>	<b>7/1/19-9/30/19</b>	<b>10/1/19-12/31/19</b>
Organize, schedule, and host four regional gatherings in FNRC's catchment area	All	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gather data via pre and post test data collection and analysis	Director	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organize, develop, create and/or produce educational materials (paper, video, online, etc) to maximize information to isolated rural areas	All	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact and collaborate with all tribal communities to increase the number of Native Regional Center Clients	Outreach Coordinator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact, collaborate with all tribal communities to maximize attendance	Executive Director,	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Project Title:</b> Our Wounded Eagles									
		<b>2018</b>	<b>2019</b>				<b>2020</b>		
<b>Activity</b>	<b>Staff</b>	<b>Q4</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>
		10/1/18-12/31/18	1/1/19-3/31/19	4/1/19-6/30/19	7/1/19-9/30/19	10/1/19-12/31/19	1/1/20-3/30/20	7/1/19-9/30/19	10/1/19-12/31/19
at regional gatherings and focus groups, Additionally, plan and develop Native advocacy teams and plan for self-directed services.									
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Note: Monthly intervals may also be used, rather than quarterly as shown in this sample. For projects shorter than 6 months, DDS may require monthly reporting. Please use as many copies of this worksheet as needed*

**DISPARITY FUNDING PROPOSAL – PROJECT MEASURES WORKSHEET**

Completed worksheets shall be submitted with the funding proposal. Check the types of qualitative and quantitative outcome measures you will use. For each type, describe the activity to be measured and the data collection method. More than one copy of each worksheet may be submitted if additional space is required. *Please see Attachment D-1 for a sample worksheet.*

<b>Project Title:</b> Our Wounded Eagles		
<b>Measures of Outcomes</b>	<b>Type of Measure(s). Check all that apply.</b>	<b>Activity To Be Measured; Data Collection Method</b>
	<input checked="" type="checkbox"/> Count	Number of events offered, number of participants who attended a regional gathering, focus group, or training.
	<input checked="" type="checkbox"/> POS	Through data sharing with Far Northern regional center POS data
	<input checked="" type="checkbox"/> Pre/post survey/assessment	Pre and post quantitative survey assessments
	<input type="checkbox"/> Stakeholder feedback	
	<input checked="" type="checkbox"/> Materials	Phase 2 will focus on creating informational videos, handout materials, and other resources related to regional center services.
	<input checked="" type="checkbox"/> Other: PLEASE DESCRIBE:	We will conduct 4 focus groups with the target population to qualitatively assess accessibility to services, knowledge of the regional center system, advocacy, and self-directed services.



**PROJECT BUDGET WORKSHEET**

Budget worksheet should reflect the total amount of funding needed for the duration of the project. More than one worksheet may be submitted if additional space is needed. Full time equivalent (FTE) typically means 40 hours per week. For example, .5FTE means 20 hours per week.

<b>Organization Name</b>
Native American Training and Technical Assistance (NATTA)
<b>Project Title</b>
Our Wounded Eagles
<b>Project Duration (start and end date)</b>
<b>Start Date:</b> 01/01/19 <b>End Date:</b> 12/31/19 <b>Number of Months:</b> 12

Description	Year 1 Annual Cost	Year 2 Annual Cost*	Total Cost
<b>Salary/Wages and Benefits</b>			
Name: Daniel Lopez Title/Position: Director <input checked="" type="checkbox"/> Existing Position or <input type="checkbox"/> New Position <input type="checkbox"/> Full Time Equivalent (FTE): 1	\$87500	\$	\$87500
Name: Corina Lego Title/Position: Administrative Assistant <input checked="" type="checkbox"/> Existing Position or <input type="checkbox"/> New Position <input type="checkbox"/> Full Time Equivalent (FTE): 0.75	\$39000	\$	\$39000
Name: Christina Lopez Title/Position: Trainer/Operations <input checked="" type="checkbox"/> Existing Position or <input type="checkbox"/> New Position <input type="checkbox"/> Full Time Equivalent (FTE): 0.75	\$28035	\$	\$28035
Name: N/A Title/Position: Coordinator of Outreach <input type="checkbox"/> Existing Position or <input checked="" type="checkbox"/> New Position <input type="checkbox"/> Full Time Equivalent (FTE): 0.75	\$39000	\$	\$39000
Name: Title/Position: <input type="checkbox"/> Existing Position or <input type="checkbox"/> New Position <input type="checkbox"/> Full Time Equivalent (FTE):	\$	\$	\$
Name: Title/Position: <input type="checkbox"/> Existing Position or <input type="checkbox"/> New Position <input type="checkbox"/> Full Time Equivalent (FTE):	\$	\$	\$
Name: Title/Position: <input type="checkbox"/> Existing Position or <input type="checkbox"/> New Position <input type="checkbox"/> Full Time Equivalent (FTE):	\$	\$	\$
<b>Salary/Wages and Benefits Total</b>	\$193535	\$	\$193535

<b>Operating Expenses</b>			
Advertising & Outreach	\$750	\$	\$750
Food & beverages	\$10000	\$	\$10000
Instructional Items	\$2500	\$	\$2500
Transportation	\$5000	\$	\$5000
In-State Travel	\$16000	\$	\$16000
Facility Costs	\$8000	\$	\$8000
	\$	\$	\$
<b>Operating Expenses Total</b>	<b>\$42250</b>	<b>\$</b>	<b>\$42250</b>

<b>Administrative Expenses (Indirect costs, up to 15%)</b>			
General Office Supplies	\$3000	\$	\$3000
Insurance	\$2000	\$	\$2000
Information Technology	\$7000	\$	\$7000
Premier Financial Services	\$3660	\$	\$3660
Utilities	\$1200	\$	\$1200
	\$	\$	\$
<b>Administrative Expenses Total</b>	<b>\$16860</b>	<b>\$</b>	<b>\$16860</b>
<b>Project Budget Total</b>	<b>\$252645</b>	<b>\$</b>	<b>\$252645</b>

\*As applicable. If the period for year 2 is less than 12 months, provide budget for the amount of months that services will be provided.

**Proposer (applicant):**

Authorized by (print name): Daniel Lopez

Signature:  Date: 10-16-2018

**Sub-grantee (subcontractor):\*\***

Authorized by (print name): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*As applicable

**PROJECT BUDGET NARRATIVE WORKSHEET**

The items and descriptions in this worksheet must correspond to the items listed in the Budget Worksheet (Attachment E-1).

<b>Organization Name</b>
Native American Training and Technical Assistance
<b>Project Title</b>
Our Wounded Eagles
<b>Project Duration (start and end date)</b>
<b>Start Date:</b> 01/01/19 <b>End Date:</b> 12/31/19 <b>Number of Months:</b> 12

Salary/Wages and Benefits - Line Item	Description of Duties
Title/Position: Director	Responsible for the overall administration of the grant. This includes travel and community organizing, data collection, training, supervision of staff, liaison with Far Northern Regional Center and other CBOs and public agencies, coordinates regional gatherings, and advocacy on a case by case basis.
Title/Position: Administrative Assistant	Manages directors calendar and schedule, organizes and maintains paper and electronic documents, maintains and keeps key organizational materials, assists with communication both internal and external, receives incoming calls, and maintains office supplies and inventory.
Title/Position: Trainer/Operations	Assists director with developing and implementing training for parents and community members, assist in the oversight and coordination of the grant, help director develop and coordinate regional gatherings, assist with data collection and evaluation, and ensure the overall performance of NATTA.
Title/Position: Coordinator of Outreach	Work responsively with the director and staff to strategize outreach with the target population. This includes data collection, travel to remote rural areas to identify community needs, communication, public relations, and develop and implement a plan for consistent and effective communication with target population.
Title/Position:	
Title/Position:	
Title/Position:	

Operating Expenses – Line Item	Description
Advertising and Outreach	Flyers, documents, invitations, etc used to meet the requirements of grant-supported activities.

Food and Beverages	For training attendees and for family and community members at regional gatherings
Instructional items	Pens, paper, video recording equipment and projector. DVDs that will be used in trainings and at regional gatherings
Transportation	All transportation including for public training participants for consumer and their families to participate in grant-supported activities.
In-State Travel	Per Diem reimbursement for grant staff to travel within the state of California
Facility Costs	Costs associated with rental spaces for four regional gatherings in addition to trainings in target communities

Administrative Expenses – Line Item	Description
General Office Supplies	Pens, paper, printer ink, computer paper, sticky notes
Insurance	Business related insurance expenses
Information Technology	computers, tablets, internet service, phones, and answering machine, printer and scanner
Premier Financial Services	Payroll and employment services
Utilities	Office utility costs

**Proposer (applicant):**Authorized by (print name): Daniel LopezSignature: Daniel Lopez Date: 10-16-2018**Sub-grantee (subcontractor):\*\***

Authorized by (print name): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Laura Larson  
Executive Director

## Far Northern Regional Center

Providing services and supports that allow persons with developmental disabilities to live productive and valued lives.

October 15, 2018

State of California  
Department of Developmental Services  
1600 9th Street  
Sacramento, CA 95814

**Re: FY 2018/19 Disparity Funds Program Proposal – *Native American Training and Technical Assistance (NATTA)***

Dear Grant Review Committee,

I am writing in regards to the grant submitted to DDS from *Native American Training and Technical Assistance (NATTA)* for the Disparity Funds Program. NATTA is requesting funding for an additional year to provide education, advocacy development, and outreach to the Native population at Far Northern Regional Center (FNRC). We have reviewed this project and are pleased to see additional emphasis on outreach to increase the number of Natives FNRC serves. Far Northern is looking forward to continuing our collaboration with NATTA to maximize services to a historically under supported community.

In the development of this project, Far Northern Regional Center (FNRC) shared some basic aggregate POS data with NATTA and anticipate data sharing in the future to assist with the program's own self-evaluation and reporting requirements to DDS. In cases where personal information such as names or other identifying characteristics are requested, FNRC and NATTA will comply with appropriate HIPPA requirements for disclosure of confidential information.

If you have any questions, please feel free to contact me at (530) 222-4791.

Sincerely,

Laura Larson  
Executive Director of Client Services  
LW:lw

[www.farnorthernrc.org](http://www.farnorthernrc.org)

☐ REDDING MAIN OFFICE: P. O. Box 492418 Redding, CA 96049-2418 1900 Churn Creek Rd. Suite 319 Redding, CA 96002-0277 (530) 222-4791 Fax (530) 222-8908

☐ CHICO OFFICE: 1377 East Lassen Ave. Chico, CA 95973-7824 (530) 895-8633 FAX (530) 332-1497

☐ REGIONAL OFFICES in: Lake Almanor, Mount Shasta and Yreka