**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 (New and Reapplications)

Please check the box that de	escribes your organization			
☐ Regional Center (RC)	X Community Based Organization (CBO), 501(c)(3)	☐ CBO, non-501(c)(3) ☐ EIN or ☐ No EIN		
a. Name of organization/Grou	ир	b. Date		
USC University Center for E Disabilities at Children's Hos (USC UCEDD at CHLA)	•	09/28/2019		
c. Primary contact (Name)				
Olga Solomon, PhD				
d. Mailing address				
3250 Wilshire Blvd, # 500, Lo	os Angeles, CA 90010			
e. Primary e-mail address	f. Pı	imary phone number		
osolomon@chla.usc.edu	323	361 - 4112		
g. Secondary contact email a	econdary contact phone number			
fgoldfarb@chla.usc.edu 323 361-3831				
i. Brief description of the organization/group (organization type, group mission, etc.). Include experience your organization has had managing a program similar to the proposal, and the outcomes of that program.				
The main a file a 1100 1	Indiana and the Constant for Constant	and a control of the		

The mission of the USC University Center for Excellence in Developmental Disabilities at Children's Hospital Los Angeles, a 501(c)(3) nonprofit institution, is to provide leadership in family-centered, culturally-competent services and systems for the benefit of, and in partnership with individuals with, or at risk for, developmental, behavioral and/or special health care needs, and their families. It is one of 67 UCEDDs in the U.S., which were authorized under the Developmental Disabilities Assistance and Bill of Rights Act (DD Act) of 1963. The USC UCEDD promotes the well-being of persons with developmental disabilities through training, research and evaluation, community services, technical assistance, information dissemination, and policy development.

As part of its mission, the USC UCEDD's interdisciplinary faculty and staff provide comprehensive, culturally and linguistically tailored technical assistance at the local, state, regional and national levels to build the capacity of organizations and entities to better serve individuals with or at risk for Developmental Disabilities, especially those who are under-served and under-resourced. A Co-Principal Investigator on the proposed project is the Director of Community Education, Information Dissemination, and Technical Assistance, Fran Goldfarb, MA, MCHES, CPSP. She is a nationally recognized expert in the support of families and individuals with developmental disabilities, and the CBOs that

serve them, a unique skillset that serves as a foundation of the proposed project. Outcomes of our technical assistance efforts specifically relevant to the proposed project are: 1) Assisting community-based organizations to seek and successfully obtain funding for work done on behalf of targeted populations; 2) Empowering and strengthening the voices of underserved communities in policy and advocacy; 3) Developing culturally-responsive systems of service delivery; 4) Building the capacity of systems of service to meet emerging needs, such as early identification and referral for treatment of specific disabilities, and addressing racial and ethnic disparities in services; 5) Agency specific adoption of evidence based practices; 6) Increasing parent-professional partnerships at all levels of service delivery and policy-making; and 7) bringing recognition to the value of collaboration with parents and other family members, including those who run CBOs to serve their communities.

#### j. If you check the CBO box, describe how your organization meets the definition of a CBO.

The USC University Center for Excellence in Developmental Disabilities is based at Children's Hospital Los Angeles, a 501(c)(3) nonprofit institution that serves healthcare needs of mostly low-income, racially and ethnically diverse children and families in Los Angeles County, State of California, nationally, and internationally. Like CHLA, the majority of children and families served by the USC UCEDD are low income. The USC UCEDD is affiliated with the USC Keck School of Medicine, and it is a nationally recognized leader in developing and implementing quality services for infants, children, youth and adults with, or at risk for, behavioral, developmental, physical, and/or special health care needs and their families. The USC UCEDD provides services that are sensitive to the needs, values and beliefs of not only the individual, but also the entire family. We provide clinical services to more than 5,000 individuals each year and our interdisciplinary training programs reach more than 16,000 parents, students and professionals. We also collaborate in research and policy projects to improve the lives of individuals with developmental disabilities, develop more responsive systems of care, and increase access for children with special health care needs.

EIN: 95-1690977

**Section III. Proposal Summary (New and Reapplications)** 

Gootion in Frepoda Gamma	(11011 alla it	ouppiloutiono,		
a. Project title	Technical Ass	sistance and Peer Edu	cation	
	Infrastructure	to Increase Impact of	Parent-Run C	BOs
		cial-Recreational Servi		
h Total amount requested		nai i tooloationai oo i i		
b. Total amount requested	\$ 127,793			
c. Projected number of	250			
individuals impacted				
d. Duration of project (months)	12	Start date:03 /01/20	End date: (	02/28/21
ш 2 ш ш ш т рт о <b>ј</b> есе (ш ст. ш с,	. –			
e. RC(s) in the project catchment	SCLARC, FD	DLRC. WRC		
area(s)	,	-, -		
f. List the city(ies) your project	SCLARC: Bell,	Bell Gardens, Carson,	Compton, Down	ney,
proposes to serve:	Huntington Par	k, Lynwood, Maywood,	Paramount, Soi	uth Gate
	FDLRC: Burba	nk, Los Angeles, Pasad	ena	
		a, Hawthorne, Inglewood	d, Lawndale,	
	Los Angeles			
g. List the county(ies) your				
project proposes to serve:	Los Angeles C	ounty		
h If your project property	00004 00004	20050 20005 20000 20	054 00000 000	207
h. If your project proposes to serve the City of Los Angeles, list		90053 90005 90026 90		
the zip code(s) and/or community				
		90036 90070 90013 90 90048 90074 90020 90		
		90048 90074 90020 90		
	90079 90004 9	0000 30001 30000 300	90 90090 90047	
	Shared zip cod	les.		
	Criaroa zip ood			
	90007 SCLA/F	DL 90011 SCLA/FDL 9	0016 SCI A/FDI	
		DL 90035 WRC/FDL 90		
		VRC 90056 SCLA/WRC		
		CLA 90248 WRC/SCLA		
i. Will you be working with one	X Yes***	□ Na		
or more CBO(s)?	↑ 162	□ No		
j. Will the project require	☐ Yes***	X No		
aggregate data from the	L 162	ANU		
RC(s)?				

<sup>\*</sup>Zip code information for Los Angeles County can be found at: https://www.dds.ca.gov/RC/regionMap.cfm?view=laCounty

<sup>\*\*\*</sup>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 and data sharing.

k. Project Type Sele	ction(s)		
Select your one prima	<u>rv</u> project type.	Select your <u>one secondary</u> project type (if applicable).	Select your <u>one tertiary</u> project type (if applicable).
□ Translation (equipment translating brochures or □ Outreach (communit social media design, max   X Workforce capacity incentives for bilingual e □ Parent education (containings, workshops, et □ Promotora (Peers educating commaccessing RC services)	materials, etc.) y events, website or aterials, etc.) (staff training, employees, etc.) online or in person c.) unity members about	☐ Translation ☐ Outreach ☐ Workforce capacity ☐ Parent education ☐ Promotora ☐ X Family/ consumer support services	☐ Translation ☐ X Outreach ☐ Workforce capacity ☐ Parent education ☐ Promotora ☐ Family/ consumer support services
☐ Family/ consumer support ser (1:1 coaching, enhanced service navigation, etc.)	vices d case management,		
I. Target Population			
Select all groups the p	roject will serve	Proposed Number of Individ Primary Project Type	luals Impacted by the
X African American		125	
☐ Cambodian			
☐ Chinese			
☐ Filipino			
X Hispanic		125	
☐ Hmong			
☐ Indian			
☐ Japanese			
☐ Korean			
☐ Mien			
□ Native American			
☐ Pacific Islander (list):	· ·		
☐ Vietnamese			
☐ Other (list):			
	<u> </u>	I groups the project will se	•
☐ Cantonese	☐ Japanese	☐ Mien ☐ Tag	•
<ul><li>☐ Hmong</li><li>☐ Indian</li></ul>	<ul><li>☐ Korean</li><li>☐ Mandarin</li></ul>		namese
		X Spanish ☐ Othe	
☐ Birth up to Three (Ea		X 16 to 21	:i v <i>e j</i>
	my Glart)		
X Three to Five		X 22 and older	
X Three to 21		☐ Other (list):	

Section IV. Proposal Certification

Proposer's (applicant) Certif	ication: I certify that the information attached is true and correct.
Authorized by (print name):	Lilit Amirkhanyan, Manager, Grants and Research Services
Organization: Children's Hos	pital Los Angeles
Signature:	Desirable signed by the Annihologyan and Colombine Strength Can Register, such that Strength Colombine Stren
Collaborative Proposals Onl	<u>y**</u>
Sub-grantee (subcontractor)	Certification: I certify that the information attached is true and correct
Subcontractor 1: Authorized by (print name):	Y .
Organization:	
Signature:	Date:
Subcontractor 2: Authorized by (print name):	
Organization:	
Signature:	Date:
Subcontractor 3: Authorized by (print name):	
Organization:	
Signature:	Date:
Subcontractor 4: Authorized by (print name):	
Organization:	
Signature:	Date:

<sup>\*\*</sup>As applicable. If more subcontractors are needed, complete additional copies of this section.

#### **Project title**

Technical Assistance and Peer Education Infrastructure to Increase Impact of Parent-Run CBOs Providing Social-Recreational Services

#### 1. What experience does the organization/group have working with the target population?

Besides providing clinical services and professional training, the USC UCEDD at CHLA provides technical support and educational opportunities to CBOs serving low-income communities of color who are the primary recipients of the USC UCEDD's services. The USC UCEDD is a leader in designing and implementing culturally tailored and linguistically competent programs to meet the needs of under-resourced communities of color in Los Angeles County and beyond. Fran Goldfarb, MA, MCHES, CPSP who is Co-Principal Investigator on the project is the Director of Community Education, Information Dissemination, and Technical Assistance with over 30 years of experience. Olga Solomon, PhD, the Project Director, has 15 years of experience in ethnographic research in the African American Community, and extensive training in ethnographic person-centered interview methodology, thematic content analysis, healthcare records and other document analysis, group interview processes, and the use of technological innovations to benefit people with ASD.

Because of the USC UCEDD's long history of working with CBOs, it has unique expertise in helping these organizations to develop, collect, and analyze meaningful outcome measures of their performance. The USC UCEDD's work in this area is especially informed by the use of National Core Indicators. For this project NCIs would be used to both collect data on the CBO's services provided to the community in the context of what Regional Centers in the catchment areas provide, and on the experiences of parents running these CBOs as they interact with the Regional Center system to receive services for their child or children with ASD or other developmental disabilities. Including CBOs in the NCI data collection will provide invaluable data on the role of community-based CBOs in addressing the unmet needs in social recreational services among communities of color in Los Angeles County living in the catchment areas of SCLARC, FDLRC, and WRC.

# 2. Explain how the target population(s) are underserved using RC POS data or other data as supporting evidence of the disparity.

Since the Lanterman Act Amendment of 2009 social recreational services, previously funded, however frugally, by the Regional Centers, have been mostly inaccessible to low-income, under-resourced communities of color in the catchments areas of SCLARC, FDLRC, and WRC. Previously vendored services that provided critically needed socialization, community participation, and functional skill development opportunities, were gone almost overnight. Unable to replace these services paying for them 'out of pocket', some of the affected families have started their own CBOs to provide such services not only to their own children, youths and young adults with Autism Spectrum Disorders and other Developmental Disabilities, but also to other children, youths and young adults in their communities. Now, 10 years later, while the services have not been restored to any

meaningful degree, there has been a proliferation of parent-led CBOs especially, to our knowledge, in the African American community, that established themselves as a reliable and accessible resource for social recreational opportunities such as swimming, skateboarding, surfing, playing basketball, therapeutic horseback riding, and other social recreational activities.

While this description captures the disparities at the institutional CBO level, there are also disparities at the individual and family levels that our program aims to address. Specifically, because the CBOs whose founders / leaders Dr. Solomon interviewed are African American parents of children with ASD living in South Los Angeles who run their CBOs on their own time with very little outside funding, their personal and financial cost of providing this service to the community is exceptionally high. Stress, time shortage, financial hardship, and a lack of supportive infrastructure such as office space, working Internet, and computer software such as Microsoft Office are the main culprits. Key informant interviews revealed that parents running these CBOs often do not possess grant-writing and other skills and resources necessary to apply for state and federal funding, including funding such as the DDS Disparity Fund Program. Several community CBO founders interviewed by Dr. Solomon said that they do not have the time, the skills and the resources to submit competitive grant applications which negatively impacts their ability to continue providing social recreational services, as well as theirs, their families, and their children's personal lives.

Another organization-level disparity that the parent-led CBOs are experiencing in South Los Angeles compared to CBOs in more socio-economically advantaged areas is that their founders and volunteers do not have the time or the resources to systematically measure, track, and analyze their outputs (the numbers of people they have served, e.g. how many children with ASD attended a swimming program), and their outcomes (the changes in a performance metric of those they serve that could demonstrate the effectiveness of their program, e.g. how many children with ASD of those who attended were reported by the parents to acquire a new skill, e.g. learned water safety, or to swim independently).

At the individual and family-level, the parent-led CBOs are functioning in a context of pervasive disparities in POS for African American and Hispanic individuals. According to the latest DDS data for FY 2017/2018, the total population served by the Regional Center system currently consists of 8.46% African Americans, and 39,9% Hispanics. The Regional Center system-wide disparity for African Americans is evidenced by the per-capita expenditure difference: \$17,327 for African Americans compared to 21,385 for Whites, which means that, on average, African Americans across all Regional Centers receive a little over 80% of per capita expenditures than White individuals. In 2017/2018 FY, African Americans represented 22.45% of all individuals served by the South Central Los Angeles Regional Center (SCLARC), the largest percentage of African Americans with developmental disabilities among all 21 Regional Centers in the DDS system. There are significant disparities in per capita expenditure for African Americans compared to Whites reported by SCLARC: \$20,203 vs. \$40,482, a 50% difference. This means that at SCLARC, African Americans received only one half in per-capita expenditures compared to Whites. Of note, in the 2016/2017 Fiscal Year report, SCLARC reported a similar scale of POS disparity: per-capita expenditure for all age groups was \$19,001 for African Americans, and

\$38,271 for Whites, a disparity of more that 50%. POS disparities are significantly lower at the other two RCs, FDLRC and WRC. At FDLRC, African Americans constitute 6.58% of all served, and receive \$17,961 per capita compared to \$18,646 received per capita by Whites who represent 31.77% of the client population. Similarly, at WRC, African Americans represent 21.32% and receive \$22,094 per capita compared to 27.02% of Whites who receive \$25,153 per capita.

Hispanics face even greater POS disparities than African Americans in the Regional center system. System-wide, they receive only 41% of per-capita expenditure by White individuals (\$8.940 vs.to \$21,385). At SCLARC, they represent over 68% of all individuals served, but receive \$7,152 (or less than 18%) in per-capita expenditure compared to \$40,483 for Whites who comprise 2.73% of the SCLARC client population. At FDLRC, Hispanics represent 45.24% of all individuals receiving services with \$8,821 (or 47%) in per-capita expenditure compared to Whites who represent 31.77% and receive \$18,646 per capita. At WRC, Hispanics represent 34.04% of all served and receive \$12,694 (or 50%) in per-capita expenditure compared to \$25,154 per capita received by White individuals who represent 27,02% of all served. One cannot help but wonder about the mechanisms underlying the similarities or differences in per capita expenditure for the same racial and ethnic group served by different RCs. For example, at WRC Hispanic individuals on average receive more than 50% per capita than those served by SCLARC. On the other hand, African Americans receive more per capita expenditure at SCLARC than at FDLRC, but less than at WRC.

### 3. How will your project improve the lives of individuals who have developmental disabilities and/or their families?

Based upon Dr. Solomon's key informant interviews with African American parents leading CBOs that were conducted in preparation of this proposal, these CBOs serve all children, youth and adults who need their services, independently of their racial and ethnic background, either free of charge or for a very nominal fees. In the catchment areas of the project the majority of individuals and families served by the CBOs are predominantly African Americans and Latinos. Thus our estimation of the program impact is that 125 African Americans and 125 Latinos will benefit from our program as recipients of the services of those 10 CBOs who will be working with the USC UCEDD to increase their impact. In addition, the 10 CBOs founders / leaders and potentially a number of their co-leaders will also benefit from working with us in our technical assistance and peer mentorship program.

Every month for the duration of the 1-year funding period, our program will hold a 2 hour, focused training on topics ranging from legal issues, record-keeping and tax filings for CBOs to grant writing and securing funding. We have already secured the commitment of two peer mentor organizations that each has unique expertise in the community: South Central Prevention Coalition (SCPC), a non-profit social justice and health advocacy organization with a 15-year history of peer education -based community programs in South Los Angeles; and 5 Eleven Hoops, a non-profit founded by a father of a now 4-year old with ASD who is a former NCAA Division II basketball player. The leaders from SCPC and 5 Eleven Hoops will carry out 3 training sessions per year each, based upon their expertise and the needs of the participating CBOs. We have approached two other major CBOs to

serve as peer mentors who have expressed verbal interest in serving on our project.

Once a week, we will hold 'office hours' for the participating CBOs that will be held in the evening. Either Olga Solomon or Fran Goldfarb will be present and available at the USC UCEDD's office during a 2-hour period to consult with the CBOs personnel either by phone or in person. The office hours will be also used for any CBO leader to get technical assistance or access to a computer and any specialized software that may be needed for their CBO's programming.

At the end of the year, we will hold CBO Community Impact and Outreach Symposia at the USC UCEDD where the Peer Educator CBOs and the participating CBOs will present about their programs and their experience in our project. The symposia will be a place for community outreach for the CBOs, and for dissemination of our program outcomes. Both Olga Solomon and Fran Goldfarb will present on the project activities and lessons learned. The Public Health Institute collaborator, Dan Gillette, will also present at the symposia.

### 4. How will this project assist to implement the RC recommendations and plan to promote equity and reduce disparities?

We will collaborate with the three RCs in whose catchment areas the program will be implemented to create a unified effort to promote equity and reduce disparities. We will solicit their guidance on how to best utilize existing resources and social networks that they have already established in communities of color. The proposed program has a potential to improve equity and reduce disparities in access to social recreational services for hundreds and potentially thousands of individuals with ASD and other DDs, and their families by increasing the impact of existing CBOs serving them in their communities.

In order to develop and implement technical assistance and peer education program that optimally meets the needs of these CBOs and their leaders' families and children with ASD or other DDs, this proposed project will carry out extensive needs assessment using the NCI Child Family Survey and Adult Family Survey. Because attention to individual outcomes are at the heart of NCIs measures, we will draw upon our team's expertise in person-centered interviewing and administered NICs surveys in person to document the impact of the CBOs in the community while also collecting data on the families' personal experiences in the community and with the Regional Center system. While NCI data are usually analyzed at a population level, the surveys are designed to capture the experiences and challenges of people with developmental disabilities at the individual, family, and community levels. This makes NCI survey format well suited for our program and will allow us to systematically collect and compile data on each CBO's parent and their experience with the Regional Center system, as well as with the services that their CBO is providing in the community. The data from the NCI surveys will be shared with the RCs both in the aggregate and at the individual level to optimize service delivery for the CBO families. The data will also be made available to the DDS for submission to the NCI database maintained by the Human Services Research Institute and the National Association of State Directors of Developmental Disabilities Services.

A unique feature of this proposal is a collaboration with Public Health Institute, a public non-profit organization in Oakland, California, whose mission for the last 50 years has been to lead and manage innovative programs and initiatives that transform health systems nationally and internationally by amplifying the impact and effectiveness of local community leaders (See Letter of Support).

5. How is the proposed project unique or different from a current disparity grant funded effort (e.g., strategies, activities, goals) in the proposed catchment area? If the project is similar to a current disparity grant funded effort, how will the proposed project expand on the current effort?

To our knowledge, there is a lack of projects currently funded by the Disparity Fund Program that systematically and comprehensively address the needs of CBOs working in communities of color to provide social-recreational services currently unavailable in the Regional Center system. The level of expertise and methodological rigor that the USC UCEDD has acquired over the decades of working with CBOs places us in a unique position to implement an innovating, potentially ground-breaking program.

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

For the last 10 years, Olga Solomon (Project Director) has conducted extensive ethnographic research on autism services disparities experienced by African Americans in Los Angeles County for a study 'Autism in Urban Context" that was funded by the National Institute for Mental Health (NIMH) between 2009 and 2012. In the course of that research, Dr. Solomon interviewed several African American parents who started CBOs to provide social-recreational services, in response to the 2009 Lanterman Act Amendment. Over the course of 3 years, these parents shared their experiences of starting and managing their CBOs in spite of the extreme stress and financial burden, as well as in spite of extreme time shortage that jeopardized their own, their children, and their families' well-being. However, their commitment to serve their communities was stronger than the stress, financial burden and other challenges of running their CBOs.

7. Describe how your organization will leverage and build upon strategies, collaborations, and lessons learned to continue to address the identified disparities after completion of the project.

We will leverage and build upon the strategies, collaborations and lessons learned acquired in the course of the project in the following way:

- 1) the program that we are proposing has the potential to become part of the USC UCEDD program portfolio with a training certification curriculum for mental health, occupational therapy, and other professionals;
- 2) we will approach the AUCD and the national UCEDD network leadership to implement this program at other UCEDDs;
- 3) we will secure a dedicated yearly budget that will be sustained by internal as well as external federal and state funding to continue the program after the DDS funding period is

#### over:

- 4) we will create a skilled volunteer workforce drawing upon the University of Southern California undergraduate and graduate students to provide a sustainable, well trained practical support for the CBOs who will be participating in our program;
- 5) we will continue the collaboration with the Public Health Institute and will establish yearly conferences in Southern and Northern California where CBOs will present their programs and learn about our approach to technical assistance and peer education.

Completed worksheets shall be submitted with the funding proposal. List all activities, the responsible party, and which quarter each activity will occur; include how the activity will be measured, the quarter data for each measure will be reported; and any additional information. More than one copy of each worksheet may be submitted if additional space is required or you may add rows to this table.

#### Year 1 Goal:

PRO	OJECT ACTIVITY Year 1	ΓIES	_	PROJECT ME Year		
Activity	Quarter Activity Will Occur (check all that apply)	Responsible Party and additional information	Type of Measure	What Will Be Measured?	What is the Target for This Measure?	Quarter Data Will Be Reported (check all that apply)
Complete grant agreement with the DDS; Prepare and submit quarterly reports, and final Y1 report Prepare program data base using RedCap	X3/01/20 –  6/30/2020 X07/01/20- 9/30/2020  X10/01/20 – 12/31/2020 X 01/01/21 – 3/ 31/21		□ Count □ POS Pre/post survey/assessment □ Stakeholder feedback X Materials developed □ Other: PLEASE DESCRIBE: □ Not applicable	Recruitment and retention of Peer Educators and participating CBOs, Scheduling regular monthly peer educator meetings, timeliness of all project activities  Reporting data collected to date and progress of data analysis		X 3/01/20 - 6/30/2020 X 07/01/20- 9/30/2020 X 10/01/20 - 12/31/2020 X 01/01/21 - 3/31/21

Completed worksheets shall be submitted with the funding proposal. List all activities, the responsible party, and which quarter each activity will occur; include how the activity will be measured, the quarter data for each measure will be reported; and any additional information. More than one copy of each worksheet may be submitted if additional space is required or you may add rows to this table

Submit the IRB as soon as funding decisions are announced and receive announced and receive approval before start date  Recruitment of 10 CBOs Carry out pre-program needs assessment  Recruitment of assessment of 10 CBOs carses ment seeds assessment assessment of 10 CBOs carses ment seeds assessment of 10 CBOs carses ment of 10 CBOs carses men	information. M	flore than one co	ppy of each works	heet may be submitte	d if additional space is red	quired or you may add row	s to this table.
Recruitment of 10 CBOs Carry out pre-program needs assessment  Recruitment of 10 CBOs  Carry out pre-program needs assessment  Recruitment of 10 CBOs  Carry out pre-program needs assessment  Recruitment of 10 CBOs  X 9701/20- 9/30/2020  X 07/01/20- 9/30/2020  X 07/01/20- 9/30/2020  Recruitment of 10 CBOs  X 9701/20- 9/30/2020  X 07/01/20- 9/30/2020  X 07/01/20- 9/30/2020  Recruitment of 10 CBOs  X 9701/20- 9/30/2020  X 07/01/20- 9/3	IRB as soon as funding decisions are announced and receive approval before start	6/30/2020 □ 07/01/20- 9/30/2020 □ 10/01/20 - 12/31/2020 □ 01/01/21 -		☐ POS ☐ Pre/post survey/assessment ☐ Stakeholder feedback X Materials developed ☐ Other: PLEASE DESCRIBE: ☐ Not applicable	consent forms will be submitted as part of the IRB application to Children's Hospital Los	protection compliance	6/30/2020 □ 07/01/20- 9/30/2020 □ 10/01/20 – 12/31/2020 □ 01/01/21 – 3/31/21
	of 10 CBOs  Carry out pre-program needs	X 3/01/20 – 6/30/2020 X 07/01/20-		□ POS X Pre/post	National Core Indicator Surveys to be conducted in person with each CBO parent leader; Audio-recorded for analysis	measure how well the public system assists children and adults with developmental disabilities, and their families, to exercise choice and control in their decision-making, participate in their communities, and maintain family relationships. Indicators probe how satisfied families are with services and supports they receive, and how supports have	6/30/2020 X 07/01/20-

Completed worksheets shall be submitted with the funding proposal. List all activities, the responsible party, and which quarter each activity will occur; include how the activity will be measured, the quarter data for each measure will be reported; and any additional information. More than one copy of each worksheet may be submitted if additional space is required or you may add rows to this table.

PROJ	IECT ACTIVIT	ΓIES		PROJECT MI	EASURES	
Activity	Quarter Activity Will Occur (check all that apply)	Responsible Party and additional information	Type of Measure	What Will Be Measured?	What is the Target for This Measure?	Quarter Data Will Be Reported (check all that apply)
	□ 10/01/20 − 12/31/2020 □ 01/01/21 − 3/31/21		☐ Stakeholder feedback ☐ Materials developed ☐ Other: PLEASE DESCRIBE: ☐ Not applicable			□ 10/01/20 − 12/31/2020 □ 01/01/21 − 3/31/21
Monthly CBO Peer - Education meetings: A structured presentation by Peer Educator CBOs on a specific topic, then a discussion of the topic by the CBO group	X3/01/20 – 6/30/2020 X07/01/20- 9/30/2020 X10/01/20 – 12/31/2020 X01/01/21 – 3/31/21		☐ Count ☐ POS X Pre/post survey/assessment X Stakeholder Feedback X Materials Developed FOR SYMPOSIUM ☐ Other: PLEASE DESCRIBE: ☐ Not applicable	Monthly peer education sessions' topics will be based upon the initial needs assessment and delivered by the Peer Educator CBO leaders / program partners  All trainings will be audio-recorded for content analysis and quality improvement  Pre- and post-knowledge surveys	Range of services provided by the CBOs; Individual and Family needs of the CBOs; Nomenclature of challenges and barriers to CBO everyday operations and impact	X 3/01/20 - 6/30/2020 X 07/01/20- 9/30/2020 X 10/01/20 - 12/31/2020 X 01/01/21 - 3/31/21

Completed worksheets shall be submitted with the funding proposal. List all activities, the responsible party, and which quarter each activity will occur; include how the activity will be measured, the quarter data for each measure will be reported; and any additional information. More than one copy of each worksheet may be submitted if additional space is required or you may add rows to this table.

1	e man one co	ppy or each works		quired or you may add row	s to this table.
for resource			and satisfaction		
sharing and			surveys will be		
individual			administered at every		
technical			monthly meeting		
assistance					
consultations			What also will be also		
			measured: The		
			services that the CBOs		
			are providing in the		
			community; the needs		
			for information,		
			resources and skills		
			that they need to		
СВО			increase their impact.		
			increase their impact.		
Community			CBO Community		
Outreach			CBO Community		
Symposium			Outreach Symposium		
			will be video-recorded		
			and posted on the		
			USC UCESS website		
			as a webinar		
			Post-Program National		
Post-program			Core Indicator		
NCI interviews			Surveys		
with CBO			to be conducted in		
cohort for			person with each CBO		
Year 1			parent leader		

SERVICE BUDGET (ATTACHMENT D-1) **Applicant Name and Address** Name: Children's Hospital Los Angeles Address: 4650 Sunset Boulevard MS 97, Los Angeles, CA 90027-6062 Year 1 Annual Budget Year 2 Annual Budget Annual FTE to Annual FTE to Line **Disparity Grant Annual Cost to Disparity Grant Annual Cost to PERSONNEL-Salary and Benefits Annual Salary** (Percentage) **Disparity Grant Annual Salary** (Percentage) **Disparity Grant** No. Name: Olga Solomon **Existing Position** 1 Title/Position: Project Director New Position \$112,414.00 15% \$16,862.10 2 Benefits: 32% \$16,862.10 32% \$5,395.87 Name: Fran Goldfarb 3 **Existing Position** Title/Position: Co-Investigator **New Position** \$100,587.00 10% \$10,058.70 Benefits: 21.7% \$10,058.70 \$2,182.74 22% 4 Name: TBD **Existing Position** 5 Title/Position: Project Coordinator **New Position** \$46,437.00 \$23,218.50 50% Benefits: 21.7% \$23,218.50 22% \$5,038.41 6 **Existing Position** Name: TBD 7 Title/Position: Project Analyst New Position \$61,200.00 10% \$6,120.00 Benefits: 21.7% \$6,120.00 22% \$1,328.04 8 **Existing Position** Name: Title/Position: New Position 10 Benefits: Existing Position Name: 11 Title/Position: New Position Benefits: 12 **Existing Position** Name: 13 Title/Position: New Position Benefits: 14 **Existing Position** Name: 15 Title/Position: New Position Benefits: Personnel Subtotal \$70,204.36 **OPERATING EXPENSES** 16 Dan Gillette, EdD, Public Health Institute \$10,000.00 Materials and Supplies 17 \$2,000.00 18 Mileage / Travel in state to CBO sites \$500.00 19 4 Mentoring organizations TBA \$16,000.00 Yearly CBO COMMUNITY OUTREACH Symposium \$5,000.00 21 Anna Lucas-Wright, MEd, South Central Prevention Coalition \$7,419.64 22 23 24 Operating Subtotal \$40,919.64 ADMINISTRATIVE/INDIRECT COSTS 25 15% \$16,669.00 26 27 28 29 30 Administrative/Indirect Cost Subtotal \$16,669.00 TOTAL (rounded to nearest dollar) \$127,793.00

**Disparity Funds Program** 

#### PROJECT BUDGET NARRATIVE WORKSHEET

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

**Organization Name** 

Children's Hospital Los Angeles

**Project Title** 

Technical Assistance and Peer Education Infrastructure to Increase Impact of Parent-Run CBOs Providing Social-Recreational Services

**Project Duration (start and end date)** 

**Start Date:** 3/1/2020 **End Date:** 2/28/2021 **Number of Months:** 12

Salary/Wages and Benefits

	ges and Benefits	Description of Position Duties and ETE Allegation for
Line Number	Line Item	Description of Position Duties and FTE Allocation for Title/Position AND Description of Benefits
1	Title/Position: Project Director	Duties: Recruitment and outreach to CBOs; communication with SCLARC, FDLRC, and WRC regarding recruitment, outreach and dissemination; needs assessment using National Core Indicators surveys; leading peer edication and mentoring program development, implementation, and evaluation; developing and overseeing data collection, management and analysis; preparing data for sharing with the RCs and the DDS; organizing and presenting at the end-of-year symposium; overseeing preparation and submission of quarterly and final reports .15 FTE
2	Benefits: Project Director	32 percent benefits cover payroll taxes, workers compensation, health and wellfare, personal holiday, and retirement plan
3	Title/Position: Co-Investigator	Duties: Oversight of project activities related to CBO recruitment and outreach; communication with RCs; participating in needs assessment using NCI surveys, and in peer education and mentorship program development, implementation, and evaluation; organizing and presenting at the end-of-year symposium; participating in data analysis .10FTE
4	Benefits: Co-Investigator	21.7 percent benefits cover payroll taxes, workers compensation, health and wellfare, personal holiday, and retirement plan
5	Title/Position: Project Coordinator	Duties: Coordinate project activities related to monthly peer education and mentorship training workshops; coordinating scheduling with Peer Educator CBOs; scheduling, contact with CBO participants, and attendance tracking; planning for space, materials and supplies, and computer needs for weekly office hours; overseeing data collection and management; assisting with timely submission of quarterly and final reports; planning and organization of end of year symposium .5FTE

### PROJECT BUDGET NARRATIVE WORKSHEET

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

Line Number	Line Item	Description of Position Duties and FTE Allocation for Title/Position AND Description of Benefits
6	Benefits: Project Coordinator	21.7 percent benefits cover payroll taxes, workers compensation, health and welfare, personal holiday, and
	Project Coordinator	retirement plan
	Title/Position:	Duties: Assist the Project Coordinator with the data collection
7	Project Analyst	and reporting requirements.
	1 Tojout / maryet	0.10FTE
	Benefits:	21.7 percent benefits cover payroll taxes, workers
8	Project Analyst	compensation, health and welfare, personal holidy, and
	,	retirement plan
9	Title/Position:	
10	Benefits:	
11	Title/Position:	
12	Benefits:	
13	Title/Position:	
14	Benefits:	

**Operating Expenses** 

Operating   Line		
Number	Line Item	Description
16	Consultant Costs (includes fees and travel to site)	Public Health Institute Consultant will provide speciialized expertise in incubation and acceleration of non-profit organizations including maximizing shared resources and team governance; the consultant will assist with designing peer education program, will be present by teleconferencing at the CBO mentoring, and will assist with data analysis and white paper write up
17	Materials and Supplies	Sign-in sheets, folders and organizers for CBO meetings; training materials
18	Mileage for travel to CBO sites	Olga Solomon and Fran Goldfarb will be driving to meetings with CBO partners
19	4 Mentoring organizations TBA - stipends: 4K each per year	Each CBO organization participating as a peer educator / mentor will receive a stipend to cover time on preparation and leading of mentoring workshops, and presenting at the yearly CBO Community Outreach Symposium
20	End of Year-1 CBO COMMUNITY OUTREACH Symposium	The symposium will be convened in the end of Year 1 to showcase the participating CBOs activities and their impact to approximately 250F community stakeholders; funding is requested for printed materials and for boxed lunches / refreshments
21	Consultant Costs (includes mileage and travel to site)	South Central Prevention Coalition Consultant will provide expertise in the Southern California and Los Angeles County-specific environment in which Community-Based Organizations we will be working with are operating. The consultant will facilitate outreach and recruitment of CBOs into

### PROJECT BUDGET NARRATIVE WORKSHEET

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

Line Number	Line Item	Description
		the project; will advise on the scope, topics, and content of the peer education and mentoring curriculum; and assist with planning the community symposium where she will also serve as a speaker.

#### Administrative/Indirect Costs

Administrative/indirect Costs		
Line Number	Line Item	Description
25	Indirect costs - 15%	Covers all space, accounting, human resource, information services, legal and other generic services at Children's Hospital. It also covers maintenance and cleaning of offices, security, and the use of training facilities at the hospital.15% of the Modified Total Direct Costs (MTDC).