

APPLICATION REPORT

Project Name: Parent Navigator in Pediatric Clinical Support Service Access
Applicant Organization: Children's Hospital Los Angeles
Awarded Amount: \$450,000.00
Funding Announcement Name: Mentoring Service Access and Equity Grant



PROJECT SUMMARY

The project will fund 4 full-time parent navigators who will be present in pediatric clinics in underserved communities in order to provide direct one-on-one assistance to families of children with developmental or sensory disabilities to help connect them to Regional Centers and other general services.

APPLICANT INFORMATION	APPLICANT RESPONSE	ATTACHMENTS
Applicant Eligibility		
Applicant Information		
1. Project Title What is the project title?	Applicant Response Parent Navigator in Pediatric Clinical Support Service Access	
2. Awarded Amount	Applicant Response \$450,000.00	
3. Organization Type Choose the response that best describes your organization.	Applicant Response Community Based Organization (CBO), 501(c)(3)	
4. Description of Organization/Group Provide a brief description of the organization/group. Explain what experience your organization has managing a project similar to the proposal and state the outcomes of that project. You may upload your brochure and add a website link.	Applicant Response Children's Hospital Los Angeles (CHLA), www.chla.org , is the largest pediatric hospital in Southern California and serves a large number of underserved, medically complex, and ethnically diverse patients. The USC UCEDD at CHLA, www.usucedd.org , has served the developmental disabilities (DD) community for over 50 years. The mission of the USC UCEDD is to provide leadership in strengthening family-entered, culturally-competent services and systems for individuals with, at risk for, DD. The USC UCEDD is nationally recognized for its work in early intervention and family support. We successfully implemented a DDS POS Disparities Funds program in FY 2017-2019, 2019-2020, and SAE grant in 2020-2021 to provide parent navigators in a pediatric clinic and have directly served 2,769 individuals and their families, impacting over 8300 people to facilitate regional center (RC) referrals, increase RC services, and assist with obtaining genetic services for individuals with DD.	
5. Applicant in Good Standing Is the applicant in good standing with the California Secretary of State, California Franchise Tax Board, and California Department of Tax and Fee Administration? Please upload confirmation letter(s) proof of good standing.	Applicant Response Yes	2
6. Subcontractors in Good Standing Are the applicant's subcontractors in good standing with the California Secretary of State, California Franchise Tax Board, and California Department of Tax and Fee Administration?	Applicant Response Not Applicable	
Grant Reapplication Information		
Grant Reapplications		
1. Previous Award(s) Did your organization receive DDS grant funding in fiscal year 2019-2020-21? If yes, go to question 2 to complete each column. If no, skip this category and go to category 3.	Applicant Response Yes	
2. Previous Grant Award(s)	Applicant Response	

APPLICANT TITLE	APPLICANT RESPONSE				ATTACHMENT
<p>Sine fiscal year 2019, complete a workflow DDS Service Assess and Equity grant organization was awarded funding.</p>	<p>Year Awarded</p>	<p>Project Title</p>	<p>Grant Number</p>	<p>Award Amount</p>	
	<p>2019</p>	<p>Parent Navigators in a General Pediatrics Clinic to Reduce Use of Services Disparities</p>	<p>19-C10</p>	<p>\$449,34</p>	
	<p>2020</p>	<p>Parent Navigator in Pediatrics Support Service Access</p>	<p>20-C10</p>	<p>\$490,616</p>	
<p>3. Previous Grant Outcomes</p> <p>Provide a brief grant summary of your project outcomes for fiscal year 2019-20 and/ 2020-21.</p>	<p>Applicant Response</p> <p>In fiscal year 2019-2020, we had 3 full-time parent Navigators provide direct assistance to 1,170 individual children/young adults. The parent Navigators facilitated 416 new referrals to Early Start services, and 177 referrals to Lanterman Act Services in FY 2019-20.</p> <p>In FY 2019-20, we assisted Regional Center consumers with the following Regional Center services: 176 families with respite, 67 with adaptive skills, 69 with ABA through eight Medi-Cal, and 232 with other RC services.</p> <p>The parent Navigators facilitated 416 referrals to Early Start services at the Regional Centers (349 were confirmed to be submitted). After facilitating a referral to Early Start, the Navigators would follow-up with each family via phone after a maximum of a 30-day period to determine the outcome of the referral and provide additional assistance as needed. At this time, we have verified that 222 (66% of those referred) were evaluated for services. Of those, 204 (88%) were found eligible for services.</p> <p>With the start of the COVID-19 pandemic grew a need for additional services that would help meet families' basic needs. We assisted 69 families with obtaining ABA through health plan, 10 with IHSS, 109 with SSI, 197 with IEP, 109 with transition, 106 with conservatorships, 50 with housing, 70 with food insecurity, 75 with legal services, 40 with COVID-19 testing, 175 with scheduling COVID-19 vaccination appointments, and 277 with other Generic services and services.</p> <p>In FY 2019-20, we began hosting virtual training sessions via Zoom, inviting families and self-advocates to attend. All in all, we hosted 10 training sessions and had 162 attendees join us to learn more about the Regional Center System, Individualized Education Plans (IEP), mental health during the pandemic, and transition from school-age to adulthood and services. In addition, we were able to host a training session for the CHLA Resident Physicians on the Regional Center System, where we were able to train 26 physicians on the Regional Centers and available services. Following this training session, a Regional Center Intake Assessment Guide for providers was distributed to all health care providers in the CHLA Division of General Pediatrics. This guide was updated to reflect changes to the intake process during the pandemic.</p> <p>Our report for FY 2020-2021 started 6/1/2021. Our 3 parent Navigators have thus far provided direct services to 285 individuals, assisting 284 with Regional Center Navigation, facilitating 85 new referrals to Early Start and 22 to Lanterman Act Services, and assisting 71 families with generic service navigation. In addition, our parent Navigators have conducted 15 trainings in FY 2020-2021, providing education about Regional Center services, IEP navigation, and transition to 102 parents and 24 providers including nurses and pediatric residents.</p> <p>Total number of individuals who received direct service navigation in FY 2019-20 and FY 2020-21: 1455</p>				
<p>4. Project Transition</p> <p>If awarded, how will you currently project transition into the 2021-22 proposed project? Does your proposed project expand on current activities, if so how? What activities, measures, or target groups are being added? Provide a summary of the differences and reasons why you are proposing the change.</p>	<p>Applicant Response</p> <p>If awarded, our current project will transition seamlessly into the FY 2021-22 project by all wing our current 3 outstanding Parent Navigators to continue employment and continue to serve patients from the general pediatrics clinic as well as additional clinics at CHLA and assist them with Regional Center (RC) service navigation, general service navigation, facilitate new referrals to Early Start and Lanterman Act services, and provide parent and provider trainings on topics including RC overview, IEP navigation, and transition. In addition, we are currently in the process of hiring a 4th Parent Navigator for the FY 2020-21 project that would continue through FY 2021-22. Our current project primarily served the Latino/Hispanic community based on our geographic location, however we have identified a community-based primary care clinic that serves a greater Black/African American population and plan on sending our 4th Parent Navigator to this site. We are also meeting with psychologists that serve the Native American community through Uptimerca India Involvement, Inc. discussing ways which we might be able to expand the Parent Navigator model to this population. In addition, because this becomes a clear how instrument for our Parent Navigators can be assisted with linkages to necessary services, a this model is being replicated in other settings, we would like to focus efforts FY 2021-22 to develop a Parent Navigator training curriculum, which could be shared with community connector programs throughout California. Our current Parent Navigators, with their next service experience, could help form a curriculum which will allow a total communities to implement similar programs. In addition, these efforts will further workforce development by creating mechanisms which parents of children with developmental disabilities from various underserved communities can obtain full employment, moving them toward equity.</p>				
<p>General Application Proposal Summary</p>					
<p>1. Project Type</p> <p>Choose the project type that best describes your activities from the list below:</p>	<p>Applicant Response</p> <p>Community Connection</p>				
<p>2. Duration of project</p> <p>Choose the duration for your project.</p>	<p>Applicant Response</p> <p>12 months</p>				
<p>3. Regional Centers</p>	<p>Applicant Response</p>				

APPLICANT INFORMATION	APPLICANT RESPONSE	ATTACHMENT
<p>Choose the Regional Center(s) that you prefer will serve. Check all that apply.</p>	<p>Eastern Los Angeles Regional Center, Frank D. Lanteman Regional Center, Harbor Regional Center, North Los Angeles County Regional Center, San Gabriel/ Marina Regional Center, South Central Los Angeles Regional Center, Westside Regional Center</p>	
<p>4. Counties Served List the county or counties you prefer to serve. Check all that apply.</p>	<p>Applicant Response Los Angeles County</p>	
<p>5. City of Los Angeles If you prefer proposes to serve the City of Los Angeles, list the zip codes you prefer will serve.</p>	<p>Applicant Response 90001-90003, 90007, 90008, 90011, 90016, 90018, 90037, 90043, 90044, 90047, 90058, 90059, 90061, 90062, 90201, 90220-90224, 90240-90242, 90255, 90262, 90270, 90723, 90280 90004-90006, 90010, 90012-90015, 90017, 90019-90021, 90026, 90027-90029, 90036, 90038, 90039, 90041, 90046, 90048, 90051, 90053-90055, 90057, 90060, 90068-90072, 91011, 91020, 91023, 91046, 91101-91106, 91109, 91201-91210, 91214, 91501-91506 90022, 90023, 90031-90033, 90040-90042, 90050, 90063, 90065, 90601-90609, 90631, 90638, 90640, 90660, 90670, 91030, 91031, 91107, 91108, 91770, 91754-91756, 91778, 91780, 91800-91803 90290, 91040, 91042, 91301-91307, 91310, 91316, 91320, 91321, 91324-91326, 91330, 91331, 91335, 91340, 91341-91345, 91350, 91352, 91355, 91356, 91359-91362, 91364, 91367, 91401-91413, 91423, 91601-91609, 93020-93022, 93062, 93065, 93243, 93510, 93532, 93534-93536, 93539, 93543, 93550, 93551, 93553, 93555, 93563 90254, 90266, 90274, 90277, 90501-90510, 90650, 90701, 90704, 90706, 90710, 90712-90717, 90731-90733, 90744-90747, 90801-90810, 90813-90815, 90822, 90840 91001, 91002, 91006, 91010, 91016, 91024, 91104, 91107, 91702, 91706, 91711, 91722-91724, 91731-91734, 91740, 91744-91750, 91765-91769, 91773, 91780, 91789, 91790-91793 90003, 90008, 90024, 90025, 90034, 90035, 90044, 90045, 90047, 90049, 90056, 90064, 90066, 90067, 90210-90212, 90230, 90245, 90247-90250, 90260, 90265, 90272, 90278, 90291, 90301-90305, 90401-90405</p>	
<p>6. Community Based Organizations Will you be working with other member Community Based Organizations? If so, provide the name of the organization and how you will be working together.</p>	<p>Applicant Response We are planning on working with Watts Health Care Partnership and United American Indian Investment, In addition to the duration of our project in FY2021-22 in order to send a grant Navigator to communities outside of CHLA in order to serve a greater number of Black/African American as well as Native American individuals.</p>	
<p>7. Multiple Organizations Does your project include partnership with one or more organizations either as a co-applicant or subcontractor? If "yes", please upload a letter of support from each organization, that includes an explanation of their role in the partnership.</p>	<p>Applicant Response No</p>	
<p>8. Strategies and Sustainability How will you perpetuate its work after the grant funding has concluded?</p>	<p>Applicant Response Ultimately, we would like to make the case that our organization that Grant Navigators should be included in the general budget and pay bill as they are so essential to ensuring proper service and support connection for individuals and families with children with DD, and help providers including social workers, nurse case managers, and physicians understand the service systems for individuals with DD and their families. Though we have not been able to achieve this at this time, we are moving forward to demonstrate the need and value of hiring such individuals permanently. In addition, we plan to advocate for legislation in CA that would make sure services as provided by our Grant Navigators are covered by reimbursable by medical insurance, as supporting individuals and families in these ways can improve health. Lastly, by using our project as a model to develop a curriculum to train additional Grant Navigators, we will assist in efforts to expand this model to other communities.</p>	
Target Population		
<p>1. Ethnic Groups Served Select the ethnicity group(s) the project will serve. For "Indian", "Pacific Islander", "Slavic", "Other" use comment section to list specific groups. Applicant Comment</p>	<p>Applicant Response African American, Hispanic, Filipino, Chinese, Indian (list), Japanese, Korean, Native American, Vietnamese, Pacific Islander (list), Slavic (list), Other (list) Indian List: Indian, Bangladeshi, Pakistani, Sri Lankan; Slavic List: Russian; Other List: Armenian, Middle Eastern, Kazakstani The majority that will be served are Hispanic, but our clinical services a diverse population, and we are conducting additional outreach to the African American and Native American communities</p>	
<p>2. Ethnic Group(s), Language(s) and Number of Individuals Served</p>	<p>Applicant Response</p>	

<p>For each ethnicity group, provide the number of individuals you expect intends to serve and the related language(s).</p>	<table border="1"> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>African American</td> <td>250</td> <td>English</td> </tr> <tr> <td>Native American</td> <td>100</td> <td>English</td> </tr> <tr> <td>Chinese</td> <td>10</td> <td>Mandarin, Cantonese</td> </tr> <tr> <td>Vietnamese</td> <td>10</td> <td>Vietnamese</td> </tr> <tr> <td>Indian (Indian, Bangladeshi, Pakistani)</td> <td>10</td> <td>Urdu, Bengali</td> </tr> <tr> <td>Slavic (Russian)</td> <td>10</td> <td>Russian</td> </tr> <tr> <td>Korean</td> <td>10</td> <td>Korean</td> </tr> <tr> <td>Other (Armenian, Middle Eastern, Kazakh)</td> <td>15</td> <td>Armenian, Arabic, Farsi</td> </tr> <tr> <td>Filipino</td> <td>10</td> <td>Tagalog</td> </tr> <tr> <td>Chamorro (Guam)</td> <td>5</td> <td>English</td> </tr> <tr> <td>Japanese</td> <td>10</td> <td>Japanese</td> </tr> </table>				African American	250	English	Native American	100	English	Chinese	10	Mandarin, Cantonese	Vietnamese	10	Vietnamese	Indian (Indian, Bangladeshi, Pakistani)	10	Urdu, Bengali	Slavic (Russian)	10	Russian	Korean	10	Korean	Other (Armenian, Middle Eastern, Kazakh)	15	Armenian, Arabic, Farsi	Filipino	10	Tagalog	Chamorro (Guam)	5	English	Japanese	10	Japanese	
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<p>3. Age Group(s) Served Select all Age Groups the project will serve.</p> <p>Applicant Comment</p>	<p>Applicant Response Birth up to Thirteen (Easily Start), Thirteen to 21</p>																																					
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<p>1. Project Summary and Organizational Experience Provide a clear and concise project summary that includes a defined target population, current area, and project design. Specifically describe what you project will accomplish and how it will benefit the community served. In your answer, include what experience your organization has working with the target population?</p>	<p>Applicant Response Our project design is to embed parent Navigators (Ns), who are parents themselves of individuals with developmental disabilities (DD), from the community that they serve, and experienced in service navigation, in pediatric clinics in underserved areas of Los Angeles in order to reach families who may need assistance connecting to the Regional Center (RC) and generic service system for individuals with developmental delay and/DD. This model, providing Ns in a space where families obtain primary care, has been very successful. Our organization has experience with implementing this model in FY 2017-2018 and FY 2018-2019, during which we provided direct services to 1,772 individuals, as well as in FY 2019-2020 when assisted 1,170 individuals with service navigation, and thus far in FY 2020-2021 we have provided navigation to 285 individuals. Our target population includes the patients served at CHLA, which covers all areas of LA County for primary health care. The majority of these individuals are Latinx/Hispanic, however, the clinic serves a diverse population of individuals as well. We are currently working on expanding this project to Watts Health Center, which geographically serves a greater number of African American individuals, as well as to United American Indian Investment, Inc., in order to better reach the Native American community. We plan to provide direct service navigation to 1100 Latino/Hispanic individuals, 250 Black/African American individuals, 100 Native American individuals, and 90 individuals from diverse backgrounds.</p> <p>We have found that many families are not able to connect to RCs due to difficulty filling out applications, contacting the appropriate intake staff, or having necessary documentation. The PN model benefits the community served by providing direct assistance with these tasks. In addition, when parents are hesitant to contact the RC, particularly for children who would qualify for Early Start services but parents might want to "wait and see," our PN's are able to tell families "I have been there, and this was helpful," which makes families more likely to become engaged in the process. Many families do not understand what services their children may be eligible for through Lanterman Act services, and our Ns encourage them to think about goals they have for their child with DD to live more independently and to integrate further into the community, and help them express their goals and needs to their service providers. Our Ns are also equipped to assist families with generic service navigation, helping with basic needs, as well as connection to services through schools, and supports such as SSI and IHSS. Our PN's help disseminate this knowledge and advocacy techniques to parents and medical providers through trainings. This year, we plan on creating a training curriculum that can be used to increase the workforce of parent professionals and expand this service into additional settings.</p>																																					
<p>2. Data and Community Input</p>	<p>Applicant Response</p>																																					

APPLICANT QUESTION	APPLICANT RESPONSE	ATTACHMENT
<p>Explain how the target population(s) are underserved using RC OS data (other data as supporting evidence of the disparity. In your answer, include how your organization used input from the community and/ target population to design the project?</p>	<p>Based on the attached analysis of FY 2019-2020 OS Data for the 4 primary RCs served by our project, there is a significant disparity in spending for ages 0-2 between White consumers and American Indian/Alaskan Native (AI/AN) at ELARC, and a significant disparity in spending between White consumers and AI/AN as well as Black/African American (AA) consumers at FDLRC as well as NLACRC. For ages <21, there is a significant disparity in spending between White consumers and Hispanic as well as AI/AN consumers at FDLRC and NLACRC, and a significant disparity in spending between White and AI/AN, Black/AA, and Hispanic consumers at ELARC and SCLARC. Thus, our target population of Hispanic, Black/AA, Native American, and other ethnically diverse consumers in LA is underserved in terms of services received when they are RC consumers, particularly for those aged 3-21 years. In addition, studies show that approximately 60-80% of children referred to early intervention to obtain a valuation (Moor, 2017), and we have found that families who have a mental basic skills lack regular access to a computer or phone have particular difficulty with the process. Our project was designed based on this direct experience with patients and families, and feedback from our Advisory Board, and was created to be able to provide needed assistance to families to help them navigate the initial RC referral, as well as to assist with obtaining additional RC and general services.</p>	<p>1</p>
<p>3. Uniqueness How is the proposed project unique (different from a currently funded grant (e.g., strategies, activities, and objectives) in the proposed regional center categorical area? If the project is similar to a currently funded grant listed on the Department's website, how is the proposed project different?</p>	<p>Applicant Response Our project is unique in that it places parent Navigators (Ns) in a location that is known and trusted by parents, their primary care pediatrician's office. Our Ns have the ability to connect with families at convenient times and locations, and to interact with the pediatricians and to help clearly define needs, and make referrals in real time based on developmental concerns. There are additional Community Connector/Navigator projects in our area, those that are run by RCs (SCLARC and SG RC), however, the end goal does not appear to be any in our area that are unmet by located at CBOs. There are Community Connector programs run by CBOs in Southern CA (A Bette Life Together, In.. Mixtext Indigena Community Organizing, Mentum WORK, In.. Alpha Resource Center, and the Integrated Community Collaborative), but these projects have a different focus that are further north, east, south than Metropolitan Los Angeles, which our project primarily serves. In addition, none of the currently funded Community Connector projects take place in pediatric offices, which provides a unique opportunity to allow the Ns to meet families outside the RC system, gain trust, and then be able to walk families through the RC referral and intake process and to meet additional needed services. We plan to continue to serve the Hispanic community as well as the diverse community CHLA, but in addition provide targeted outreach to the African American and Native American communities.</p>	
<p>4. Improve quit and Service Access How will you provide timely equity, access, and education to diverse individuals with intellectual and developmental disabilities and their families?</p>	<p>Applicant Response Our project will improve equity by aiding families who truly need assistance to access necessary services. For example, many of our families become overwhelmed when they are shown the online application for RCs, and state that they do not wish to move forward because the application is intimidating, they do not have access to the internet, simply that they do not have time. Our parent Navigators (Ns) are able to sit with a family and help them fill out the application and explain the importance of accessing these services. The Ns help reduce barriers by addressing basic needs that a family may need to address prior to applying to RCs, by helping families gain trust by expressing their own personal experience with the RC system for their own children, and by meeting them in a familiar location outside of the RC. They speak the language of the majority of families served, and access interpreters if any language that is needed, and they are able to identify when a family may have low literacy and provide additional assistance with reading writing. In addition, our Ns work closely with families to ensure they are accessing not only the RC services system, but special education, SSI, IHSS, and transportation services, that are necessary to help families that are heavily burdened by poverty and social inequities. Lastly, they encourage families to create a life vision for their family member with DD, and to advocate for the necessary services to fulfill this vision.</p>	
<p>5. Support of RC Plan How does this project support the RC plan to promote equity and reduce disparities in your proposed categorical area? If you are a RC, how does this project support your recommendations and plan to promote equity and reduce disparities in your categorical area? How will you collaborate with their organizations that serve individuals with intellectual and developmental disabilities and their families?</p>	<p>Applicant Response In SCLARC's Town Hall presentation FY 2019-2020 OS Data, the following challenges were identified: "Misguided information shared in the community regarding services; Reluctance to share documentation with Regional Center; Hesitant to utilize General Resources; Individual/family does not know who their SC program Manager are and do not have contact information; Self-Determination program (SD) participants hesitation with moving forward in the program; Service requests are not based on needs." Our parent Navigators (Ns) continue to work to address all of these challenges by: gaining trust with the family by providing their own positive experiences with RCs, helping to obtain necessary documentation from physicians, communicating directly with RCs to help a family understand who their SC is, discussing the SD with families, and encouraging families to identify the needs of their children, and to create a "life vision" for them to help identify appropriate services needed. In our discussions with FDLRC, we have identified that one major barrier that the intake staff face is not being able to get in touch with families. Our Ns can continue to assist when breakdowns in communication occur, and inform families that RCs are trying to get in touch with them, and/or communicate with families directly at their pediatric visits. In our discussion with ELARC, we identified that the Ns can assist in identifying families who may benefit from the educational project.</p>	
<p>6. Project Activities</p>	<p>Applicant Response</p>	

APPLICANT TITLE	APPLICANT RESPONSE	ATTACHMENT
<p>Note: Before answering this question, applicants must complete the Activities Template located in the middle tab directly above.</p> <p>Clearly and specifically state how the schedule of activities demonstrates the steps that the parent will take to achieve its stated objective and measures.</p>	<p>The following schedule of activities will allow us to achieve our objective and measures:</p> <ol style="list-style-type: none"> 1. Elizabeth's participation in the clinical study that serves the African American community: this study currently happens at part of Y 2020-2021 funding, and will likely be finalized by the beginning of Y 2021-2022 (by 8/1/22) as we are currently working on getting a PN to Watts Health Corporation. 2. Elizabeth's participation in the clinical study that serves the Native American community: this study currently happens at part of Y 2020-2021 funding, and will likely be finalized by the beginning of Y 2021-2022 (by 8/1/22) as we are currently working on getting a PN to Utmersca India involvement. <ul style="list-style-type: none"> • Parent Navigators provide one-on-one assistance to families to facilitate Early Start referrals: (6/1/22-5/31/22)* • Parent Navigators provide one-on-one assistance to families to facilitate Summer referrals: (6/1/22-5/31/22)* • Parent Navigators provide one-on-one assistance to families to obtain final R go al C t r s r v i c s based on a coach family support how to obtain such services* (6/1/22 - 5/21/22) • Parent Navigators provide one-on-one assistance to families to obtain final R go al C t r s r v i c s based on a coach family support how to obtain such services* (6/1/22 - 5/21/22) • Parent Navigators call families to follow-up on results of Early Start referrals, including the year valuation found log bl ** (7/1/22-5/31/22) • Parent Navigators call families to follow-up on results of Summer referrals, including the year valuation found log bl ** (9/1/22-5/31/22) • Parent Navigators call families to follow-up on results of assistance with R go al C t r s r v i c s** (7/1/22-5/31/22) • Parent Navigators call families to follow-up on results of assistance with the R go al C t r s r v i c s** (7/1/22-5/31/22) • Parent Navigators provide monthly parent provider workshops to help increase understanding of the R go al C t r s r v i c s , IEP navigation, Transition, Vocacy, and additional topics as (6/1/22-5/31/22) • Project staff develop Parent Navigator Training curriculum user-friendly format for dissemination at (6/1/22-5/31/22) • Parent Navigators upload consents and participant information to DDS (name, UCI and dates of participation) • *When participants start our program, ethnicity will be documented, as well as current RC services, current genetic services, current barriers accessing RC services, and knowledge and self-efficacy questions as per DDS Community Connection Standard Measures • ** When follow-up calls are made, current RC services, current genetic services, current barriers in accessing RC services, and knowledge and self-efficacy questions as per DDS Community Connection Standard Measures will be asked 	
<p>7. Project Measures</p> <p>Before answering this question, applicants must enter performance measures into the Activities Template located in the middle tab directly above.</p> <p>Are you proposing measures appropriate to track the project's behavior and activities? Explain how you proposed measures provide insight into the effectiveness of the overall design of the project and demonstrate how the impact on the community will be evaluated.</p>	<p>Applicant Response</p> <p>Our proposed measures will primarily be the DDS Community Connection Standard measures, which are comprehensive, and allow us to document changes in RC services obtained, changes in genetic services obtained, and changes in participants' knowledge and self-efficacy. In addition, by obtaining consents for DDS we will be able to evaluate changes in OS as a result of assistance by us. We will continue to clearly track number of Early Start and Lante man A t Se v i c e s referrals submitted and results of referrals, as this clearly reflects the results of day-to-day work by us. We plan on measuring the following:</p> <ul style="list-style-type: none"> Number of individuals who started as Ns Criteria for selecting Ns Hours of training and topic training for PN's Number of workshops held for parents Number of parents trained in workshops Number of workshops held for providers Number of providers trained in workshops Number of participants referred to Early Start Services (ages 0- years) Number % of participants referred to Early Start services who were assessed for eligibility Number % of participants referred to Early Start who were found eligible for services Number of participants referred to Lante man A t Se v i c e s (ages <21 years) Number % of participants referred to Lante man A t Se v i c e s who were assessed for eligibility Number % of participants referred to Lante man A t Se v i c e s who were found eligible for services Number of individuals who experience an increase in RC services after assistance from the N Number of individuals who experience an increase in general services after assistance from the Ns Number of parents reporting an increase in self-efficacy and/ knowledge after assistance from Ns Number of parents reporting barriers before and after assistance by Ns <p>Parent Navigator Training Curriculum developed</p> <p>Breakdown of individuals served by ethnicity: Hispanic, African American, Native American, Chinese, Vietnamese, Indian, Russian, Korean, American, Middle Eastern, Filipino, Pacific Islander, Japanese</p>	
<p>8. Budget Template and Narrative</p>	<p>Applicant Response</p>	

APPLICANT TITN	APPLICANT RESPONSE	ATTACHMENT
<p>Note: Before answering this question, applicants must complete the Budget Template located in the tab directly above.</p> <p>In your Budget Template, explain how the proposed budget is consistent with the stated purpose, objective and activities, and clearly and concisely explain how the proposed expenditures support the overall project design and proposed outcomes.</p> <ul style="list-style-type: none"> Budget Template example is located at Attachment C. Budget Details and Restrictions are available here. 	<p>The majority of your project's budget is for personnel. The project director, Dr. Christine Mirzaian, will be responsible for the overall management of the project, including hiring and managing parent navigators, completing reports, and accomplishing performance measures, and 20% of her full-time budget will be dedicated to this project. Dr. Sharon Hudson will contribute 10% of her full-time budget assisting with evaluation of the project, including completing IRB applications when needed, and working to disseminate outcomes for the project to the community. Dr. Olga Solomon will contribute 10% of her full-time budget to this project as a content expert, as she has extensive experience in community-participatory research, workforce development, and community education, she will lead efforts to create a parent navigator training curriculum that can be disseminated broadly. Overall, your budget is slightly higher this year due to minor salary increases for all personnel accounting for staff-hiring increases. We would like to fund 4 full-time parent navigators to provide non-emergency assistance to families, as well as to provide workshops and inform parent navigator training curriculum. We equate 3 navigators to handle the cases referred from CHLA, which have a case load of 1200 per year, and need a 4th individual to be able to expand our current additional community-based lines that target the African American and Native American communities, with the goal of providing direct services to 1540 individuals overall. We equate a Project Analyst to help us with purchases, invoices, and financial reporting. We have requested a small amount for office supplies (\$1000), as parent navigators often need to assist families with organizing and mailing applications, and a small amount (\$516.80) for translation of material. We would like to continue to provide stipends to our peer and parent advisory board members for meetings and their contributions to furthering your project's goals and objectives. Lastly, CHLA will contribute 15% indirect costs for facilities and management.</p>	
<p>9. Budget Costs</p> <p>Explain how the proposed budget is a reasonable association with the project activities and objective and confirm that the budget does not include non-allowable costs for other services.</p>	<p>Applicant Response</p> <p>Budget costs are associated with project activities as follows. The project director, Dr. Christine Mirzaian, will have 20% of her time funded to work in this DDS project, and will oversee all project activities, ensure objectives are met, and will ensure reports are filed in a timely manner. The Project Evaluator, Dr. Sharon Hudson, will have 10% of her time funded to work on this DDS project, and will assist with necessary IRB applications and reports and assist with disseminating project results such as through academic publications. Dr. Olga Solomon will have 10% of her time funded to work on this DDS project and use her expertise in community education, information dissemination, and community participation to help create a parent navigator training curriculum to be disseminated widely. We have a project director who will have 100% of his/her time to work on this DDS grant to ensure daily parent navigator activities run smoothly, and to assist with reports and training curriculum development. The Project Analyst will have 28% of her time funded and will assist with invoices and financial reports. The bulk of your budget will be funded to 4 parent navigators to each work full-time to provide 1:1 assistance to families, and to train parents and providers. We have budgeted a small amount for office supplies and translation of documents, and a stipend for our peer advisory committee. We have budgeted 15% indirect costs for facilities and administrative costs. We have not included any non-allowable costs in our budget for other services.</p>	
<p>Proposal Certification</p>		
<p>Certification</p>		
<p>1. Confirm Proposal Discussion with RC(s)</p> <p>CBOs are required to discuss their proposal with each RC(s) the CBO is intending to serve. If you are a CBO, have you discussed your proposal with each RC you are intending to serve?</p>	<p>Applicant Response</p> <p>Yes</p>	
<p>2. RC Contact</p> <p>CBOs are required to submit their application on only to the Department and to each RC(s) that the CBO is intending to serve. If you are a CBO, state the name(s) of the contact person(s) at each RC you have discussed your proposal with.</p>	<p>Applicant Response</p> <p>SCLARC: Crystal Smith, Kiara Lopez, and Dexter Henderson, discussed via email (see attached letter of support)</p> <p>FDLRC: Rose Chacana, discussed via email (see attached letter of support)</p> <p>ELARC: Carmen Luna and Monserrat Alacios, discussed via Zoom meeting, expressed support</p> <p>NLACRC: emailed Ruth Janka, Mercedes Hernandez, discussed over email, expressed support</p> <p>SG RC: Anthony Hill, discussed over email, discussed via Zoom meeting with staff, expressed support</p> <p>Harbor RC: emailed Patrick Ruppe, Antonette Perez, Nancy Spiegel, Erika Segovia</p> <p>Westside RC: emailed Mary Lou Weese-Stusser, Sandy Rivera</p>	2
<p>3. Applicant Certification</p>	<p>Applicant Response</p>	

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<p>By submitting this application, the Applicant is certifying the truth and accuracy of the proposal. The applicant also certifies that if you have subcontracting organizations, each participating organization has reviewed your project and agrees to their assigned activities, measures, and the budget.</p>	<p>Yes</p>	
<p>Applicant Comment</p>		