# **Application Report**



Applicant Organization: Board of Trustees of the Leland Stanford Junior University

**Project Name:** A.F.E.C.T. Autism Family Empowerment Coaching and Training Project

**Application ID:** App-22-629

Funding Announcement: FY 22-23 Service Access and Equity Grant

Awarded Amount: \$750,000

**Project Summary:** This person- and family-centered project will empower families of children newly diagnosed with autism to understand the child's condition, implement adult-child interactions effective for increasing learning and communication, and navigate the complex service system to find appropriate therapeutic services. Stanford Medicine Children's Health will hire 2 bilingual and bi-cultural Autism Family Empowerment Coaches to provide direct one-on-one training and assistance to families within the critical first 3-6 months after autism diagnosis. With the aid of the Coaches, activated and prepared families will connect to their Regional Center, Family Resource Center, other critical community-based resources, and any additional medical care. Semi-annual workshops will support coordination between the medical teams and the community-based service sector, especially the Regional Center and Family Resource Center staff. A rigorous evaluation will assess process and outcome measures at the individual and systemic levels.

Authorized Certifying Official: Ronald Sol rsol@stanford.edu -

Project Director/Manager: Heidi Feldman hfeldman@stanford.edu

Project Manager/Coordinator: Ingrid Lin ingridyl@stanford.edu -

Compliance/Fiscal Officer: Naseem Salehi npsalehi@stanford.edu 9257897339

Section Name: Applicant Eligibility

**Sub Section Name:** Applicant Information

### 1. Applicant Question: Project Title

What is the Project Title?

### **Applicant Response:**

A.F.E.C.T. Autism Family Empowerment Coaching and Training Project

#### 2. Applicant Question: Awarded Amount

What is the total amount awarded for the project?

# **Applicant Response:**

\$750,000

### 3. Applicant Question: Organization Type

Choose the response that best describes your organization.

#### **Applicant Response:**

Community Based Organization (CBO), 501(c)(3)

#### 4. Applicant Question: Description of Organization/Group

Provide a brief description of the organization or 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 or add a website

#### **Applicant Response:**

### Developmental-Behavioral Pediatrics (DBP) Service at Stanford

is a nationally recognized and experienced interdisciplinary team of pediatricians, nurses, and psychologists, with access to social workers, occupational therapists, and speech-language pathologists within SMCH. We provide diagnostic and therapeutic services for children 0 to 13 years old with developmental and/or behavioral concerns. At the first visit, 48.3% of families thought the child might have ASD, entrusting us to make an accurate diagnosis and to guide them to an appropriate plan. The addition of the Coaches who are bilingual/bi-cultural or from marginalized

This group has extensive experience managing federal research and training grants, an ACES Aware grant from California, and contracts from First 5 San Mateo. A brochure is attached. The website is dbpeds.stanford.edu.

communities will expand our capacity to serve children and families at a critical juncture in their journey.

#### 5. Applicant Question: 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) or proof of good standing.

### **Applicant Response:**

Yes

#### **Attachment:**

Stanford Entity Status Letter.pdf - PDF FILE

# 6. Applicant Question: 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:**

Yes

Section Name: Grant Reapplication Information

**Sub Section Name:** Grant Reapplications Only

#### 1. Applicant Question: Previous Award(s)

Did your organization receive DDS grant funding in fiscal year 2020-21 or 2021-22? If yes, go to question 2 to complete each column. If no, skip this category and go to category 3.

No

### 2. Applicant Question: Previous Grant Award(s)

Since fiscal year 2020, complete a row for each DDS Service Access and Equity grant your organization was awarded funding.

# **Applicant Response:**

### 3. Applicant Question: Previous Grant Outcomes

Provide a brief grant summary of your project outcomes for fiscal year 2020-21 and/or 2021-22.

### **Applicant Response:**

Not Applicable

### **Applicant Comment:**

Not Applicable

# 4. Applicant Question: Project Transition

If awarded, how will your current project(s) transition into the 2022-23 proposed project? Does your proposed project expand or continue your current project, 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.

### **Applicant Response:**

Not Applicable

### **Applicant Comment:**

Not Applicable

**Section Name:** General Application

**Sub Section Name: Proposal Summary** 

### 1. Applicant Question: Project Type

Choose the project type that best describes your activities from the list below:

### **Applicant Response:**

**Education and Training** 

#### **Applicant Comment:**

This person- and family-centered project will empower families of children newly diagnosed with autism to understand the child's condition, implement adult-child interactions effective for increasing learning and communication, and navigate the complex service system to find appropriate therapeutic services. Stanford Medicine Children's Health will hire 2 bilingual and bi-cultural Autism Family Empowerment Coaches to provide direct one-on-one training and assistance to families within the critical first 3-6 months after autism diagnosis. With the aid of the Coaches, activated and prepared families will connect to their Regional Center, Family Resource Center, other critical community-based resources, and any additional medical care. Semi-annual workshops will support coordination between the medical teams and the community-based service sector, especially the Regional Center and Family Resource Center staff. A rigorous evaluation will assess process and outcome measures at the individual and systemic levels.

# 2. Applicant Question: Duration of project

Choose the duration of your project.

### **Applicant Response:**

24 months

### 3. Applicant Question: Regional Centers

Choose the Regional Center(s) that your project will serve. Check all that apply. If you are proposing a statewide project, select the All Regional Centers/Statewide option.

### **Applicant Response:**

- Golden Gate Regional Center
- Regional Center of the East Bay
- San Andreas Regional Center

### 4. Applicant Question: Counties Served

List the county or counties your project proposes to serve. Check all that apply. If you are proposing a statewide project, the select All Counties / Statewide option.

- Alameda County
- Contra Costa County
- Marin County
- Monterey County
- San Benito County
- San Francisco County
- San Mateo County
- Santa Clara County
- Santa Cruz County

### 5. Applicant Question: Community Based Organizations

Will you be working with one or more Community Based Organizations? If so, provide the name of the organization and how you will be working together.

#### **Applicant Response:**

Our plan is to work with FRCs for GGRC, RCEB, and SARC to host workshops. We have met with AbilityPath's FRC who is in support of our project and will be collaborating with us to host workshops for their family navigators and pediatricians serving marginalized communities regarding training resources available for families with children newly diagnosed with autism, including culturally and linguistically competent parent training program in ABA techniques.

### 6. Applicant Question: 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.

### **Applicant Response:**

No

### 7. Applicant Question: Strategies and Sustainability

How will your project continue its work after the grant funding has concluded?

We will sustain progress for the target population by making any materials we create publicly available and by popularizing the use of free online ABA training program. ABA training program in Spanish developed using funds from this grant will remain freely available after the grant period, empowering future families from marginalized communities to train at their own pace at home.

We anticipate the Autism Family Empowerment Coach will enable our clinicians to evaluate more children from our 3-6 month waitlist by reducing multiple follow-up appointments for families unable to access services. If this assumption proves correct, we will petition Stanford Medicine Children's Health to financially support the Coaches after the project ends.

We know early intervention reduces treatment costs over time. We plan to demonstrate that coaching and navigation services are cost-effective for insurance companies, leading to their reimbursement of care coordination and coaching services.

**Sub Section Name:** Target Population

### 1. Applicant Question: Ethnicity Groups Served

Select the ethnicity group(s) the project will serve. For "Indian", "Pacific Islander", "Slavic" or "Other" use comment section to list specific groups.

### **Applicant Response:**

- African American
- Hispanic
- Chinese
- Filipino
- Vietnamese
- Other (list)
- Indian (list)
- Japanese
- Korean
- Native American
- Slavic (list)
- Pacific Islander (list)

### **Applicant Comment:**

Indian: Indian, Bangladeshi, Pakistani. Pacific Islander: Guam. Slavic: Russian. Other: Middle Eastern. The majority of children and families served will be Hispanic and Black/African-American, but our project will also serve families who are on Medi-Cal and therefore include other ethnicities from marginalized communities.

# 2. Applicant Question: Ethnicity Group(s), Language(s) and Number of Individuals Served

For each ethnicity group, provide the number of individuals your project intends to serve and the related language(s).

### **Applicant Response:**

Ethnicity Group(s)	Individuals Served	Language(s)
Hispanic	350	Spanish
Black/African-American	90	English
Chinese	80	Mandarin, Cantonese
Filipino	60	Tagalog
Vietnamese	50	Vietnamese
Indian (Indian, Bangladeshi, Pakistani)	50	Urdu, Bengali
Korean	20	Korean
Japanese	10	Japanese
Pacific Islander (Guam)	3	English
Slavic (Russian)	6	Russian
Native American	3	English
Other (Middle Eastern)	30	Arabic, Farsi

### 3. Applicant Question: Age Group(s) Served

Select all Age Groups the project will serve.

### **Applicant Response:**

• Birth up to Three (Early Start)

• Three to Five

**Section Name:** Project Application

**Sub Section Name:** Project Application

1. Applicant Question: Project Summary and Organizational Experience
Provide a clear and concise project summary that includes a defined target population, catchment area, and project design. Specifically describe what your 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 and how your organization will work with the local RC(s).
Applicant Response:

Rationale: Families of children newly diagnosed with autism often leave the clinic emotional and overwhelmed, with a long list of steps to get their child connected to therapeutic services. Public feedback from FY 20-21 GGRC POS Data Public Meeting showed that, without assistance, many families are hesitant to engage in services, based on a history of oppression and misrepresentation or cultural factors causing denial, shame, and guilt. More than half of families, especially from marginalized, underserved communities, cannot access services within the first 3 months of autism diagnosis; only 38% completed an appointment with State's DDS agency and only 18% completed an appointment for ABA services (Roth 2016).

**Project Design:** We will create the role of **Autism Family Empowerment Coach** to provide coaching and navigation for families during the first critical 3-6 months after autism diagnosis. Coaches will be bilingual/bi-cultural or from marginalized communities and will provide 1:1 coaching and navigation (Figure).

- Coaching to
  - o Assure family understands diagnosis
  - Assist family in finding accurate, current information
  - o Guide family to skills-training in ABA techniques that can be used at home
  - o Empower family to evaluate child's intervention plan holistically
  - Provide emotional support to reduce stress
- Navigation to
  - Connect to RC and FRC
  - o Coordinate communication across sectors and agencies/organizations
  - Help family access ABA and generic services

### We anticipate many accomplishments. Families will:

- Understand the diagnosis of autism and its implications
- Be empowered to implement ABA skills even before services begin
- Connect with RC, prepared for the first IFSP/IPP
- Access and begin ABA services
- Access LEAs, health plans, and FRCs, as appropriate

**Additional Benefits:** We will host 2 annual workshops, collaborations between project and RC and FRC staff to share updates about autism and reduce barriers to service.

Target population: Families of children birth to 5 years diagnosed with Autism

- identified as **Hispanic/Latino** or **Black/African-American** or
- have Medi-Cal Insurance

Catchment area: Counties served by GGRC, RCEB, and SARC.

### Our Organization: Developmental-Behavioral Pediatrics Service at Stanford

consists of a

nationally recognized and experienced interdisciplinary team that serves an ethnically diverse population and provides diagnostic and therapeutic services for children with autism. Around 42% of our families served receive Medi-Cal. In the past fiscal year, we served about 2,500 children birth to 5 years,  $\sim 30\%$  Hispanic/Latino and 5% Black/African-American families.

#### **DDS** priority areas of focus addressed by this project:

- Improving access to Early Start services, resources, and education for diverse and marginalized communities
- Developing culturally and linguistically competent resources and educational opportunities for new parents

#### 2. Applicant Question: Data and Community Input

Explain why you have selected your priority population(s) using RC POS data and other data as supporting evidence of the disparity or inequity. Include how your organization used input from the community, target population, and RC to design the proposal.

RC POS data shows inequities in expenditure for underserved ethnicities. We will serve Hispanic and Black/African-American families and families with Medi-Cal to support additional marginalized communities.

In RCEB FY 2020-2021 POS Annual Report, for ages 3-21, POS expenditures for **Hispanic** children were 58% of White children. Although for birth-2 years, POS expenditures for Hispanic children were 94% of White children, we know equity goes beyond equality and would expect Hispanic families to utilize services more than White families due to increased needs, such as translation and transportation services.

In SARC FY 2020-2021 POS Annual Report, for ages 3-21, POS expenditures for Hispanic children were 61% of White children. For birth through 2 years, POS expenditures for **Black/African-American** children were 61% of White children.

Public feedback from FY 20-21 GGRC POS Data Public Meeting showed:

- Lack of knowledge = lack of utilization services
- Big barrier is understanding what services are

By coaching families service navigation, our project will increase POS utilization by empowering families with information/resources to attend their first IFSP/IPP ready to discuss service gaps.

In a Kaiser news article, wait times for ABA in CA range from 3-12 months (Miller 2022). Many families then give up finding ABA. Our project will provide ABA parent training during this gap and show families benefits of ABA, leading to greater buy-in and service utilization.

### 3. Applicant Question: Uniqueness

How is the proposed project unique from a currently funded grant (e.g., strategies, activities, and goals) in the proposed RC catchment area? If the project is similar to a currently funded grant listed on the Department's website, how is the proposed project different?

Although there are current grant funded efforts to provide information and connect families to RCs, our project is unique in the following ways:

- We are focused on the critical **first 3-6 months after autism diagnosis**, before families become completely frustrated and overwhelmed, and prepare families for their first IFSP/IPP meeting to increase POS utilization. We will provide warm hand-offs to RCs and FRC and existing community Family Navigators for ongoing support.
- Our project goes beyond service navigation to coaching. Our coaching includes training on how families can implement ABA
  techniques. This distinctive model means families can utilize ABA techniques to work with their child as they wait for linkage to RCs
  and other services, including ABA.
- We will **leverage and utilize an existing free online parent coaching program** in English based on an evidence-based autism behavioral treatment program.
- We will use funds from this grant to **translate the program into Spanish** to develop culturally and linguistically competent resources. This translation will be publicly accessible online for free, empowering Spanish-speaking families in rural areas or on extensive waitlists for ABA to be trained in ABA techniques.
- The Autism Family Empowerment Coach will be trained and supervised by experts from Stanford Medicine Children's Health with decades of experience in the field of autism and in-depth understanding of complexities of systems of support between RCs, health insurance, and LEAs.

### 4. Applicant Question: Improve Equity and Service Access

How will your project measurably improve equity, access, and reduce barriers to services for individuals with intellectual and developmental disabilities and their families?

#### **Applicant Response:**

From POS data, family surveys & community input, we know families of our target population are impacted by lack of support & information. In a study of families referred to EI, only 25% of Latino & 43% of African-American families & 44% of families with income <\$33,000/year were evaluated by EI vs. 75% of Caucasian families(Jimenez 2012). Families give up services due to lack of information, long waitlists, & difficulty integrating services into their work schedule & life demands. In a survey of Latina mothers of children with ASD in California, >90% wanted information on "How to handle my child"s behavior" & "How to teach my child". Top barriers were: difficulty understanding special education system (86%); understanding medical and social service systems (84%); and complicated paperwork (79%)(Iland 2012).

Our project will address all of above barriers & increase POS utilization by:

- Increasing access to Early Start/Lanterman services
  - Assist with complicated paperwork
  - Prepare families for IFSP/IPP process
- Reducing disparities in information and parenting skills
  - · Guide skills-training in ABA techniques to "teach child" & "handle behavior"
  - Empower families to evaluate child's intervention plan holistically & integrate services that meet their needs
- Improving equity
  - Assure understanding of autism
  - Develop culturally, linguistically competent resources
  - o Provide information on special education, medical, social service systems
  - Provide emotional support to reduce stress & empower active advocacy

#### 5. Applicant Question: Support of RC Plan

Does the project support the RC plan to promote equity and reduce disparities in their catchment? If you are a RC, how does this project support your recommendations and plan to promote equity and reduce your identified disparities? How

will your project collaborate with other organizations to promote community inclusion?

### **Applicant Response:**

In GGRC annual report, public feedback indicated that many families are hesitant to engage in services, based on history of oppression & misrepresentation or cultural factors causing denial, shame, & guilt. Our strategy to promote equity is to hire 2 bilingual/bi-cultural Autism Family Empowerment Coach from local communities to earn family's trust & confidence. Our workshops will directly address & reduce root causes of RC hesitancy.

GGRC is planning for SWs carrying low/no POS caseload to serve as RC service educators for newly eligible individuals. Public feedback indicated need for "Regular meetings regarding supports for families & individuals to learn how to navigate & obtain support." Our project will complement GGRC's plan. The Coach will connect families to GGRC & provide education on first IPP/IFSP, ensuring warm hand-off to GGRC SWs.

In SARC annual report, public feedback included:

- Almost 30% of autism cases aren't getting services
- Need for good initial orientation for new families to help inform which services to access
- People give up accessing services because waitlists are too long

Our project will directly address all 3 issues by helping families access ABA & other services & providing information on services through RCs, schools & health insurance. Parent education will guide families to skills-training program in ABA techniques to mitigate lack of action during long wait times.

These strategies will be equally applicable to disparities shown in RCEB annual report.

### 6. Applicant Question: Project Activities and Measures

Note: Before answering this question, applicants must complete the Activities Template located in the middle tab directly above.

The schedule of activities clearly and specifically demonstrates the steps that the project will take to achieve its stated objective and measures. Do the proposed measures appropriately track the project objective and activities, provide insight into the effectiveness of project, and demonstrate impact on the target population?

### **Applicant Response:**

Stanford Medicine Children's Health has extensive experience in research & program evaluation & will have access to Quantitative Sciences Unit, a group of statisticians, public health specialists who assist in data analysis & statistics. We will conduct **rigorous evaluation** of the project with process & outcome measures below and will include DDS Community Connector standard set of impact measures to assess engagement with RCs & generic resources & impact on barriers & participant stress, knowledge & self-efficacy. Data collected will include breakdown of individuals served by ethnicity & language.

Objective: Increase knowledge & access to services & reduce stress among parents of children newly diagnosed with autism identified as Hispanic/Latino, Black/African-American, or receive Medi-Cal.

#### Activities:

- 1. Recruit/hire 2 Autism Family Empowerment Coach
- 2. Develop culturally, linguistically appropriate training materials for ABA techniques in Spanish
- 3. Conduct 1:1 training & technical assistance with families within first 3-6 months of autism diagnosis on use of online parent coaching program on ABA techniques
- 4. Conduct 1:1 guidance to assist participants in gaining & maximizing services through their RC
- 5. Conduct 1:1 guidance to assist participants in gaining & maximizing generic services or external community services
- 6. Conduct Pre/Post Survey for families who participate in 1:1 coaching & training sessions
- 7. Conduct workshops in catchment area of 3 Regional Centers

- 8. Analyze pre/post workshop data
- 9. Analyze process & outcome measures

#### Measures:

#### **NUMBER**

- Total number of individuals impacted
- Number of children served
- Number of one-one-one sessions conducted by Autism Family Empowerment Coach
- Number of families who started ABA training curriculum
- Number of families who completed >50% of ABA training curriculum
- Number of children connected to RC for Early Start services
- Number of children connected to RC for Lanterman services
- Number of referrals assessed for eligibility by RC for Early Start
- Number of children with IFSPs
- Number of days between autism diagnosis to IFSP meeting
- Number of referrals assessed for eligibility by RC for Lanterman services
- Number of children with IPPs
- Number of days between autism diagnosis to IPP meeting
- Number of case coordination with insurance plans
- Number of referrals to LEA
- Number of workshops with FRCs & community partners
- Number of workshops with RC staff and vendors
- Number of participants in workshops

#### MILESTONES

• Date of completion of ABA training curriculum translation

#### PERCENTAGE

- Percentage of families with POS services in initial IFSP/IPP
- Percentage of families reporting high satisfaction with RC
- Percentage of families who increased knowledge after ABA training curriculum
- Percentage of people who increased knowledge after workshop

### PERCENTAGE INCREASE/DECREASE

- Percentage increase in parental sense of self-efficacy
- Percentage decrease in parental stress

#### **NARRATIVE**

• Qualitative comments & feedback from families & participants

7. Applicant Question: Budget Template and Narrative

Note: Before answering this question, applicants must complete the Budget Template located in the tab

# directly above.

The project budget is consistent with the stated project objective and activities, and clearly and concisely explains how the proposed expenditures support the overall project design and outcomes. The project budget costs are clearly associated with the activities and does not include non-allowable costs or costs funded by other sources.

- Budget Template example is located at Attachment C.
- Budget Details and Restrictions are available here.

The project budget is consistent with the stated project objective and activities. Our project's objective is to increase knowledge and access to services and reduce stress among parents of children newly diagnosed with autism identified as Hispanic/Latino, Black/African-American, or receive Medi-Cal.

To accomplish this objective, we will hire 2 Autism Family Empowerment Coaches. We anticipate hiring a bilingual/bi-cultural Spanish speaker and an experienced BA or MA/MS prepared Coach from local marginalized communities. The role of the Coaches is to provide the Coaching and Navigation from the program design. The Coaches will provide the following activities:

- Conduct 1:1 training and technical assistance with families within first 3-6 months of autism diagnosis on the use of online parent coaching program on ABA techniques
- Conduct 1:1 guidance to assist participants in gaining and maximizing services through their RC
- Conduct 1:1 guidance to assist participants in gaining and maximizing generic services or external community services
- Conduct Pre/Post Survey for families who participate in the one-on-one coaching and training sessions

Dr. Heidi Feldman is the Ballinger-Swindells Professor and Division Chief of Developmental and Behavioral Pediatrics with decades of experience in autism treatment and expertise in data analysis. She is responsible for the overall administration and management of the project and will oversee data analysis, data reporting, and dissemination of concepts.

Dr. Ingrid Lin is the former GGRC Director, Clinical Services until 2022. Currently, she is a Developmental-Behavioral Pediatrics Fellow. She will work closely with Dr. Feldman to:

- Develop training and orientation curriculum for the Coaches
- Provide clinical consultation for the Coaches
- Work closely with the Coaches to identify potential participants, implement program activities, and collect and analyze process and outcome data
- Collaborate on preparation and presentation of data
- Plan and host 2 workshops per year for RC, FRC, and medical clinicians referring children to this program
- Oversee the development of culturally and linguistically appropriate training materials for ABA techniques in Spanish and disseminate the resource

LPCH Supervising Psychologist will be responsible for training and supervising Coaches. We will hire PhD/PsyD with experience in the field of autism and in-depth understanding of complexities of systems of support between RCs, health insurance, and LEAs.

With the Coaching and Navigation provided by the Coaches, under the supervision and training by experienced clinicians, families will:

- Understand the diagnosis of autism and its implications
- Be empowered to implement ABA skills even before services begin
- Connect with RC, prepared for the first IFSP/IPP
- Access and begin ABA services
- Access LEAs, health plans, and FRCs, as appropriate

Section Name: Proposal Certification

Sub Section Name: Certification

### 1. Applicant Question: Confirm Proposal Discussion with RC(s)

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?

Yes

### 2. Applicant Question: RC Contact

CBOs are required to submit their application concurrently to the Department and to each RC(s) catchment 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 emailed your proposal application. The RC contact list is available here at Attachment F.

#### **Applicant Response:**

#### **Golden Gate Regional Center**

Eric Zigman

Arianna Cruz-Sellu

# **Regional Center of the East Bay**

Lisa Kleinbub

Jairo Guiza

#### **San Andreas Regional Center**

Javier Zaldivar

Minerva Valdez

#### 3. Applicant Question: Code of Conduct

#### **Grantee Code of Conduct**

The Department is committed to supporting services and programs with integrity that foster collaboration and professionalism. Grantees are expected to conduct project activities in a professional and respectful manner that include:

- **Valuing Diversity and Inclusion**. Grantees should embrace diversity that includes but is not limited to: ability, race, language, national origin, citizenship, age, gender identity or expression, sexual orientation, and religion.
- Conducting Activities with Personal and Professional Integrity. All activities with individuals, families, community organizations, regional centers, and state, local and federal agencies should be conducted with professionalism, dignity, respect, and fairness. Grantees should be open to listening to different points of view and fostering productive communication.
- **Providing a Positive Work Environment**: All projects should foster a positive and respectful work environment with their colleagues and other grantees.

• I acknowledge that I have reviewed the Code of Conduct.

# 4. Applicant Question: Applicant Certification

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.

# **Applicant Response:**

Yes