

The following PowerPoint document was shown as a summary for RFA# BEN-17-056 Employment for TANF Participants on April 21, 2017 during the pre-application conference. This PowerPoint was for informational purposes only and did not cover all requirements of the RFA. The PowerPoint includes outdated information due to updated information that has been changed with the issuance of Addendum 1, posted on April 25, 2017 to [www.eva.virginia.gov](http://www.eva.virginia.gov) . If there are any further changes to the RFA they will be addressed in future addendums.

**Applicants must review the Request for Application and any Addendums as these are the official documents posted at [www.eva.virginia.gov](http://www.eva.virginia.gov) .**





## EMPLOYMENT FOR TANF PARTICIPANTS

### Request for Applications (RFA): Guidance and Requirements

SUB-GRANT NUMBER BEN-17-056

## AGENDA

- ▶ Welcome and Introductions
- ▶ Purpose
- ▶ Background
- ▶ Statement of Needs
- ▶ Preparation and Submission Requirements
- ▶ Evaluation and Sub-award Criteria
- ▶ Reporting Requirements and Delivery
- ▶ General and Special Terms and Conditions
- ▶ Method of Payment
- ▶ Appendices
- ▶ Questions
- ▶ Indirect Costs

## PURPOSE

- ▶ Solicit Applications for Proven Service Approaches and Strategies that Promote Employment Success of Current and Former TANF Clients, Including Those with Multiple Barriers
- ▶ Provide Resources to Expand and Enhance existing Service Delivery Efforts to Address More Fully the Needs of This Population Prior to Their Entry into Work and During Their Employment

## PURPOSE

- ▶ **Available Funding**
  - \$7,500,000 (\$2,000,000 specifically for ESOs)
  - \$400,000 Limit Per Sub-award
- ▶ **Contract Period of Performance**
  - July 1, 2017 - June 30, 2018
  - At present, limited to one year, unless the General Assembly reauthorizes it for SFY 2019-20.

## PURPOSE

### Eligible Applicants

- Local Departments of Social Services  
(Limitations and Restrictions Apply)
- Incorporated Nonprofit
- For Profit Organizations
- State Agencies
- Local Government Entities in Virginia
- Educational Institutions
- Faith-Based Organizations
- Employment Service Organizations

## BACKGROUND

### TANF Population

#### ▶ Characteristics of TANF Population

- Diverse Within and Across Localities
- Individuals With Significant Issues Often Need Stabilization Services Before Work Entry and After Employment

## BACKGROUND

#### ▶ Characteristics of TANF Population

- Personal Issues May Include –
  - Learning Disabilities
  - Substance Abuse
  - Mental Illness
  - Mental Retardation
  - Low Education Levels
  - Attention Deficit and Hyperactivity Disorder
  - Medical (Physical) Problems

## BACKGROUND

#### ▶ Characteristics of TANF Population

- Family or Situational Issues that Include
  - Social Issues
  - Domestic Violence
  - Family Issues
  - Limited English Proficiency
  - Lack of Transportation

## BACKGROUND

- ▶ Characteristics of TANF Population (ADA Guidance)
  - Americans With Disabilities Act of 1990 (ADA) Guidance
    - Guidance from HHS, Office for Civil Rights, Clarifies Responsibility of TANF Programs to Comport with Title II of ADA of 1990
    - TANF Recipients with 'Hidden' Disabilities (Including Those with Temporary Medical Exemptions or Partial Disabilities) Have Often not Been Able to Secure and Retain Employment
    - Need Appropriate Screening, Assessment and Diagnostic Work, and Services
    - Expansion of These Services Across the State will Help More TANF Adults with Disabilities Obtain and Retain Employment

## BACKGROUND

### ▶ Employment and Retention Strategies

- Individuals Who Face Special Issues and Need Extra Preparation and Support Before Entering the Workforce
- Those Who Find Jobs, but Have Difficulty Keeping Jobs
- Those Who can Find Only Entry Level, Low Wage or Part-time Employment

## BACKGROUND

### ▶ Employment and Retention Strategies

- Those With Poor Work Histories May Need Assistance Transitioning to a New Position to Help Build a Better Employment Record and Demonstrate Qualities as Workers
- Better Jobs Can Help Improve Loyalty that Can Serve the Best Interests of Both the Employee and Employer

## STATEMENT OF NEEDS

### Priority Areas

- ▶ Provide Continuum and Array of Services Statewide, Including Specialized Employment Services to Better Serve the Target Population and Support Job Entry; and Continued Employment.
- ▶ Provide Range and Depth in Assessment and Services to Enhance Virginia's Implementation of the Americans With Disability Act.

## STATEMENT OF NEEDS

- ▶ Population Eligible to Receive Services
- ▶ TANF Recipients In VIEW, Including Those Sanctioned
- ▶ TANF Recipients Exempted from VIEW (VIEW-Exempt)
- ▶ Recipients of Diversionary Assistance Under TANF Program
- ▶ TANF Clients in the Transitional Period Up to 24 Months After the End of TANF Cash Assistance

## STATEMENT OF NEEDS

- ▶ Applications may:
  - Serve TANF Clients in a Specific Status or all Statuses
  - Target One or More Specific Populations Defined by Other Characteristics

## STATEMENT OF NEEDS

### Geographic Coverage

- ▶ Statewide Coverage Is An Important Consideration to
  - Increase Services Available
  - Support Enhanced Efforts to Meet ADA Requirements
- ▶ Cover as Many Jurisdictions as Feasible for Statewide Services and Economies of Scale
- ▶ Order of Priorities Where Feasible
  - Statewide
  - Regional or District-Wide
  - Individual Locality
- ▶ To the Extent Possible, VDSS Intends to Achieve Regional Balance in Services Funded

## STATEMENT OF NEEDS

### Services Requested

- ▶ One Application Could Include Multiple Providers for the Same Geographic Area
- ▶ Two or More Could Cover a Similar/Overlapping Geographical Area and Each Could Include One or More Providers in Their Respective Applications
- ▶ Combination of Services Purchased Per Individual as Needed and Other Services That Might Require ongoing staff

## STATEMENT OF NEEDS

- ▶ Services–Applications shall include one or more of the following:
  - Comprehensive assessments, including diagnostic evaluations from licensed or certified professionals to identify specific impairments or issues that may exist
  - Vocational assessment and vocational evaluations
    - From DARS staff, certified vocational evaluator (CVE), licensed vocational evaluator
  - Situational assessments
    - From DARS–approved providers who maintain certification from CARF – Commission on the Accreditation of Rehabilitation Facilities
  - Medical case management
    - From individuals/organizations with medical credentials such as RN, certified rehabilitation provider – CRP, or certified disability management specialist – CDMS

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## STATEMENT OF NEEDS

- interventions and /or treatment for substance abuse, mental health, physical disabilities, learning disabilities, etc.
- Assistive technology and other accommodations
- Soft–skills development
- Independent living skills
  - From DARS–approved providers
- Intensive job readiness
- Work adjustment training
  - From DARS–approved providers who maintain CARF certification
- Job Skills Training
- GED and basic education
- Job analysis (may be part of vocational assessment or situational assessment)

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## STATEMENT OF NEEDS

- Employer outreach, job development and expanding access to better jobs
- Job placement
- Job coaching
- Supported employment
- Internships, Practicums, Work–study, Pre–Apprenticeships and Apprenticeships
- On–the–Job Training
- Supportive services
- Job follow–up
- Job “follow along”
  - (From DARS–approved providers who maintain CARF certification)
- Transportation
- SSI/SSDI Proposal Support

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## STATEMENT OF NEEDS

- ▶ Other Services May be Considered if They Relate to the Purpose and Priorities
- ▶ Childcare Services are Excluded Except Where It Supports Another Primary Strategy
- ▶ To Be Considered, Planned Percent of Entered Employment Should Equal or Exceed 50% and the Hourly Wage Should Equal or Exceed 10% above Minimum Wage

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## STATEMENT OF NEEDS

- ▶ Service Models—Applicants May Wish to Consider Using One or More “Best Practices” Included in the RFA as Examples Are:
  - Comprehensive Screening and Assessments for Employment Barriers
  - Intensive Work Readiness Programs
  - “Bridges to Practice”

## STATEMENT OF NEEDS

- Disability–focused Employment Projects
- Training and Education when Focused on the Acquisition of One or More Essential Skills
- “MedVIEW” Projects
- Targeted Sector Employment
- Using the Workplace as a Learning Lab to Teach Basic and Workplace Skills
- Post–Employment “Service Packages”
- Pay–for–Performance

## STATEMENT OF NEEDS

- ▶ Expedited Implementation
  - Continuation of Existing Program With Proven Outcomes
  - Licensed Social Workers or Certified Clinicians for Assessments
  - Purchase Services  
(Consideration Should be Given to “Wrap–Around” Services)

## STATEMENT OF NEEDS

- ▶ Providers of Services

The Diverse Needs of the TANF Populations Require Multiple Providers. Some Services Require the Use of Licensed or Certified Professionals. Resources Include:

  - DARS’ Network of Providers May be Useful for Developing a Application as They Include Many Types of Vendors
  - Employment Service Organizations (ESOs), Centers for Independent Living (CILs), Psychologists and Other Providers

## STATEMENT OF NEEDS

Providers Service Networks Including Community Services Boards, Providers Associated with Workforce Investment Boards, Health Departments and Child Development Clinics, the Adult Education System, the Community College System, Local Community Action Agencies, Employment Services Organizations, and United Way Providers

## STATEMENT OF NEEDS

### Expected Outcomes

- ▶ # Participants
- ▶ # Entered Employment
- ▶ # unique Employers
- ▶ Average Hourly Starting Wage
- ▶ # With Benefits
- ▶ # Employed Part Time
- ▶ # Employed Full Time
- ▶ Average Wage increase
- ▶ # obtaining wage increase
- ▶ # Jobs in a Career Pathway

## STATEMENT OF NEEDS

### Community Partnerships

- ▶ Multiple Providers Allow
  - Array of Services
  - Essential Expertise
- ▶ Clients Benefit Greatly From Integrated Case Planning and Service Delivery
- ▶ Applications Should Include
  - Documentation of Partnerships
  - Definition of Responsibilities

## STATEMENT OF NEEDS

### Community Partnerships

- ▶ Document Key Interactions with LDSS:
  - Integration With Local VIEW Plans and Other TANF Initiatives
  - Expansion of the Continuum of Services
  - Process to Identify and Refer TANF Participants
  - Case Planning and Case Management
  - Case Monitoring or Follow-up
  - Reporting of Status and Outcomes

## STATEMENT OF NEEDS

### Use of Funds

Funds May Be Used for the Following:

- Core Staff Supporting Project Activities (Restricted)
- Equipment In Support of the Project
- Consultation, Technical Assistance or Staff Training Related to Project
- Adaptation of Site or Equipment to Accommodate An Individual's Need for Work

## STATEMENT OF NEEDS

### Use of Funds

Funds May Be Used for the Following:

- Medical Services NOT Covered By Other Sources ~ MUST be Tracked and Reported Separately so They May Be Charged to TANF "Maintenance of Effort" Funds ~ Estimated Costs Must Be Identified Separately In Application
- Other Allowable Direct Costs Such as Supplies, Travel and Communication
- Costs related to Assistive Technology Needs
- Indirect Costs not to exceed 10% unless there is an approved federal indirect cost rate.

## STATEMENT OF NEEDS

Funds May Not Be Used for The Following:

- Direct Services by LDSS Staff
- Administrative Costs Not Specifically for Staff Working Directly with Recipients or Developing Program Sources on their Behalf
- Rent (Unless Project Requires Rental of Space and Such Need Is Documented)
- Construction of New Buildings
- Renovations to a Facility
- Capital Investments or Operating Revenue
- Salaries of LDSS Staff Except for Personnel Associated with Reporting Requirements

## PREPARATION AND SUBMISSION REQUIREMENTS

General Instructions

- (1) Original
- (5) Copies
- (1) soft copy (CD) (Thumb drives are not acceptable)

## PREPARATION AND SUBMISSION REQUIREMENTS

### Application Preparation

- ▶ Signed by an Authorized Representative
- ▶ Failure to Submit Requirement Information Could Result in a Lower Evaluation or, if Substantially Incomplete, Rejection
- ▶ Applications Must Be
  - Prepared Simply And Economically
  - Contain Concise Language to Describe Capabilities to Satisfy the Requirements of This Solicitation

## PREPARATION AND SUBMISSION REQUIREMENTS

- ▶ **Must and Shall** Identify Requirements with a Major Impact; **Should and May** are Desirable, but not Necessary
- ▶ Response Must Be Organized According to Application Template
- ▶ Pages Numbered Beginning With Page One for Each Required Set
- ▶ Applicants May be Required to Give an Oral Presentation

## PREPARATION AND SUBMISSION REQUIREMENTS

### Submission Requirements

- ▶ Signed Applications Must Be Submitted in A Sealed Envelope or Package with Your Name, Organization, Address, Due Date of the Application, Time and RFA Title and Number. (See Page 12) Address As Follows:  
Virginia Department of Social Services  
General Services - Procurement  
801 East Main Street  
Richmond, VA 23219-2901

ATTENTION: Jennifer Nixon

## PREPARATION AND SUBMISSION REQUIREMENTS

### Narrative

- Use One Inch Margins
- Narrative Section Limited to 25 Pages In Times New Roman 12 Font for the General Text and Times New Roman 10 or 12 Font for Tables

## PREPARATION AND SUBMISSION REQUIREMENTS

- ▶ Prepare Narrative in the Following Sequence:
  - Application Title
  - Application Summary (one page limit)
  - Application Needs Statement
  - Program Design/Proposed Services and Implementation Plan
  - Outcome and Benefits Expected
  - Organizational Staff and Provider Qualifications and Collaborative Agreements

## PREPARATION AND SUBMISSION REQUIREMENTS

### Budget

- ▶ Using the Forms Provided in the RFA, Provide Your Proposed Budget for a 12 Month Period
- ▶ Budget Documents Include the Following:
  - Itemized Budget - Personnel Costs
  - Budget Summary by Line Item
  - Budget Narrative that Includes the Following:
    - Description of Each Proposed Expenditure
    - Justification of Proposed Expenditure with Explanation of Need

## PREPARATION AND SUBMISSION REQUIREMENTS

- ▶ The Applicant's Provider(s), the Interagency Agreements/ Documents and the Community Partners and Documents of Support Do Not Count in the 25 Page Limitation for the Narrative for this RFA.

## EVALUATION AND AWARD CRITERIA

- ▶ All Applications Will Be Screened by State employees for Completeness and Responsiveness to RFA ~ Any Not Deemed Complete or Responsive Will Not Be Forwarded to the Committee
- ▶ Applications will be Evaluated by Panels of Individuals with Demonstrated Expertise in the Subject Matter
- ▶ VDSS may Request Additional Technical Assistance from any Source and May Include Information from References and Prior Contract Awards with VDSS
- ▶ The Panel Will Review and Score Each Application on Its Responsiveness to the Solicitation, the Projected Impact of the Program/Services and the Estimated Cost

## EVALUATION AND AWARD CRITERIA

- Review Panel Will Evaluate and Rate the Applications Using the Following Criteria

Rating	Description
Exceptional	Applicant's application exceeds requirements and/or demonstrates an exceptional understanding of goals and objectives of the procurement. Major strengths are illustrated. No significant weaknesses exist.
Acceptable	Applicant's application demonstrates an acceptable understanding of goals and objectives of the procurement. There may be strengths and weaknesses, however, strengths outweigh the weaknesses.
Marginal	Applicant's application demonstrates a minimal understanding of the goals and objectives of the procurement. Weaknesses have been found that out balance any strengths that exist.
Unacceptable	The content of the Applicant's application is significantly incomplete and/or the application fails to demonstrate an understanding of the goals and objectives of the procurement.

## EVALUATION AND AWARD CRITERIA

### AWARD of CONTRACT

- Those Considered fully Qualified and Best Suited
- Negotiations Will Be Conducted
- Price will be Considered
- The Award Document Will be a Contract Incorporating by Reference All the Requirements, Terms and Conditions of the Solicitation and the Proposal, as negotiated

## REPORTING REQUIREMENTS AND DELIVERY

- Statistical Data Required
- Maintain Documentation for Review and Audit
- Specific Reporting Instructions Will be Provided to Awardees to include
  - Quarterly Reports
  - Final Report

## TERMS AND CONDITIONS

- eVA Vendor Registration Required
- Availability of Funds – Agency Bound Only to the Extent of Funds Available
- Termination clause (both parties can terminate and the sub recipient may terminate part of the sub-award with VDSS approval)
- Audit clause (\$750,000 or more in combined federal funding during the sub recipient's fiscal year)
- Equipment (over \$5,000 is considered equipment, all other is considered supplies)
- Records retention (3 years for RFAs)
- Supplantation of Funds are not allowed

## METHOD OF PAYMENT

- ▶ Reimbursable Basic
- ▶ 30-Day Reimbursement
- ▶ LASER Used for Local Agencies
- ▶ Interagency Transfer System Used for State Agencies
- ▶ Monthly Invoices Used for All Others, Unless a Local Agency is Serving as the Fiscal Agency

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## METHOD OF PAYMENT

### Payment Method (Non State or LDSS Contractors)

- Reimbursements Are Made Electronically Using Virginia Department of Account's Remittance Electronic Data Interchange (EDI)
- Contractors Being Reimbursed Via EDI Must Be or Become Eligible to Receive Reimbursements by Completing Application Information for EDI
- Application Information for EDI Can Be Found on the Department of Accounts Website: [www.doa.virginia.gov](http://www.doa.virginia.gov)

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## METHOD OF PAYMENT

### Funding Duration

- ▶ Sub-award Is for 12 Months
- ▶ VDSS Will Perform Six Month's Performance Review
  - Funding May Be Adjusted Based on Review
  - Funding May Be Terminated Based on Review

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## APPENDICES

- ▶ These Appendices assist the Applicant in Understanding the Overall Purpose of the Proposed Project and Is Self Explanatory
  - Definitions of Services
  - TANF Requirements
  - Map of Regions for Award Purposes Only and Regional Boundaries for Award Purposes Only

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## Questions

Direct Additional Questions Regarding the RFA to

- Jennifer Nixon at [jennifer.nixon@dss.virginia.gov](mailto:jennifer.nixon@dss.virginia.gov)
- Questions, Answers and Any Addendums Will Be Posted on the eVA website
- Questions should be submitted within five (5) working days prior to the due date of the applications

## INDIRECT COSTS

### REGULATIONS FOR PASS THROUGH

- ▶ VDSS must allow its subrecipients to charge indirect costs in their sub-award budgets – UNLESS the federal agency that is giving VDSS the federal funds prohibits indirect costs in the sub-award.

Note: Some federal agencies have issued exceptions to requirements of 2 CFR 200: See <https://cfo.gov/wp-content/uploads/2014/12/Agency-Exceptions.pdf>

- ▶ The subrecipient is not required to take indirect costs.

## INDIRECT COSTS

### CALCULATION OF INDIRECT COSTS

- ▶ The subrecipient will multiply the BASE times an indirect cost rate.

$\text{BASE} \times \text{INDIRECT COSTS RATE} = \text{INDIRECT COSTS}$

## INDIRECT COSTS

### WHICH BASE?

- ▶ Which base will the subrecipient use?

Depends on whether the subrecipient has a NICRA (negotiated indirect costs rate agreement) with the federal government!

## INDIRECT COSTS

### Possible Bases When Subrecipient has a NICRA:

- MTDC (Modified Total Direct Costs) **OR**
- S&W (Salaries and Wages): Indirect cost rate is multiplied by the total of Salaries and Wages only. Subtract all direct cost expenses EXCEPT Salaries and Wages to arrive at base. **OR**
- S,W, & FB (Salaries, Wages and Fringe Benefits): Indirect cost rate is multiplied by the total of Salaries, Wages, and Benefits only. Subtract all direct cost expenses EXCEPT Salaries, Wages and Benefits to arrive at base. **OR**
- Other base as determined by NICRA

The base when using the *de minimis* rate is always MTDC.

## INDIRECT COSTS

### DE MINIMIS RATE

- If the subrecipient does NOT have a NICRA, it may use the *de minimis* rate (10%).
- The base for the *de minimis* calculation will always be MTDC (Modified Total Direct Costs).
- The subrecipient does not have to provide back up documentation to use the *de minimis* rate.
- Although the subrecipient may choose to use a rate less than 10%, the pass through must not coerce the subrecipient into using a rate less than 10%.

## INDIRECT COSTS

### DEFINITION OF MTDC

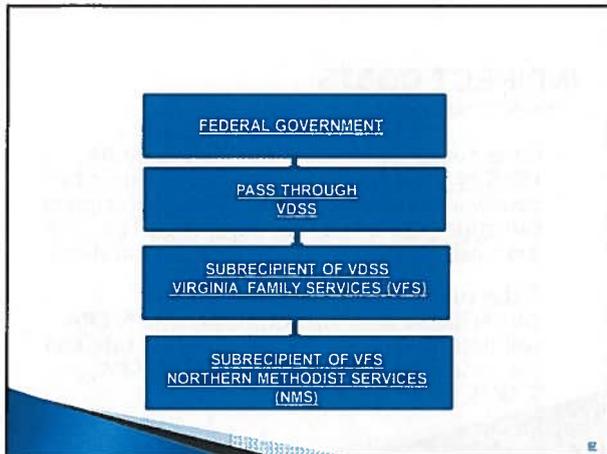
MTDC **includes** all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each **sub-award**.

MTDC **excludes** equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each **sub-award** in excess of \$25,000.

## INDIRECT COSTS

### EXAMPLE: Subrecipient and Sub-award

- Virginia Family Services (VFS) receives a sub-award from VDSS to provide home visiting services to families.
- VFS has employees who provide home visiting services. VFS pays these home visitors directly from the VDSS grant.
- VFS gives a **sub-award** of \$50,000 to Northern Methodist Services (NMS). NMS then provides home visiting services to families in a certain geographic location. These home visitors are NOT employees of VFS.



PROGRAM BUDGET SUBMITTED BY VFS TO VDSS		INDIRECT COSTS - de minimis CALCULATION	
SALARIES	\$100,000.00		
BENEFITS	\$7,000.00		
RENT	\$10,000.00		
EQUIPMENT PURCHASES	\$10,000.00		
SUBCONTRACTING	\$60,000.00	(sub-award to NMS)	
CONSUMABLE SUPPLIES	\$1,000.00		
TRAVEL	\$1,000.00		
TRAINING	\$1,000.00		
PRINTING	\$1,000.00		
UTILITIES	\$1,000.00		
OTHER	\$1,000.00		
<b>TOTAL</b>	<b>\$183,000.00</b>	<b>Total Direct Costs</b>	
<b>MTDC CALCULATION</b>			
<b>EXCLUDED COSTS</b>			
Rent	\$10,000.00	From above	
Equipment Purchases	\$10,000.00	Enter the price of each piece of equipment which costs \$5,000 or more.	
Subcontracting expenses	\$60,000.00	Enter the amount of the sub-award to NMS. <b>EXCEPT</b> salaries.	
<b>Total Excluded Costs</b>	<b>\$80,000.00</b>		
<b>Direct Costs - Excluded Costs = Base</b>	<b>\$103,000.00</b>	<b>MTDC (Revised) Total Direct Costs</b>	
Indirect Costs Percentage Rate	10%	Enter a rate up to 10% here	
<b>MTDC x Percentage Rate</b>	<b>\$13,300.00</b>	<b>INDIRECT COSTS</b>	
<b>Total Budget \$183,000 + \$13,300 = \$196,300</b>			

## INDIRECT COSTS

### EXAMPLE 2

- ▶ If the subrecipient has a NICRA, the pass through must accept it.
- ▶ If the subrecipient has a NICRA, the base may be MTDC, S&W, or S,W, & FB, or other. It depends on what the NICRA says.
- ▶ Subrecipient should submit a copy of the NICRA to VDSS. The NICRA will identify the subrecipient's base and indirect cost rate.

Same scenario as before except VFS has a federally approved rate.

According to the NICRA, the base is S,W, & FB and the indirect cost rate is 17%. (in THIS example).

SALARIES	\$100,000.00		
BENEFITS	\$7,000.00		
RENT	\$10,000.00		
EQUIPMENT PURCHASES	\$10,000.00		
SUBCONTRACTING	\$60,000.00		
CONSUMABLE SUPPLIES	\$1,000.00		
TRAVEL	\$1,000.00		
TRAINING	\$1,000.00		
PRINTING	\$1,000.00		
UTILITIES	\$1,000.00		
OTHER	\$1,000.00		
<b>TOTAL</b>	<b>\$183,000.00</b>	<b>Total Direct Costs</b>	
<b>Excluded Costs</b>	<b>\$70,000.00</b>	<b>Total of excluded expenses in red above</b>	
<b>Direct costs - Excluded Costs = Base</b>	<b>\$113,000.00</b>	<b>All direct expenses EXCEPT salaries and wages have been removed.</b>	
<b>Indirect Cost Rate in NICRA</b>	<b>17%</b>		
<b>Base x Rate = Indirect Costs</b>	<b>\$19,210.00</b>		
<b>Total Budget = \$183,000 + \$19,210 = \$202,210</b>			

## INDIRECT COSTS SUMMARY

- VDSS must allow subrecipients to take indirect costs on sub-awards consisting of federal dollars (unless the federal agency making the award says otherwise).
  - VDSS should let the subrecipient know the rules about indirect costs in the Request for Applications.
  - The subrecipient is not required to take indirect costs.
- ▶ *Note: If the award consists of both federal and state dollars, VDSS will allow indirect costs on total grant amount.*

## INDIRECT COSTS SUMMARY (continued)

- If the subrecipient does not have a NICRA, VDSS must allow the subrecipient to use the *de minimis* rate, up to 10%. The subrecipient can choose to use a rate lower than 10%. The base will always be MTDC for the *de minimis*.
- If the subrecipient has a NICRA, the subrecipient must use that rate. The NICRA will determine both the indirect cost rate and the base. The base could be MTDC, S&W, or S, W, & FB, or other.

**Instructions for Completing Budget Sheets**

**P1-Budget Summary:** Fill in the cells titled "SUBGRANTEE NAME" and "Grant Period" at the top of the worksheet. Please read the existing budget items on the sheet called "P2-Salary" and continue until you have completed all worksheets that apply to your application.

**P2-Salary:** This worksheet details which programs a staff position will be funded through this grant. Please list names of program staff to be funded. Only list the staff that will be funded (in whole or part) by this grant. (Attachments with a list of staff members will not be accepted.)

List the title of staff  
 List total hours worked per week  
 List hours per week spent on this program  
 List # of hours per week to be paid by VDSS  
 List total annual salary

**P3-Benefits Budget for Employee Benefits:** This section of the worksheet details the benefits offered to employees of your program. Names and titles of employees will populate from P2-Salary. Be sure to work dates, the column instead of across, for each employee.

Enter rates amounts of each benefit for each employee for the year (except PICA PICA will be automatically calculated).

Enter the percentage of benefits that you would like VDSS to pay for each employee for each benefit. This input will not be the same percentage for all categories. For salaries, however, the benefits percentages cannot exceed 14.3% in the table called "P4-Other Expenses".

**P4-Other Expenses:** This tab allows for line items that are being requested for expenses other than salaries and benefits. All separate rows directly relate to Title programs.

**P5-Indirect Costs:** This sheet lists the business to support the program.

Indirect Costs Complete: Complete Tab P-4 Indirect (E), Tab P-6 Indirect (I).

Indirect-Complete this sheet if you do NOT have a federally approved negotiated cost rate. If you have a federally approved rate, skip this page and go to Tab P-4 Indirect (I). Indirect costs will be based on the de minimis calculator:  $US\$ 14\% \times \text{MTDC (Indirect Total Direct Costs)}$

P-4 Indirect (E)-Complete this sheet only if you have a federally approved negotiated cost rate. Skip this sheet if you filled out Tab P-4 (I) indirect costs will be based on the NICRA budget cost.

P-7 Budget Worksheet: Use this worksheet to prepare your budget narrative according to requests mentioned on Page 2-4. Provide an in-depth narrative using the examples of calculations in this sheet. Example: Printing 500 copies of a new brochure. The cost per form is 30-The cost of 500 brochures = 30 units total = 3150.00

BUDGET SUMMARY - DSS FUNDS AND MATCH FUNDS				
SUBGRANTEE NAME				
Grant Period				
BUDGET CATEGORY	TOTAL PROGRAM BUDGET (Including amount from VDSS)	TOTAL VDSS REQUEST	INCOME	TOTAL (Income + VDSS Request)
SALARIES		\$0.00	\$0.00	\$0.00
EMPLOYEE BENEFITS		\$0.00	\$0.00	\$0.00
RENT		\$0.00	\$0.00	\$0.00
OFFICE & PROGRAM		\$0.00	\$0.00	\$0.00
EQUIPMENT		\$0.00	\$0.00	\$0.00
SUBAWARDS		\$0.00	\$0.00	\$0.00
TRAINING/TRANSPORTATION		\$0.00	\$0.00	\$0.00
OTHER		\$0.00	\$0.00	\$0.00
INDIRECT COSTS				
<b>Total</b>	\$	\$	\$	\$0.00
Percentage of Total Program Budget Requested from DSS		0%		

Awarded funds cannot be used to support existing funds.

Please enter data into yellow fields only!



INDIRECT COSTS	
SUBGRANTEE NAME	0
Grant Period:	0
<b>DE MINIMIS CALCULATION</b>	
<b>DIRECT COSTS</b>	
SALARIES	\$1.00
EMPLOYEE BENEFITS	\$0.00
RENT	\$0.00
OFFICE & PROGRAM	\$0.00
EQUIPMENT	\$0.00
SUBAWARDS	\$0.00
TRAINING/TRANSPORTATION	\$0.00
OTHER	\$0.00
<b>TOTAL DIRECT COSTS</b>	<b>\$4.00</b>
<b>EXCLUDED EXPENSES</b>	
Rent	\$0.00
Equipment	\$0.00
Subcontracting Expenses > \$25,000	
Other Excluded Costs	
<b>Total Excluded Costs</b>	<b>\$0.00</b>
<b>Total Direct Costs - Excluded Costs = Base</b>	<b>\$4.00</b>
Indirect Costs Percentage Rate	0%

INDIRECT COSTS	
SUBGRANTEE NAME	0
Grant Period:	0
<b>Indirect Costs Calculation with NICRA</b>	
<b>Direct Costs</b>	
SALARIES	\$0.00
EMPLOYEE BENEFITS	\$0.00
RENT	\$0.00
OFFICE & PROGRAM	\$0.00
EQUIPMENT	\$0.00
SUBAWARDS	\$0.00
TRAINING/TRANSPORTATION	\$0.00
OTHER	\$0.00
<b>TOTAL DIRECT COSTS</b>	<b>\$4.00</b>
<b>EXCLUDED EXPENSES</b>	
Please enter the total amount of all excluded expenses from direct costs above (according to your NICRA).	
<b>Total Direct Costs - Excluded Costs = Base</b>	<b>\$4.00</b>
Indirect Costs Percentage Rate	
<b>Base x Percentage Rate = Indirect Costs</b>	<b>\$0.00</b>
Please submit a copy of your NICRA (Negotiated Indirect Cost Rate Agreement) with this application.	

BUDGET NARRATIVE		
SUBGRANTEE NAME	0	
Grant Period:	0	
Line Item	Budget	Narrative Description
<b>SALARIES</b>	\$1.00	
<b>BENEFITS</b>	\$0.00	
<b>RENT - Other</b>	\$0.00	
<b>OFFICE and PROGRAM</b>	\$0.00	
Phone	\$0.00	
Postage	\$0.00	
Supplies	\$0.00	
Utilities	\$0.00	
Travel	\$0.00	
Participant Support Costs	\$0.00	
Other Program Expenses (Benefit)	\$0.00	
Other Program Expenses (Benefit)	\$0.00	
Other Program Expenses (Benefit)	\$0.00	
Other Program Expenses (Benefit)	\$0.00	
<b>EQUIPMENT</b>	\$0.00	
Equipment Purchase (Benefit)	\$0.00	
Equipment Purchase (Benefit)	\$0.00	
Equipment Lease (Benefit)	\$0.00	
<b>SUBAWARDS</b>	\$0.00	
<b>STAFF TRAVEL &amp; TRAINING</b>	\$0.00	
Travel	\$0.00	
Training	\$0.00	
<b>OTHER</b>	\$0.00	
Other (Benefit)	\$0.00	
<b>TOTAL</b>	<b>\$4.00</b>	