



State Fiscal Year 2026 Regional and Local Dementia Grant
Request for Proposals Responders' Conference
February 5, 2025

Jane Cunningham | Grants Specialist Senior

Getting Connected to the Conference

Join by phone:

+1-415-655-0003 United States Toll

1-855-282-6330 United States Toll Free

Access code: 2499 096 7265

Host PIN: 4832

Join by video system

- Dial: 24990967265@minnesota.webex.com
- You can also dial 173.243.2.68 and enter your meeting number.

- About the Minnesota Board on Aging
- Overview of State Fiscal Year 2026 Request for Proposal key guidelines
- Funding Categories
- Insurance Requirements
- Online Application Review (“walk through”)
- Final Reminders
- Questions

Minnesota Board on Aging

Mission

Works to ensure that older Minnesotans and their families are effectively served by State and local policies and programs so they can age well and live well. The Minnesota Board on Aging does this through its three major roles: administrator, advisor and advocate.

The Board on Aging provides:

- **Direct service programs**
 - Office of Ombudsman for Long-Term Care
 - Senior LinkAge Line
- **Grant programs**
 - Regional and Local Dementia Grants
 - Senior Volunteer Programs
- **Designation, oversight, and funding of Area Agencies on Aging (AAAs)**

Minnesota Board on Aging, continued

The Minnesota Board on Aging is committed to helping every older Minnesotan age well and live well.

To achieve this goal, we work to eliminate the institutional barriers and social inequities that keep some older Minnesotans from thriving.

We will work toward a Minnesota where every older resident feels safe, secure, valued and respected.

Request for Proposal Overview and Objectives

Purpose and Objective

- The Regional and Local Dementia Grant Program was established in State Statute in 2015. The State Fiscal Year 2026 grant round represents the 10th cycle of awards.
- Annual funding is for regional and local projects to increase awareness of Alzheimer's disease and related dementias (ARD), promote the benefits of early identification, increase the rate of cognitive testing, and connect family and friends caring for persons with dementia to education and resources.
- Projects should stimulate community relationships or partnerships that promote the benefit of physician consultation for persons suspected of having memory or cognitive issues.

Funding Categories for State Fiscal Year 2026

Responders can propose work in one or more of these funding categories:

- 1) **Increase Awareness** – Programs or projects that increase the public's awareness of Alzheimer's disease and other dementias.
- 2) **Promote Early Identification** – Programs or projects that use culturally appropriate screening tools to facilitate and increase referrals to healthcare professionals for cognitive assessment testing.
- 3) **Increase Cognitive Testing** – Programs or projects that increase the rate of cognitive testing and promote cross-referral and communication protocols between the partnering entities.

Funding Categories for State Fiscal Year 2026, continued

- 4) **Connect Family, Friends and Neighbors Caregiving** – Programs or projects that connect those caregiving for persons with Alzheimer’s disease and other related dementias to services, education and resources.

- 5) **Respite Services for Family, Friends and Neighbors Caregiving** – Projects that increase the availability of respite services for family caregivers of people with dementia and provide information, education and training to respite caregivers and volunteers caring for people with dementia.

Qualified responders:

Community health boards, school districts, colleges and universities, tribal nations, nonprofit and for-profit organizations, home and community-based service providers, community clinics and health care organizations.

- Organizations with a State Fiscal Year 2025 Regional and Local Dementia Grant are eligible to apply for State Fiscal Year 2026 funds as long as they propose a new project and budget distinct from their 2025 award.
- Responders may submit multiple proposals per grant round providing the projects and budgets are clearly distinct.

Request Amounts, Term and Match Requirements

Available grant funds in SFY 2026: \$750,000.

- **Maximum grant request:** Up to \$150,000.
- **Proposed Grant or Contract Term:** July 1, 2025 – June 30, 2027 (one or two years).
- **Project Budget:** Submit one budget for the full grant or contract term requested.
- **Required Match:** Projects with proposed budgets greater than \$50,001 require a 25% match of the project's total budget. Requests of \$50,000 or less have no match requirement (see pp. 16-17 of the Request for Proposal document).

Required Insurance

SAMPLE
CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsements.

PRODUCER XYZ Insurance Agency, Inc. Address Line 1 Address Line 2	CONTACT Insurance Agent Name PHONE: () - - FAX: () - - E-MAIL: @ ADDRESS: , INSURER(S) AFFORDING COVERAGE	INSURER A: Insurer Name INSURER B: Insurer Name INSURER C: Insurer Name INSURER D: INSURER E: INSURER F:
---	--	---

INSURED
Smart Granite
Address Line 1
Address Line 2

COVERAGES **CERTIFICATE NUMBER:** 123456789 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

LINE	TYPE OF INSURANCE	ADDITIONAL	POLICY NUMBER	POLICY EFF	POLICY EXP	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIED PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> SUB POLICY <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y		7/1/2022	6/30/2023	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ OTHER: \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DEF <input type="checkbox"/> RETENTION \$			7/1/2022	6/30/2023	COMBINED SINGLE LIMIT (EA ACCIDENT) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ AGGREGATE \$ OTHER: \$
B	EMPLOYERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICERS ARE RECLUDED (Mandatory in MN) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N		7/1/2022	6/30/2023	<input checked="" type="checkbox"/> PER <input type="checkbox"/> STATUTE <input type="checkbox"/> OR E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
C	Employee Theft/Employee Dishonesty			7/1/2022	6/30/2023	Limit Each Occurrence \$1,000,000 Aggregate \$5,000,000
A	Professional Liability			7/1/2022	6/30/2023	Each Occurrence \$1,000,000 Aggregate \$5,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 The State of MN is listed as Joint Loss Payee for the Employee Theft/Employee Dishonesty Policy.
 The State of MN is listed as an Additional Insured for the General Commercial Policy.

CERTIFICATE HOLDER MN Department of Human Services Disability Services PO Box 54957 St. Paul, MN 55154-0957	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	--

© 1988-2016 ACORD CORPORATION. All rights reserved.

ACORD 25 (2016/03)

The ACORD name and logo are registered marks of ACORD

- The Department of Administration Risk Management Office sets required amounts of insurance coverages for State Agency Contracts (see pp. 20-23 of Request for Proposal document).
- If you are invited to contract with MBA, the process will include confirmation of insurances and coverage levels for the duration of your chosen grant period (1 or 2 year).
- **Costs of getting additional insurance for your project term can be built into your proposal budget. Check with your agent as you create budgets.**

General Liability and Workers Compensation

Workers Compensation

- \$100,000 – Bodily Injury by Disease per employee
- \$500,000 – Bodily Injury by Disease aggregate
- \$100,000 – Bodily Injury by Accident

General Liability Coverage

- \$2,000,000 per occurrence and \$2,000,000 annual aggregate

The following coverages shall be included:

- Premises and Operations Bodily Injury and Property Damage
- Personal and Advertising Injury \$2,000,000 per occurrence
- Blanket Contractual Liability
- Products and Completed Operations Liability \$2,000,000 per occurrence

General Commercial Auto Liability

Commercial Automobile Liability Coverage

- \$200,000 – Combined Single limit for Bodily Injury and Property Damage per occurrence
- In addition, the following coverages should be included (as relevant): Owned, Hired, and Non-owned Automobile
 - In the case that any work is subcontracted, GRANTEE will require the subcontractor to maintain Commercial Automobile Liability insurance that conforms to this section.
- An Umbrella or Excess Policy can generally be used to supplement shortfalls in General Liability, Auto Liability or Workers Compensation.

Professional Liability Insurance

Professional Liability

This policy will provide coverage for all claims the GRANTEE may become legally obligated to pay resulting from any actual or alleged negligent act, error, or omission related to Grantee's professional services required under the CONTRACT. GRANTEE is required to carry the following minimum insurance limits:

- \$2,000,000 – per claim or event
- \$2,000,000 – annual aggregate
- Contractor shall maintain such insurance for a period of at least three (3) years, following completion of the work.
- **Generally, an Excess or Umbrella Policy does not supplement Professional Liability Insurance.**
- Subcontractors, including Independent Contractors, may also need professional liability coverage.

Employee Theft and Dishonesty

Employee Theft Coverage

GRANTEE agrees to keep in force a Blanket Employee Theft & Employee Dishonesty Policy in at least the total amount of the first year's grant award as an addendum on its property insurance policy. If it is not feasible to include a blanket employee theft and employee dishonesty policy as an addendum to a property insurance policy, then GRANTEE must keep in force a stand-alone employee theft/employee dishonesty policy.

STATE will be named as both a joint payee and a certificate holder on the employee theft/employee dishonesty policy. Only in cases in which the first year's grant award exceeds the available employee theft/employee dishonesty coverage may grantees provide blanket employee theft/employee dishonesty insurance in an amount equal to either 25% of the yearly grant amount, or the first quarterly advance amount, whichever is greater.

MBA Dementia Grant Application Webpage

([MBA Dementia Grant webpage link](#))

The screenshot shows the Minnesota Board on Aging website. The header includes the logo, navigation links like 'App-Friendly Minnesota', 'MN2020', 'Live Well at Home', and 'S.I. Referrals', and a search bar. A breadcrumb trail reads: Home > Direct Services > Grants > Dementia Grants > Dementia Grants RFP. A sidebar menu lists 'Direct Services' with sub-items: Senior LinkAge Line, Grants, Dementia Grants, Dementia Grants RFP, Dashboard, Ombudsman for Long-term Care, and Vulnerable Adults. The main content area is titled 'Regional and Local Dementia Grants' and includes a description of the grant program, a list of goals, a photograph of an elderly person's hands, and sections for 'Program Information', 'Grant application and portal', and 'Proposal Development Assistance'.

Direct Services

- Senior LinkAge Line
- Grants
- Dementia Grants
- Dementia Grants RFP
- Dashboard
- Ombudsman for Long-term Care
- Vulnerable Adults

Regional and Local Dementia Grants

The Minnesota Board on Aging administers a competitive grant program focusing on Alzheimer's disease and other dementias and their impact on family, friends and caregivers. Grants should:

- Increase awareness of Alzheimer's disease and other dementias
- Increase the rate of cognitive testing
- Promote the benefits of early identification
- Connect family, friends and neighbors who are caregiving with education, support and resources
- Increase the availability of respite for family, friends and neighbors caring for people with dementia, and provide information, education and training to respite caregivers and volunteers

Grants should stimulate collaboration and coordination and strengthen community relationships and partnerships that promote the benefit of physician consultation for all people who may have a memory or cognitive concern.

Program Information

- **Grant term:** Up to 24 months (July 1, 2025 — June 30, 2027)
- **Maximum request:** \$150,000
- **Total funds available:** \$750,000
- **Match requirement:** 25 percent match is required for request above \$50,000.

Grant application and portal

- [SFY 2026 Regional and Local Dementia Grants Application \(PDF\)](#)
- To apply, visit our [grant portal](#)

Proposal Development Assistance

Technical assistance is available from Local Area Agencies on Aging - [ElderCare Development Partnerships](#)

Key Dates

- Jan. 6, 2025: Request for Proposal (RFP) posted
- Feb. 5, 2025: Dementia Grant Responders Conference, 1:00 p.m. - 3:00 p.m. Central Time
 - [Responders Conference join information \(PDF\)](#)
- April 25, 2025: Applications due by 4 p.m. Central Time
- May 2, 2025: Phase I denial notices sent to responders
- May and June, 2025: Review and scoring applications
- June, 2025: Negotiate contracts
- July 1, 2025: SFY 2026 grantee anticipated start date

Grant Contact: Jane Cunningham — jane.e.cunningham@state.mn.us

Application Documents

- [Budget SFY26 form \(XLSX\)](#)
- [Dementia Knowledge Capture SFY26 Instructions \(PDF\)](#)
- [Dementia Knowledge Capture SFY26 Form \(XLSX\)](#)

Required Statements

- [MBA Disclosure of Funding Form 7018 \(PDF\)](#)
- [MBA Exceptions to Terms and Conditions Form 7019 \(PDF\)](#)
- [MBA Responder Declarations Form 7020 \(PDF\)](#)
- [MBA Documentation to Establish Fiscal Responsibility 7896 \(PDF\)](#)

Dementia Grants Awarded

- [State Fiscal Year 2025 \(PDF\)](#)
- [State Fiscal Year 2024 \(PDF\)](#)
- [State Fiscal Year 2023 \(PDF\)](#)
- [State Fiscal Year 2022 \(PDF\)](#)

Online Portal Login Page (Dementia grant webpage portal)

Dementia grant webpage portal



mn
MINNESOTA

Logon

Email Address*

jane.e.cunningham@state.mn.us

Password*

.....

[Log On](#) [Create New Account](#)

[Forgot your Password?](#)

Welcome to the State of Minnesota's Department of Human Services and the Minnesota Board on Aging's online grant portal.

The SFY 2026 Regional and Local Dementia Grant Request for Proposals is open through April 20, 2025, at 4:00pm (Central Time).

The SFY 2026 Live Well at Home Grant Request for Proposals is open through April 4, 2025, at 4:00pm (Central Time).

New Users: Please click on "Create New Account" to complete the registration process and create your logon credentials.

Not Sure? If you think that you or someone at your organization has already registered in the system, do not create a new account. For MN Board on Aging Dementia Grants, please contact Jane Cunningham at jane.e.cunningham@state.mn.us for help. If you have or are applying for Live Well at Home grants, you can contact Andrea Lingl for help at andrea.lingl@state.mn.us.

Applicant Tutorials

Logon

Email Address*

Password*

[Log On](#) [Create New Account](#)

[Forgot your Password?](#)

New Users: Please click on "Create New Account" to complete the registration process and create your logon credentials.

Not Sure? If you think that you or someone at your organization has already registered in the system, do not create a new account. For MN Board on Aging Dementia Grants, please contact Jane Cunningham at jane.e.cunningham@state.mn.us for help. If you have or are applying for Live Well at Home grants, you can contact Andrea Lingl for help at andrea.lingl@state.mn.us.

Helpful Hints:

- 1) We recommend that you bookmark this page for ease of access.
- 2) Please remove the following email: 'MN Department of Human Services' from your spam filters to ensure you receive emails from the system.
- 3) We suggest using the following internet browsers, Google Chrome or Firefox for the optimal system experience.

Click on the link here for short videos and written instructions on [creating an account, applying for funding, or managing your applicant dashboard](#). The Legacy Dashboard Tutorial will best match your experience.

> [Grant](#) & Scholarship Lifecycle Manager > GLM & SLM - User Workflows > GLM & SLM - Applicant Workflow

GLM Applicant Tutorial

Last Updated 2 months ago ·

The content contained in this article is applicable to the applicant and is meant to be shared with them.

There are two sections below, the New Dashboard and the Legacy Dashboard. If you are unsure of which dashboard is available to you, reach out to the foundation's grant manager.

- GLM Applicant Tutorial (New Dashboard) +
- GLM Applicant Tutorial (Legacy Dashboard) -
- GLM Applicant Tutorial Video +


Articles In This Section

- >> [Applicant Tutorial - Multiple Organizations](#)
- >> [Applicant Tutorial - Submit A Follow Up Form](#)
- >> [Applicant Dashboard](#)
- >> [Guiding Applicants Through The Process](#)
- >> [GLM Applicant Tutorial](#)

Online Application – Preview

Application Preview As Applicants Question List

[Process Manager](#) / [SFY 2025 MBA Dementia Grants](#) / [FY 2025 MBA Dementia Grants](#) / [Preview](#)

 Fields with an asterisk (*) are required.

- > Applicant Tutorial
- > Required Statements
- > Responder Info
- > Proposal Contents
- > Work Plan: Goal, Objectives, Activities, and Outcomes
- > Evaluation Plan
- > Budget
- > Internal Questions

SFY 2026 Application: Required Statements

About Required Statements

The Required Statements will be evaluated on a pass or fail basis. Responders must "pass" each of the requirements identified in the RFP to move to Phase II.

- **Disclosure of Funding Form (7018)**
- **Responder Information and Declarations Form (7020)**
- **Exceptions to Terms Form (7019)**
- **New: Documentation to Establish Fiscal Responsibility (7896)**

If you have difficulty downloading the Required Statements, please access them through the Minnesota Board on Aging Dementia Grant [Homepage](#). Complete each and then upload to your online application.

Application - Responder Info

▼ Responder Info

Project Name*

Project Focus Categories

All projects must perform work within one or more of the below categories. Choose all that apply.

- Increase Awareness
- Promote Early Identification
- Increase Cognitive Testing
- Connect Family, Friends, and Neighbors Caregiving
- Increase the availability of respite for family/friends/neighbors caregiving

Requested Project Grant Period*

Please indicate if you are requesting a one year (12 months) or two year (24 month) project period.

Counties in Project Area*

Available Counties:

- | | | | | |
|--|---|---|--|---|
| <input type="checkbox"/> Aitkin County | <input type="checkbox"/> Dakota County | <input type="checkbox"/> Lac qui Parle County | <input type="checkbox"/> Olmsted County | <input type="checkbox"/> Stearns County |
| <input type="checkbox"/> Anoka County | <input type="checkbox"/> Dodge County | <input type="checkbox"/> Lake County | <input type="checkbox"/> Otter Tail County | <input type="checkbox"/> Steele County |
| <input type="checkbox"/> Becker County | <input type="checkbox"/> Douglas County | <input type="checkbox"/> Lake of the Woods County | <input type="checkbox"/> Pennington County | <input type="checkbox"/> Stevens County |
| <input type="checkbox"/> Beltrami County | <input type="checkbox"/> Faribault County | <input type="checkbox"/> Le Sueur County | <input type="checkbox"/> Pine County | <input type="checkbox"/> Swift County |

Application - Responder Info, continued

Area Agencies on Aging*

Please use the checkboxes to indicate Areas Agencies on Aging that will be served by your project. A map of Minnesota's Area Agencies on Aging can be found [here](#)

- Arrowhead Area Agency on Aging - Duluth
- Central Minnesota Council on Aging - Sartell
- Dancing Sky Area Agency on Aging - Warren
- Metropolitan Area Agency on Aging (d/b/a Trellis), Arden Hills
- Minnesota Indian Area Agency on Aging
- Minnesota River Area Agency on Aging - Mankato
- Southeastern Minnesota Area Agency on Aging - Rochester

Minnesota Legislative District*

What legislative district is your project primarily operating in? Click [here](#) to find your legislative district.

Additional Minnesota Legislative Districts That You Serve

List here any additional Minnesota Legislative Districts you serve.

Type of Service Agency*

Are you a returning grantee?*

Have you received an MBA Dementia grant within the last four years?

- Yes
- No

If yes:

Please identify the year of your most recent award. Describe what is different or what you plan to expand upon from your past project and this grant request.

Application – Proposal Contents

Executive Summary (25 points)

This component of the proposal should demonstrate the responder's understanding of the services requested in this RFP and any problems anticipated in accomplishing the work. Write a brief description of the proposed project, including: state funds requested, project focus category(ies), region where the project will occur as defined by the planning and service areas of the [Area Agencies on Aging](#), the project/program goals, and a short list of objectives and products/services to be developed.

The Executive Summary should also clearly describe/outline the responder's overall design of the project in response to achieving the purpose & deliverables as defined in this RFP. Specifically, the Executive Summary should demonstrate the responder's familiarity with: (a) the project elements; (b) its solutions to the problems presented; and (c) knowledge of the proposed services. **The executive summary from applicants awarded a grant may be posted on the Minnesota Board on Aging's public web page.**

✔ 1,400 characters left of 1,400

Applicant Description (100 points)

This section must include information on:

- The existing programs and activities of the agency
- The number of people served, geographic area served
- Population served
- Staff experience- **include prior Dementia and Knowledge Training Completed and associated certificates; and completed Dementia and Knowledge Capture form (upload below)**
- Programmatic accomplishments.

The responders should include reasons why your organization is able to effectively complete the services outlined in the RFP. Be certain to demonstrate the length, depth, and applicability of all prior experience in providing the requested services. The responder should also demonstrate the skill and experience of lead staff and identify within the proposal a project manager with experience in planning and providing the proposed services.

Upload completed Dementia and Respite Knowledge Capture Form

The **SFY 2026 Dementia Knowledge Capture Form (XLSX)** can be downloaded from [here](#) (scroll down to Application Documents section). Please consult the **SFY 2026 Dementia Knowledge Capture Form Instructions** (PDF) for guidance. It can also be found [here](#) (under Application Documents).

Upload a file [9 MiB allowed]

Application – Proposal Contents, continued

Description of Target Population (175 points)

In this section, responders should clearly describe the need for the proposed project in their community that includes an overview of the overall project design.

It is the policy of the State of Minnesota to ensure fairness, precision, equity and consistency in competitive grant awards. This includes implementing diversity and inclusion in grant-making. Policy 08-02 establishes the expectation that grant programs intentionally identify how the grant serves diverse populations, especially populations experiencing inequities and/or disparities.

This grant will serve:

- Racial and ethnic communities
- LGBTQI communities
- Native Americans
- Disabled Persons
- Veterans
- Geographic diversity within and across Minnesota (e.g., Greater Minnesota and/or urban/metro).

Grant outcomes will include one or more of the following:

- Increased awareness of Alzheimer's disease and other dementias
- Increased rate of cognitive testing
- Promoting the benefits of early identification
- Connecting family, friends and neighbors who are caregiving with education, support and resources
- Increasing the availability of respite services and respite education

Grantees will measure performance in serving the diverse populations identified above by completing quarterly progress or "follow up" reports that align with the populations targeted for services.

Responders should also describe the level of need for services in the community and what group or groups of individuals will be targeted for services by the Responder's program. Describe how Responder's program will serve diverse populations, and especially populations experiencing inequities and/or disparities in this area. Be sure to address any underserved populations specifically identified in this RFP.

If Responder is proposing work focused on a specific diverse or underserved population listed above—and if the Responder's staff is not representative of those community—the proposal and supporting budget must include a Cultural Consultant from that community.

Indicate whether the program and activities will have a local or regional impact and whether they will serve low-and moderate-income individuals and families. Describe outreach methods that will be used to effectively reach the target population and how proposed activities will positively impact the target population(s). Briefly identify any anticipated barriers or challenges that could impact your plan.

Application – Work Plan, continued

Work Plan: Goal, Objectives, Activities, and Outcomes

Work Plan: Goal, Objectives, Activities, and Outcomes. (300 points)

In this section, responders will start by providing one sentence that summarizes the goal of your project or program. Next, responders will identify a minimum of two (2) and a maximum of five (5) objectives of your project in order to reach the one or more identified focus categories as defined in Section II.B, Project Focus Categories, of the RFP. For each objective, choose a project focus category with from the drop-down menu. The proposed objectives will be used to measure progress and demonstrate the program's effectiveness, and will carry forward to the grantee's annual report.

Describing plans to implement at least one evidence-based or evidence-informed program will be worth 100 of the total 300 points available in Section 4, Project Goals, Objectives, and Outcomes. Responders must submit a copy of the work plan document for the scoring grid.

To aid in maximizing their score, responders should involve at least one of the following groups as a partner in their proposal: human or social service organization; community organization; healthcare organization; a quasi-formal or other service provider; and/or local not-for-profit (e.g., an ethnic or culturally-focused organization) or for-profit business (e.g., an employer, a commercial venture), educational institution, unit of government, transportation agency, or trade association.

Optional: Scores can also be maximized in this section by including a description of how the proposed project:

- Is supported by the targeted population(s);
- Will use or enhance existing activities and resources or involve innovative approaches to achieving the proposed project's success;
- Will be coordinated with other community activities or health initiative(s); and/or
- Will strengthen community relationships or partnerships with health care entities.
- Includes and clearly identifies evidence-based or promising evidence-informed interventions intended to support family/friend caregivers.

For the last three bullet points listed above, responders should identify partners within the "people responsible" section for each Objective. Responders should clearly define roles and responsibilities in the project. Document the resources outlined within the explanation in the budget and responsibilities in the work plan that each partner will contribute to the project.

Project/Program Goal

In one sentence, summarize the goal of your project or program.

Application – Work Plan, continued

Objective #1: Estimated Outcomes (narrative)

Describe specific results that aim to achieve the overall project goal, such as skills and knowledge obtained, community connections made, services provided to people, etc.

Objective #1: Estimated Outcomes (result)

Enter the estimated numerical result of the outcome described above (i.e., # of units/people served, community connections made, etc.).

Objective #1: Estimated Outcomes (type)

Please identify the type of result corresponding to the numeric result above (e.g., # of: *workshops, training sessions, caregiver consultations, respite hours, dementia education events*)

Objective #1: Estimated Start Date

Dates should be incremental in regards to the overall project and not just the entire timeframe of the grant.

Objective #1: Estimated End Date

Dates should be incremental in regards to the overall project and not just the entire timeframe of the grant.

Application – Evaluation Plan

Evaluation Plan (100 points)

The State is committed to funding services that produce a measurable result for the people of Minnesota. A successful responder must develop indicators of the success and effectiveness of the program and be able to measure and evaluate them to determine outcomes.

In this section, describe what lasting effects will be produced by the project and how your organization will continue the proposed project after it ends. Discuss the relationship with other organizations that you have or will develop further that will help maintain the proposed project long-term, and describe the value of any coordination across service providers and any secondary benefits that happened and/or you propose will happen due to this coordination.

Program and financial sustainability must be explicitly addressed as one indicator of the proposed evaluation. List surveys or other assessment tools you propose to use to assess and measure pre- and post-participant outcomes and how results will be summarized.

3,500 characters left of 3,500

Application – Budget

Budget Proposal (300 points)

This section should specify the grant amount requested and detail all expenses for the proposed project. Using the template describe and explain what the estimated costs pay for. Identify what other ancillary services are being provided that have costs with them and which components are essential to delivering quality services. See pages 21-25 of the RFP for line by line instructions on how to complete the budget. Explain the proposed use of the grant funds and matching funds. **A twenty-five (25) percent match of the program/project total is required on estimated budgets between \$50,001 and \$150,000. No match is required for budgets less than \$50,000. To ensure your match is correctly calculated, please consult the match formulas on pages 16-17 of the RFP document. Incorrectly calculated match may result in points reduction.**

Budget Instructions*

Your narrative should provide sufficient detail to justify the total amount budgeted in each category. The project budget must be complete and reasonable, must link to the proposed project activities, and must specify how the amounts for each budget item were determined. Responders are encouraged to apply for only the amount needed for their proposed projects. The total available funds will not necessarily be divided equally, nor will selected responders be guaranteed the entire amount requested. Budget proposals will be judged on efficient use of funds (that is, funds are being spent on direct services versus administrative costs, as detailed in their budget proposal) and overall cost-effectiveness. The purchase of all technology related items (computers, routers, etc.) must be specifically listed and detailed as either a supply or equipment as instructed below.

Please download the Budget SFY26 form (XLSX) [here](#). Once completed, you can upload it below.

Upload a file [8 MiB allowed]

Total Grant Funds Requested

This amount should match the Grant Funds Budget Total amount listed on the bottom of the Grants Funds Budget (Detail) page of the Grant Funds Budget worksheet.

Total Match Funds

Budget Template – Grant Funds, Match Funds

A	B	C
	Attachment B - Grant Funds Budget	
	<i>Enter Responder Organization Name Here</i>	
	July 1, 2025 - June 30, 2027	
Cost Categories	Explanation	Total
1. Personnel Instructions		
	Subtotal	\$0
2. Fringe Instructions		
	Subtotal	\$0
3. Travel Instructions		
	Subtotal	\$0
4. Building Instructions		
	Subtotal	\$0

Match Funds Budget					
<i>Enter Responder Organization Name Here</i>					
July 1, 2025 - June 30, 2027					
Categories	Explanation	Funding Source	Cash	In-Kind	Total
Personnel Instructions					\$0
					\$0
					\$0
					\$0
					\$0
		Subtotal	\$0	\$0	\$0
Change Instructions					\$0
					\$0
					\$0
					\$0
		Subtotal	\$0	\$0	\$0
Development Instructions					\$0
					\$0
					\$0
					\$0
		Subtotal	\$0	\$0	\$0
Maintenance Instructions					\$0
					\$0
					\$0
					\$0
		Subtotal	\$0	\$0	\$0
Supplies Instructions					\$0
					\$0
					\$0
					\$0
		Subtotal	\$0	\$0	\$0

Budget Template – Match Funds

Sub-Contract Detail				
<i>Enter Responder Organization Name Here</i>				
July 1, 2025 - June 30, 2027				
Instructions				
Subcontractor	Explanation and Computation of Costs	Grant	Match	Total
<i>Name</i>				\$0
				\$0
				\$0
	Subtotal	\$0	\$0	\$0
<i>Name</i>				\$0
				\$0
				\$0
	Subtotal	\$0	\$0	\$0
<i>Name</i>				\$0
				\$0
				\$0
	Subtotal	\$0	\$0	\$0
<i>Name</i>				\$0
				\$0
				\$0
	Subtotal	\$0	\$0	\$0
Sub-Contract Budget Total		\$0	\$0	\$0

Total Budget			
<i>Enter Responder Organization Name Here</i>			
<i>NOTE: these values will auto-fill from the other</i>			
Cost Categories	Grant Funds	Match Funds	Total
1. Personnel	\$0	\$0	\$0
2. Fringe	\$0	\$0	\$0
3. Travel	\$0	\$0	\$0
4. Building Space/Utilities	\$0	\$0	\$0
5. Equipment	\$0	\$0	\$0
6. Supplies	\$0	\$0	\$0
7. Administrative/ Indirect	\$0	\$0	\$0
8. Contractual	\$0	\$0	\$0
9. Other Costs (Specify)	\$0	\$0	\$0
Totals	\$0	\$0	\$0

Proposal Evaluation and Selection Process

MBA uses a three-part evaluation process (see pp. 23-26 of RFP).

Phase I - Required Statements Review

Required Statements will be evaluated on a pass or fail basis. Responder will receive notification by May 2, 2025, on their Applicant Dashboard within the online portal if they will not be moving forward to Phase II, committee review.

Phase II - Evaluation of Proposal Requirements – Reviewer Scoring Components

Proposal Components	Possible Points
1. Executive Summary	25
2. Description of the Applicant Organization	100
3. Description of Target Population	175
4. Project goals, objectives and workplan	300
5. Evaluation Plan	100
6. Budget proposal	300
Total Possible Points	1000

Including an Evidence-Based or Evidence Informed intervention is worth 100 of 300 total points in Project Workplan section (see p. 6 of RFP for links to resources).

Implementing REST® training counts as an intervention here.

Proposal Evaluation and Selection Process, continued

Phase III - Selection of the Successful Responder(s)

- Only the proposals found to be responsive under Phases I & II will be considered in Phase III.
- If a responder(s) is selected, the State will notify the successful responder(s) in writing of their selection and the State's desire to enter into contract negotiations.
- Responders with proposals or projects not invited to contract may contact staff (Jane Cunningham) in later summer 2025 for feedback on their proposal.

Key Dates

April 25, 2025: Applications are due by 4:00 p.m. Central Time.

May 2, 2025: Phase I denial notices sent to responders.

May and June 2025: Review and scoring applications.

June 2025: Negotiate contracts.

July 1, 2025: SFY 2026 grantee anticipated start date begins.

Important Items to Remember

- Submit ahead of deadline – online grants portal closes automatically at **4:00 pm on April 25, 2025**.
- \$150,000 is the maximum total request.
- A grant period can run from July 1, 2025 to June 30, 2027.
- Make sure you are calculating required match correctly. See formula on pp. 16-17 of the Request for Proposal document.
- Make sure **Required Statements** are current to 2025 and signed and dated as required.

Important Items to Remember, continued

- Build costs of additional insurances needed into your budget for duration of grant period chosen.
- Connect with your [ElderCare Development Partnership](#) for technical assistance for your proposal.
- Questions submitted via email to [Jane Cunningham](#) (jane.e.cunningham@state.mn.us) will be answered in a FAQ document updated and posted bi-weekly between Feb. 21 and April 18, 2025.

Thank You!