



Kūpuna Aging in Place (KAP) Program for Elderly Services Funding Opportunity

Online Application Deadline: Friday, May 5, 2023, 4:00 p.m. HST

OVERVIEW

Theory of Change

The Kūpuna Aging in Place (KAP) Program for Elderly Services supports organizations that provide a range of supportive services including community-based support services, adult day care & adult day health, and caregiver support services for low- to moderate-income kūpuna (seniors) age 65 and older and their caregivers so that kūpuna in Hawai'i can age in place, for as long as it is in their best interest.

Background

There are an estimated 282,567 kūpuna 65 years and older in Hawai'i making up 19.6% of the total population in the state according to the U.S. Census. By 2045, the population of kūpuna in Hawai'i 65 years and older will represent 24% of the population, as compared to only 8% in 1980¹. In addition, Hawai'i continues to have the highest life expectancy in the nation at over 80 years of age.

Many kūpuna in Hawai'i rely on informal or family caregivers. Data indicates that this trend continues to grow and for many caregivers this is a source of stress which can negatively impact workforce productivity and quality of life. There are approximately 157,000 family members in Hawai'i providing care for their loved ones throughout the year. The value of this unpaid care totals about \$2.1 billion. In an AARP survey of Hawai'i voters aged 45 and older, about half said they were providing for or had provided care to an adult loved one. Sixty-three percent reported feelings of emotional stress and 51% struggled to balance their family and job responsibilities.²

The U.S. Centers for Disease Control and Prevention defines aging in place as "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level." Aging in place benefits kūpuna, their families, and greater communities. The Stanford Center on Longevity and the MetLife Mature Market Institute states that one of the key community characteristics that supports sustainable aging in place is "Community Supports & Services" including the availability of health care, supportive services, healthy food, and social integration. Supportive services include home- and community-based services and caregiver support services.³ The pandemic reinforced the

¹ "Population and Economic Projections for the State of Hawaii to 2045." *Department of Business, Economic Development and Tourism*, June 2018, https://files.hawaii.gov/dbedt/economic/data_reports/2045-long-range-forecast/2045-long-range-forecast.pdf. Accessed 6 February 2023.

² "AARP hosts 'Caring for Family, Caring for Yourself' caregiver conference." *Hawaii News Now*, 19 Mar. 2018, <http://www.hawaiinewsnow.com/story/37759447/aarp-caregiver-conference-caring-for-family-caring-for-yourself>. Accessed 6 February 2023.

³ "Liveable Community Indicators for Sustainable Aging in Place." *Stanford Center on Longevity and MetLife Mature Market Institute*, Mar 2013, <http://162.144.124.243/~longevl0/wp-content/uploads/2017/01/mmi-livable-communities-study.pdf>. Accessed 6 February 2023.

importance of “Community Supports & Services” for kūpuna and their caregivers. Organizations innovated to meet the needs of this high-risk population to address issues including food security, access to basic necessities, use of technology to access medical care and social opportunities, and transportation barriers. Kūpuna continue to experience challenges and support services are essential to maximize opportunities to age well, remain active, and enjoy quality lives while engaging in their communities, a goal of Hawai‘i’s 2019-2023 State Plan on Aging.⁴

Hawai‘i Community Foundation (HCF) has provided grants for elderly services for over 30 years through the Persons in Need (PIN) program, now known as the KAP program. Recognizing the rapid growth in the number of kūpuna and the dependence on caregivers, in 2011, HCF adopted a focus for its aging grants to “strengthen the safety net of family and informal care giving services for the elderly, with an emphasis on families and elderly of modest means.”

Purpose

Through this Funding Opportunity, HCF seeks proposals from qualified 501(c)(3) public charities to provide:

1. **Community-based support services** for low- to moderate-income kūpuna age 65 or older provided in kūpuna’s homes or at a center/facility.
2. **Tuition assistance** for low- to moderate-income kūpuna age 65 or older to attend licensed adult day care or adult day health programs.
3. **Caregiver support services** including education, support groups, and respite.

ELIGIBILITY & REQUIREMENTS

1. Applicants must be nonprofit organizations with tax-exempt 501(c)(3) status and provide services in the State of Hawai‘i. Programs with fiscal sponsors are not eligible.
2. Applicants are required to provide case management services and utilize and monitor individual care plans that have specific client-centered goals for kūpuna. HCF has identified 4 key indicators which can contribute to kūpuna’s ability to age in place: Prevention of falls, Nutrition, Socialization, and Functional mobility. Applicants should include all or some of these indicators into kūpuna’s care plans. The plans should be continually assessed to evaluate the effectiveness of the services to meet kūpuna’s needs.
3. Organizations must be in good standing with HCF. Organizations currently funded by HCF with overdue final reports are not eligible to apply.
4. Grants may not be used for the following:
 - Re-granting (i.e., redistribution of these funds to other organizations or individuals)
 - Endowments
 - Major capital improvements including capital campaigns, construction or renovations
 - Activities that promote religious beliefs
5. Adult day care & adult day health programs must have a current license issued by the Hawaii State Department of Health. These programs will be required to maintain an active license throughout the grant period and must provide a copy of the license to HCF upon renewal each year.

⁴ “Executive Office on Aging Annual Report for SFY 2020.” *Department of Health Executive Office on Aging*, Dec 2020, https://health.hawaii.gov/opppd/files/2020/12/EOA_LEG-REPORT-2020-w_attachment-12.21.20.pdf. Accessed 6 February 2023.

Grant Award & Requirements

Applicants may apply for KAP grants up to \$255,000 for three-years (\$85,000 per year) for activities within the FY 2024, FY 2025, and FY 2026 grant period (July 1, 2023, to June 30, 2026). Larger grants may be considered for applicants that can demonstrate reaching a greater number of kūpuna through multiple sites.

Awarded programs will:

- Receive notification of awards by the end of June 2023 with a grant start date of July 1, 2023. Year one grant payments will be mailed upon the execution of a Grant Terms and Conditions Agreement.
- Be required to submit annual progress and expenditure reports including an Evaluation Reporting Matrix (see Attachment A) to report on the total number of kūpuna served and the residence of kūpuna one year after their entrance into the program and toward the end of each fiscal year thereafter. Grantees will also need to gather and report feedback from kūpuna and caregivers to evaluate the satisfaction of clients and effectiveness of programs to support aging in place. Second- and third-year grant payments are contingent on receipt and approval of prior year's progress and expenditure reports. A final narrative and expenditure report must be submitted one month after the grant term ends to HCF.
- Be required to attend training and networking opportunities including grantee gatherings and other events. Training topics at grantee gatherings and events will be informed by grantee feedback and may focus on building organizational and program capacity, improving volunteer management, achieving financial sustainability, etc.
- Receive a site visit by HCF staff at least once during the grant term.

Award Categories

Applicants may apply for grants under Category 1 and/or 2. If applying for both, a separate application should be submitted for each Category. Additionally, if an applicant is also requesting funding for caregiver support services, this request should be included in only one of the applications.

Category 1. Community-based support services for low- to moderate-income kūpuna age 65 or older provided in kūpuna's homes or at a center/facility.

Eligible community-based support services for Category 1 include but are not limited to: chore services, classes to support physical health and socialization, transportation assistance, meal preparation, meal delivery services, and overnight respite support for caregivers. Preference will be given to organizations that demonstrate broad reach. The use of volunteer-based models of service delivery to increase the availability and quality of services is encouraged.

Category 2. Tuition assistance for low- to moderate-income kūpuna age 65 or older to attend licensed adult day care or adult day health programs.

Only applications from licensed adult day care and adult day health programs will be considered for Category 2. Applicants must submit a current copy of their license from the Hawaii State Department of Health. Preference will be given to Category 2 applicants that can demonstrate programming that responds to kūpuna and caregiver needs and has strong evaluation practices.

****Caregiver support services****

Applicants may apply for additional funds (up to \$10,000 per year per organization) to provide caregiver support services. Through the provision of community-based support services and adult day care & adult day health for kūpuna, caregivers receive respite. Caregiver support services including training or

education, counseling, support groups, and other supplemental support services can positively impact the wellbeing of caregivers and improve the ability of caregivers to support kūpuna. All caregivers are eligible to benefit from these services. Grantees will be required to evaluate the impact of their program on caregivers.

Evaluation Criteria

The strongest proposals are those that demonstrate the following criteria:

1. Demonstrates it has the experience to provide services and the capacity (staff, volunteers, board, etc.) to fulfill its service commitments and reporting requirements.
2. Understands the needs of the community where it works and provides services that are attuned to the needs of both kūpuna and their caregivers within its community.
3. Clearly explains how the services contribute to the goal of aging in place.
4. Clearly articulates a well-defined procedure for client intake and determining financial eligibility.
5. Demonstrates it has a high-quality individual care plan and regularly revisits the care plans to ensure kūpuna's goals are met.
6. Partners and collaborates with other organizations to ensure kūpuna receive a continuum of services.
7. Program budget is reasonable and appropriate detailing other sources of funding.

APPLICATION PROCESS

Online Application

Applications must be submitted online through Hawai'i Community Foundation's **Grants Portal** available here: https://hawaiicf.smartsimple.com/s_Login.jsp. New users must register for an account. Registered users may login to their account to submit an application. Please give yourself adequate time before the submission deadline to access the system and familiarize yourself with the application process and requirements.

Instructions

- Only complete and timely applications will be accepted.
- The online application has fillable boxes with character limits. The character counts in MS Word may not match the character counts in the application. If you cut and paste your work into the application, please be sure your text fits the space provided.
- The online application accepts diacritical markings in written 'Ōlelo Hawai'i (Hawaiian language).

ORGANIZATION PROFILE

As part of the online application your organization profile must be certified prior to submission of grant applications and must be certified annually. Information needed to complete your organization's profile includes, but is not limited to, the following:

- IRS 501(c)(3) determination letter (not required if previously applied to the Foundation or if applying through a fiscal sponsor)
- Number of full-time, part-time, or regular volunteer staff
- Organization Mission
- Service Location(s)
- Types of services provided including age, gender, and target populations served
- Financial Statements – including income statement (or profit/loss statement) and balance sheet for the most recently completed fiscal year, and annual operating budget for the current year.

Audited financial statements are preferred but not required. Local units of national organizations must submit local unit financial information.

- Board of Directors List

APPLICATION

The application consists of 4 tabs. Information needed to complete your application includes the following:

1. Program Overview:

- Provide general information and characteristics about the program including program title, duration, area of interest, program location(s), ages and genders served, and the CHANGE sector(s) your program most closely aligns with.
- For more information about the CHANGE Framework, please visit our website <https://www.hawaiicommunityfoundation.org/change>.

2. Program Information:

- **Organization Description:** Describe the history and mission of the organization/program. Share about the organization's experience implementing this program, including staff/volunteer expertise. Share how you screen staff and volunteers to safeguard kūpuna. If applying under Category 2, provide the total number of participants the organization is licensed to serve and the current number of enrolled participants (by site if more than one site will be served). *(Maximum 2,500 characters = ¾ page)*
- **Executive Summary:** Provide a brief summary of the proposed program. This executive summary may be used for different purposes, including external communications, to describe the program should a grant be awarded. *(Maximum 2,500 characters = ¾ page)*
- **Problem or Opportunity:** Provide data and information to describe the needs of kūpuna in the neighborhood/community/island your program serves (e.g., within your service area the number of kūpuna 65+, the projected growth of this demographic, and percentage who are low- to moderate-income). *(Maximum 3,000 characters = ¾ page)*
- **Program Activities:** Describe the program and how the provided services will meet the needs of kūpuna and contribute towards the goal of aging in place. Where will services be provided? Share how the program utilizes volunteers (if applicable). Describe the formal intake process for kūpuna who are applying for KAP funded services. Describe the process for determining the "low- to moderate-income" status for clients (i.e., clearly explain what documentation is used to determine financial need). Explain how the program utilizes an individual care plan for kūpuna and how often the care plan is revisited. Describe how your program partners and collaborates with other organizations to ensure kūpuna receive a continuum of services. If applying under Category 2, describe your strategy for how tuition assistance is shared amongst eligible kūpuna. *(Maximum 3,500 characters = 1 page)*
- **Expected Results:** Describe the impact your organization is seeking to achieve. Provide the projected number of kūpuna to be served by program year (FY 2024, FY 2025, and FY 2026). Describe how kūpuna and caregiver feedback will be gathered and evaluated. Describe how you evaluate your services and how this information impacts program change and development. *(Maximum 3,500 characters = 1 page)*
- **Caregiver Support Services (if applicable):** Describe the process for determining caregivers' need for support. What are the major elements of the caregiver support program? Provide the projected number of caregivers to be served by program year (FY 2024, FY 2025, and FY 2026). Describe how caregiver feedback will be gathered and evaluated. *(Maximum 3,000 characters = ¾ page)*

- 3. Budget:** Provide your total program budget and total amount requested through this application. Upload the **KAP Program Budget Form**, including program expenses (KAP Request & Other Funding) by Fiscal Year and income for Year 1.
- The KAP Program Budget Form is available in the Grant Portal's Resources > Additional Documents and Templates section. This form must be completed and uploaded. The program budget includes separate budgets for kūpuna services and caregiver support services (if applicable).
 - Note – For adult day care & adult day health programs, while the funds will support tuition assistance, the program budget should include the organization's expenses that the grant funding will support, for example staff salaries, fringe benefits, supplies, transportation costs, etc.
- 4. Support Documents & Certification:** Upload these additional required documents as PDFs:
- **Individual Care Plan** - Template of your Individual Care Plan for kūpuna.
 - **License** - Adult day care & Adult day health programs must upload the current license issued by the Hawaii State Department of Health.

CONTACT INFORMATION

If you have questions about this Funding Opportunity, please contact Elise von Dohlen at 808-566-5585 or evondohlen@hcf-hawaii.org.

For technical assistance with the online application process, please submit a support ticket at <http://hawaiicommunityfoundation.org/ticket>.

Kūpuna Aging in Place Program for Elderly Services Evaluation Reporting Matrix

Organization Name: _____

		KAP Kūpuna							KAP Caregiver		
		Kūpuna-Centered Goal			Kūpuna Feedback				Caregiver Feedback		
Category Assessment Tool	Total Kūpuna	Total Projected	Total Served	Total Aging in Place*	Are you satisfied with the services you received?	Would you recommend these services to a friend?	Did the services you received help you to meet your personal goals?	In general, compared to other people your age, would you say your health is: excellent, very good, good, fair, or poor?	Are you satisfied with the services provided to the person in your care?	Would you recommend these services to a friend?	Have the services provided, enabled you to provide care for a longer period of time than would have been possible without these services?
Outcome	# of kūpuna served by the entire program during the year.	# of kūpuna projected to be served during the year.	# of kūpuna served during the year.	# kūpuna who remained in their home at the end of the year.	Total % answered Yes & total surveyed	Total % answered Yes & total surveyed	Total % answered Yes & total surveyed	Total % answered by response & total surveyed	Total % answered Yes & total surveyed	Total % answered Yes & total surveyed	Total % answered Yes & total surveyed
Year 1 (FY 2024)											
Year 2 (FY 2025)											
Year 3 (FY 2026)											

*Defined as "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level." (U.S. Centers for Disease Control and Prevention)