



Special Diabetes Program for Indians (SDPI)

# Activities/Services Not Related to Best Practice

IHS Division of Diabetes Treatment and Prevention  
July 22, 2020

# SDPI – Commonly Used Abbreviations

- ADC = Area Diabetes Consultant
- Audit = IHS Diabetes Care and Outcomes Audit
- Best Practice = SDPI Diabetes Best Practice for FY 2016-2020
- DDTP = IHS Division of Diabetes Treatment and Prevention
- DGM = IHS Division of Grants Management
- EHR = Electronic Health Record System
- GMS = Grants Management Specialist
- NoA = Notice of Award for your SDPI Grant
- PO = Project Officer
- RKM = Required Key Measure
- SDPI = Special Diabetes Program for Indians
- SOS = SDPI Outcomes System

# Activities/Services: Overview

- Describe other diabetes prevention and treatment activities not related to the Best Practice.
- Things to Consider:
  - Utilize the most SDPI funding and program time.
  - Address significant needs/challenges
  - Audit items that need improvement

# Activities/Services

## Purpose is to:

- Fully describe your scope of work.
- Ensure that all activities/services are connected back to the budget.
- Address diabetes-related issues based on Audit report.
- Address concerns from your 2020 application summary review.
- Continue a previous Best Practice activity/service.

# Activities/Services

## Preparation:

1. Address Audit item improvements.
2. Look at review summary (see grant notes in GrantSolutions).
3. Resources and staff.
4. Match the budget.

# Activities/Services

## Part G. Activities/Services not related to selected Best Practice

Complete this section if you are proposing to implement activities/services not related to your selected Best Practice and/or Target Group in 2021. Otherwise, skip to [Part H](#).

Activities/services reported here should be based on the following criteria:

- Utilize the most grant funding and program time.
- Address significant needs/challenges. This could include items from your review of the Diabetes Audit Reports ([Part B](#)).

### Activity/Service #1

G1.1 What activity/service will you be providing with your SDPI funds (not related to your selected Best Practice) to reduce risk factors for diabetes and related conditions?

Provide physical fitness activities including chair exercises, yoga for kids, Zumba, Pilates at the local market every month.

# Activities/Services: Examples

## Clinical

- Foot Exams
  - Weekly foot care clinics
  - Providers refer patients with elevated risk of developing diabetes-related foot complications (criteria listed)
  - Comprehensive foot assessment by provider and basic foot care by nurse
  - Complicated/complex referred to Podiatrist
  - Therapeutic shoe program

## Community

- Physical/Fitness/Exercise Events
  - Walk/runs
  - Walking/jogging club
  - Fitness classes, challenges, training sessions
  - Fitness Fairs (obstacle courses or inflatable action tools)
  - Kickball, softball, basketball, canoeing, snowshoeing, archery, swimming, gardening, biking, dancing, yoga etc.

# Poll Question

What activities would you provide in your clinic and community?



# Activities/Services: Target Group

G1.2 **Target Group for this activity/service:** See the [Target Group section](#) (steps two – five) on how to select a Target Group.

- a. What is the number of patients/participants in your Target Group for this activity/service?

300

- b. Describe your Target Group for this activity/service.

Community members of all ages who attend the market.

- c. Briefly describe how your program's Target Group number was determined.

This target number was selected because we have observed community members at the market with their families of all ages.

# Target Group Examples

## Clinical

- Foot Exam Target Group
  - All patients on local Diabetes Registry
  - Patients with diabetes and a history of foot ulcer, amputation or abnormal comprehensive foot exam
  - Patients with diabetes and > or equal to 10 years duration
  - Patients with diabetes and age > or equal to 50
  - Referred patients with diabetes

## Community

- Physical/Fitness/Exercise Events
  - All community members
  - Registered/enrolled participants
  - Consortium community members
  - Gym members/ class attendees
  - Community youth with adult buddy
  - Seasonal roster, league list, summer camp, specific school, district, housing or workplace
  - People with diabetes or at-risk

# Activities/Services: Improvement & Evaluation

**G1.3** What improvements do you anticipate will result from implementing this activity/service?

Increase awareness of different types of physical activities.

**G1.4** How will you evaluate whether these improvements occurred?

A head count by support staff, sign-in sheets.

# Improvement & Evaluation

## Best Practice

- Evaluation is very specific.
- Audit data reports.
- SOS data summary report.

## Activities/Services Not Related

- Evaluation data is not required to be submitted.
- Can be anything your program chooses and can include Audit data.
- Examples provided on next slide.

# Improvement & Evaluation Examples

## Clinical

- Foot Exam
  - Increase in Foot Exam Rates- *Audit %*
  - Decreased foot complications- *Chart review*
  - Increase in nurse foot clinic attendees or visits- *Clinic visits #s*
  - Comparison of number of therapeutic shoe referrals by year- *# of yearly shoe purchases*
  - Track clinic or podiatry referrals- *# of referrals*

## Community

- Physical/Fitness/Exercise Events
  - All community members- *Event #*
  - Registered/enrolled participants- *Post-test*
  - Community consortium attendees- *Sign-in #*
  - Gym members/ class attendees- *Satisfaction survey*
  - Community youth with adult buddy- *Show of hands-Fab Fit Fun Day?*
  - Seasonal roster, league list, summer camp, specific school, district, housing area or workplace etc. - *# attendees that would attend again*

# Activities/Services: Putting It All Together!

- **Activity:** Provide Physical Fitness activities including chair exercises, yoga for kids, Zumba, and Pilates at the local market every month.
- **Target Group:** 300
- **Description:** community members of all ages who attend the market.
- **Improvement:** Increase awareness of different types of physical activities.
- **Evaluation:** head count by support staff, sign-in sheet.

# Discussion Question

What changes in “Activities/Services” are you considering in this COVID-19 time?



# Questions?

# Poll Question

Are you involved in budget planning and writing?

- A. Yes
- B. No
- C. Don't know





# SDPI Budget for 2021 Application

IHS Division of Diabetes Treatment and Prevention  
July 22, 2020

# Application Due Date and Submission

Due to the demands of the COVID-19 pandemic, there are two options for submitting the SDPI continuation application for 2021.

1. Option 1 – Submit all documents and forms by September 2, 2020 via GrantSolutions.
2. Option 2 – Submit in two parts:
  - a. By September 2, 2020: Submit the SF-424 and a statement of continuation via GrantSolutions.
  - b. By December 15, 2020: Submit the remaining application documents in GrantSolutions as a grant note.

You may submit your program's continuation application documents as soon as they are completed, even if that's earlier than the dates noted above

[https://www.ihs.gov/sites/sdpi/themes/responsive2017/display\\_objects/documents/SDPI\\_AppRepDates20-21.pdf](https://www.ihs.gov/sites/sdpi/themes/responsive2017/display_objects/documents/SDPI_AppRepDates20-21.pdf)



# Creating a Budget Narrative

- Match the scope of work described in the Project Narrative.
- Address the proposed project including activities/services.
- Reflect reasonable and allowable costs.
- Aim for the budget to be accurate, reasonable, and consistent to strengthen the application.



# Budget Narrative

The Budget Narrative consists of two parts:

1. Line Item Budget
2. Budget Justification

# Line Item Budget - Sample

## Line Item Budget – SAMPLE

<b>A. Personnel</b>	
Program Coordinator	40,000
Administrative Assistant	6,373
CNA/Transporter	6,552
Mental Health Counselor	5,769
<b>Total Personnel:</b>	<b>58,694</b>
<b>B. Benefits:</b>	
Program Coordinator	14,000
Administrative Assistant	2,231
CNA/Transporter	2,293
Mental Health Counselor	2,019
<b>Total Fringe Benefits:</b>	<b>20,543</b>
<b>C. Supplies:</b>	
Desk Top Computers and Software	3,000
Exercise Equipment	3,300
Laptop Computer	1,500
LCD Projector	1,200
Educational/Outreach	3,000
Office Supplies	1,200
Supplies for Wellness Luncheons	2,400
Medical Supplies (Clinic)	3,000
<b>Total Supplies:</b>	<b>18,600</b>
<b>D. Training and Travel:</b>	
Local Mileage	1,350
Staff Training & Travel -Out of State	2,400
<b>Total Travel:</b>	<b>3,750</b>

<b>E. Contractual:</b>	
Fiscal Officer	16,640
Consulting Medical Doctor	14,440
Registered Dietitian/Diabetes Educator	18,720
Exercise Therapist	33,250
<b>Total Contractual:</b>	<b>83,050</b>

<b>F. Equipment:</b>	
Heavy Duty Printer/Scanner/Copier	9,000
<b>Total Equipment:</b>	<b>9,000</b>

### G. Other Direct Costs:

Rent	20,805
Utility	4,000
Postage	500
Telephone	2,611
Audit Fees	2,500
Professional Fees	2,400
Insurance Liability	1,593
Office Cleaning	1,680
Storage Fees	240
Biohazard Disposal	154
Marketing/Advertising	2,010
<b>Total Other Direct Costs:</b>	<b>38,493</b>

<b>H. Indirect Costs (15%):</b>	<b>\$34,819</b>
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**TOTAL DIRECT COSTS** \$232,130.00

**TOTAL DIRECT COST AND  
INDIRECT COSTS** \$266,949

# Budget Justification-Sample

## Budget Justification – SAMPLE

### A. Personnel: \$58,694.00

#### Program Coordinator: George Smith

A full-time employee responsible for the implementation of the program goals as well as overseeing financial and grant application aspects of the agency.

(100% Annual Salary = \$40,000/year)

#### Administrative Assistant: Susan Brown

A part-time employee responsible for providing assistance to the Program Coordinator.

(416 hours x \$15.32/hour = \$6,373.12)

#### CAN/Transporter/Homemaker: To be named

A full-time employee working 8 hours per week on this grant providing transportation services and in-home health care to clients.

(416 hours x \$15.75/hour = \$6,552.00)

#### Mental Health Counselor: Lisa Green

A part-time employee works 6 hours per week in the ADAPT/Mental Health Program providing counseling and workshops to clients.

(6 hours x 52 weeks x \$18.49/hour = \$5,768.88)

### B. Fringe Benefits: \$20,543.00

Fringe benefits are calculated at 35% for both salaried and hourly employees. Fringe is composed of health, dental, life and vision insurance (20%), FICA/Medicare (7.65%), worker's compensation (1.10%), State unemployment insurance (1.25%), and retirement (.5%).

Program Coordinator: \$14,000  
Administrative Assistant: \$2,230.59  
CAN/Transporter/Homemaker: \$2293.20  
Mental Health Coordinator: \$2019.11

### C. Supplies: \$18,600.00

#### Desk Top Computers and Software (2)

Needed by our Diabetes Educator, Exercise Specialist, and Medical Director in order to access and update information on client's records. (2 x \$1,500.00 = \$3,000.00).

#### Exercise Equipment

Elliptical cross trainer equipment (creates less impact on the knees), body fat analyzer, 8 dumbbell weights, 4 exercise balls, 4 exercise mats, step stretch, adjustable bench, bow flex plates kit, 2 dance pads, ball stacker set, and exercise video. Total for all exercise equipment is \$3,300.00.

#### Laptop Computer

This type of computer is needed to be used in conjunction with the LCD projector that will be used by the Diabetes Educator for presentations. Cost is \$1,500.00.

#### LCD Projector

This equipment will be used by the Diabetes Educator for presentations. Cost is \$1,200.00.

#### Educational & Outreach Supplies

Various printed literature, books, videos, pamphlets, pens, bottled water, little promotional items will be needed to hand out at various health fairs, events, and to various groups to educate and promote health. Funds allocated are \$3,000.00.

#### Office Supplies

General office supplies are essential in order to properly maintain client records, financial records, and all reporting requirements. General office supplies include file folders, labels, writing pads, pens, paper clips, toner, etc. \$1,200.00 will be included in this budget.

#### Supplies for Monthly Wellness Meetings

An allocation of \$200.00 has been made towards teaching tools that will be used by the Diabetes Educator during the monthly wellness classes. (\$200.00 x 12 months = \$2,400.00)

#### Medical Supplies - Clinic

An allocation has been made for purchasing medical supplies for our clinic such as alcohol wipes, strips for glucometers, paper sheets, gloves, gowns, etc., in the amount of \$3,000.00.

# Example of a Budget Justification

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# Comparing Budget Justification to Line Item Budget

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# Tips to Improve your Budget

- Make sure you have the correct total dollar amount for your budget.
- Personnel identified in budget match the paid staff listed in the project narrative.
- Make sure that your budget aligns with the:
  1. Best Practice.
  2. Activities/Services not related to Best Practice.



# Summary

## Ask yourself:

- Does the budget match the scope of work described in the Project Narrative?
- Is each line item adequately specified and justified?
- Is the Budget Narrative within the guidance on 5 page limit?
- Does the total funding amount match between Federal form, line item budget, and justification?
- Is the budget reasonable and realistic?

# Application Resources

- [SDPI Application webpage](#): Instructions, templates, checklist, webinar access, and recordings.
- [GrantSolutions.gov](#) – Web-based system where application will be submitted.
- [DGM website](#) – policies, forms, GrantSolutions webinars.
- Connect with a human:
  - [ADC Directory](#) – detailed or program-specific questions, program plan
  - DDTP – SDPI Team ([sdpi@ihs.gov](mailto:sdpi@ihs.gov)) for questions on SOS, Project Narrative. WebAudit Team ([diabetesaudit@ihs.gov](mailto:diabetesaudit@ihs.gov)) for questions on annual Diabetes Audit Reports.
  - [Grants Management Specialist](#) – budget narrative, forms, GrantSolutions.

## IHS Division of Grants Management

- Website: [www.ihs.gov/dgm](http://www.ihs.gov/dgm)
- Main line: 301-443-0243

<b>IHS Division of Grants Management – Grants Management Specialists (GMS)</b>			
<b>IHS Area</b>	<b>GMS</b>	<b>GMS Email</b>	<b>GMS Phone</b>
Albuquerque, Nashville, Navajo, Phoenix, Tucson	<b>John Hoffman</b>	<b>John.hoffman@ihs.gov</b>	<b>301-443-2116</b>
Great Plains, Portland, Oklahoma City	<b>Cherron Smith</b>	<b>Cherron.smith@ihs.gov</b>	<b>301-443-2192</b>
Alaska, Bemidji, Billings	<b>Patience Musikikongo</b>	<b>Patience.musikikongo@ihs.gov</b>	<b>301-443-2059</b>
California and Urban	<b>Pallop Chareonvootitam</b>	<b>Pallop.chareonvootitam@ihs.gov</b>	<b>301-443-2195</b>