APPLICATION SUBMISSION REQUIREMENTS

The Applicant must submit its response in two **SEPARATE** sealed envelopes.

ENVELOPE #1 – THRESHOLD REVIEW

This sealed envelope must contain the following:

- 1. Application Threshold Checklist Section 0610
- 2. Required Attachments
 - a) Current Board of Directors by-laws
 - b) Approved Board of Directors minutes during the previous fiscal year reflecting the Board has a documented process that:
 - i. Reviews program performance
 - ii. Approves budgets
 - iii. Reviews financial performance
 - iv. Approves audit reports
 - c) Copy of the most recently filed 990 or 990 EZ, or Extension to File documentation (no older than FY2015)
 - d) A complete set of audited financial statements which include the auditor's opinion and any management letters, covering the two most recent consecutive audit years

The envelope should be labeled: THRESHOLD REVIEW CHECKLIST

[NAME OF AGENCY]

[NAME OF PROPOSED PROGRAM]

ENVELOPE #2 – APPLICATION DOCUMENTS

This sealed envelope must contain the following:

1 original and 3 CDs or flash drives each containing all the elements below:

- 1. Executive Summary
- 2. Application
- 3. Attachments

The envelope should be labeled: APPLICATION DOCUMENTS [NAME OF AGENCY]

BOTH SETS OF ENVELOPES SHOULD BE SHIPPED IN A BOX (OR BOXES) WITH THE SOLICITATION NUMBER CYD2017CG CLEARLY MARKED ON THE OUTSIDE AND IDENTIFY WHICH ENVELOPE IS IN WHICH PACKAGE.

Application Evaluation

An application must address each item in Parts I, II, & III, outlined below, in order to be considered responsive to the goals of this RFA. Part IV is optional and is not required in order for an application to be considered responsive to the goals of this RFA. A total of 100 points may be awarded to the application in Parts I, II, & III below with an additional 15 bonus points available in Part IV for a potential of 115 total evaluation points. The maximum score per section is noted at the beginning of each section. All responses will be evaluated as to how the proposed program aligns with the goals of this RFA and whether each required response to the evaluation factors has been adequately addressed.

Application Format

The Applicant must use size 12 Times New Roman font. An original Application must be printed double-spaced on single-sided 8½ x 11 inch plain white paper with 1" margins and no Page Scaling. Do not submit booklets, pamphlets, or other bulky items. Do not use covers, card stock, staples, binders, notebooks, or dividers with tabs. Fasten the proposal with binder clips only.

An application cannot exceed <u>20 (twenty) pages</u>, excluding executive summary, table of contents, signed certifications, budget forms, MOUs, organizational charts, resumes, job descriptions or other required attachments outlined in the sections below. An <u>additional 5</u> (<u>five</u>) <u>pages</u> is allowed if an application responds to any or all of the items in Part IV of this RFA.

The actual application itself should be organized and labeled using the following informational sequence:

If you are applying for more than one program service, you must fill out a separate RFA Application package, for each program service category.

Executive Summary

Submit a one-page summary, which may be single spaced, describing the estimated amount of unduplicated youth served, program description, the target age of participants, and program total cost for services to the Community Youth Development (CYD) program in the 78744 ZIP code. This summary is not included in the 20-page page limit.

Part I – Project Work Plan

A. Organizational Capacity for Program Services

- 1. Describe the Applicant's history and relationship with the target zip code and population
- 2. Describe the Applicant's experience in developing and managing juvenile delinquency prevention programs.
- 3. Describe the services to be provided in detail and provide information on the following components: (For a detailed description of the Program Service Area, see Section 0500 Scope of Work: Section 3 Principle Objective & Goals).
 - a. Is the Program a stand-alone program or component of a larger program
 - b. Indicate the protective factors this program will identify for change:
 - i. Involvement with positive peer group activities and norms
 - ii. Social competencies such as decision making skills, assertiveness and interpersonal skills

- iii. Parental/guardian supervision
- iv. Caring adults other than parent
- v. Strong bond between children and parents
- vi. Emotional support and absence of severe criticism
- vii. High parental expectations
- viii. Clear rules and expectations
- ix. Involvement with school/community
- x. Friendship network
- xi. Positive perception of self and others
- xii. Places high values on helping others
- xiii. Sense of purpose
- c. Mentor to Youth ratio (Applicable to Mentoring services only)
- d. Describe the process for ensuring opportunities are provided for youth to serve in leadership roles in their community (Applicable to Youth Leadership Development services only)
- e. Identify the program model or curriculum to be implemented, to include the developer of the program (if applicable)
- f. Identify the target population to be served (i.e. Gender, Ages, Race/Ethnicity, and School Grades Targeted
- g. Identify the average frequency of services (i.e. daily, weekly, monthly, etc.)
- h. Identify the average intensity of services (i.e. Total number of sessions, visits, or interaction per participant)
- i. Identify the average duration of services (i.e. average amount of time it will take a

participant to complete the program)

- j. Identify the location services will be delivered (i.e. program office, client's school, client's home, etc.)
- k. Identify the days/times services will be provided (i.e. M-F 9-5, 24/7 services, weekend services, etc.)
- 4. Describe the Applicant's experience in managing grant programs.
- 5. Describe your plan for ensuring that CYD information is registered and remains updated with 211-United Way Resources within 30 days of any changes in the scope of the CYD program.
- 6. Explain how you will ensure DPS, DFPS and (FBI-only if lived outside of Texas within the last 5 years)criminal background checks are conducted and criminal history affidavits are obtained for staff and volunteers with direct client contact or with access to client information, prior to such contact or access and are renewed every two years.

*The City of Austin will not reimburse any staff time paid if billing is submitted on a staff that has not cleared all aforementioned background checks prior to the time stated on the timesheets requested in the reimbursement submission where applicable.

B. Client Recruitment and Retention Strategies

- 1. Describe the process for recruiting, engaging and retaining program participants. Describe the procedures and/or processes for intake, including how the family's individual need(s) for service will be assessed.
- 2. Will your program offer incentives for participation? If yes, describe the types of incentives to be provided.
- 3. Discuss potential barriers (e.g. transportation, child care, Limited English Proficiency, etc.) to providing services to the target population and how you will overcome those barriers. If additional services such as transportation are NOT to be offered, identify the processes that are used to ensure that these factors are not obstacles to accessing services.

C. Case Documentation

- 1. Explain how you will ensure clients complete a pre- and post-service survey.
- 2. Indicate the staff members who will be responsible for collecting the pre- and post-service survey.
- 3. How will you determine that it is time to transition participants out of the program?

D. Organizational Structure and Staffing Plan

- 1. Attach two organizational charts: One representing your agency structure overall, marked Attachment A: Agency-Based Organizational Chart, and one showing the program you are discussing in this Application, marked Attachment B: Program-Based Organizational Chart. Your programmatic organizational chart should include the number of staff/volunteers supervised by each position and clearly show lines of reporting and supervision. Attach job descriptions for all potential key staff (limited to one page each; job descriptions and organizational charts do not count toward the proposal 20-page limit).
- 2. Explain and describe your agency's education and/or experience qualifications for staff delivering and supervising services.
- 3. Using Section 0645 Program Staff Positions and Time, list the project staff by title and the percentage of each position's time to be spent on the program.
- 4. In the table below, list all training your staff and volunteers will receive through your training plan. Identify the staff or volunteer position(s) for which you will require this training and the timeframe for conducting the training. If additional space is needed, please attach a separate table titled Attachment C: Training for Staff and Volunteers. (Additional page for Training Staff and Volunteers will not count toward 20 page limit)

Staff Position	Training Required	Delivery Parameters	Timeframe for Training

5. If staff vacancies occur, indicate the business continuity plan you will use to ensure services are continued, include all job duties.

Position title (indicate if a volunteer)	Services for which this position is responsible	Position supervised by:	Position has backup by this position:

6. Explain your agency's plan to ensure new and on-going staff and volunteers complete cultural competency training in person. Each CYD direct paid staff members and volunteers must obtain a minimum of three (3) hours of cultural competency training. All trainings must be obtained for all

direct staff/volunteers providing services working on the CYD contract within 60 days of start of contract year.

7. Explain how cultural competency principles are incorporated and implemented by your agency on a daily basis; and your agency's plan for dealing with any issues related to cultural competence.

E. Outputs and Outcomes

Applicants must use the Outputs and Outcomes required by this RFA as indicated below.

Output Measures

- 1. Indicate the expected average number of Target Youth served monthly for initial 3 month period (FY17) and for subsequent 12 month period (FY18).
- 2. Indicate the expected average number of Target Youth served annually for initial 3 month period (FY17) and for the subsequent 12 month period (FY18).

OUTPUTS AND OUTCOMES	TAR	GET
OUTPUT 1: The expected average number of Target Youths served monthly.	FY17	FY18
OUTPUT 2: The expected number of Target Youths served annually.	FY17	FY18
OUTPUT 3: Completed Pre-Service Protective Factors Survey Questionnaires are obtained from 6-9 year old Target Youths served in the Provider's CYD Program.	100%	
OUTPUT 4: Completed Pre-Service Protective Factors Survey Questionnaires are obtained from 10-17 year old Target Youths served in the Provider's CYD Program.		
OUTPUT 5: Completed Post-Service Protective Factors Survey Questionnaires are obtained from 6-9 year old Target Youths served in the Provider's CYD Program.		
OUTPUT 6: Completed Post-Service Protective Factors Survey Questionnaires are obtained from 10-17 year old Target Youths served in the Provider's CYD Program.		

Outcome Measures

OUTCOME 1: 10-17 year old Target Youths served in the Grantee's CYD Program will not engage in delinquent behavior.	95%
OUTCOME 2 : 6-9 year old Target Youths report an increase in the protective factors.	80%
OUTCOME #3 : 10-17 year old Target Youths report an increase in the protective factors.	80%

Part II – Cost Effectiveness

Applicants are <u>required</u> to submit a separate budget for both a 3-month period and for a **12-month period** and provide the following information to describe the budget necessary to accomplish the proposed strategy/strategies.

The application will be evaluated on how well it addresses **all** of the following:

A. Budget

- 1. A summary description of the budget justification for the program service is required.
 - a. Applicants must use Section 0650 Program Budget and Narrative to provide the required budget information. All expenses should be identifiable, reasonable, and necessary.
 - **b.** Applicant shall not subcontract any services. All services described in this RFA are the sole responsibility of the contractor. All awards granted will be only to one sole agency. No CYD funds will be granted to two agencies in one proposal. **Please do not use Program Subcontractors section of the Program Budget Form 0650.**
- 2. Describe the Applicant's fundraising and administrative percentage, calculated from its most recent Form 990. To do so, add the amount in Part IX (Statement of Functional Expenses), Line 25, Column C (Management and General Expenses) to the amount in Line 25, Column D (Fundraising Expenses), and divide the sum by Part VIII (Statement of Revenue), Line 12, Column A (Total Revenue), and multiply the result by 100. No other methods may be used to calculate this percentage.

For organizations that filed the short form (IRS Form 990EZ), utilize the long form (IRS Form 990) at http://www.irs.gov/pub/irs-pdf/f990.pdf (and instructions http://www.irs.gov/pub/irs-pdf/i990.pdf) to determine your fundraising and administrative percentage calculation. Your organization is not required to complete and resubmit the entire long form to the IRS, but must determine the calculation from

the long form (IRS Form 990) parts identified above.

B. Cost per Client

1. Describe the average cost per City client served for both the three (3) month period and the twelve (12) month period. In the description, detail the calculation used to derive the average cost.

C. Program Funding Summary

1. Using Section 0655 – Program Funding Summary, provide an overview of all funding sources the Applicant will use for the proposed project.

Part III – Local Business Presence

Local Business Presence: The City seeks opportunities for businesses in the Austin Corporate City Limits to participate on City contracts. A firm (Offeror or Subcontractor) is considered to have a Local Business Presence if the firm is headquartered in the Austin Corporate City Limits, or has a branch office located in the Austin Corporate City Limits in operation for the last five (5) years. The City defines headquarters as the administrative center where most of the important functions and full responsibility for managing and coordinating the business activities of the firm are located. The City defines branch office as a smaller, remotely located office that is separate from a firm's headquarters that offers the services requested and required under this solicitation. Points will be awarded through a combination of the Offeror's Local Business Presence and/or the Local Business Presence of their subcontractors.

1. Using Section 0605 – Local Business Presence Identification Form provide the information requested regarding the Applicant and Subcontractor(s), if applicable.

Team's Local Business Presence	Points Awarded
Local business presence of 90% to 100%	10
Local business presence of 75% to 89%	8
Local business presence of 50% to 74%	6
Local business presence of 25% to 49%	4
Local presence of between 1 and 24%	2
No local presence	0

Part IV – Bonus Evaluation Points

A. Leveraging

5 points

For purposes of this solicitation, "leveraging" is specifically defined as follows.

- Leveraged funding is a situation where City funding is a portion of the total program budget for the proposed program which is received by a third party funder. Applicant must either:
 - o currently receive third party funding for the proposed program, or
 - Applicant has received a notice of funding award from a third-party funder for the proposed program.
- Leveraged funding must be direct funding for the program proposed by the Applicant and not funding for Applicant's other programs or solely for Applicant's general operations.

The following types of funding/donations <u>ARE NOT</u> considered "leveraging" under this solicitation and may not be included for consideration:

- Funding and funding opportunities that are anticipated but for which the Applicant has not received a notice of funding/award.
- Any type of in-kind, non-cash revenue such as time, expertise, or commodities.
- Anticipated "Return on Investment" benefits for the Applicant or for the community as a whole.

For each leverage opportunity, provide the following information:

- 1. Identify the third party funding that the Applicant receives for the proposed program.
- 2. Provide the name of the grant, award, or program under which the third-party funds are/will be awarded to the Applicant, the term of the third-party funding, and the amount of third-party funding contingent upon receiving City funding under this solicitation.
- 3. Describe the quantified impact on the proposed program if the Applicant does not receive City funding under this solicitation.
- 4. Provide contract or other documentation that confirms the requirement of City funding in order to receive the third-party funding as an attachment to the application.

B. Healthy Service Environment

Maximum 10 points

A maximum of 10 points will be awarded for Applicants who create a healthy service environment for their clients, visitors, and staff. Applicants will be awarded the point values indicated below for having implemented or agreeing to implement prior to 10/01/15 any or all of the four (4) Healthy Service Environment policies with a maximum award of 10 points for all four (4) policies described below.

- Tobacco-free Campus (3 points) Applicant has established and is enforcing a tobacco-free worksite policy and has developed initiatives and programming that promotes tobacco-free living. A tobacco-free campus policy states:
 - Use of tobacco products of any kind are not permitted on any property owned, leased, or rented by the organization (indoors and outdoors). This also includes parking areas and company cars. The policy applies to all employees, subcontractors, temporary workers and visitors.
- Mother-Friendly Workplace (**3 points**) Applicant actively promotes and supports breastfeeding by employees and maintains a written worksite lactation support policy that is regularly communicated to employees. The policy includes:
 - o employer provides work schedule flexibility, including scheduling breaks and work patterns to provide time for expression of milk;
 - o the provision of accessible locations allowing privacy;
 - o access nearby to a clean, safe water source and a sink for washing hands and rinsing out any needed breast-pumping equipment; and
 - o access to hygienic storage alternatives in the workplace for the mother's breast milk (may include the allowance of personal coolers onsite).
- Employee Wellness Initiative (**3 points**) The Applicant has a comprehensive Employee Wellness Initiative in place that promotes nutrition, physical activity, tobacco-free living, and the mental health of employees. The initiative encompasses healthy changes to the physical worksite environment as well as formal, written health promotion policies, programs or benefits impacting all employees. The initiative is promoted through educational and issue awareness efforts by the Applicant, signage and a supportive company culture, championed by leadership.
- Violence Prevention Policy (**1 point**) The Applicant is committed to providing a safe environment for working and conducting business. The Applicant will not tolerate or ignore behaviors that are threatening or violent in nature. The Applicant has a procedure to provide guidance for identifying and reporting threats and workplace violence.
- 1. If applicable, describe how the Applicant has implemented one or more of the Healthy Service Environment policies outlined above. Include the approved and signed policy/policies as an attachment to the application.

2. If applicable, describe how the Applicant plans to implement one or more of the Healthy Service Environment policies outlined above. Include the key personnel, by position name only, responsible for ensuring implementation. Also, describe any technical assistance which will be provided to assist the Applicant to implement the selected policy/policies.

Technical assistance is available from the City of Austin Health and Human Services Department Chronic Disease Prevention and Control Program to assist Applicants in planning and implementing a Tobacco-free Campus policy, Mother-Friendly Workplace policy and Employee Wellness Initiative. They can be contacted at 512-972-6760.

Additional Information:

Proposal Acceptance Period: All applications shall be valid until award, negotiation, and execution of contracts as directed by Austin City Council.

Proprietary Information: All material submitted to the City becomes public property and is subject to the Texas Open Records Act upon receipt. If a Proposer does not desire proprietary information in the proposal to be disclosed, each page must be identified and marked proprietary at time of submittal. The City will, to the extent allowed by law, endeavor to protect such information from disclosure. The final decision as to what information must be disclosed, however, lies with the Texas Attorney General. Failure to identify proprietary information will result in all unmarked sections being deemed non-proprietary and available upon public request.

Authorized Negotiator: Include name, address, and telephone number of person in your organization authorized to negotiate Contract terms and render binding decisions on Contract matters.

Exceptions: Please be advised that exceptions to any portion of the Solicitation may jeopardize acceptance of the application.

Application Preparation Costs: All costs directly or indirectly related to preparation of a response to the RFA or any oral presentation required to supplement and/or clarify an application which may be required by the City shall be the sole responsibility of the Applicant.