

REQUEST FOR APPLICATIONS

COVER SHEET

Issued: Monday, April 20, 2015	Description: 2015 Holly Area Children & Youth Services RFA# HHSD FHU 2015-4-20
Pre-Application Conference Date, Time and Location: Monday, April 27, 2015. 10:00 AM City of Austin - Health & Human Services Campus 7201 Levander Loop, Building E, Room E-16 Austin, Texas 78702 Attendance is recommended but not mandatory.	
Request for Explanations or Clarifications in Writing Only Deadline: Wednesday, May 6, 2015, no later than 12:00 Noon. E-mail: Ron.Hubbard@austintexas.gov Responses to written questions, addendums, and clarifications will be posted on the HHSD website at: www.austintexas.gov/page/holly-area-request-applications	
Applications Due No Later Than: <u>12:00 Noon, Friday, May 15, 2015</u> NOTICE: Late applications will <u>not</u> be accepted	
RFA Authorized Contact Person: Ron Hubbard, Manager Family Health Unit Phone: (512) 972-5028 E-mail: Ron.Hubbard@austintexas.gov	Deliver Completed Application prior to Due Date and Time to: City of Austin Health and Human Services Department Family Health Unit Attn: Ron Hubbard 7201 Levander Loop, Building C Austin, Texas 78702 (off Airport Blvd, just north of 183/Montopolis Bridge)

City of Austin Health and Human Services Department

REQUEST FOR APPLICATIONS (RFA) 2015 Holly Area Children and Youth Services

INTRODUCTION

The principle objective of this solicitation is intended to enable Health and Human Services Department (HHSD) to purchase services that improve the lives of youth. Funding is designated to address services to Austin's children and youth, with a specific focus on children and youth who live or attend school in the Holly Neighborhood area. Services will provide opportunities for development and enrichment which might otherwise not be available for youth in this community.

An annual total of \$95,020 of the City of Austin funding is available for this solicitation. Multiple awards are anticipated.

Applicants are required to submit a request in a specific, annual amount within the range from \$25,000 to \$48,000 for the initial 12-month period. The final amounts and deliverables of the successful applications will be negotiated.

Contracts awarded as a result of this solicitation are anticipated to be for 12-month contracts anticipated to be effective July 1, 2015 through June 30, 2016, with two 12-month optional renewals possible. Initial contracts and optional renewals are subject to funding availability and City Council approval. Optional renewals are also subject to contract performance.

Target Populations and Services

Target population:

- Children and youth ages 0 to 18 years. A more limited age range may be proposed.
- Children and youth that live or attend school in the Holly Neighborhood area that is bounded to the south by Lady Bird Lake, to the east by Shady Lane, to the north by East 7th Street, and to the west by the IH 35 access road.

Services:

The area of focus will be child and youth development including the broad areas of social/emotional, intellectual, language/communication, and physical development appropriate for the ages to be served.

In determining the final contract awards, the City may select applications that represent services to both young children and school-age youth. For example, one application that serves preschoolers and one that serves elementary or middle school age youth.

The City of Austin reserves the right to adjust the contract amount or scope of work over the contract period based on the ability of the contractor to expend funds and accomplish activities in a timely manner. The contract amount and scope of work are based on the availability of funds, application review, community needs, and other factors. When the City determines adjustments need to be made, the City will provide at least 30-days' notice to contractor.

City of Austin Health and Human Services Department

SOLICITATION

2015 Holly Area Children & Youth Services

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200	SOLICITATION INSTRUCTIONS
300	STANDARD PURCHASING TERMS AND CONDITIONS (not included-see note below.* HSD Social Service Terms and Conditions will be used.)
400	NOT APPLICABLE
500	PROGRAM DESCRIPTION, WORK STATEMENT FORMAT AND EVALUATION FACTORS, BUDGET DOCUMENTS
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900	NON-SUSPENSION OR DEBARMENT CERTIFICATION (not included-see note below*)
ATTACHMENT A	SAMPLE CONTRACT (SEE SECTION 6.1 INSURANCE REQUIREMENTS)

***NOTE:** Sections not included are on the Internet at: <http://austintexas.gov/department/standard-bid-documents> , but are not included with this application. Refer to the “Standard Solicitation Documents for Purchases” selections. When reading, substitute the words “applicant” and “application” for “proposer” and “proposal.” Do not use the addresses or phone numbers from the Internet documents. Use the addresses and phone numbers within this document. If you do not have Internet access, it is available at the Austin Public Libraries.

City of Austin Health and Human Services Department

REQUEST FOR APPLICATION (RFA)

2015 Holly Area Children & Youth Services

SCOPE OF WORK

Purpose and Goals

City Council included funding to Health and Human Services to the social services budget for children and youth services in the Holly Neighborhood. HHSD recognizes that providing Children and Youth Development Services affect the health of the entire community. Funding is designated to address social service needs for Austin's children and youth, with a specific focus in the Holly Neighborhood. Services to be funded will provide opportunities for development, enrichment, and other activities that might otherwise not be available for youth in this community.

Applicants must demonstrate their agency's success in assisting children and youth and successfully providing development and enrichment services including demonstrated ability to successfully serve culturally, linguistically diverse children and/or youth with agency programs.

Awards will be determined on the application scores and the best mix of projects that result in the most significant positive difference for children and youth including a mix of projects serving different ages.

Target Populations and Services

Target population:

- Children and youth ages 0 to 18 years. A more limited age range may be proposed.
- Children and youth that live or attend school in the Holly Neighborhood area that is bounded to the south by Lady Bird Lake, to the east by Shady Lane, to the north by East 7th Street, and to the west by the IH 35 access road.

Services:

The area of focus will be child and youth development including the broad areas of social/emotional, intellectual, language/communication, and physical development appropriate for the ages to be served.

Given diverse community needs, the City is intentionally leaving the type of program service options open for the areas described above, allowing applicants to propose services to best meet the needs of Austin's children and youth in a successful manner.

Client Eligibility Guidelines

- Children and youth who live in or attend school in the Holly Neighborhood (bounded to the south by Lady Bird Lake, to the east by Shady Lane, to the north by East 7th Street, and to the west by the IH 35 access road).
- Children and youth whose gross family income is less than 200% of the federal poverty guidelines.
- Applicants are required to specifically identify the population(s) they plan to serve.

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Eligible Applicant Organizations

- Any nonprofit with an IRS 501(c)(3) designation that can legally contract with the City of Austin as determined by the City Purchasing Office is eligible to submit an Application. City policy does not permit entering into a contract with an entity that owes taxes to the City. A copy of the organization's IRS 501(c)(3) Determination letter and the most recent, completed IRS Form 990 must be included with the application packet. An internet link to the 990 is acceptable if available online.
- Applicants are responsible for completing and maintaining documentation for Criminal Background Checks for all staff, volunteers, interns or any individuals who will be in contact with children and youth in connection with program services. The cost of this requirement should be considered when developing this program budget.
- Applicants must be able to meet the City's insurance requirements for social service contractors. See the insurance requirements in Attachment A of this RFA. The cost of this requirement should be considered when developing this program budget.
- Applicants must agree to provide the City a complete audit or financial review and the auditor's opinion and management letters (if selected as the Contractor). The cost of this requirement should be considered when developing this program budget.
- The Applicant and its principals may not be currently suspended or debarred from doing business with the Federal Government, as indicated by the GSA list of Parties Excluded from Federal Procurement and Non-Procurement Programs, the State of Texas, or the City of Austin.
- Organization must have a minimum of one year of successful experience providing services to children and youth including demonstrated ability to successfully serve children and youth with agency programs.

Application Due Date And Time

Friday, May 15, 2015 no later than Noon.

Late applications will not be accepted.

City of Austin Health and Human Services Department

SECTION 200: SOLICITATION INSTRUCTIONS

1. EQUAL OPPORTUNITY

- A. **Equal Employment Opportunity:** No Applicant, nor Applicant's agent, shall engage in any discriminatory employment practice as defined in chapter 5-4 of the City Code. No Application submitted to the City shall be considered, nor any Purchase Order issued, or any Contract awarded by the City unless the Applicant has executed and filed with the City a current Non-Discrimination Certificate. Applicants shall sign and return with their Application, the Non-Discrimination Certification located in Section 700 herein.
- B. **Americans with Disabilities Act (ADA) Compliance:** No Applicant, nor Applicant's agent, shall engage in any discriminatory employment practice against individuals with disabilities as defined in the ADA.

2. ELIGIBLE APPLICANTS

Please see the Scope of Work for eligibility criteria.

3. LEGAL AUTHORITY

The funding of a contract award to provide the requested services will be in accordance with applicable City of Austin regulations, rules, and program guidance.

4. SOLICITATION

- A. **Review of Documents:** Applicants are expected to examine all documents that make up the Solicitation. Applicants shall promptly notify the City of any omission, ambiguity, inconsistency or error that they may discover upon examination of the Solicitation. Applicants must use a complete Solicitation to prepare Applications. The City assumes no responsibility for any errors or misrepresentations that result from the use of incomplete Solicitations.
- B. **Location of Documents:** Solicitations are issued by the Contract Awarding Authority. The location and phone number for the Contract Awarding Authority are specified in the advertisement and in the Solicitation.

5. WRITTEN EXPLANATIONS OR CLARIFICATIONS

Any material information given to one Applicant concerning a Solicitation will be furnished as an Addendum to all Applicants who have been issued a Solicitation. Any explanation, clarification, interpretation or change to the Solicitation made in any other manner is not binding upon the City, and Applicants shall not rely upon such explanation, clarification, interpretation or change. Oral explanations or instructions given before the award of the Contract are not binding.

The deadline for requesting an explanation, clarification, or interpretation is no later than 12:00 Noon on Wednesday, May 6, 2015. Requests for explanations, clarifications or interpretations must be emailed to Ron Hubbard at: Ron.Hubbard@austintexas.gov. The communication must clearly identify the Applicant's name and the Solicitation name. Any material information given to one Applicant concerning a Solicitation will be furnished as an

City of Austin Health and Human Services Department

Addendum to all Applicants who have been issued a Solicitation. Addendums will be posted on the City HHSD website at the link on the RFA Cover Sheet.

6. PRE-APPLICATION CONFERENCE

All potential applicants may attend the pre-Application conference **Monday, April 27, 2015, 10:00 AM** at City of Austin - Health & Human Services Campus, 7201 Levander Loop, Building E, Room E-16, Austin, Texas 78702. Attendance by interested applicants is recommended but not required

7. PREPARATION OF APPLICATIONS

Page length: The Application must be no longer than 8 pages not including the cover letter, signed certifications and budget forms. The Applicant must use Times New Roman font size 11, single spacing, and single-sided pages.

Signature: The Applicant must sign each document in the Solicitation requiring a signature. Any changes made to the Application must be initialed by the Applicant.

8. SUBMISSION OF APPLICATIONS: Complete applications are due: **Friday, May 15, 2015 no later than 12:00 Noon. Late applications will not be accepted.**

Unless otherwise specified, Applicants are required to submit an original and three (3) copies.

A. Documents required with the Application: (Please refer to Section 600, Item #3)

All other pages in the Solicitation should be retained by the Applicant.

B. Hand-Delivery

In order to ensure receipt of the application by the due date and time, Applicants must hand-deliver their Application to the address below.

Applications must be delivered in a sealed envelope or container marked on the outside with the:

- i) Applicant's name & address
- ii) Name of Solicitation:
HHSD: 2015 Holly Area Children & Youth Services RFA #2015-04-20
- iii) Date and time submitted

Mailed, emailed, telegraphic, or facsimile Applications will not be accepted.

Street Address for Hand Delivery or Courier Service
City of Austin
Health and Human Services Department
Family Health Unit Attn: Ron Hubbard
7201 Levander Loop, Building C
Austin, Texas 78702
Phone: (512) 972-5028

City of Austin Health and Human Services Department

- C. **Late Applications:** Applications must be received by the Health and Human Services Department no later than 12:00 Noon, on May 15, 2015. All Applications received after the Due Date and Time will be considered late and will be returned to the Applicant unopened. **The time stamp clock in Building C at the Health and Human Services Department Campus is the time of record and is verified with the local time service at (512) 476-7744.** It is the sole responsibility of the Applicant to ensure timely delivery of the Application. The City is not responsible for failure of service on the part of the U.S. Postal Office, courier companies, or any other form of delivery service chosen by the Applicant.

9. MODIFICATION OR WITHDRAWAL OF APPLICATIONS

- A. **Modification of Applications:** Applications may be modified in writing at any time prior to the Due Date and Time.
- B. **Withdrawal of Applications:** Written requests to withdraw an Application may be submitted to Ron Hubbard via email to Ron.Hubbard@austintexas.gov at any time prior to the Due Date and Time. An Applicant may also withdraw an Application in person, provided the withdrawal is made prior to Due Date and Time. All requests for withdrawal must also be signed by the Applicant. Withdrawn Applications may be resubmitted, with or without modifications, up to the due date.

10. OPENING OF APPLICATIONS/ RELEASE OF INFORMATION

- A. **Opening of Applications:** As authorized by Texas Local Government Code Section 252.049(b), Applications will be opened in a manner that avoids disclosure of the contents to competing Applicants and keeps the contents confidential during negotiations. Until the negotiations are completed, only the number and identity of the Applicants submitting Applications will be made available to the public.
- B. **Release of Information:** Under Texas law, information relating to Requests for Applications may be kept confidential until a contract has been awarded. Information relative to this RFA shall not be released by the City during the application evaluation process or prior to contract award.

11. RESERVATIONS

The City expressly reserves the right to:

- A. Specify approximate quantities in the Solicitation;
- B. Extend the Solicitation closing date and time;
- C. Waive as an informality, minor deviations from specifications provided they do not affect competition or result in functionally unacceptable Goods or Services;
- D. Waive any minor informality in any Application or Solicitation procedure (a minor informality is one that does not affect the competitiveness of the Applicant);
- E. Add additional terms or modify existing terms in the Solicitation;
- F. Reject an Application containing exceptions, additions, qualifications or conditions not called for in the Solicitation;
- G. Reject an Application received from an Applicant who is debarred or suspended by the City;
- H. Reject an Application received from an Applicant who is currently debarred or suspended by the Federal Government (Applicable if project receives Federal funding);

City of Austin Health and Human Services Department

- I. Reject an Application that contains fraudulent information;
- J. Reject an Application that has material omissions;
- K. Reject or cancel any or all Applications;
- L. Reissue a Solicitation; and/or
- M. Procure any item by other means.

12. NEGOTIATIONS

The City reserves the right to negotiate all elements which comprise the Applicant's Application to ensure that the best possible consideration be afforded to all concerned.

13. CONTRACT INCORPORATION

Applicant should be aware that the contents of the successful Application may become a part of the subsequent contractual documents. Failure of the successful Applicant to accept this obligation may result in the cancellation of any award. Any damages accruing to the City as a result of the successful Applicant's failure to contract may be recovered from the successful Applicant.

14. PAYMENT

The Contractor will be paid for eligible, actual expenses on a reimbursement basis.

15. OPPORTUNITY TO PROTEST

The Health and Human Services Department has the authority to settle or resolve any claim of an alleged deficiency or protest. The procedures for notifying the City of Austin of an alleged deficiency or filing a protest are listed below. If you fail to comply with any of these requirements, the Health and Human Services Department may dismiss your complaint or protest.

- A. **Prior to the Application Due Date and Time:** If you are a prospective Applicant and you become aware of the facts regarding what you believe is a deficiency in the Solicitation process before the Due Date and Time for receipt of Applications, you must notify the City in writing of the alleged deficiency by Monday, May 4, 2015, at 12:00 Noon, giving the City an opportunity to resolve the situation prior to the Application Due Date and Time: Friday, May 15, 2015, at 12:00 Noon.
- B. **After the Application Due Date and Time:** If you submit an Application to the City and you believe that there has been a deficiency in the Solicitation process or the award, you have the opportunity to protest the Solicitation process or the recommended award as follows:
 - i. You must file *written notice* of your intent to protest within four (4) calendar days of the date that you know or should have known of the facts relating to the protest. If you do not file a written notice of intent within this time, you have waived all rights to protest the Solicitation process or the award.
 - ii. You must file your written protest within fourteen (14) calendar days of the date that you know or should have known of the facts relating to the protest unless you know of the facts before the Offer has been closed. If you know of the facts before those dates, you must notify the City as stated above.
 - iii. You must submit your protest in writing and must include the following information:
 - 1) your name, address, telephone and fax number;
 - 2) the solicitation name and number

City of Austin Health and Human Services Department

- 3) a detailed statement of the factual grounds for the protest, including copies of any relevant documents.
- iv. Your protest must be concise and presented logically and factually to help with the City's review.
- iv. When the City receives a timely written protest, HHSD will determine whether grounds for your protest are sufficient. A decision will usually be made within fifteen (15) calendar days after review of the complaint.
- v. The City will send you a copy of the Health and Human Services Department's decision after the appropriate City staff has reviewed the decision.

16. **POST APPLICATION DOCUMENTS REQUIRED FROM SUCCESSFUL APPLICANT**

- A. **Certificates of Insurance:** Insurance is required. The Applicant (and collaborating partners in some circumstances) must provide Certificates of Insurance in the amounts and for the coverage required to the Health and Human Services Department prior to the contract initiation, or as otherwise required by the Solicitation. A certificate is not required with the Application. Insurance Requirements are included in Attachment A.

City of Austin Health and Human Services Department

500: PROGRAM DESCRIPTION PROPOSED PROGRAM WORK STATEMENT FORMAT AND EVALUATION FACTORS

HOLLY AREA CHILDREN AND YOUTH SERVICES

It is strongly advised that Applicants carefully consider the Work Statement when responding to this RFA.

- **Work Statement Format:** The work statement should be organized in the structure below.
 - **Competitive Selection:** This procurement will comply with applicable City of Austin Policy. The City will select the successful Applicant on a rational basis. The Application review team will be comprised of City HHSD staff and others. Evaluation factors outlined after each section of the work statement shall be applied to all eligible Applicants in comparing Applications and selecting successful Applicants. Award of a contract may be made without discussion with Applicants after the Applications are received. Applications should, therefore, be submitted on the most favorable terms.
 - **Evaluation:** A total of 100 points is possible for the proposed program description. Evaluation factors and the maximum score per section are noted at the end of each section. All responses will be evaluated as to how the proposed program will align with the goals outlined in the Work Statement and Evaluation factors and to ensure that each required response in the Work Statement has been adequately addressed.
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Section I Accomplishments, Experience, and Community Service Coordination

1. Describe experience in the provision of successfully serving children and/or youth.
2. Include specific information describing agency's experience in child and/or youth development and the types of child/youth services the agency has provided within the last five years.

Evaluation Section I Accomplishments, Experience, and Community Service Coordination	10 points
• Services to children and youth Documentation demonstrates level of success in providing the activities described	
• Services to children and/or youth that include experience in children/youth development and/or enrichment services are clearly described including ages served, time periods, and outcomes achieved.	

Section II Targeted Populations

All applicants are required to identify the specific target population(s) they intend to serve. All clients must meet the Target Population and Eligibility criterion.

- A. Target Population(s) & Eligibility Determination
 1. Describe the priority target population to be served and the rationale for services to that population.
 2. Describe how children and youth will be recruited and engaged.

City of Austin Health and Human Services Department

B. Cultural Competency for the Target Population(s)

The term “cultural competency” refers to providing services, support or other assistance in a manner that is responsive to the beliefs, interpersonal styles, attitudes, language and behaviors of individuals who are receiving services in a manner that has the greatest likelihood of ensuring their maximum participation in the service.

Describe how the agency will deliver services so that cultural and language differences and differing physical or mental abilities are not a barrier to services. Include the preferred staffing qualifications to ensure staff will understand and be sensitive to the needs of diverse populations.

Evaluation Section II Targeted Populations	10 points
Eligibility	
<ul style="list-style-type: none"> • Specific priority target client population(s) to be served are defined • Rationale for target population is clear and reasonable • Strategies to recruit and engage children/youth are well defined, appropriate, and feasible 	
Cultural Competency	
<ul style="list-style-type: none"> • Strategies are inclusive and appropriate for target populations including considerations for diverse cultures, languages, and abilities • Staff competencies are defined in qualifications requirements 	

**Section III
Project Activities**

Note: This section is the most heavily weighted in the evaluation scoring and therefore demands the most detailed response.

Given diverse community needs, the City is intentionally leaving program service options open for the areas described above, allowing applicants to propose services that best meet the needs of Austin’s children and youth in a successful manner. Proposed activities/services should align with recognized community plans, and should be evidence-based.

The area of focus will be services to children and youth including one or more of the broad developmental areas of social/emotional, intellectual, language/communication, and physical development appropriate for the ages to be served. Activities that use arts, culture, social and/or community engagement to further developmental goals are appropriate.

Describe the proposed services/activities including the rationales for why the type or types of services/activities were chosen to address specific needs of the target population. List the address and accessibility of the location(s) of the activities. Include the schedule of activities including times, frequency, and duration across the 12 month period.

City of Austin Health and Human Services Department

Evaluation Section III Project Activities	25 points
Overall Evaluation Factors	
<ul style="list-style-type: none"> • Responsive to goals and other information presented in the RFA • Structure and strategies are feasible and well-defined • Specific activities are outlined and relevant • Proposed activities are evidence-based or use best practices • Needs addressed are described and align with proposed activities • Services can be implemented in a timely manner • Application demonstrates how strategies align with a recognized community plan such as School Readiness Action Plan or Ready By 21 Dashboard • Locations provided and are accessible and in or adjacent to the service area. • Service schedule adequately demonstrates the intensity of the proposed services 	

**Section IV
Staffing**

Staff Positions: Attach brief job descriptions including minimum qualifications for key program staff to perform the described services and/or activities. Describe the staffing level for activities including the staff to child/youth ratio, group size, and age range within each group.

Evaluation Section IV Staffing	10 points
<ul style="list-style-type: none"> • Staffing level is adequate for activities supervision and safety • Job descriptions are clear with reasonable minimum qualifications for job expectations 	

**Section V
Performance Measures**

All Applicants must report the unduplicated count of individuals served. Additional measures may be added, however please limit total number of Outputs to no more than four. Output measures only report City-funded individuals. Applicants should also describe their plan for measuring the outcomes of the services provided. At least one Outcome is required. Outcome measures are reported on all program clients City funded and other funded. Measures will be reported quarterly. Goals should reflect the number anticipated for a 12-month period.

Required Measures

Output Measures (At least one)

1. Unduplicated count of individuals served with City funding

City of Austin Health and Human Services Department

OUTPUT MEASURES

<u>OUTPUT</u>	<u>City of Austin Goal</u>	<u>Other Funding Goal</u>	<u>TOTAL</u>
Number of Unduplicated Clients served with City funding			

Outcome Measures (At least one)

Describe how you plan to measure the impact of services delivered. In other words:

- How will you show that children and youth served benefited from the services provided?
- What change occurred as a result of the services?

For example, how will children and youth served demonstrate:

- Increased school readiness or knowledge/ability
- Increased involvement in positive activities
- Increased confidence and self esteem
- Increased decision-making, conflict resolution or leadership skills

Please provide a narrative description of how you plan to measure the impact of services delivered. Include a description of who is to be measured (denominator), of that group what is considered a successful outcome including how it is defined and measured (numerator), and the percentage of the total who achieve the Outcome Goal (result). Outcomes are measured on total program participants, not just City funded participants.

OUTCOME MEASURES

<u>OUTCOME</u>	<u>Program Goal</u>
NUMERATOR: Number of individuals meeting desired outcome (describe outcome)	
DENOMINATOR: Total number of individuals measured (describe)	
RESULT: Outcome Goal	%

Evaluation Section V Performance Measures	10 points
<ul style="list-style-type: none"> • Both Output and Outcome measures are included as required and goals are described, feasible and measureable 	
<ul style="list-style-type: none"> • Outcome measure(s) adequately capture changes in behavior or condition 	

Section VI

Data Management and Reporting, Program Evaluation and Quality Improvement

Data collection, management and reporting is required. Successful Applicants will provide performance reports throughout the contract period.

City of Austin Health and Human Services Department

A. Data Management and Reporting

Provide information regarding any past experience with data management and reporting. Describe how data is gathered on program clients, and any current processes used to compile and report this information to funders or other community partners.

Evaluation Section VI	5
Data Management and Reporting, Program Evaluation and Quality Improvement	points
Data Management and Reporting	
<ul style="list-style-type: none"> • Demonstrates past, successful experience in data management and reporting 	

**Section VII
Budget Information**

Applicants are required to submit 12-month budget information that is within the range from \$25,000 - \$48,000. Applicants must complete all budget forms incorporated into the RFA (forms are located after the budget evaluation factors listed below).

Eligible Expenses

The following items are eligible for reimbursement.

Operations Costs

- Personnel
- Operating Expenses (e.g. organization’s rent and utilities, insurance, local travel, supplies, phone, copier)

Capital Outlay Costs

- Equipment with a per unit cost of greater than \$5,000 only

Direct Assistance to Client Costs

- Financial Assistance to clients
- Food and beverages for clients
- Other costs such as field trips, recognition and incentives

A. Program Budget

Enter the total amount of funding requested for the program and each subsection. All expenses should be identifiable, reasonable, and necessary.

B. Budget Narrative

Enter a description of all costs included in the program budget that will be funded with City of Austin funds. List staff positions funded (partially or fully) with City funds including the FTE and percent paid by City funds. Equipment purchases and any proposed out of Travis County travel must be itemized and detailed. Equipment and out-of-County travel expenses are discouraged.

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Evaluation Part VII Budget Information	15 points
Program Budget	
<ul style="list-style-type: none"> • Budget is reasonable and necessary for the proposed work plan • 12-month budget total is within the range from \$25,000 to \$48,000 • Budget narrative provides sufficient detail of proposed City paid expenses • Staff hours per week (FTE) and percent paid by City funds are listed 	

Section VIII

Overall Evaluation Factors Regarding Applicant

All applicants are required to submit the most recent IRS Form 990 and Independent Audit or Financial Review, if available. Organizations that do not have audited financial statements must state that these documents are not currently available and why.

Evaluation Section VIII	5 points
<ul style="list-style-type: none"> • Completed IRS Form 990 received (online link acceptable) • Most recent audit or financial review (unqualified/qualified/going concern identified), if available. 	

Section VIII

Local Presence – Maximum 10 points

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.

Local Business Presence Scoring	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

City of Austin Health and Human Services Department

LOCAL PRESENCE FORM

OFFEROR MUST SUBMIT THE FOLLOWING INFORMATION FOR EACH LOCAL BUSINESS (INCLUDING THE OFFEROR AND SUBCONTRACTORS, IF APPLICABLE).

USE ADDITIONAL FORMS AS NECESSARY

OFFEROR:

Name of Local Firm						
Physical Address						
Is Firm located in the Corporate City Limits? (circle one)	Yes			No		
In business at this location for past 5 yrs?	Yes			No		
Location Type:	Headquarters	Yes	No	Branch	Yes	No
Number of FTEs?	Agency-wide	#	Local	#	% Local	%

SUBCONTRACTOR:

Name of Local Firm						
Physical Address						
Is Firm located in the Corporate City Limits? (circle one)	Yes			No		
In business at this location for past 5 yrs?	Yes			No		
Location Type:	Headquarters	Yes	No	Branch	Yes	No
Number of FTEs?	Agency-wide	#	Local	#	% Local	%

City of Austin Health and Human Services Department

PROGRAM BUDGET

Program's Line Item Budget	Requested CITY OF AUSTIN Amount	Amount Funded by ALL OTHER Sources	TOTAL Budget (ALL funding sources)
PERSONNEL			
1. Salaries and Benefits			
A. Subtotals: PERSONNEL			
OPERATING EXPENSES			
1. General Operating Expenses			
2. Out of County Travel			
3. Other			
B. Subtotals: OPERATING EXPENSES			
DIRECT ASSISTANCE for PROGRAM CLIENTS			
4. Food/Beverage for Clients			
5. Financial Assistance for Clients (specify)			
6. Other (describe)			
C. Subtotals: DIRECT ASSISTANCE			
CAPITAL OUTLAY (with per Unit Cost <u>greater than \$5,000 ONLY</u>)			
7. Capital Outlay			
D. Subtotals: CAPITAL OUTLAY			
TOTALS			
GRAND TOTALS (A + B + C + D)			
PERCENT SHARE of Total for Funding Sources:	%	%	100%

City of Austin Health and Human Services Department

Program Budget NARRATIVE
Social Service Contracts – City of Austin

PERSONNEL	NARRATIVE/ Descriptions
1. Salaries and Benefits	
OPERATING EXPENSES	
2. General Operating Expenses	
3. Out of County Travel (itemized)	
4. Other (specify)	
DIRECT ASSISTANCE	
4. Food/Beverage for Clients	
5. Financial Assistance for Clients (specify)	
6. Other (specify)	
CAPITAL OUTLAY	
7. Capital Outlay (itemized)	

City of Austin Health and Human Services Department

600: APPLICATION PREPARATION INSTRUCTIONS

Application Preparation Instructions

1. Application must be no longer than 8 pages, not including cover letter, letter verifying 501(c)(3) status, IRS Form 990, signed certifications, budget forms or any attachments.
2. The Applicant must use Times New Roman font, no smaller than size 11. An original Application and three copies must be printed on single-sided 8½ x 11 inch plain white paper. 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.
3. The Application shall be organized in the following format and informational sequence. All pages shall be sequentially numbered with the agency and program name on each page.
 - Part A:** Cover letter on agency stationery (not included in page limit) including:
 - a. The name of the proposed program and the amount of funding requested.
 - b. The name, address, email address and telephone number of the person in your organization authorized to negotiate contract terms and render binding decisions on contract matters.
 - c. A statement that the Application is valid for a minimal period of one hundred and twenty (120) days subsequent to the RFA closing date.
 - d. A statement of your compliance with all applicable rules and regulations of Federal, State and Local governing entities; and compliance with terms of this RFA.
 - Part B:** A copy of the organization's IRS 501(c)(3) Determination letter (not included in page limit)
 - Part C:** Table of Contents (included in eight-page limit)
 - Part D:** Required Attachments – completed form #800 (not included in page limit)
 - Part E:** Program Description – Section 500 (eight-page limit, not including budget forms)
 - Part F:** Budget forms (editable forms are provided)
 - Part G:** Agency audited financial statements (if available) and IRS Form 990

Due Date and Time

The Application must be submitted to HHSD no later than 12:00 Noon, Friday, May 15, 2015. Late applications will not be accepted.

4. **Exceptions**

If any exceptions are taken to any portion of the Solicitation, the Applicant must clearly indicate the exceptions taken and include a full explanation as a separate attachment to the Application. The failure to identify exceptions with a full explanation will constitute acceptance by the Applicant of the Solicitation as proposed by the City. The City reserves the right to reject an Application containing exceptions, additions, qualifications or conditions not called for in the Solicitation.

5. **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.

6. **Administrative and Fiscal Review Required**

As a part of capacity building requirements, applicants must agree to participate with City of Austin Health and Human Services staff to complete an Administrative and Fiscal Review (AFR) by May 31, 2013. The AFR shall be submitted separately from the Application. Attachment B lists the information which will be included in the AFR.

City of Austin Health and Human Services Department

City of Austin, Texas

**800: PROPOSER'S AFFIDAVIT OF NON-COLLUSION,
NON-CONFLICT OF INTEREST**

State of Texas

County of Travis

The undersigned "Affiant" is a duly authorized representative of the Offeror for the purpose of making this Affidavit, and, after being first duly sworn, has deposed and stated and hereby deposes and states, to the best of his or her personal knowledge and belief as follows:

The term "**Offeror**", as used herein, includes the individual or business entity submitting the Offer and for the purpose of this Affidavit includes the directors, officers, partners, managers, members, principals, owners, agents, representatives, employees, other parties in interest of the Offeror, and anyone or any entity acting for or on behalf of the Offeror, including a subcontractor in connection with this Offer.

1. **Anti-Collusion Statement.** The Offeror has not in any way directly or indirectly:
 - a. colluded, conspired, or agreed with any other person, firm, corporation, Offeror or potential Offeror to the amount of this Offer or the terms or conditions of this Offer.
 - b. paid or agreed to pay any other person, firm, corporation Offeror or potential Offeror any money or anything of value in return for assistance in procuring or attempting to procure a contract or in return for establishing the prices in the attached Offer or the Offer of any other Offeror.
2. **Preparation of Solicitation and Contract Documents.** The Offeror has not received any compensation or a promise of compensation for participating in the preparation or development of the underlying Solicitation or Contract documents. In addition, the Offeror has not otherwise participated in the preparation or development of the underlying Solicitation or Contract documents, except to the extent of any comments or questions and responses in the solicitation process, which are available to all Offerors, so as to have an unfair advantage over other Offerors, provided that the Offeror may have provided relevant product or process information to a consultant in the normal course of its business.
3. **Participation in Decision Making Process.** The Offeror has not participated in the evaluation of Offers or other decision making process for this Solicitation, and, if Offeror is awarded a Contract hereunder, no individual, agent, representative, consultant, subcontractor, or subconsultant associated with Offeror, who may have been involved in the evaluation or other decision making process for this Solicitation, will have any direct or indirect financial interest in the Contract, provided that the Offeror may have provided relevant product or process information to a consultant in the normal course of its business.
4. **Present Knowledge.** Offeror is not presently aware of any potential or actual conflicts of interest regarding this Solicitation, which either enabled Offeror to obtain an advantage over other Offerors or would prevent Offeror from advancing the best interests of the City in the course of the performance of the Contract.
5. **City Code.** As provided in Sections 2-7-61 through 2-7-65 of the City Code, no individual with a substantial interest in Offeror is a City official or employee or is related to any City official or employee within the first or second degree of consanguinity or affinity.
6. **Chapter 176 Conflict of Interest Disclosure.** In accordance with Chapter 176 of the Texas Local Government Code, the Offeror:
 - a. does not have an employment or other business relationship with any local government officer of the City or a family member of that officer that results in the officer or family member receiving taxable income;
 - b. has not given a local government officer of the City one or more gifts, other than gifts of food, lodging, transportation, or entertainment accepted as a guest, that have an aggregate value of more than \$250 in the twelve month period preceding the date the officer becomes aware of the execution of the Contract or that OWNER is considering doing business with the Offeror.

City of Austin Health and Human Services Department

- c. as required by Chapter 176 of the Texas Local Government Code, Offeror must file a Conflict of Interest Questionnaire with the Office of the City Clerk no later than 5:00 P.M. on the seventh (7th) business day after the commencement of contract discussions or negotiations with the City or the submission of an Offer, or other writing related to a potential Contract with the City. The questionnaire is available on line at the following website for the City Clerk:

Information: <http://www.austintexas.gov/department/conflict-interest-questionnaire>
Form: <http://www.ethics.state.tx.us/forms/CIQ.pdf>

There are statutory penalties for failure to comply with Chapter 176.

If the Offeror cannot affirmatively swear and subscribe to the forgoing statements, the Offeror shall provide a detailed written explanation in the space provided below or, as necessary, on separate pages to be annexed hereto.

OFFEROR'S EXPLANATION:

Contractor's Name:

Printed
Name:

Title

Signature of Officer or Authorized Representative: _____

Subscribed and sworn to before me this ____ day of _____, 20____.

_____ My Commission Expires _____
Notary Public