

BOARD OF COUNTY COMMISSIONERS



**REQUEST FOR APPLICATION
FOR FUNDING SOCIAL SERVICES**

RFA #1000-06

FY 06 AND FY 07

PREPARED BY:

**MANAGEMENT AND BUDGET DEPARTMENT
601 EAST KENNEDY BOULEVARD
26TH FLOOR, FREDRICK B. KARL COUNTY CENTER
TAMPA, FLORIDA 33602
(813) 272-5890**

FY 06 and FY 07 Social Services Request for Application (RFA)

Hillsborough County, Management and Budget Department is accepting applications from private non-profit organizations desiring to provide innovative, community-based social services to residents of Hillsborough County. The non-profit organization shall demonstrate incorporation with a certificate from the State of Florida, if the incorporation is not in Florida, the not for profit organization is required to obtain a certificate of authority from the Florida Department of State pursuant to Section 617.1501 F.S. and shall provide a copy of certification and demonstrate the organization's non-profit status with a copy of the declaration from the Internal Revenue Service indicating they are a 501(c)(3) organization as part of its application response. Applications are requested for planning the use of available FY 06 and FY 07 funds. Funding will be available through the Board of County Commissioners (Board) Competitive Social Services Request for Application (RFA) Funding Process.

The RFA is designed for organizations to provide a summary of the proposed initiative. This package does not attempt to list the federal, state or county laws, ordinances, rules or regulations that may affect your proposal or performance under any resulting contract. Lack of knowledge will not relieve the applicant from complying with applicable laws. We encourage you to read the enclosed documents carefully and respond to this request on the forms provided. The submission deadline for all applications is 5 p.m., Monday, January 10, 2005, Hillsborough County Management and Budget Department, Contracts Unit, 26th Floor, Fredrick B. Karl County Center, 601 East Kennedy Boulevard, Tampa, Florida 33602.

In fairness to applicants that meet the deadline, staff may not consider any late submissions.

**HILLSBOROUGH COUNTY BOARD OF COUNTY COMMISSIONERS
Management and Budget Department**

FY 06 AND FY 07 Social Services Request for Application (RFA)

SUMMARY

This Request for Application (RFA) outlines the competitive process for selecting private non-profit organizations to provide social services through funds allocated by the Board for FY 06 and FY 07, October 1, 2005 to September 30, 2007. The non-profit organization shall demonstrate incorporation with a certificate from the State of Florida, if the incorporation is not in Florida, the not for profit organization is required to obtain a certificate of authority from the Florida Department of State pursuant to Section 617.1501 F.S. and shall provide a copy of certification and demonstrate the organization's non-profit status with a copy of the declaration from the Internal Revenue Service indicating they are a 501(c)(3) organization as part of its application response. These funds are intended to provide innovative, community-based social services to residents of Hillsborough County.

Initiatives must meet a need identified by: Local and national documented findings such as a needs assessment indicating a community priority. Funding awards resulting from any submittal may only be made to community-based private non-profit organizations that have been in operation for a minimum of one year with the capacity to implement the initiative.

BACKGROUND

At the request of the Board, the Management and Budget Department is seeking applications for funding from private non-profit organizations that provide social services to County residents. The Board has selected the RFA Process for awarding available funds. This ensures an objective, competitive process that provides for the selection of organization(s) that address the most needed community social services or serve the greatest number of citizens. Eligible initiatives must seek to directly impact the community through the provision of its service(s).

USE OF AWARDS

The Board has designated general areas in which services are to be funded. **Research studies are not eligible for funding.** Examples of the types of services to be funded include, but are not limited to, crisis intervention, education, prevention programs, youth and recreation services, adult and child day care, employment and work fair activities, and services for disabled citizens. These services represent the Board's past funding history and the needs identified through various needs assessment reports of Hillsborough County or other related data and statistical analysis related to the County.

It is the intent of the Board to provide funding where social services can be directed towards citizens whose ability to purchase needed services are limited and to those citizens whose incomes are near or at the poverty level.

ELIGIBILITY CRITERIA

Eligible initiatives should include community-based social services that are new and innovative or that significantly expand existing services. The Board is especially interested in initiatives that include creative measures for sustainability. Additionally, proposed initiatives must operate in and only serve residents of Hillsborough County. Organizations seeking funding under this funding process must meet all of the following criteria to be eligible for funding. The organizations must be: 1) a private non-profit organization, 2) incorporated for a minimum of one year prior to the application deadline, as specified in the funding process schedule; 3) currently serving Hillsborough County citizens for at least one year; and 4) proposing to provide a direct social service. **Organizations must also have completed a current financial audit report, which includes the CPA management letter that states the auditor's opinion. If the organization has an audit in process, the applicant must submit their latest financial statements along with a letter from the auditor indicating when the audit will be available.**

Applicants must be incorporated non-profit organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code and not classified as a private foundation under Section 509(a) of the Internal Revenue Code. **Private non-profit organizations must submit 501(c)(3) documentation along with the application.** Funding may be recommended for initiatives provided by faith-based organizations, provided they 1) have a secular purpose; 2) will neither advance nor inhibit religion; and 3) do not require worship or religious instruction activities as a condition of participation per federal guidelines.

The County may seek clarifying information regarding any application. Such clarifying information shall be provided by the organization, in writing, and shall become part of the application. Clarifying information must be submitted to the Management and Budget Department, Contracts Unit, **within 2 days of the request** to be considered in the review process.

Management and Budget will accept only one application from a competing organization for SSFRA funding. However, organizations seeking funding for more than one initiative may apply for both SSRFA and CDBG funding if the programs are independent and meet the established criteria of both funding categories.

PRE-APPLICATION PROCESS

A Pre-Application Conference will be held as specified in the funding process schedule. The conference will provide an overview of the application process and answer questions from organizations planning to submit an application. Organizations are urged to carefully read the instructions in the application, list all questions, and attend the conference. **YOUR PRESENCE IS STRONGLY RECOMMENDED AS THIS IS AN OPPORTUNITY FOR ORGANIZATIONS TO ASK QUESTIONS CONCERNING THE FUNDING PROCESS.**

SUBMISSION

Applications must be typed and submitted on 8-1/2 x 11 paper. Organizations are required to submit **one original and six copies**, including all supporting documentation. Applications should be delivered to the Management and Budget Department, Fredrick B. Karl County Center, 601 East Kennedy Boulevard, 26th Floor, Tampa, Florida 33602, by 5:00 p.m., Monday, January 10, 2005. The applicant must thoroughly present the initiative (including resources, expenditures, and measurable outcomes) in a manner consistent with the application. The application response shall be prepared utilizing **only** the forms provided in the application. Additional pages may be attached and should be labeled and numbered as necessary.

All applications must be received by the Management and Budget Department, by 5 p.m. on Monday, January 10, 2005, in order to be considered. Regardless of the method of delivery any application received after the deadline will not be considered. The applicant may elect to use a courier service or the U.S. Mail to accomplish the delivery. Applicants are prohibited from submitting more than one application under this RFA #1000-06.

Please note, all materials and supporting documentation included with the application shall become public documents and the property of Hillsborough County.

REVIEW AND SELECTION PROCESS:

A Review Committee comprised of Hillsborough County citizens and County staff will review the submitted applications. Applications will be ranked and prioritized based on the final points accrued by each eligible applicant. The score of an application may not necessarily be the sole means by which funding recommendations are determined. The Review Committee recommendations are presented to the County Administrator who may reject or accept the Review Committee's recommendations. If the County Administrator accepts the recommendations, they are forwarded to the Board of County Commissioners for their approval. Applicants will receive the appropriate notification after the Board's final approval of the FY 06 and FY 07 County Budget. All Board funding decisions are based on continued availability of funds, subsequent approvals if applicable, and the outcome of any appeals filed.

The Review Committee will not **consider more than one application from any organization and its affiliates under this RFA #1000-06.** Only complete and timely applications, which satisfy all the eligibility and submission criteria, will be considered. The Review Committee will determine whether an application meets the defined criteria.

FUNDING PROCESS

Organizations selected to receive funding as a result of this process will be required to negotiate with the Management and Budget Department staff. As a result, the County and the organization will enter into a formal Agreement specifying the dollar amount awarded, units of service or level of service contracted, how outcomes will be measured, Agreement terms, and the contract duration. The funding process covers a two-year funding cycle and the amount of funds awarded will be based on each fiscal year. Funding for the first year is subject to Board approval in September 2005. Funding in the second year of the County's two-year budget cycle is based

upon both the availability of funds and the organization's performance in the first year of the Agreement. Any misrepresentation and/or failure to carry out the initiatives as set forth in the contract may result in immediate termination of the Agreement. The contract period for applications selected for funding will cover the period October 1, 2005 through September 30, 2007.

ANTICIPATED OR PROJECTED RESOURCES

Resources which are identified to support the initiative will remain the responsibility of the applicant. If an organization's resources are reduced or prove to be unattainable, the Board will not be obligated to replace anticipated or projected resources. The applicant's failure to obtain or otherwise replace such resources, to sustain the initiative, may constitute a breach of contract and forfeiture of funding and may result, among other things, in termination of the Agreement.

DISCLAIMER

The County reserves the right to: 1) accept or reject any or all applications received; 2) waive any non-substantive deficiency or irregularity; 3) negotiate with any qualified applicant; 4) award a contract in what it believes to be in the best interest of the County; 5) cancel this request, in part or its entirety, if it is deemed to be in the best interest of the County; 6) reject the initiative of any applicant that has previously failed to perform properly; 7) reject the initiative of any applicant who has failed to complete a contract within the specified timeframe, and 8) reject the initiative of any applicant that is not in a position to fulfill a resulting contractual obligation. This RFA does not commit the County to award any contract, pay any pre-award expenses, or pay any costs incurred in the preparation of an application.

OFFICIAL CONTACT PERSON

Nikki Morton, Manager, Contracts Unit, Management and Budget Department, 26th Floor, Fredrick B. Karl County Center, 601 East Kennedy Boulevard, Tampa, Florida 33602, telephone (813) 276-2543, Fax (813) 272-7005.

APPEAL PROCESS

Appeals alleging significant errors made by the Review Committee must be submitted to the Management and Budget Department within ten business days from the date of the Applicants notification letter of funding recommendations. To warrant review, an appeal must clearly state the alleged error. Appeals are limited to substantive issues that refute the findings (basis of decision) upon which the Review Committee's recommendations were based. **An appeal cannot be filed to challenge the recommended level of funding for an initiative, nor can the appeal process be used as a forum to submit additional information to supplement the initial submittal.** The score of an application may not necessarily be the sole means by which funding recommendations are determined. Any organization's appeal must be submitted to:

Fredrick B. Karl County Center
Management and Budget Department, 26th Floor
APPEAL RESPONSE
ATTN: Nikki Morton
P O Box 1110
Tampa, FL 33601-1110

Submitted appeals are presented to the Review Committee for consideration. Once reviewed, the Review Committee recommendation is forwarded to the County Administrator for final decision. The applicant will receive the appropriate notification outcome of the appeal.

**FY 06 AND FY 07
APPLICATION FUNDING PROCESS SCHEDULE**

Oct 1, 2004	RFA advertised. Applications may be obtained from the Hillsborough County Management and Budget Department.
Oct 27, 2004	Pre-Application Conference will be held at 10:00 a.m. at the Fredrick B. Karl County Center, 601 East Kennedy Boulevard, 26 th Floor, Conference Room A to answer questions from organizations that plan to submit applications.
Dec 6, 2004	
Jan 10, 2005	Deadline for submitting applications to the Hillsborough County Management and Budget Department. Applications received after 5:00 p.m. may not be considered for funding.
Jan 24, 2005	Management and Budget Department distributes applications to Review Committee.
June 2005	Applicants will receive notification of funding recommendations.
	*Deadline for appeals is 10 business days from the date of Applicant's notification letter of funding recommendations.

HILLSBOROUGH COUNTY BOARD OF COUNTY COMMISSIONERS
Management and Budget Department
FY 06 AND FY 07 Social Services Request for Application (RFA)

1. Organization: _____
2. Initiative Program Name: _____
3. Type of Service: _____
4. Type of Funds Requested: Competitive Social Service
5. Amount Requested: \$ _____
6. Match Amount: \$ _____ Source: _____
7. Source(s) _____
8. *Total Initiative Funds:* \$ _____
9. Clients to be Served: # _____ Cost per Client \$ _____
10. Taxpayer/Employer ID #: _____
11. Organization's IRS Status: Private Non-Profit Corporation [attach document]
12. Charitable Organization: Registered in Florida Not Registered in Florida
13. Date of Incorporation: _____
14. Contact Person: _____
 Phone: () - Fax: () -
 E-mail: _____
15. Mailing Address: _____
 City, State and Zip Code _____
 Print Name and Title of
 Authorized Official: _____
16. Official's Signature: _____

Notice: Applicant is required to disclose any conflict of interest they may have in connection with this application. The Official signing the application certifies to the best of their knowledge, the information contained in the application is accurate, true, and complete.

(CONTINUED)

Page Two

1. Concept Description: *Refer to Attachment - Page # _____*
State why the initiative should be recommended for funding and summarize the entire proposal. The description should convince the County to consider the project by providing a frame work to help visualize the project. The description should include: a brief statement of the problem or need the organization has recognized and is prepared to address, a short description of the initiative, including what will take place and how many people will benefit from the initiative and who will staff it. Include initiative objective(s) and what method(s) will be utilized to reach the objective(s). Provide an explanation for the amount of funding requested for the initiative and how the organization will continue funding the initiative in the future. (maximum length two pages)

2. Organization Profile: *Refer to Attachment - Page # _____*
Describe the organization's purposes and long-range goals. What strengths or features does the organization possess that enhances its capability to implement the proposed initiative? Explain the organization's experience relevant to the proposed initiative. Briefly describe the organizational structure, financial capabilities, fund-raising activities, and accreditation and licensing, if applicable. Attach a list of the Board of Directors and an organizational chart. (maximum length one page without attachment)

3. Financial Capabilities: *Refer to Attachment - Page # _____*
Briefly describe the financial procedures utilized to assure compliance with generally accepted accounting principles, laws, rules and regulations applicable to the organization. Describe what positions (both staff and volunteer) are responsible for the financial management of the organization. Include information about the financial record keeping system and how program revenues and expenses are incorporated into the financial system. **If your organization received funding from the RFA process beginning October 1, 2003, it is not necessary to include this information in your application.** However, all applicants must submit a current audit. If not available, applicant must submit their latest financial statement. (maximum length two pages)

4. Community Need: *Refer to Attachment - Page # _____*
Clearly identify the problem area to be addressed through the initiative. Why is the problem important and who does it affect within Hillsborough County? Identify the client population to be served and the geographic areas within the County that will be affected.

(CONTINUED)

Page Three

Document any evidence that shows this problem is real and important. Discuss what is currently being done in the community to address the need. How is the initiative related to the purposes and goals of the organization? State how this initiative will be coordinated with services currently being provided by existing programs. Differentiate the initiative from similar programs currently available in the County. Identify related service gaps including sufficient supporting statistics or data specific to this region such as needs assessment, interviews, crime rates, waiting lists, surveys, trends, or analyses. (maximum length four pages)

5. Scope of Service: *Refer to Attachment - Page # _____*
Describe the initiative and indicate whether it is a new, expanded, or continued endeavor. (If new, detail how the initiative will be implemented and describe the sequences for implementation). How will the initiative address and help solve the problem as identified? What are the services and how many persons will be served? (Include where the services will be located and how they are accessible to the target population.) If the funding requested is for positions, explain how the positions directly support the proposed services. Describe the client selection process and the number of clients that will be served by this initiative. Provide a staff to client ratio (if applicable). Describe the staffing of the initiative. Attach job descriptions and resumes of key staff supporting the initiative. State where the activities will be located and how they will be accessible to the intended population. **Provide an implementation schedule of the initiative.** If the funding in this application is to be used to fund positions, explain how the funded positions support the services provided. The information should include position titles and salary amounts and be coordinated with the information requested on the budget worksheet form. (maximum length four pages)
6. Program Goals and Objectives *Refer to Attachment - Page # _____*
Provide a clear description of what the organization hopes to accomplish in this initiative and how the target population will benefit from the initiative. Identify the objective(s) and goal(s) for each problem or need being addressed in the initiative and indicate the timeframe by which the objectives will be accomplished. The objectives must be measurable and time limited. Describe the outcomes in measurable terms. If your organization previously received funding for this initiative or a similar project, please describe its performance. What were the initiative's success indicators? Did the initiative meet its goals and objectives? (maximum length six pages)

(CONTINUED)

Page Four

7. Evaluation Plan: *Refer to Attachment - Page # _____*
Describe the evaluation measures to be used to adequately track the short-term and long-term changes that will occur as a result of this initiative. Include a measure for each of the outcomes that you expect to achieve. Each objective and outcome should be tied to an evaluative tool or measure.

8. Leverage of Other Resources: *Refer to Attachment - Page # _____*
The County requires that applicants “demonstrate” other funds are committed to the initiative. Include Letters of Commitment **for other funds** with the application to support the initiative can continue should County funds discontinue.
(maximum length one page)

9. Funding Sources: *Refer to Attachment - Page # _____*
Describe how the organization's assets will be utilized for this initiative. Explain how the on-going cost of operations will be met should the initiative continue. Describe strategies for long-term funding.
(maximum length one page)

10. Budget Information
All organizations must include a Total Organization Budget Summary Statement of Revenue and Expense for Funding Year 1 and Year 2 created by the applicant’s spreadsheet. Additionally, provide a budget which clearly outlines the initiative costs utilizing County funds and those costs utilizing other funding sources, both administrative and programs costs. The budget should show income as well as expenses and should be structured on the format provided. Budgets should not be submitted in narrative form.

Budget information should also delineate personnel cost such as salary and benefit information, and non-personnel expenses such as facility costs (rent/mortgage, utilities, maintenance, taxes), fundraising expenses, travel, postage, equipment costs, supplies, and insurance. This information should be reflected in the Initiative Operational Expense form (see attached).

Sources of income should be listed separately as part of budget information. Sources should be actual funders, not merely prospects. However, applications for which funding is pending may be listed, if desired. Sources for funding may include fees for service, government funds, corporate/private grants, individual donations, etc. This should be reflected in the Source of Income form (see attached).

SOURCES OF INCOME YEAR 1

FUNDING SOURCES	<u>AMOUNT REQUESTED</u>	<u>ACTUAL \$ AWARDED</u>	<u>% OF FUNDING</u>
Hillsborough County SSRFA Funding	\$ _____	\$ _____	_____ %
Other Hillsborough County Funds (Specify)	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
United Way of Hillsborough County	\$ _____	\$ _____	_____ %
Children's Board of Hillsborough County	\$ _____	\$ _____	_____ %
Other Sources of Funds (Specify)	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
In-Kind Contributions (Specify)	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
Endowment Funds	\$ _____	\$ _____	_____ %
TOTAL	\$ _____	\$ _____	_____ %

SOURCES OF INCOME YEAR 2

FUNDING SOURCES	<u>AMOUNT REQUESTED</u>	<u>ACTUAL \$ AWARDED</u>	<u>% OF FUNDING</u>
Hillsborough County SSRFA Funding	\$ _____	\$ _____	_____ %
Other Hillsborough County Funds (Specify)	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
United Way of Hillsborough County	\$ _____	\$ _____	_____ %
Children’s Board of Hillsborough County	\$ _____	\$ _____	_____ %
Other Sources of Funds (Specify)	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
In-Kind Contributions (Specify)	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
_____	\$ _____	\$ _____	_____ %
Endowment Funds	\$ _____	\$ _____	_____ %
TOTAL	\$ _____	\$ _____	_____ %

INITIATIVE OPERATIONAL EXPENSES YEAR 1

PROGRAM EXPENSES	BOCC	OTHER	TOTAL PROGRAM COSTS
Salaries	\$	\$	\$
Fringe Benefits	\$	\$	\$
Professional Fees	\$	\$	\$
Contractual Services	\$	\$	\$
Training	\$	\$	\$
Travel	\$	\$	\$
Rent	\$	\$	\$
Utilities	\$	\$	\$
Supplies	\$	\$	\$
Printing/Postage	\$	\$	\$
Other (specify)	\$	\$	\$
Total Expenses	\$	\$	\$

*Units of Service to be Provided: _____

Total Initiative Expenses: \$ _____

$\frac{\text{Program Expenses}}{\text{Units of Service Provided}} = \text{Per Unit Cost}$

\$

*Unit of Service is defined as the number of clients benefiting from service.

INITIATIVE OPERATIONAL EXPENSES YEAR 2

PROGRAM EXPENSES	BOCC	OTHER	TOTAL PROGRAM COSTS
Salaries	\$	\$	\$
Fringe Benefits	\$	\$	\$
Professional Fees	\$	\$	\$
Contractual Services	\$	\$	\$
Training	\$	\$	\$
Travel	\$	\$	\$
Rent	\$	\$	\$
Utilities	\$	\$	\$
Supplies	\$	\$	\$
Printing/Postage	\$	\$	\$
Other (specify)	\$	\$	\$
Total Expenses	\$	\$	\$

*Units of Service to be Provided: _____

Total Initiative Expenses: _____

\$

Program Expenses = Per Unit Cost
Units of Service Provided

\$

*Unit of Service is defined as the number of clients benefiting from service.