

**CONTRA COSTA COUNTY  
EMPLOYMENT & HUMAN SERVICES DEPARTMENT**

**Request for Interest #722  
Community Action Projects  
*Housing-Shelter / Employment-Jobs/ Food-Nutrition/Comprehensive Health Services***

Contra Costa County (County) Employment and Human Services Department (EHSD) announces Request for Interest (RFI) #722 seeking applications from eligible organizations to design and deliver Community Action Projects in alignment with the 2021/22 Contra Costa County Community Action Plan. Selected organizations may be awarded up to, but not more than, \$200,000.00 if additional funding becomes available. Award amounts will range from \$20,000 to \$40,000. This RFI is not in itself an offer of work nor does it commit the County to fund any proposal submitted. The County is not liable for any costs incurred in the preparation or research of proposals.

An Informational Session will be held via Zoom on **Wednesday, January 6, 2021 from 1:30 pm to 2:30 pm**. To attend this Zoom Informational Session, please use the following link and Password 267096: <https://cccouny-us.zoom.us/j/88651225777?pwd=VzB1ZUkwL0lrZWJmREhIT0RjVmhmKZz09>.

While attendance at the Informational Session is not mandatory, it is highly recommended that potential applicants attend for information on completing a response to the RFI. If you plan to attend, please RSVP by email to [contractbid@ehsd.cccouny.us](mailto:contractbid@ehsd.cccouny.us) or leave voice message on (925) 608-4959.

Funding

EHSD will award a Federal subaward standard contract (or contracts) to selected organization(s). All Contracts will be billable monthly, in arrears. Award amounts will range from \$20,000 to \$40,000. Contracts will be for twelve (12) months. Selected organizations may be awarded up to, but not more than, \$200,000.00 if additional funding becomes available. Federal Funds are passed through the California Department of Community Services and Development, and are identified as follows:

|  |  |
|--|--|
| <i>Federal Award Identification Number (FAIN):</i>           | G-16B1CACOSR                             |
| <i>Subaward Period of Performance:</i>                       | 3/1/2021/ to 2/28/2022                   |
| <i>Catalog of Federal Domestic Assistance Number (CFDA):</i> | 93.569                                   |
| <i>Program Title:</i>  | Community Services Block Grant (CSBG)    |
| <i>Agency:</i>   | Department of Health and Human Services  |
| <i>Office:</i>   | Administration for Children and Families |

Legal Authorities – Program Requirements, Standards and Guidance

All services and activities are to be provided in accordance with all applicable federal, state, and local laws and regulations, and as those laws and regulations may be amended from time to time, including but not limited to the following:

1. The Community Services Block Grant Act, as amended, 42 U.S.C. §9901 et seq., and 45 Code of Federal Regulations (CFR) Part 96.
2. The California Community Services Block Grant Program, Government Code §12085 et seq., as amended, and Title 22, California Code of Regulations (CCR) §§ 100601-100795;
3. The Single Audit Act, 31 U.S.C. §7301 et seq. and Office of Management and Budget (OMB) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards, 2 CFR 200, and 45 CFR Part 75.

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Purpose

EHSD's Community Services Bureau (CSB) serves as the federally designated Community Action Agency for Contra Costa County. CSB is part of the national Community Action Partnership (CAP) network of over 1,100 agencies that work to alleviate poverty and empower low-income families in communities throughout the United States. CAP is a public organization established under the Economic Opportunity Act of 1964. The Federal Department of Health and Human Services administers the Community Services Block Grant (CSBG) program funds which are then allocated annually to participating CSBG states. The CSBG administrator for California is the California Department of Community Services and Development (CSD). CSD distributes allocations within the state to the existing network of Community Action Agencies and additional community partners, which includes EHSD. Community needs are met and program goals achieved by partnering with community members, establishing and fostering community partnerships; developing and adapting new and innovative initiatives and working with other community-based and public organizations to leverage funding.

The focus areas for this RFI are to support **Housing-Shelter** (preventing homelessness, supporting safe and affordable housing to low income families/youth), **Employment-Jobs** (job training and/or placement, job readiness skills and/or development), **Food-Nutrition** (reducing hunger, promoting healthy eating, improve access and availability of fresh produce to our underserved population), and **Comprehensive Health Services** (improving health outcomes and overall well-being through a more effective and efficient use of resources). The RFI is available on EHSD website: <http://ehsd.org/directors/contracting-opportunities/rfis>, and the Contra Costa 2020-2021 Community Action Plan is available at <http://ehsd.org/headstart/community-action>.

Project Deliverables

The intent of this RFI is to invite profit/non-profit community based organizations or corporations to submit a Letter of Interest describing a program or project to address locally identified needs in low-income communities in at least one of the following priority areas:

- **Housing-Shelter** (preventing homelessness, supporting safe and affordable housing to low income families/youth/adults)
- **Employment-Jobs** (job training and/or placement, job readiness and and/or development)
- **Food-Nutrition** (reducing hunger, promoting healthy eating, improve access and availability of fresh produce to our underserved population)
- **Comprehensive Health Services** (improving health outcomes and overall well-being through a more effective and efficient use of resources)

Components of Letter of Interest (LOI):

**Applicants must submit Letter of Interest that includes the following and follows the Letter of Interest Guide.**

- Project Overview
- Program Budget Information (see Attachment C)
- Project Description

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- Outcome Goals and Objectives of the Project (see Attachment B)
- Statement of agency qualifications regarding track record of providing the proposed services
- Proof of required insurance
- Current list of Board of Directors and Staff
- Statement of **NO Potential Conflict Of Interest** between the Contra Costa County Economic Opportunity Council members and the applicant (see Attachment D)

| <u>Selection Criteria</u>                               | <u>Weight</u> |
|---|---------------|
| 1. Project Overview                                     | 5%            |
| 2. Program Budget                                       | 20%           |
| 3. Project Description                                  | 25%           |
| 4. Outcome Goals & Objectives                           | 30%           |
| <u>5. Proven track record of providing the services</u> | <u>20%</u>    |
| Total   | 100%          |

**If you are a current subcontractor, your previous performance will be considered in the scoring application.**

Contract Requirements

Applicants must provide proof of:

- Worker’s Compensation (for organizations with 50 employees or more)
- Professional liability
- Commercial Comprehensive Liability Insurance and Automobile Insurance
- Current list of Board of Directors and Staff
- Statement of **NO Potential Conflict Of Interest** between the Contra Costa County Economic Opportunity Council members and the applicant

Additionally, successful applicants must certify to the following prior to a resulting contract execution:

- Smoke-free work environment
- Discrimination policy
- Affirmative Action compliance
- Cultural Diversity policy
- Drug-free workplace

**Submissions:**

Submissions must follow the **Letter of Interest Guide** included in this RFI. Submissions must include the bidder’s e-mail address. Emailed submissions must show **RFI 722** in the Subject line. Email attachments must be in MS Word, MS Excel, and/or PDF file formats. Send proposals to one of the addresses listed below. Please note that responses will not be returned, and postmarks will **NOT** be accepted. If you plan to hand-deliver your response, please be advised the building is open to the public 8:00a.m. to 5:00 p.m., Monday through Friday (except holidays).

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Contra Costa County Employment and Human Services Department  
Contracts Unit, Attention: **RFI 722**  
40 Douglas Drive  
Martinez, Ca 94553

Telephone: (925) 608-4969  
Fax: (925) 608-4956  
E-mail: [contractbid@ehsd.cccounty.us](mailto:contractbid@ehsd.cccounty.us)  
Website: [www.ehsd.org/rfi](http://www.ehsd.org/rfi)

**Letters of Interest (LOI) will be due by 5:00 p.m. on Friday, January 15, 2021.** Please submit a cover letter detailing your agency's background, experience and references. Also attach your agency's proposed action plan to complete the services described herein.

**Letter of Interest Guide**

**Section I. Project Overview**

- A. Applicant/Organization information
- B. Project Name
- C. Areas of county where services are provided

**Section II. Program Budget Information**

- A. Amount of CSBG funds requested (not to exceed \$99,999)
- B. Total CSBG project cost (should match budget)
- C. Itemized CSBG project budget using Attachment C
- D. Leveraging-describe how you leverage other funds to provide the services you are proposing to fund.
- E. Provide budget contingency plan for reduced funding (See Section III. D)

**Section III. Project Description**

- A. Priority Area to be addressed [Housing/Shelter or Employment/Jobs or Food/Nutrition or Comprehensive Health Services]
- B. Goal Statement (use Attachment B)
- C. Project objective(s). Description of what will be achieved, including specific measurable action-oriented, realistic and time-bound steps that demonstrate how goals will be obtained. Include National Performance Indicators (NPIs) found in Attachment A relative to the priority area(s) you wish to address along with other performance indicators or metrics related to your program proposal. In your submission, please use the template found in Attachment B.
- D. Sustainability Plan-what steps will you take if funding is reduced/eliminated?
- E. How will your program partner with existing agencies to avoid duplication and maximize efficiency?

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**Section IV. Contract Requirements**

- A. Worker's Compensation
- B. Professional liability
- C. Comprehensive general liability, including automobile
- D. Current list of Board of Directors and Staff
- E. Statement of **NO potential conflict of interest** between the Contra Costa County Economic Opportunity Council members and the applicant

**Appeal process/Disqualification**

Each applicant submitting a letter of interest shall have an opportunity to appeal the funding decision of the Economic Opportunity Council. **Proposals disqualified for not meeting the deadline for submission and/or for not stating that there is a potential for conflict of interest in the application process are not eligible for appeal.**

All bidders will receive a written and emailed notice from EHSD notifying them of the funding decisions. If an applicant wishes to appeal the selection or award decision, the applicant must submit a written appeal to **EHSD Director, 40 Douglas Drive, Martinez, CA 94553 within ten (10) working days of the postmarked date of the written letter of award status.** The appeal will be conducted in accordance with the EHSD process.

All written letters of appeal must state the following:

- The issue(s) appealed
- How the alleged issue detrimentally effects the appellant
- The rectification sought by the appellant

An appeal will only be considered valid if there has been a violation of one of the following criteria:

- The procurement process as outlined in the RFI was violated in some manner; and or
- Federal, state, and/or EHSD procurement guidelines have been violated.

An appeal would not be allowed:

- To contest individual score, the rating system, or dissatisfaction with the evaluation results unless there is a violation of the process as outlined above.

Letters of appeal must be addressed to the Employment and Human Services Department Director and received by 40 Douglas Drive, Martinez, CA 94553 **no later than 5:00 p.m. on the 10<sup>th</sup> business day after award notification.** Notification of a final decision on an appeal shall be made in writing to the applicant.

Appeals unresolved by the initial appeal process may be pursued with the Contra Costa County Board of Supervisors.

**ATTACHMENT A**

**NATIONAL PERFORMANCE INDICATORS**

Use one or more of the below questions to develop each goal and objective in your RFI response.

**Housing - Shelter**

1. How many clients obtained and/or maintained safe and affordable housing?
2. How many clients have you assisted with Emergency Temporary Shelter?
3. How many clients have you assisted with Emergency Home Repairs (i.e., structural appliances, heating systems, etc.)?
4. How many clients have you assisted with Emergency Rent or Mortgage Assistance?
5. How many clients purchased their own home in their community?
6. What is the number of Housing Consortiums/Collaboration, both public and private your agency actively works with?
7. How many safe and affordable housing units in the community will be preserved or improved through the partnership with Contra Costa County Employment and Human Service Department Community Services Bureau?

**Employment - Training**

1. How many clients who are unemployed have obtained a job after visiting your agency?
  - A. Out of those clients, how many have maintained a job for at least 90 days?
  - B. Out of those clients employed, how many have obtained an increase in employment income and/or benefits?
2. How many clients have achieved “living wage” employment and/or benefits?
3. How many clients have obtained skills/competencies required for employment?
4. How many clients have completed ABE/GED and received certificate or diploma?
5. How many clients have completed post-secondary education program and obtained certificate or diploma?
6. How many accessible or increased educational and training placement opportunities, or those that are saved from reduction or elimination that are available for low-income people in the community, including vocational, literacy, and life skill training, ABE/GED, and post-secondary education will be preserved or improved through the partnership with Contra Costa County Employment and Human Service Department Community Services Bureau?
7. What is the number of Institutions of post-secondary education/training both public and private your agency actively works with?

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**ATTACHMENT A**

**Food - Nutrition**

1. How many clients has your agency assisted in obtaining food assistance?
2. How many clients have you assisted with emergency food?
3. How many clients in your agency with infants and children have had an improvement on their health and development because of adequate nutrition?

**Comprehensive Health Services**

1. How many clients obtained health care services for themselves and/or family member?
2. How many clients had access to safe and adorable health care services/facilities?
3. How many clients received Emergency Medical Care?
4. How many clients had access to reliable transportation and/or driver's license?
5. How many clients received Emergency Protection from Violence?
6. How many clients received Emergency Clothing?
7. How many youths improved their health and physical development?
8. How many youths improved their social/emotional development?
9. How many parents and other adults learned and exhibited improved parenting skills?
10. How many parents and other adults learned and exhibited family functioning skills?

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**ATTACHMENT B**

**SAMPLE GOAL AND OBJECTIVE SHEET**

|   |  |   |
|---|--|---|
| <p><b>GOAL:</b> Please state your goal in the box below. Choose one of the three priority areas and formulate a goal that describes how your program/project will impact the priority area.</p>   |  |   |
| <p>Contra Costa Housing Advocacy’s goal is to provide access to affordable and safe housing by providing low-income clients assistance with housing, evictions, foreclosure, and housing violations regardless of their location in the county.</p> |  |   |
| <p><b>OBJECTIVES</b></p>  | <p><b>METRICS –</b><br/>Quantifiable Results<br/>(Use NPIs in Attachment A)</p>  | <p><b>TIMEFRAME</b><br/>(When will you complete task?)</p>  |
| <p>Provide housing advice and assistance to seventy-five (75) low-income residents which include housing referrals, emergency shelter assistance, eviction requirements and procedures.</p>   | <p>Housing - Shelter<br/>Priority Areas:<br/>Our agency will assist sixty-five (65) low-income clients with emergency shelter in Contra Costa County.<br/><br/>Our agency will assist ten (10) low-income clients maintain safe and affordable housing in Contra Costa County.</p> | <p>We intend on completing these tasks and assisting the projected number of low-income clients stated on our objective by the end of the 2016 CSBG contract.</p> |
|   |  |   |
|   |  |   |
|   |  |   |



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**ATTACHMENT B**

Use this worksheet to complete Section III. B. Outcome Goal and Objective

| <p><b>GOAL:</b> Please state your goal in the box below. Choose one of the three priority areas and formulate a goal that describes how your program/project will impact the priority area.</p> |  |   |
|---|--|---|
|   |  |   |
| OBJECTIVES  | METRICS – Quantifiable Results<br>(Use NPIs in Attachment A) | TIMEFRAME<br>(When will you complete task?) |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |

**ATTACHMENT C**

**Budget Summary (Cost Reimbursement)**

Legal Entity Name: \_\_\_\_\_

Doing Business As (DBA): \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contract Number: \_\_\_\_\_

RFI / RFP Number: \_\_\_\_\_

| Budget Category                    | Cost Reimbursement Amount | In-Kind Amounts | Total |
|------------------------------------|---------------------------|-----------------|-------|
| A. Personnel                       |                           |                 |       |
| B. Fringe Benefits                 |                           |                 |       |
| C. Travel                          |                           |                 |       |
| D. Property                        |                           |                 |       |
| E. Supplies                        |                           |                 |       |
| F. Facility & Infrastructure Costs |                           |                 |       |
| G. Consultants & Contracts         |                           |                 |       |
| H. Participant Costs               |                           |                 |       |
| I. Other                           |                           |                 |       |
| <b>TOTAL PROJECT COSTS:</b>        |                           |                 |       |

**ATTACHMENT D**

**CONFLICT OF INTEREST FORM**

The below noted member of the board of directors and executive director of the noted agency hereby certifies that there is not a conflict of interest with the Contra Costa County Economic Opportunity Council. We attest that, to the best of our knowledge, no board member or staff have any direct or indirect interest with any member of the Contra Costa County Economic Opportunity Council that would prevent the exercise of fair and impartial judgment in our proposal evaluation. A conflict of interest is a transaction or arrangement that might benefit the private interest of an officer, board member, or employee.

We also understand that all proposals and their contents are considered confidential information and may not be distributed. This form shall be returned to the Employment and Human Services Department, Contracts and Grants Unit, 40 Douglas Drive, Martinez, CA 94553. Upon awarding of any contract, the proposals, with some limitations, may become public information.

\_\_\_\_\_  
Signature of Board Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Title / Position / Agency

\_\_\_\_\_  
Signature of Executive Director (or designee)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Title / Position / Agency