

**MAYOR’S OFFICE OF HOUSING AND COMMUNITY DEVELOPMENT**

**CITY & COUNTY OF SAN FRANCISCO**

##### REQUEST FOR PROPOSALS

**AUGUST 2016**

**Deadline for Submitting Applications: 5:00 p.m., Wednesday, August 31, 2016**

One original and three copies of the completed proposal should be submitted to:

Mayor’s Office of Housing and Community Development

1 South Van Ness Avenue, 5th Floor

Attention: Brian Cheu

***HAND DELIVERY RECOMMENDED***

**TECHNICAL ASSISTANCE WORKSHOP**

The Mayor’s Office of Housing and Community Development will conduct a technical assistance workshop to assist interested applicants in determining the eligibility of proposed projects, and completing the required elements of the proposal packet. This workshop will be held:

**Monday, August 15, 2016**

**12:30pm – 2:00pm**

**1 South Van Ness Avenue, 5th Floor**

The meeting room is wheel chair accessible. If you need translation services, a sign language interpreter, or any other accommodations, please call 415-701-5598 at least 72 hours in advance. For speech/hearing impaired callers, please call TYY/TDD 415-701-5503. For information on MUNI routes, please call 415-673-6864.

**REQUEST FOR PROPOSAL OVERVIEW**

# I. NOTICE OF FUNDING AVAILABILITY

The Mayor’s Office of Housing and Community Development Division (MOHCD is seeking to fund community-based organizations to provide various services and activities as described in Attachment A. The grant period will be from October 1, 2016-June 30, 2017. This is a Request for Proposal (RFP) from MOHCD announcing that General Funds are being made available to provide these services and activities in the amounts described in the Attachment.

**II. ELIGIBLE ACTIVITIES**

**Eligible activities under each program area can be found in Attachment A of this packet.** Applicants must submit a separate proposal for each program area. MOHCD reserves the option to award single or multiple agency awards during the review process.

**III. PROCUREMENT**

This RFP procurement process, and the proposals received as a result of it, may be used to justify contract funding decisions for other similar services and/or other funding that becomes available through MOHCD or any other City department.MOHCD and/or any other City departments who use this RFP solicitation as a procurement process for other funds, reserve the right, at their own discretion, to fund select activities or partners, (and remove or eliminate others) within a proposal submitted by a collaborative or group of agencies. The procurement process for this RFP or any of its component Proposal Areas or Modules may be delayed, suspended, or canceled if the City determines that such action is in the best interest of the City.

**IV. PRIORITIES and ELIGIBILITY**

1. **Priority**

Priority will be given to those agencies that currently perform similar services and demonstrate ability to increase impact through collaborative efforts.

1. **Eligibility:**
* Programs must principally benefit low and moderate-income individuals and their families.
* Beneficiaries must reside within the boundaries of the City and County of San Francisco.
* Applicants must be San Francisco-based; must be a 501(C)(3) non-profit corporation registered with the Internal Revenue Service; and must be in good standing with the State of California’s Registry of Charitable Trusts.
* Applicants may submit as single agencies or as a collaborative; however, collaborative proposals must choose a lead agency to serve as the fiscal agent. The fiscal agent should submit its own organizational documentation as directed below in the same manner as if it was a single agency.
* Applicants must demonstrate a history and track record of successfully providing the activities and services within the framework described in **Attachment A**.
* Successful applicants must comply with all applicable local government regulations.

**V. EVALUATION CRITERIA**

1. The extent to which the applicant reflects a successful history of effectively serving the targeted populations as specified in **Attachment A**. **25%**
2. The extent to which the proposed program meets the objectives, eligible activities, and program description outlined in the RFP. **30%**
3. The extent to which the proposal outlines specific, measurable and realistic outcomes for the targeted population and reflects best practices. **25%**
4. Extent to which applicant demonstrates a robust evaluation methodology. **10%**
5. Extent to which applicant demonstrates staff experience and expertise required to deliver successful programs. **10%**

**VI. REQUIREMENTS**

The use of City funds is subject to numerous local requirements. A few of the requirements are listed below and are briefly summarized.

* **Accessibility:** programs and services must be accessible to persons with disabilities. Program access can be achieved in many cases without having to alter the existing facility.
* **Non-Discrimination:** agencies must comply with federal, state and San Francisco prohibitions against discrimination in fair housing and equal employment opportunity, and in awarding contracts. Agencies must also comply with the Equal Benefits Ordinance for domestic partners.
* **Procurement:** projects must comply with federal conflict of interest regulations, and regulatory procedures for obtaining and contracting for goods and services.
* **Ineligible Reimbursements:** funds for activities occurring prior to the commencement date of the grant agreement cannot be reimbursed.
* **Religious Activity:** funds may not be used for religious purposes or for the improvements of property owned by religious entities except where the grant recipient is a secular non-profit organization with a long term lease.
* **Political Activity:** funds may not be used for political activity.

**VII. TECHNICAL ASSISTANCE**

Questions on completing the application can be addressed at the technical assistance workshop. The technical assistance workshop will assist interested applicants in determining eligibility and completing the required elements of the proposal package. **This workshop is scheduled for:** **Monday, August 15, 2016,** **12:30pm – 2:00pm, 1 South Van Ness Avenue, 5th Floor.**

**VIII. REVIEW PROCESS AND SCHEDULE**

All submitted proposals will be initially screened by a committee composed of MOHCD staff to determine completeness and eligibility. Ineligible proposals will be eliminated at this stage. MOHCD staff will evaluate all complete and eligible proposals submitted for programs listed on Attachment A. MOHCD will make the final selection of the agencies/agency to be awarded a grant(s) under Attachment A. **The preliminary schedule for review and approval is:**

Wednesday, August 31, 2016 Proposals due to MOHCD by 5:00pm

September 8 -12 Agencies notified of award

September 14 – 19 Five day appeals period ends

September 19 – September 30 Grant negotiations

October 1 – October 31 Contracting and encumbering process

October 1, 2016 Grant term begins

MOHCD reserves the right to adjust the preliminary schedule at its discretion.

**IX. PROTEST PROCEDURES**

**A. Protest of Non-Responsiveness Determination**

Within five business days of the City's issuance of a notice of non-responsiveness, any respondent that has submitted a proposal and believes that the City has incorrectly determined that its proposal is non-responsive may submit a written notice of protest. Such notice of protest must be received by the City on or before the fifth business day following the City's issuance of the notice of non-responsiveness. The notice of protest must include a written statement specifying in detail each and every one of the grounds asserted for the protest. The protest must be signed by an individual authorized to represent the respondent, and must cite the law, rule, local ordinance, procedure or RFP provision on which the protest is based. In addition, the protestor must specify facts and evidence sufficient for the City to determine the validity of the protest.

**B. Protest of Grant Award**

Within five business days of the City's issuance of a notice of intent to award the grant, any firm that has submitted a responsive proposal and believes that the City has incorrectly selected another proposer for award may submit a written notice of protest. Such notice of protest must be received by the City on or before the fifth business day after the City's issuance of the notice of intent to award.

The notice of protest must include a written statement specifying in detail each and every one of the grounds asserted for the protest. The protest must be signed by an individual authorized to represent the proposer, and must cite the law, rule, local ordinance, procedure or RFP provision on which the protest is based. In addition, the protestor must specify facts and evidence sufficient for the City to determine the validity of the protest.

**C. Delivery of Protests**

All protests must be received by 5:00p.m. of the due date. If a protest is mailed, the protestor bears the risk of non-delivery within the deadlines specified herein. Protests should be transmitted by a means that will objectively establish the date the City received the protest. Protests or notice of protests made orally (e.g., by telephone) or via e-mail will not be considered.

If the City determines that a meeting with the party submitting the appeal is necessary, such meeting will be scheduled within ten (10) calendar days of the receipt of a protest to review and attempt to resolve the protest. Protests must be delivered to:

**Director of Community Development**

Mayor’s Office of Housing and Community Development

1 South Van Ness Ave., 5th Floor
San Francisco, CA 94103

**Note:** Successful applicants will be required to execute and meet the provisions of a grant agreement. Additional documentation, including an annual work plan and an annual budget, must be completed and approved by MOHCD prior to any funds being committed or spent. Financing is primarily on a monthly cost-reimbursement basis. Successful applicants will be expected to participate in MOHCD online programmatic and financial reporting system. Expenses incurred prior to start of the contract are not eligible for reimbursement.

# PROPOSAL INSTRUCTIONS

* Please be as succinct as possible. The narrative section must be no longer than five pages and single spaced. Reviewers will not consider text beyond the indicated text limitations and/or space provided.
* No handwritten proposals will be accepted. Proposals must be typed or computer generated and single-spaced. The font must be at least 12 point.
* Pages should be standard 8-1/2" by 11" with 1 inch margins. All copies should be double sided and double spaced.
* Original signatures must be in blue ink on the original set.
* Use the application checklist to ensure your package is complete.
* Do not bind proposals, or submit extra materials not requested.
* Substantially incomplete, faxed, or late applications will not be considered. **Hand delivery is highly recommended. No applications will be accepted after 5:00pm on Wednesday, August 31, 2016.**
* One original and three copies of the completed proposal should be submitted to:

**Mayor’s Office of Housing and Community Development**

**1 South Van Ness Avenue, 5th Floor**

**Attention: Brian Cheu**

# AGENCY CHECKLIST

**Application *(one original signed in blue ink and three copies)***

[ ] Proposal Cover Sheet

[ ] Board Affiliations

[ ] Application Narrative

 [ ] Program Budget Worksheet

**Additional required items for applicants not currently receiving MOHCD *(one copy attached to the original set)***

[ ]Articles of Incorporation, including all amendments

[ ]Organization by-laws, including all amendments

[ ]Evidence of Federal Tax Exempt 501(c) (3) status

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

###### PROPOSAL COVER SHEET

Street Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ San Francisco, CA 941\_\_\_\_\_\_\_\_\_

Program Location (if different):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ San Francisco, CA 941 \_\_\_\_\_\_\_

Main Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Executive Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ x \_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ x \_\_\_\_\_\_\_\_

Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please check the box for both the Service Area and the Proposal Title that this proposal is applying for:**

***---For any of the proposals listed below, please reference Attachment A --***

**Access to Housing**

1. Access to Housing Counseling – Citywide
2. Access to Housing Counseling – Western Addition
3. Tenant and Applicant Support Services - Citywide
4. Technical Assistance – Housing Information Portal

**Community Building and Neighborhood Planning**

1. Community Center for SRO Families in Chinatown
2. Filipino Cultural District Planning
3. Richmond Neighborhood Safety Network
4. Outreach, primarily to monolingual Chinese speakers, regarding Sisterhood Farms in the OMI
5. Violence Prevention and Public Safety Coordination in Bernal Heights
6. Expanding Development-Related Employment Opportunities
7. Urban Agriculture and Greening Opportunities in the Portola District

**Eviction Prevention**

1. Legal Representation in Unlawful Detainer Actions
2. Citywide Tenant Outreach and Education
3. Tenant counseling, outreach and education primarily to residents of the Richmond District
4. Tenant counseling, legal advocacy, outreach and education to public housing residents, including those going through the RAD transition
5. Tenant Outreach and Education to the Filipino community, particularly in South of Market
6. Rental Assistance and Case Management for Formerly Homeless Families
7. Mediation and Engagement in Supportive Housing
8. Eviction Prevention Data Project
9. Long-term subsidies – aging out of private disability
10. Housing Assistance for San Francisco Unified District Teachers and Paraprofessionals

**Foundational Competencies**

1. Foundational competencies primarily for transitional age youth, focusing on low-income youth,Asian Pacific Islander and limited-English-proficient youth
2. Foundational competencies for transitional-aged youth and adults that are re-entering from incarceration
3. Family Economic Success and job readiness program, primarily for Asian Pacific Islander residents

**Legal Services**

1. Coordination of citywide immigration legal services

**Organizational Capacity Building**

1. Capacity building for agencies serving vulnerable populations in the South of Market (SoMa)
2. Capacity building for agencies serving vulnerable populations in the Mission
3. Capacity building for a cultural center focused on LGBT issues.

**Service Connection**

1. Service Connection in the Excelsior Neighborhood
2. Family Support for Immigrant Parents

**Sustainable Homeownership**

1. Home Modification Fund

**Total Proposal Request:** (must not exceed the amount listed on Attachment A) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total FY 2016-2017 Projected Agency Budget:** $\_\_\_\_\_\_\_\_\_\_\_\_\_

**I certify that the information provided in this application is true:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature of Executive Director Date

## PROPOSAL NARRATIVE

*(Must not exceed 5 pages)*

1. **Background and Need:** (2-4 paragraphs suggested)

This section should demonstrate a broad understanding of the barriers and challenges faced by the target population as described in Attachment A the relevant program area.

* What specific barriers and challenges exist for this population within this program area?
* What is your history of providing services in this specific program area and with this specific population?
1. **Proposed Program Design:** (4-5 paragraphs suggested)

This section should provide information about agency capacity to implement the activities prioritized in this RFP for the relevant program area. This section should provide detail about program design and service delivery strategies.

* What is the proposed program design?
* Who will your organization target for services, how many overall individuals do you propose to serve through this program, and how do you propose to outreach to them?
* Describe how you incorporate best practices into your program design.
* What other organization(s) do you partner with, and how does this partnership impact your reach/activities/services?
* How will you involve the community, or connect with community-based knowledge and experience, to inform program design?
1. **Activities and Outcomes:** (3-4 paragraphs suggested)
This section should list activities and outcomes for your proposed program. The activities and outcomes for each program area are included in Appendix A.
* Activity descriptions should be clear and specific.
* Each client activity must be linked to specific outcome(s) and should be supported by evidence-based practice. Non-client based activities are not required to have corresponding outcomes.
* Your proposal should also include expected number of people to be served per activity, and number of people expected to achieve the corresponding outcomes.
1. **Evaluation:** (1-2 paragraphs suggested)
This section should describe how you will evaluate the impact of the proposed activities for the target population.
* How will you track progress and determine the level of impact for target population?
* How will you evaluate and inform program design?
1. **Organizational Capacity:** (2-3 paragraphs suggested)Describe the skills and experience of key agency staff.

# Identify the individual/s who will work on this project on behalf of your organization. Include name/s, job title/s, skills and experience.

**LIST YOUR BOARD OF DIRECTORS:**

 Name Neighborhood Affiliation/Occupation List Other Board Memberships

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Line****MOHCD Program Budget Worksheet Agency Name** | **Budget Item** |  |  | **Requested Amount from MOHCD** | **Total Program Budget** |
| **Salaries & Wages** |  |  |  |  |  |
|   |  **NAME - TITLE** | **Rate/Hr.** | **# of Hrs.**  | $ | $ |
| 1 |   |   |   | $ | $ |
| 2 |   |   |   | $ | $ |
| 3 |   |   |   | $ | $ |
| 4 |   |   |   | $ | $ |
| 5 |   |   |   | $ | $ |
| 6 |   |   |   | $ | $ |
| 7 |   |   |   | $ | $ |
| 8 |   |   |   | $ | $ |
| 9 | **Total Salaries (Lines 1 thru 8)** |   |   | $ | $ |
| **Fringe Benefits** |  |  |  |  |  |
|  | **Item** |   |   |  |  |
| 10 | FICA |   |   | $ | $ |
| 11 | SUI |   |   | $ | $ |
| 12 | Workers Compensation |   |   | $ | $ |
| 13 | Medical Insurance |   |   | $ | $ |
| 14 | Retirement |   |   | $ | $ |
| 15 | Other  |   |   | $ | $ |
| 16 | **Total Fringe Benefits (Lines 10 thru 15)** |   |   | $ | $ |
| **Contractual Services**  |  |  |  |  |  |
|  | **Item** |   |   |  |  |
| 17 |   |   |   | $ | $ |
| 18 |   |   |   | $ | $ |
| 19 |   |   |   | $ | $ |
| 20 |   |   |   | $ | $ |
| 21 |   |   |   | $ | $ |
| 22 | **Total Contractual Services (Lines 17 thru 21)** |   |   | $ | $ |
|  | **Equipment** |  |  |
| 23 |   |   |   | $ | $ |
| 24 |   |   |   | $ | $ |
| 25 |   |   |   | $ | $ |
| 26 | **Total Equipment (Lines 23 thru 25)** |   |   | $ | $ |
| **Insurance** |  |  |  |  |  |
| 27 |   |   |   | $ | $ |
| 28 |   |   |   | $ | $ |
| 29 |   |   |   | $ | $ |
| 30 |   |   |   | $ | $ |
| 31 |   |   |   | $ | $ |
| 32 | **Total Insurance (Lines 27 thru 31)** |   |   | $ | $ |
| **Travel & Conferences** |  |  |  |  |  |
| 33 |   |   |   | $ | $ |
| 34 |   |   |   | $ | $ |
| 35 |   |   |   | $ | $ |
| 36 | **Total Travel (Lines 33 thru 35)** |  |  | $ | $ |
|  | **Space Rental (Office/Program Space)** |  |  |
| 37 | **Total Space Rental** |   |   | $  | $ |
|  |  **Supplies** |  |  |
| 38 | **Total Office Supplies** |   |   | $ | $ |
|  | **Telecommunications (Phone)** |  |  |
| 39 | **Total Telecommunications** |   |   | $ | $ |
|  | **Utilities** |  |  |
| 40 | **Total Utilities**  |   |   | $ | $ |
|  | **OTHER**  |  |  |
| 41 |   |   |   | $ | $ |
| 42 |   |   |   | $ | $ |
| 43 |   |   |   | $ | $ |
| 44 |   |   |   | $ | $ |
| 45 | **Total Other (Lines 41 thru 45)** |   |   | $ | $ |
|  | **Indirect**  |  |  |
| 46 | **Total Indirect (no more than 15%)** |   |   | $ | $ |
| 47 | **Total (Line 9+16+22+26+32+36+37+38+39+40+46)** |   | $ | $ |