

# **United Planning Organization**

## **CSBG**

### **Request for Performance Based Proposals**

### **Fiscal Year 2013**

Request Issued: July 30 , 2012

Corporate Capability Documentation & Proposal Due: August 30, 2012

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# **I. GENERAL INFORMATION**

## **A. Background on UPO**

UPO is a 501(c) (3) private non-profit corporation and the designated Community Action Agency for the District of Columbia. As UPO celebrates half a century of providing services and programs to low-income residents of Washington, DC, UPO is grateful to offer other community based organizations the opportunity to serve the community through the funding of the Community Services Block Grant (CSBG).

UPO is committed to uniting DC residents with resources enabling them to reach higher levels of self-sufficiency. We are instrumental in engaging residents, while empowering them to take an active role in sustaining their future.

## **B. Purpose of the RFP**

This Request for Proposals (RFP) is being issued to support community based programs that provide services authorized under CSBG funding to assist residents of the District of Columbia living at or below 125% of the poverty level (2011 “Federal Poverty Guidelines”) in becoming self-sufficient. Funding will not be provided for planning, development, construction, or start-up projects.

## **C. General Community Based Organization Eligibility Requirements**

This RFP seeks to identify community based organizations (CBOs) that can provide programs and services that promote self-sufficiency and/or improve the conditions of low-income residents living in poverty. Additionally, this RFP seeks to determine the eligibility of CBOs to provide programs and services that supplement activities of an existing organization or create new programs within an existing organization.

Eligible CBOs must be able to demonstrate that they are a legally incorporated private non-profit organization licensed to conduct business in the District of Columbia, have current 501(c)(3) tax-exempt status, have a formal governing body, have been in existence and operating for a minimum of five years, are financially capable with audited financial statements for each year of operation, and have a sound organizational structure.

## **D. Grant Award Amount and Length of Funding**

It is expected that twelve (12) grants will be awarded for the 2013 fiscal year with a one-year renewal option. Available funding totals \$2,710,000 per year. The maximum grant ceiling is \$420,000 per year. Applicants requesting award amounts above the maximum will not be considered. Proposed programs should be community based initiatives that serve low income individuals and families residing in the District of Columbia.

Successful applicants shall be required to enter into a “written agreement” with UPO. The terms of the Agreement shall be performance based as set by the program areas/services measures and rates in **Form D** attached to this document; in accordance with the approved program performance standards, earnings allocation, and time frames established within the award notification. **The performance period for the award will be October 1, 2012 through September 30, 2013 with a one-year renewal option.**

## E. Contact Person

Technical questions concerning the CSBG program or this RFP are to be submitted in writing at least ten (10) days prior to the submission due date. Responses to technical questions will be posted on the UPO website within three (3) business days of receipt. Verbal questions and/or responses will not be permitted and will not be considered binding.

All general questions or non-technical requests for information regarding this RFP are to be directed in writing (via or mail or e-mail) to:

Sally Ibrahim, Procurement Officer  
United Planning Organization  
301 Rhode Island Ave., N.W., Washington, D.C. 20001  
E-mail: sbrahim@upo.org

All technical questions regarding this RFP shall be submitted in writing via e-mail to:

Mark Koiwai, Senior Program Evaluator  
United Planning Organization  
301 Rhode Island Ave., N.W., Washington, D.C. 20001  
E-mail: mkoiwai@upo.org

## II. CORPORATE CAPABILITY DOCUMENTATION

### A. Introduction

This RFP seeks to determine the eligibility of CBOs to provide programs and services that supplement activities of an existing organization or create new programs within an existing organization. Eligible CBOs must be able to demonstrate that they are a legally incorporated private non-profit organization licensed to conduct business in the District of Columbia, have current 501(c)(3) tax-exempt status, have a formal governing body, have been in existence and operating for a minimum of five years, are financially capable with audited financial statements for each year of operation, and have a sound organizational structure.

Single CBO applicants should submit their corporate capability documentation in a separate packet from the proposal, marked “**Corporate Capability Documentation.**” This documentation shall be used to determine the eligibility of the CBO to provide CSBG services.

In the event that a CBO may desire to partner with another organization(s), a Lead CBO should be identified. The Lead CBO should submit their corporate capability documentation in a separate packet from the proposal, marked “**Lead-Corporate Capability Documentation.**” This documentation shall be used to determine the eligibility of the CBO Lead to provide CSBG services.

An individual person may not submit a grant application to this grant opportunity.

## **B. Listing of Required Documentation**

CSBG requires the following corporate capability documentation for all grantees to be awarded funding under this solicitation:

**ALL DOCUMENTATION MUST BE CURRENT, ACCURATE, AND APPLICABLE TO THE CBO or LEAD CBO RESPONDING TO THIS RFP. DOCUMENTATION MUST BE ORGANIZED AND NUMBERED IN THE FOLLOWING MANNER:**

1. Federal Tax Exempt Status Verification (i.e., proof of 501 (c)(3) tax-exempt status)
2. IRS Employer Identification Number
3. DC Tax Exempt Status Verification
4. Articles of Incorporation (include all amendments)
5. Most current copy of Bylaws
6. Current DC Basic Business License
7. Certificate of Good Standing (DC Office of Tax & Revenue)
8. Current Board Membership Roster, including Name, Address, Telephone Number, Position on the Board and/or Advisory Board membership, and state ex-officio status (voting or non-voting) if applicable
9. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion
10. Certification Regarding Lobbying
11. Certification Regarding Drug-free Workplace Requirements
12. Certification Regarding Environmental Tobacco Smoke (Pro-Children Act of 1994)
13. Most recent Audited Financial Statement (drafts unacceptable)
14. CBOs with \$500,000 or more in US Federal funding, must submit a prior year Single Audit (OMB Circular A-133) including findings, opinions and recommendations (drafts unacceptable)
15. Most recent Income/Expense Statement and Balance Sheet (no more than 3 months old)
16. Most recent Federal Tax Return 990 (signed and completed) and/or copy of signed and completed extension request/letter
17. Resume of Chief Financial Officer or person providing regularly scheduled or ongoing services of a qualified fiscal officer or Chief Financial Officer
18. Resume of Chief Executive Officer and/or Executive Director
19. Certificate of Insurance for comprehensive general liability coverage inclusive of property coverage, vehicle liability coverage, sexual abuse liability coverage (applicant operations involving interaction with youth), worker's compensation (employees eligible for coverage under existing worker's compensation laws and regulations) or accidental medical insurance and, if available, Director's & Officer's liability insurance policy.
20. Proof of Bonding/Employee Dishonesty Insurance
21. List of organization headquarters and/or proposed program site location(s) and hours of operation

22. Board and Employee Conflict of Interest Policies
23. Statement of Compliance with Equal Employment Opportunity laws and regulations
24. Statement of Compliance with the American Disabilities Act
25. Criminal Background Check Policy
26. Disclosure of any administrative or legal proceedings within the last three years; including any pending actions
27. Other funding resources utilized during the stated performance period-complete and attach **Form I** of the RFP

If documentation is unavailable, please mark “**Documentation Unavailable**” and provide a brief explanation on a single sheet with the documentation number. If documentation does not exist, please mark “**None**” and provide a brief explanation on a single sheet with the documentation number. If documentation is not applicable, please mark “**N/A**” and provide a brief explanation on a single sheet with the documentation number.

**Only CBOs determined by UPO to have met the corporate capability requirements will have their proposal reviewed. Any proposal not accompanied by all requested corporate capability documentation may automatically be declined.** All services under the grant are to be performed solely by the CBO or lead CBO and/or its partners; and may not be otherwise subcontracted or assigned without prior written approval and consent of UPO.

### **III. PROPOSAL TO PROVIDE CSBG-FUNDED SERVICES – SCOPE OF SERVICES**

#### ***A. Program Purpose***

The United Planning Organization, pursuant to its authority as amended by P.L. 105-285, the Coats Human Services Reauthorization Act of 1998, which authorizes the Community Services Block Grant, proposes the establishment of Agency Agreements with community based organizations. Through these Agreements, UPO seeks to assure the effective delivery of services and activities in the program areas covered by CSBG National Goals. RFP respondents must demonstrate that the proposed services will have a measurable impact on assisting low-income District of Columbia residents to attain at least one of the below stated national goals.

Applicants for this solicitation are required to select goals and performance indicators that correspond to the work their proposed program will perform. Applicant CBOs will be mandated to report program outcomes using UPO’s client data tracking information system-Community Action Statistical Access (CASA). Applicants must have sufficient organizational capacity to ensure accurate and timely data input using CASA; and adequate and reliable access to the Internet.

The program categories for funding are community based initiatives that serve low-income individuals and families in the District of Columbia.

Programs and services must support one or more of the following five (5) national goals and incorporate one or more of the associated performance indicators:

**Goal 1: Low-Income People Become Self-Sufficient:** The performance indicators are employment, employment supports, economic asset enhancement and utilization management;

**Goal 2: The Conditions in Which Low-Income People's Lives are Improved:** The performance indicators are community improvement and revitalization, community quality of life and assets, and community engagement;

**Goal 3: Low-Income People Own a Stake in Their Community:** The performance indicators are community enhancement through maximum feasible participation, and community empowerment through maximum feasible participation;

**Goal 4: Partnerships Among Supporters and Providers of Services to Low-Income People are Achieved:** The performance indicator is expanding opportunities through community-wide partnerships; and

**Goal 6: Low-Income People, Especially Vulnerable Populations, Achieve Their Potential by Strengthening Family and Other Supportive Systems:** The performance indicators are independent living, emergency assistance, child and family development, family supports (seniors, disabled and caregivers) and service counts.

UPO's six (6) priority focus areas are based upon data and projections from UPO's published 2009 Community Needs Assessment and the pending 2012 Community Needs Assessment. Proposals must address those programs and services that address one or more of the priority focus areas below:

1. Employment Support combining: (a) vocational skills training; (b) job readiness training; and (c) job placement assistance.
2. Housing Support Services.
3. Pro-active Youth Engagement and Child Development: (a) childcare and aftercare programs; (b) dual language instruction programs; and (c) summer programs.
4. Family Strengthening and Support.
5. Health Programs that provide support, awareness or services for: (a) health education, promotion and prevention; (b) direct health care; (c) mental health; and (d) persons with disabilities.
6. Advocacy Services: (a) Senior Citizens; and (b) Re-entry residents.

In support of these priorities, programs and services shall be performance based as set by the program areas/services measures and rates in **Form D Program Outcome Earnings Plan of this RFP. Also, see Part III, D. Program Outcome Earnings Plan and Instructions.**

## **B. Abstract Requirements**

Provide a one (1) page abstract of your proposal including: (1) a brief description of your organization; (2) the program focus area(s) and program indicator(s) and/or initiative(s) you will address; (3) a brief description of the proposed program and/or initiative; (4) the target population(s); (5) the need for the



proposed program and/or initiative; (6) if applicable, the name and program function(s) of your partner CBOs; (7) the dates of program operation (must be within the grant award period); (8) your location(s) and hours of operation; and (9) the amount of projected earnings requested.

## **C. Program Narrative Requirements**

### **Population and Need for Program**

Justify the selection of the target population and approach proposed. Provide a detailed description of client need, clearly referencing all data and information sources used as documentation. Should an end note index be utilized, a one page end note index page does NOT count against your 30 page limitation. Describe the percentage of the target population which your project will address. A detailed description of the proposed target population, including demographics, DC Ward number(s), economic levels and total number to be served must be provided. If services outlined are not unique to the target population or area, explain why the activities proposed do not supplant existing services provided by your program or other agencies serving the population outlined.

Only low-income individuals and families who are DC residents; and whose family income does not exceed **125%** of the federal poverty guidelines are eligible for services funded through this solicitation. This policy does not preclude participation of persons in your program with family incomes above 125% of the federal poverty guidelines. However, participants not meeting the UPO target population criteria cannot be served through UPO's CSBG funding. Provide your system for maintaining administrative records that clearly demonstrate Customer Proof of CSBG Eligibility (see Forms B Customer Proof of CSBG Eligibility and Instructions) and administrative records that clearly identify alternative funding sources for persons ineligible for services through CSBG funding.

Describe the low-income people who will benefit from activities that expand or safeguard the availability of community resources and opportunities through their own community development activities or partnerships, or as a result of advocacy and/or describe the residents of low-income neighborhoods who become connected and involved in the well-being and improvement of their community.

### **Specific Services**

Provide a justification for your program, a description of your target population(s), and the percentage of the target population you believe your program will serve. Discuss the relevance of your program and how it integrates or links with other community activities, or furthers community goals and/or strategies. Fully describe the proposed program, explain its operations, any special techniques you will use to achieve your goals, and the specific methodology that will be used to determine goal achievement. Explain how you will fulfill reporting, records maintenance, monitoring and evaluation requirements including client tracking. Discuss program location and facility conditions. Additional instructions regarding these items are provided by section below for the purpose of clarification.

Specify activities to be performed by your staff and if applicable, the activities performed by your partner CBO(s). State the specific services which will be provided to clients participating in the program. Explain how these methods are innovative or unique and different from services provided to the target population or area by existing organizations. Services provided should be consistent with staffing, organizational capacity, history, agency accomplishments and proposed outcome earnings plan.

Discuss the program indicators selected, why they were selected and the methods to be used in program implementation. Outline the methodology designed to ensure goal attainment and achievement of projected performance indicators and outcomes. Describe the system or methodology for monitoring and reporting processes and outcomes, and identify an evaluation or quality management plan to ensure deficiencies are addressed. The evaluation or quality management plan should also focus on linkages, leveraging of resources and client outcomes.

Programs that include vocational skills training of 30+ days must include the training curriculum. Programs that offer General Educational Development (GED) must include documentation that they meet the education requirements set forth by the District's Office of the State Superintendent of Education. "Label" and attach as **Form K Curriculum and/or DC OSSE** Recognition.

### **Initiatives**

If Goal 2 "The Conditions in Which Low-income People Live are Improved" and/or Goal 3 "Low-income People Own a Stake in their Community" are chosen then a full explanation of the initiative must be included. This includes the rationale for the initiative, the targeted population(s), description of activities to complete the initiative and what are the results of the initiative. Fully describe a completed unit and/or how the units will be measured and determined. Specify the number of units in the initiative. Explain its operations, any special techniques used to achieve the results, and the specific methodology that will be used to track the success of the initiative. Discuss the relevance of your initiative and how it integrates or links with other community activities, or furthers community goals and/or strategies. State how you will fulfill reporting, record maintenance, monitor and evaluate the achievements of the initiative. State and justify the expected earnings associated with the initiative.

### **Program Linkages**

Fully describe your program's operation and the relationship to other organizations and programs within the community. Relate program goals to both prior successes and proposed strategies for assisting clients to achieve self-sufficiency. Respondents are encouraged to form coalitions and/or partnerships with UPO Community Service Centers, UPO's Office of Child & Family Development and other UPO funded Programs.

**Form F Coordination and Linkages** is provided for use in documenting these relationships. This form must be fully completed and attached to your proposal.

### **Prior or Existing Relationship With UPO**

Fully describe any prior or current funding relationship with UPO utilizing the **Form E Notice of Prior or Existing Relationship With UPO**, if applicable. If no prior or current relationship exists, state "no prior or existing funding relationship."

### **Program Organizational Structure and Operation**

Fully describe the capacity of your organization to manage and operate the proposed program. Briefly describe your overall organizational structure, management and staffing, including staffing for the proposed program, and how it will function within the organization. Provide an overall organizational chart including proposed program staffing that clearly identifies personnel by name and title. Vacant positions should be designated "vacant" or "to be hired (TBH)." This chart should be marked **Form L Organizational Chart** and attached to your proposal. This attachment should NOT be counted in the page limit.

## **Position Descriptions**

Provide a position description for each person assigned to the program. Clearly identify the name of the person to be assigned to the position in your program to be funded or label “to be hired (TBH).” Clearly identify the individual responsible for the successful operation of the program. Position descriptions should be limited to one page or less. These items should be placed in the Attachments Section of your response and should NOT be counted in the page limit. Position descriptions must be consistent with the services outlined and should be marked as **Form M Position Description**; and attached to your proposal.

## **Staff Qualifications**

Describe the qualifications of key personnel in your proposed program. Current resumes or curriculum vitae should be provided for all personnel assigned to the funded program. Resumes or curriculum vitae for the Chief Executive Officer/Executive Director and Chief Financial Officer submitted under the Corporate Capability Requirements do NOT have to be resubmitted in the proposal regarding program staff qualifications. All qualifications must be appropriate for all positions. Staffing should be consistent with position descriptions, organizational chart, and program narrative. Persons selected to provide services must be qualified to perform tasks outlined in the job description. Each resume included should be marked as **Form N Staff Qualifications**; and attached to your proposal. Resumes or curriculum vitae should not exceed two (2) pages. These items should NOT be counted in the page limit.

## **Program Location(s) and Facility Conditions**

Provide a description and location of your program facility. UPO promotes the concept of "thriving" communities and neighborhoods. Therefore, we encourage programs to embody the idea of community revitalization and neighborhood pride. Programs should attempt to operate in facilities that are community landmarks such as public housing centers, local health clinics, metropolitan boys & girls clubs, faith-based centers, multi-purpose buildings and schools. The facilities should be readily accessible to program participants.

The facility must also be safe and conform to health, sanitation, fire, licensing, zoning and building codes as established and regulated by the District of Columbia government. The facility must be suitable for the program purpose, handicap accessible and subject to inspection by UPO in the event of grant award. In the event that private facilities are utilized, evidence of DCRA inspection/certification and/or an Occupancy Authorization Letter must be submitted to UPO. Complete and attach **Form G Occupancy Authorization Letter**; and attach to your proposal. UPO encourages the use of donated space.

In addition, **Form H Drug-Free Workplace Certification** and **Form J Organization/Agency Checklist** must be attached to your proposal.

## **Reports & Records**

UPO utilizes Community Action Statistical Access (CASA), a web based data reporting system. Applicants must have Internet access, and be able to access and enter data into the CASA System on a daily basis. Mandatory CASA training shall be provided by UPO. Please describe your technological capability to access the Internet and the CASA System.

If the proposal is funded, the awardees shall provide UPO with the following reports by the designated due dates (formats will be provided by UPO):

- Monthly Program Outcome Earnings Report (POER), including narrative progress reporting which includes information on activities conducted during the month, meetings attended during the month, linkages/partnerships, upcoming events, program comments and/or issues to be addressed and up-to-date staffing information. This report is due the 5<sup>th</sup> day following the last day of (end of) the previous month. If the 5<sup>th</sup> day falls on a weekend, the report is due the Friday before.
- Quarterly Progress and Financial Report, including a case study/success story, due the 15<sup>th</sup> day following the close of a previous quarter. If the 15<sup>th</sup> day falls on a weekend, the report is due the Friday before.
- Final report, summarizing all program deliverables inclusive of program modifications along with an accompanying financial summary. This report is due no later than forty-five (45) days after expiration of the Award Agreement and prior to receiving the final disbursement.
- UPO reserves the right and may request current or unaudited financial documentation at any time prior to receiving the final disbursement.

## **D. PROGRAM OUTCOME EARNINGS PLAN AND INSTRUCTIONS**

Clearly state the selected National CSBG Goals, Performance Indicators and UPO Focus Areas your program will address.

Download **Form D Program Outcome Earnings Plan** from the UPO website; complete the Plan in its entirety, one for the funded year AND one for the one-year renewal option year; print; mark your spreadsheet as **Form D Program Outcome Earning Plan**; and attach to your proposal. The Plan is a self-populating electronic six (6) sheet Excel spreadsheet. Instructions for completing your Program Outcome Earning Plan are also attached to **Form D** in the Appendix; and may also be downloaded from the UPO website.

Develop a Program Outcome Earnings Plan for your organization that outlines the selected national CSBG Goals and Program Indicators as provided in Form D. A listing of selected goals, indicators and rates has been entered on the form to offer suitable choices. You may use only those program indicators and service measures listed in the attached **Form D.**

Quantified achievable outcomes are required for each application. Selected National CSBG Goals and Program Indicators are provided for use in the development of your Program Outcome Earnings Plan. The applicant should propose strategies that address one or more of the selected National CSBG Goals and Performance Indicators cited in **Part III of the RFP; and the attached Form D.**

## **IV. RESPONSE FORMAT AND SUBMISSION REQUIREMENTS**

### **A. Format**

Applicants should submit the typed proposal on "8.5 x 11" paper. The proposal shall have margins of one inch and type face shall be in a 12 point font, single spaced. Copies should not be double-sided. The requested forms in this RFP have been reproduced in hard copy and included with this document, these forms should be used to submit information as requested. Feel free to reproduce forms and attachments per your requirement. Electronic versions compatible to WORD 2007; EXCEL 2007; and PDF formats may be downloaded at the UPO website under "News/Events – Open Solicitations."

### **B. Proposal Format and Organization**

All proposals should contain numbered pages and a table of contents. Proposals shall not exceed thirty (30) pages. Organizational Chart, current resumes, position descriptions, all requested attachments, and section separators pages are NOT counted towards the 30 page limit.

#### **THE PROPOSAL MUST BE ORGANIZED IN THE FOLLOWING ORDER:**

Proposal Cover Page (Form A)

Organization Identification and Participant Profile (Form C)

Table of Contents

- I. Abstract
- II. Program Narrative
  - A. Population and Need for Program
  - B. Specific Services
  - C. Initiatives
  - D. Program Linkages
  - E. Prior or Existing Relationship With UPO
  - F. Program Organizational Structure and Operations
  - G. Position Descriptions
  - H. Staff Qualifications
  - I. Program Locations and Facility Conditions

### III. Program Outcome Earnings Plan

## C. Required Form Attachments

The following form attachments should be labeled accordingly, fully completed as instructed in the RFP; and attached to the proposal in the following order:

1. FORM D Program Outcome Earnings Plan
2. FORM E Notice of Prior Existing Relationship With UPO
3. FORM F Coordination & Linkages
4. FORM G Occupancy Authorization Letter
5. FORM H Drug-Free Workplace Certification
6. FORM I Other Resources To Be Utilized or Administered
7. FORM K Curriculum/DC OSSE Recognition (GED)
8. FORM L Organizational Chart
9. FORM M Position Descriptions
10. FORM N Staff Qualifications
11. FORM J Organization/Agency Checklist

## D. Who to Submit Response To

Mail or deliver the proposal along with the corporate capability documentation to:

United Planning Organization  
301 Rhode Island Avenue, N.W.  
Washington, D.C. 20001  
Attention: Sally Ibrahim, Procurement Officer  
UPO CSBG 2013 Proposal

Applicants must submit one (1) original proposal, one (1) hard copy of the proposal and one (1) electronic copy in PDF format on disk or flash drive. The original, hardcopy and electronic copy on disk or flash drive should be placed in a sealed envelope. Do not omit copies of any attachments to the original proposal or copies. Please do not submit double-sided copies.

Proposals must be accompanied by the Proposal Cover Page (Form A) signed by an official or agent who is legally authorized to act on behalf of the applicant CBO or lead CBO in carrying out the proposed program activities.

Proposals must comply fully with the requirements detailed in the UPO CSBG FY 2013 RFP. Incomplete proposals, proposals containing errors or inconsistencies in the program outcome plan, proposals not organized as instructed; and other process errors or deficiencies, may constitute cause for rejection. UPO may request clarification or additional information from the applicant at any point during the application process. UPO reserves the right to reject any proposal for noncompliance with the RFP provisions; not award an agreement at any time because of unforeseen circumstances; negotiate with applicants regarding services and costs; and cancel in part or in its entirety this RFP based on a review of the proposals submitted.

## V. EVALUATION AND SCORING

UPO will award Agency Agreements to the best applicants whose programs are most advantageous to the accomplishment of CSBG National Goals and Performance Indicators. Proposals will be grouped and considered according to the projected earnings requested by the applicant in the following monetary tier categories:

Up to \$130,000  
 \$130,001 to \$200,000  
 \$200,001 to \$420,000

All proposals will be scored in the categories outlined in the chart below. The points in the evaluation criteria are weighted by their relative importance. The total scores will not necessarily be a determination of award; if applicable, prior performance will also be considered and verified for past and current CSBG funded recipients.

<b>Evaluation Scoring FY 2013 Request for Performance Based Proposals</b>	<b>POSSIBLE POINTS PER SECTION</b>
CORPORATE CAPABILITY DOCUMENTATION	Declined or Accepted For Proposal Review
ORGANIZATION IDENTIFICATION AND PARTICIPANT PROFILE	5
ABSTRACT	5
NARRATIVE	15
POPULATION AND NEED FOR THE PROGRAM	10
SPECIFIC SERVICES	15
PROGRAM LINKAGES	5
PROGRAM STRUCTURE AND OPERATION	15
PROGRAM OUTCOME EARNINGS PLAN	30
<b>TOTAL SCORED POINTS</b>	<b>100</b>
PAST PERFORMANCE EVALUATION	<b>Acceptable or Unacceptable</b>
<b>There are a maximum of 100 total scored points. UPO reserves the right to accept or reject any proposal.</b>	

### Award Notice

Notification of award will be made following evaluation of all eligible applications. If declined, you will be notified via e-mail and written notice will be sent via US mail to your organization. Awardees will be posted to the UPO website.

## **UPO Monitoring and Evaluation of Programs**

Upon notification of award, UPO will designate representatives to monitor and render technical assistance to the programs. The procedures and criteria for reviewing the program's progress will be outlined in the Award Agreement. One of the tools to be used to measure impact and program effectiveness is data from the Community Action Statistical Access (CASA) system. All recipients of CSBG funding are expected to fully utilize the CASA reporting database.

## **VI. TERMS AND CONDITIONS**

All Award Agreements resulting from this RFP shall be subject but not limited to the following terms and conditions:

### **Payment Provision**

Payments under this Award are performance based and will be processed on a monthly basis. Awardees will submit the POER request for reimbursement each month by the fifth (5<sup>th</sup>) day of each month. If the 5th day falls on a weekend, the report shall be due the Friday before.

### **Audits**

At any time or times before final payment and three (3) years thereafter, UPO may require an audit of the awardee.

### **Insurance**

Awardees shall obtain and keep in force public liability and property damage insurance during the funded program operating period.

### **Youth Safety Requirements**

Programs that provide direct services to minors must meet the requirement of the Child and Youth Safety and Health Omnibus Amendment of 2004.

### **Privacy and Confidentiality**

All awardees are required to have a privacy policy applicable to all personal information of clients served through its programs which includes a provision for written notice to the client or guardian of uses and disclosures of the personal information provided by the client.

### **CSBG Grant Terms and Conditions**

Funds are available for expenditure in accordance with Title II of Public Law 105-285, Coats Human Services Reauthorization Act of 1998, and are subject to all of the applicable Community Services Block Grant regulations, guidelines or other actions which may be adopted by the U.S. Department of Health and Human Services, D.C. Department of Human Services or UPO, pursuant to the requirements. In addition the following terms and conditions are applicable to the Community Services Block Grant Program:



1. Payments to Awardees for any fiscal year shall be earned within the contract period.
2. No person shall, on the basis of race, color, national origin, sex, age, or with respect to an otherwise qualified individual with a disability be subjected to discrimination under any program or activity funded in whole or in part by the United Planning Organization.
3. Applicants shall adhere to the Limitations on Use of Grants for Construction outlined in Section 680 (42 U.S.C. 9909).
4. Applicants shall adhere to the provisions of 678 D which address the Applicant's responsibilities for fiscal control, fund accounting and audit procedures.
5. The earnings of funds under this program is subject to the annual audit requirements under the Single Audit Act of 1984 (P.L. 98-502) and the Office of Management and Budget Circular A-133 (Audits of Institutions of Higher Education and Other Non-Profit Organizations).
6. Applicants under Section 678D (a)(1)(B) (14) shall adhere to cost and accounting standards of the Office of Management and Budget Circulars A-110 (Administrative Standards for Grants and Cooperative Agreements to Non-Profit Organizations), codified at 45 CFR Part 74, and A-122 (Cost Principles for Non-Profit Organizations).
7. As stated in Section 507 of Public Law 103-333 it is the sense of Congress that, to the extent practicable, all equipment and products purchased with funds made available in this Act should be American made.
8. As stated in Section 508 of Public Law 103-333, statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, including but not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.
9. DHHS regulations codified in Title 45 of the Code of Federal Regulations are applicable:
  - Part 30 - Claims Collection
  - Part 76 - Debarment and Suspension from Eligibility for Financial Assistance
    - Subpart F. Drug-Free Workplace
  - Part 93 - New restrictions on lobbying
  - Part 96 - Block grants
  - Part 97 - Consolidation of grants to the insular areas
10. Applicants must comply with Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act). This Act requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted by an entity and used routinely or regularly for the provision of health, day

care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments. Federal programs include grants, cooperative agreement, loans or loan guarantees, and provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug and alcohol treatment.

- 11. The applicant further agrees that the above language will be included in any sub-awards which contain provisions for children’s services and that all sub-Applicants shall certify compliance accordingly. Failure to comply with the provisions of this law may result in imposition of a civil monetary penalty of up to \$1,000 per day.
  
- 12. The Applicant is prohibited from employing a person whose employment is supported by UPO funds or by contribution of the non-federal share in the event that the person would:
  - a. Hold a job while he/she or a member of his/her immediate family serves on a board or committee of a UPO Delegate agency if that board or committee has authority to order personnel actions affecting his/her job;
  - b. Hold a job over which a member of his/her immediate family exercises supervisory authority; or
  - c. Hold a job while either he/she or a member of his/her immediate family serves on a board or committee which, either by rule or by practice, regularly nominates, recommends, or screens candidates for the agency or program. Immediate family shall include any of the following persons:

- |          |                 |
|----------|-----------------|
| Husband  | Wife            |
| Father   | Father-in-law   |
| Mother   | Mother-in-law   |
| Brother  | Brother-in-law  |
| Sister   | Sister-in-law   |
| Son      | Son-in-law      |
| Daughter | Daughter-in-law |

## VII. APPENDICES

FORM A	Proposal Cover Page
FORM B	Customer Proof of CSBG Eligibility and Instructions
FORM C	Organization Identification and Participant Profile
FORM D	Program Outcome Earnings Plan and Instructions
FORM E	Notice of Prior Existing Relationship With UPO
FORM F	Coordination & Linkages
FORM G	Occupancy Authorization Letter
FORM H	Certification Regarding Drug-Free Workplace
FORM I	Other Resources To Be Utilized or Administered
FORM J	Organization/Agency Checklist

**ELECTRONIC VERSIONS OF ALL FORMS  
AND ATTACHMENTS  
MAY BE DOWNLOADED FROM  
[WWW.UPO.ORG](http://WWW.UPO.ORG)**

**UNITED PLANNING ORGANIZATION  
 FORM A PROPOSAL COVER PAGE  
 FY 2013 CSBG REQUEST FOR PERFORMANCE BASED PROPOSAL**

PROGRAM FOCUS AREA(S):	Check all that apply:  <input type="checkbox"/> 1. Employment combining: <input type="checkbox"/> (a) vocational skill training; <input type="checkbox"/> (b) job readiness training; and <input type="checkbox"/> (c) job placement assistance.  <input type="checkbox"/> 2. Housing Support Services  <input type="checkbox"/> 3. Proactive Youth Engagement and Development: <input type="checkbox"/> (a) childcare and aftercare programs; <input type="checkbox"/> (b) dual language instruction programs; <input type="checkbox"/> (c) summer programs.  <input type="checkbox"/> 4. Family Strengthening and Support  <input type="checkbox"/> 5. Health Programs that provides support, awareness or services for: <input type="checkbox"/> (a) health education, promotion and prevention; <input type="checkbox"/> (b) direct health care; <input type="checkbox"/> (c) mental health; <input type="checkbox"/> (d) persons with disabilities.  <input type="checkbox"/> 6. Advocacy and Services: <input type="checkbox"/> (a) Senior Citizens; <input type="checkbox"/> (b) DC Re-entry residents.
PROPOSED PROGRAM NAME:	
ORGANIZATION NAME: CONTACT PERSON (Name & Title):	
ADDRESS-STREET, CITY, ZIP CODE:	
TELEPHONE, FAX, EMAIL NOS:	
PROJECTED EARNINGS REQUESTED:	

**UNITED PLANNING ORGANIZATION  
FORM B CUSTOMER PROOF OF CSBG ELIGIBILITY  
FY 2013 CSBG REQUEST FOR PERFORMANCE BASED PROPOSAL**

[Download from UPO website @[www.UPO.ORG](http://www.UPO.ORG).]

**UNITED PLANNING ORGANIZATION  
FORM C ORGANIZATION IDENTIFICATION AND PARTICIPANT PROFILE  
FY 2013 CSBG REQUEST FOR PERFORMANCE BASED PROPOSAL**

Organization Name Program Location Street Address City, State, Zip Code:		Ward(s):			
Contact Person Name & Title:					
Phone:	Fax:		E-Mail	Duns #	
Primary Program Areas (check all that apply):					
___ 1. Employment combining: ___ (a) vocational skill training; ___(b) job readiness training; and ___ (c) job placement assistance.					
___ 2. Housing Support Services					
___ 3. Proactive Youth Engagement and Child Development: ___ (a) childcare & aftercare programs; ___(b) dual language instruction programs; ___ (c) summer programs.					
___ 4. Family Strengthening and Support					
___ 5. Health Programs that provides support, awareness or services for: ___ (a) health education, promotion and prevention; ___ (b) direct health care; ___ (c) mental health; ___ (d) persons with disabilities.					
___ 6. Advocacy and Services: ___ (a) Senior Citizens; ___ (b) DC Re-entry residents.					
<b>Program Information</b>					
1.	Total Projected Program Outcomes Earnings Requested:				
2.	Start Date				
3.	End Date				
4.	Time of Day	From:	To:		
5.	Wards Served				
6.	Census Tracts Served				
7.	Number of Persons to be Served				
8.	Number of Staff				
9.	Ratio: Staff to Participants				
<b>Participant Profile</b>					
10.	Age Range of Participants				
11.	Gender of Participants -Use %	%Males _____ %Females _____			
12.	% Unemployed				
13.	% Living in Assisted Housing				
14.	% w/ HS Diploma/GED				
15.	Ethnicity	_____% African American, ____% Hispanic or Latino, ____% White, ____% Other			
19.	% Residing in MPD Hot Spots				
20.	% Homeless				

**UNITED PLANNING ORGANIZATION  
FORM D PROGRAM OUTCOME PLAN AND INSTRUCTIONS  
FY 2013 CSBG REQUEST FOR PERFORMANCE BASED PROPOSAL**

**FORM D  
Program Outcome Plan**

**Download the full  
Six (6) sheet Excel Workbook  
And  
Instructions**

**from [www.upo.org](http://www.upo.org)**

**Hard copy see next pages**

**UNITED PLANNING ORGANIZATION  
FORM E NOTICE OF PRIOR OR EXISTING RELATIONSHIP WITH UPO  
FY 2013 CSBG REQUEST FOR PERFORMANCE BASED PROPOSAL**

**NOTICE OF PRIOR OR EXISTING RELATIONSHIP WITH UPO**

Please indicate whether your organization has received funding through the United Planning Organization. If yes, please provide the percentage of outcomes achieved for each year. If no contract, mark N/A under Performance Level. Data submitted in this form is subject to CASA verification.

- Organization has not received funding through UPO  
 Organization has received funding through UPO for the following fiscal years:

Fiscal Year	Performance Level
10/01/11 to current	
10/01/10 to 09/30/11	
10/01/09 to 09/30/10	
10/01/08 to 09/30/09	
10/01/07 to 09/30/08	

**PAST PERFORMANCE EVALUATION FORM**

(Check appropriate box)

Performance Elements	Excellent	Good	Acceptable	Poor	Unacceptable
Quality of Services/ Work					
Budget/Planned Earnings					
Timeliness of Performance					
Business Relations					
Customer Satisfaction					

1. Name & Title: \_\_\_\_\_
2. Signature: \_\_\_\_\_
3. Name of Organization: \_\_\_\_\_
4. Telephone Number: \_\_\_\_\_
5. Type of service performed: \_\_\_\_\_



6. Contract Number, Amount and Period of Performance: \_\_\_\_\_

---

7. Remarks on Excellence Performance: Provide data supporting this observation. (Continue on separate sheet, if needed)

8. Remarks on unacceptable performance: Provide data supporting this observation. (Continue on separate sheet, if needed)

#### RATING GUIDELINES

Summarize Contractor performance in each of the rating areas. Assign each area a rating of 0 (Unacceptable), 1 (Poor), 2 (Acceptable), 3 (Good), 4 (Excellent), or ++ (Plus). Use the following instructions as a guide in making these evaluations.

	<b>Quality Product/Service</b>	<b>Budget/ Planned Earnings</b>	<b>Timeliness Of Performance</b>	<b>Business Relations</b>
	-Compliance with Contract requirements -Accuracy of reports -Appropriateness of Personnel -Technical excellence	-Within budget (over/ under target earnings) -Current, accurate, and complete payment request -Outcome plan modification	-Meet Interim milestones -Reliable -Responsive to technical directions -Completed on time, including wrap-up and contract administration	-Effective management -Businesslike correspondence -Responsive to contract requirements -Prompt notification of contract Problems -Reasonable/cooperative -Flexible -Pro-active -Effective contractor recommended solutions
0. Zero	Non-conformances are compromising the achievement of contract requirements, despite use of Agency resources	Earnings issues are compromising performance of contract requirements.	Delays are compromising the achievement of contract requirements. Despite use of Agency resources.	Response to inquiries, technical/ service/administrative issues is not effective and responsive
1. Unacceptable	Non-conformances require major Agency resources to ensure achievement of contract requirements.	Earnings issues are compromising performance of contract requirements.	Delays require major Agency resources to ensure achievement of contract requirements.	Response to inquiries, technical/ service/administrative issues is marginally effective and responsive.
2. Poor	Non-conformances require major Agency resources to ensure achievement of contract requirements.	Earnings issues are compromising performance of contract requirements.	Delays require major Agency resources to ensure achievement of contract requirements.	Response to inquiries, technical/ service/administrative issues is marginally effective and responsive.
3. Acceptable	Non-conformances do not impact achievement of contract requirements.	Earnings issues do not impact achievement of contract requirements.	Delays do not impact achievement of contract requirements.	Response to inquiries, technical/ service/administrative issues is usually effective and responsive.
4. Good	There are no quality problems.	There are no earnings issues.	There are no delays.	Response to inquiries, technical/ service/administrative issues is effective and responsive.
5. Excellent	The contractor has demonstrated an exceptional performance level in some or all of the above categories.			

**UNITED PLANNING ORGANIZATION  
FORM F COORDINATION AND LINKAGES  
FY 2013 CSBG REQUEST FOR PERFORMANCE BASED PROPOSAL**

**PROGRAM RELEVANCE:  
DOCUMENTATION OF COORDINATION AND LINKAGES**

\_\_\_\_\_ has established partnerships, collaborations and/or relationships with  
(Name of Applicant)

the following organizations in an effort to decrease the duplication and fragmentation of services and to improve and/or expand coordination and linkages between programs and projects designed to address services to low income citizens of the District of Columbia. Check yes to indicate inclusion of:

\_\_\_\_\_  
(Name of Program Submitted for Funding)

by way of notification, service availability, and acceptance of referrals, regular review and/or strategy sessions, provision of direct services or performance of other services in the operation of the above named project.

**UPO FUNDED PROGRAMS**

Name of UPO Program	Name & Title UPO Program Representative	Link with current program*	
		Yes	No

**OTHER PARTNERS, COLLABORATORS & RELATED ORGANIZATIONS**

Name of Organization or Agency	Name & Title Organization or Agency Program Representative	Link with current program*	
		Yes	No

**Please use back of page, if you want to list more organizations or agencies.**

**UNITED PLANNING ORGANIZATION  
FORM G OCCUPANCY AUTHORIZATION LETTER  
FY 2013 CSBG REQUEST FOR PERFORMANCE BASED PROPOSAL**

Use the language set below and submit on Landlord's Stationery addressed to:

Sally Ibrahim  
Procurement Officer  
United Planning Organization  
301 Rhode Island Avenue, N.W.  
Washington, DC 20001

Or submit on this form with original signatures.

\_\_\_\_\_ is authorized to utilize the premises of  
[Name of Organization, Agency or Program]

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
Suite/Floor/Room

\_\_\_\_\_  
City/State/Zip Code

For the period of \_\_\_\_\_ to \_\_\_\_\_ for the following purpose(s) of the program:

\_\_\_\_\_  
\_\_\_\_\_

The facility is safe and conforms to health, sanitation, fire, licensing, zoning and building codes as established and regulated by the D.C. Department of Consumer and Regulatory Affairs (D.C. D.C.R.A.).

The D.C. D.C.R.A. certificate of occupancy and current inspection certificates are maintained by the landlord and will be made available to UPO upon request.

It is agreed that \_\_\_\_\_ is permitted to utilize the premises at:

cost or  no cost (check one)

for the purpose(s) mentioned above.

Sincerely,

\_\_\_\_\_  
(Landlord's signature)

\_\_\_\_\_  
(Landlord's Printed Name)

**UNITED PLANNING ORGANIZATION  
FORM H CERTIFICATION REGARDING DRUG-FREE WORKPLACE  
FY 2013 CSBG REQUEST FOR PERFORMANCE BASED PROPOSAL**

**CERTIFICATION REGARDING DRUG-FREE WORKPLACE**

By signing and submitting this grant application, the applicant, in accordance with 45 CFR Part 76, certifies that it will provide a drug-free workplace by:

- a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition,
- b) Establishing a drug-free awareness program to inform employees about
  - 1) The dangers of drug abuse in the workplace,
  - 2) The applicant's policy of maintaining a drug-free workplace,
  - 3) Any available drug counseling, rehabilitation, and employee assistance programs, and
  - 4) The penalties that may be imposed upon employees for drug abuse violation occurring in the workplace;
- c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- d) Notifying the employee in the statement required by paragraph (a) above, that as a condition of employment under the grant, the employee will
  - 1) Abide by the terms of the statement,
  - 2) Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction;
- e) Notifying the agency within ten days after receiving notice under subparagraph (d) (2) above, from an employee or otherwise receiving actual notice of such conviction;
- f) Taking one of the following actions, within 30 days of receiving notice under subparagraph (d) (2) above, with respect to any employee who is so convicted;
  - 1) Taking appropriate personnel action against such an employee, up to and including termination,
  - 2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency and;
- g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f) above.

Signature \_\_\_\_\_ Title \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_



UNITED PLANNING ORGANIZATION  
**FORM J ORGANIZATION/AGENCY CHECK LIST**  
**FY 2013 CSBG REQUEST FOR PERFORMANCE BASED PROPOSAL**

This document should be attached to the last page of your submission. We recommend that you complete it to assure that all components of your submission have been included.

	<b>Check When Attached</b>	<b>Documents</b>	<b>Form Attachment</b>
1.		<b>Corporate Capability Documentation</b>	<b>Separate Sealed Envelope</b>
2.		<b>Proposal Response Cover Page</b>	<b>FORM A</b>
3.		<b>Organization Identification/Participant Profile</b>	<b>FORM C</b>
4.		<b>Table of Contents</b>	
5.		<b>Proposal (not to exceed 30 pages)</b>	<b>Separate Sealed Envelope</b>
<b>Form Attachments</b>			
6.		<b>Program Outcome Earnings Plan</b>	<b>FORM D</b>
7.		<b>Notice of Prior Existing Relationship With UPO</b>	<b>FORM E</b>
8.		<b>Coordination &amp; Linkages</b>	<b>FORM F</b>
9.		<b>Occupancy Authorization</b>	<b>FORM G</b>
10.		<b>Drug-Free Workplace Certification</b>	<b>FORM H</b>
11.		<b>Other Resources To Be Utilized</b>	<b>FORM I</b>
12.		<b>Curriculum/DC OSSE Recognition</b>	<b>FORM K</b>
13.		<b>Organizational Chart</b>	<b>FORM L</b>
14.		<b>Position Descriptions</b>	<b>FORM M</b>
15.		<b>Staff Qualifications</b>	<b>FORM N</b>
16.		<b>Organizational/Agency Checklist</b>	<b>FORM J</b>

