



## Request for Proposals

The Town of Falmouth Human Services Committee (herein referred to as the "Human Services Committee") will accept proposals from public or private, state and federally recognized not-for-profit organizations, agencies, or partnerships to enter into a contract with the Town of Falmouth to provide projects, programs or services that will address the unmet needs related to substance use of Falmouth residents and the community.

### BACKGROUND

The Town of Falmouth promotes quality projects, programs and services that provide a safety net for vulnerable citizens and address identified human service needs of its residents. The primary intent of this funding is to stimulate the development of new initiatives outside the scope of currently existing programs and services. Additionally, this funding can be utilized to significantly enhance or grow existing programs and services that are unable to meet the community's current need; if the application demonstrates that the funding will enable the organization to achieve outcomes that wouldn't otherwise be achieved.

Following a community human services needs assessment; the Human Services Committee has recommended that the April 2018 Falmouth Town Meeting appropriate \$20,000 **for the purpose of addressing the unmet needs related to substance use of Falmouth residents and the community.**

### SCOPE OF SERVICES

Public agencies or state and federally recognized not-for-profit organizations may submit proposals. Proposals from collaborative partnerships will be accepted provided that there is a lead organization who meets the above criteria and who will be responsible for project delivery, outcome measurement and reporting requirements.

Proposals must address the **unmet needs related to substance use for Falmouth residents and the community** by targeting one or more of the following identified needs in Falmouth:

1. To expand evidence-based prevention efforts in the Falmouth community
2. To integrate the assessment and treatment of substance use disorders into medical clinics and primary care practices
3. To expand treatment options and improve access for vulnerable residents and families
4. To expand recovery support services in the community in order to reinforce long term recovery
5. To expand harm reduction services, programs and education in the community in order to reduce unintended deaths by substance use

### CONTRACT TERMS AND CONDITIONS

If Town Meeting appropriates the recommended funds, the Town of Falmouth will execute one contract for fiscal year 2019 to address the unmet needs related to substance use of Falmouth residents and the community.

### CONTRACT TIME FRAME AND CONDITIONS FOR RENEWALS AND EXTENSIONS

The contract resulting from this Request for Proposals shall cover the fiscal year 2019 (July 1, 2018 – June 30, 2019). The Town of Falmouth, at its sole discretion, may choose to renew this contract for up to 2 additional years if deliverables and benchmarks are achieved and subject to appropriation of funds by town meeting in the next fiscal year's operating budget.

## NOTICE OF CONTRACT CANCELLATION IF FUNDS ARE NOT AVAILABLE

The contracts resulting from this Request for Proposals shall be canceled if funds are not appropriated or otherwise made available to support continuation of this agreement.

The Town of Falmouth reserves the right to cancel this RFP at any time until the contract is executed and to reject any and all proposals if the Town Manager determines that such action is in the best interests of the Town.

## SUBMISSION REQUIREMENTS

### Technical Proposal Requirements

Interested applicants may obtain the Request for Proposals and associated appendices from the Town of Falmouth Human Services Department at 65A Town Hall Square Falmouth, MA 02540 or on the Falmouth Human Services website ([www.falmouthhumanservices.org](http://www.falmouthhumanservices.org)).

**All proposals shall include one original and 1 copy (including attachments). All proposal pages must be scan-ready, single sided with no staples and include the following information:**

- **Cover Sheet** submitted on lead agency letterhead – see Appendix A
- **Abstract** - Introduction of proposal .....no more than 1 page
- **Program Narrative** .....no more than 10 pages
  - A. Project methodology
    - i. Provide a detailed description of each component and/or service of the proposed project
    - ii. How will this project address the identified need for which funding is sought?
    - iii. Include data as to why this approach was chosen and any evidence based strategies or best practices being utilized
    - iv. Include any fees for residents associated with accessing the services
    - v. Include a timeline for benchmarks
  - B. Organizational Capacity and Collaborations
    - i. Describe the capacity of your organization, and other partnering organizations, to deliver the project/programs/service outlined in this application.
    - ii. Include relevant history of similar projects/programs/service executed by your organization
    - iii. Include community collaborations you plan to utilize to deliver this project/program/service. Attach Memorandums of Understanding from these agencies or organizations
    - iv. Attach organization structure/chart for lead agency
    - v. Attach list of Board of Directors for lead agency
  - C. Outcome Measures
    - i. Describe your plan to track the specific delivery of all aspects of your proposal.
    - ii. What short term results are anticipated for residents or community and describe your plan to track those outcomes.
    - iii. Describe your plan to track the impact of your project/program or service on the identified community needs listed in the Scope of Service section of this RFP.
  - D. Sustainability Vision for year 2 and 3

Successful awardees must execute a one-year Contract Agreement with the Town of Falmouth with the potential for a non-competitive renewal in each of the next 2 years if deliverables and outcomes are achieved and funds are appropriated by town meeting in the next fiscal year's operating budget.

- i. How might you plan to sustain, or enhance, this project/program or service in year 2 and year 3 if renewal funds are appropriated by Falmouth Town Meeting?
- ii. What is the long term public benefit you might foresee after 3 years of delivering this project/program or service?

➤ **Budgetary Proposal Requirements**

- A. Submit the Budget Worksheet (see Appendix B) for the project/program/services to be provided. Include costs and revenues (both monetary and in-kind) from all sources and partners.
- B. Submit the Budget Narrative (see Appendix C) to include details and justification for expenditures as well as details of project income sufficient to meet the goals of the project
- C. Capital expenses must be limited and shown to be necessary to the development of new programs and services
- D. No more than 15% of the budget may be utilized for administrative costs

➤ **Attachments**

- A. Attach appropriate partnership agreements or Memorandums of Understanding from agencies, organizations or groups who will be collaborating with you to deliver this project.
- B. Organization Chart of lead agency
- C. Board of Directors of lead agency
- D. Appendices A through F

➤ **Signature Page**

- A. Submit signature page on lead agency letterhead – see Appendix F
- B. Signature page must include the handwritten signature of the individual authorized to execute the contract.

## **ADDRESS AND DEADLINE FOR SUBMISSION**

*Proposals must be received no later than 2pm April 6, 2018.*

Submit to:

Falmouth Human Services Committee  
c/o Falmouth Human Services  
65A Town Hall Square  
Falmouth, MA 02540

NOTE: Proposals, or any parts thereof, received after the date stated above will be rejected as non-responsive to this RFP. Faxed or emailed proposals will not be accepted. It is the sole responsibility of the proposer to ensure that proposals are complete and received at the proper location prior to the stated deadline. Questions can be forwarded in writing to [shauptmann@falmouthhumanservices.org](mailto:shauptmann@falmouthhumanservices.org).

## **PROPOSAL EVALUATION PROCESS**

### Screening Proposals for Compliance with Submission Requirements and Minimum Evaluation Criteria

The submission of all required documentation shall be deemed the minimal criteria necessary for a proposal to be considered for evaluation. The Evaluation Committee, consisting of the Human Services Committee and the Human Services Department staff, shall screen proposals as to their responsiveness. Any proposal which, in the opinion of the Evaluation Committee, fails to include the information or documentation specified in the submission requirements shall be determined to be non-responsive and shall be rejected.

### Interviews and additional information

The Town reserves the right to interview finalists, or seek further information or specific justifications for funding requests.

## SELECTION CRITERIA

The Town reserves the right to award the contract to the proposal which best meets the Town's needs, taking into account agency qualifications, proposal quality and evaluation criteria. The Evaluation Committee's decision or judgment on these matters shall be final. The committee will use the following comparative criterion for each separate rating area, and based upon these criteria, will assign an overall rating to each category. Each of the criteria may contain ratings of:

- ✓ Not Advantageous
- ✓ Advantageous
- ✓ Highly Advantageous

### Use of Comparative Evaluation Criteria

1. Program Methodology:
  - ✓ *Not Advantageous* – Application does not adequately describe the components of the programs and services meant to address the identified need nor does it utilize best practices.
  - ✓ *Advantageous* - Proposal provides a description of each component and/or services being delivered. If relevant programs and services are currently available to the community, they are not at a level that meets the community need and evidence of this is provided.
  - ✓ *Highly advantageous* - Proposal provides a description of each component and/or services being delivered. Programs and/or services are unduplicated and have a clear connection to the community need and utilize evidenced based strategies or best practices. Realistic timeline for benchmarks, demonstrating the proposer's understanding of human service program delivery is shown.
  
2. Organizational Capacity and Collaborations:
  - ✓ *Not Advantageous* – The organizational structure and staffing plan does not adequately demonstrate the ability to deliver the services described. Limited or no history of past successes in delivering similar or related projects.
  - ✓ *Advantageous* - Organizational structure, staffing plan and collaborations are provided. The Organization, and other partnering organizations, demonstrate capacity and staffing to deliver the proposed project/program/service. A recent history of success in delivering similar or related projects/services is demonstrated. Community collaborations are evident.
  - ✓ *Highly Advantageous* – The Organization, and other partnering organizations, demonstrate clear capacity and staffing to deliver the proposed project/program/service. The Organization has successfully executed similar projects. Community collaborations are evident and the information provided, as well as the organization's history, shows the proposer's commitment to and capability of delivering quality services that will positively impact the community. Organization has a 5+ year history.
  
3. Outcome Measures and Expected Results:
  - ✓ *Not advantageous* – No plan for tracking components of the project/services was provided nor a plan for outcome measurements.
  - ✓ *Advantageous*- Proposal offers a plan to track all components of projects/services as well as a plan to measure and assess the outcomes.
  - ✓ *Highly Advantageous* – Proposal offers a detailed plan to track all components of the proposed projects/services as well as a plan to measure and assess the outcomes utilizing both qualitative and quantitative data. The anticipated short-term results for residents are clear and attainable and the anticipated long-term impact for the community is clear and attainable. The information provided indicates an understanding and ability to address the identified need.

4. Sustainability/Vision for year 2 & 3

- ✓ *Not advantageous* – No sustainability plan in Year 2 or Year 3, if town funds are appropriated, is offered in the proposal.
- ✓ *Advantageous* – Proposal outlines a plan to sustain, or enhance, this project/service in year 2 and year 3, if town funds are appropriated; along with a timeline with appropriate benchmarks for year 2 and year 3. The long term public benefit following 3 years of delivering this project/program or service is described.
- ✓ *Highly Advantageous* – Proposal outlines a plan to sustain, or enhance, this project/service in year 2 and year 3, if town funds are appropriated; along with a timeline with appropriate benchmarks for year 2 and year 3. The long term public benefit following 3 years of delivering this project/program or service is described. The proposal demonstrates a vision for longer term sustainability beyond the initial 3-year funding cycle (3-5 years).

## **CONTRACTING**

The Human Services Committee and the Human Services Department staff will jointly recommend awards to the Town Manager as the Chief Procurement Officer. Awards will be announced following the April 2018 Town Meeting appropriations. Prior to the release of funds, awardees must execute a one-year Contract Agreement with the Town of Falmouth which will outline the scope of services, mechanisms to track outcomes, and payment plan.

## **REPORTING REQUIREMENTS YEAR ONE**

**Mid-year report** due February 28, 2019 – A summary report to include:

- Details of the services provided
- Number of Falmouth residents served to date
- Barriers encountered and any adjustments made as a result
- Proposed plans for sustaining the project/program or service in renewal years 2 and 3

**Year-end report** is due no later than August 31, 2019 – A summary report detailing the services provided for the fiscal year, the number of Falmouth residents served, all other deliverables, benchmarks or outcomes attained, and barriers encountered.

**Attendance of an appropriate designee of your agency at a Falmouth Human Services Committee Meeting** no later than April 1, 2019 to give a verbal report on the status and progress of the project.

**On Agency Letterhead**

**Appendix A**

**Cover Sheet**

**+ Organization/ Partnership Name:**

Address:

City, State, Zip:

Phone:

Fax:

**+ Lead Administrator (Responsible for contract and reports):**

Organization:

Name/Title:

Phone:

Fax:

E-mail:

**+ Financial Administrator (Responsible for invoices):**

Name/Title

Phone:

Fax:

E-mail:

**+ Federal Tax ID Number:**

Attach a copy of your tax exempt certificate

**IDENTIFIED NEED - Substance Use Needs**

Check the identified need category (categories) your proposal is designed to address:

- To expand evidence-based prevention efforts in the Falmouth community
- To integrate the assessment and treatment of substance use disorders into medical clinics and primary care practices
- To expand treatment options and improve access for vulnerable residents and families
- To expand recovery support services in the community in order to reinforce long term recovery
- To expand harm reduction services, programs and education in the community in order to reduce unintended deaths by substance use

**Budget Worksheet - Appendix B**  
**Proposed Budget (July 1, 2018 – June 30, 2019)**

Name of Proposer: \_\_\_\_\_ Name of Project: \_\_\_\_\_

PROJECT EXPENSES	
Detailed Expense Categories	Proposed Program Expense
<b>Personnel Expenses:</b>	
Administrative	\$
Program Implementation	\$
	\$
<b>Contract services (specify all)</b>	
	\$
	\$
<b>Equipment/Supplies</b>	
	\$
	\$
<b>Operational costs/Overhead</b>	
	\$
	\$
<b>Other (specify)</b>	
	\$
<b>TOTAL PROJECT EXPENSES</b>	\$

PROJECT INCOME			
Sources of Funding and Contributions (List all)	Funds Requested from All Sources	In-kind Contributions	Availability of Funds <i>Pending, Secured, or In-kind</i>
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
<b>TOTAL PROJECT INCOME</b>	\$	\$	

**Appendix C**

**Budget Narrative**

Please provide a narrative to include details and justification for expenditures as well as details of project income sufficient to meet the goals of the project.

A large, empty rectangular box with a thin black border, intended for the user to write the budget narrative. The box is centered on the page and occupies most of the lower half of the document.

**APPENDIX D**

**NON-COLLUSIVE RESOLUTION**

The undersigned certifies, under the provisions of Chapter 701 of the Acts of 1983 and under the penalties of perjury that this proposal is in all respects bona fide, fair and made without collusion or fraud with any other person. As used in this Section, the word "person" shall mean any natural person, joint venture, partnership, corporation or other business or legal entity.

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**APPENDIX E**

**STATE TAXES CERTIFICATE CLAUSE**

I, certify under the penalties of perjury that I, to my best knowledge and belief, have filed all State (Commonwealth of Massachusetts) tax returns and paid all State (Commonwealth of Massachusetts) taxes under law.

\_\_\_\_\_

By: \_\_\_\_\_

\*Signature of Individual or Corporate Name

**APPENDIX F**

**SIGNATURE PAGE**

I/we hereby certify that this proposal is submitted in good faith and the information contained herein is true and accurate to the best of my ability.

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Signature

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Date

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Print Name and Title (Lead Administrator)

**CHECKLIST**

To ensure that your proposal receives all due consideration, please be sure to include all requested information and supplementary materials. Incomplete applications or missing supplementary materials may cause your application to be removed from consideration for funding.

- Completed Cover Sheet on agency letterhead (Appendix A)
- Completed Abstract (1 page)
- Completed Program Narrative (no more than 10 pages)
- Completed budget sheets including in-kind costs (Appendix B & C)
- Attachments (MOUs, Organizational Chart, Board of Director, letters of support)
- Non-Collusive Resolution (Appendix D)
- Copy of tax exempt certificate
- State Taxes Certificate Clause (Appendix E)
- Completed Signature Page on agency letterhead (Appendix F)