

SOCIAL SERVICES DEPARTMENT

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Request for Proposal **Local Homeless Prevention Aid**

1. **Date:** 2/22/2023

2. **Clay County Contact:**

Rhonda Porter, Social Services Director

Phone: 218-299-7134

E-mail: Rhonda.porter@claycountymn.gov

3. **Proposal/Service Description**

Local Homeless Prevention Aid was created by the 2021 Legislature to help local governments ensure no child is homeless within a local jurisdiction by keeping families from losing housing and helping those experiencing homelessness find housing.

Counties must use this aid to fund new or existing family homeless prevention and assistance projects or programs. Each project or program must include plans for:

- Targeting families with children who are eligible for a prekindergarten through grade 12 academic program and are one of the following:
 - Living in overcrowded conditions in their current housing
 - Paying more than 50 percent of their income for rent
 - Lacking a fixed, regular, and adequate nighttime residence
- Targeting unaccompanied youth in need of an alternative residential setting
- Connecting families with the social services necessary to maintain the families' stability in their homes, such as housing navigation, legal representation, and family outreach
- One or both of the following:
 - Providing rental assistance for a specified period which may exceed 24 months
 - Providing support and case management services to improve housing stability, such as housing navigation and family outreach

Clay County will be allocated **\$223,581 for SFY2023** to fund projects/proposals in Clay County. The funding is scheduled to occur every year for six years; however, the amounts may change as they will be determined by the Department of Revenue based on previous spending and reporting.

4. **Clay County RFP Eligibility Guidelines:**

The applicant(s) must:

- Be physically located and operating in Clay County, Minnesota
- Be an eligible community service organization (e.g., 501c3) or Tribe
- Serve youth (including up to age 24) and/or families with children in Clay County
- Follow harm reduction and Housing First principles
- Comply with reporting requirement for each project and program. At minimum, the number of people served and an assessment of how the funding/program impacts people who are currently experiencing homelessness or are at risk of experiencing homelessness

5. **Clay County RFP Questions:**

- Provide a brief overview of your organization including (1 – 2 pages):
 - Service area and services currently offered
 - Population you currently and intend to serve, including youth with disabilities and youth and families from the BIPOC and LGBTQIA2S+ communities
 - Accessibility & equity work your organization has done/is doing, including work done to support youth and families who are impacted by disparities in our housing and homelessness systems.
- Provide an overview of your proposal/project including (1 – 2 pages):
 - Services that this project will add/expand as noted in #3 above
 - Gaps that this funding will meet and how those gaps were identified
 - If/how the organization incorporates the voices of youth and families with lived experience and expertise in the work and/or this proposal
 - Any partnerships related to the proposed project/funding request
- Provide a Budget Narrative (1 page):
 - Itemized program budget and overview of how funds will be spent.
 - Note other funding sources that will be used in tandem with potential funding received from this proposal. Note if these funds will allow you to leverage other state, federal or local funds.
 - Describe your program sustainability plan for when the funding is discontinued or potentially reduced (noting that this funding is expected to continue for 6 years with yearly reallocations depending on State budget calculations)

6. **Scoring/Evaluation of Applications:**

- All responses will be reviewed by Clay County Social Services Department and a small team of stakeholders. Once a provider(s) is chosen a recommendation to enter into an agreement will be submitted to the County Board of Commissioners for their approval.
- Each proposal will be scored based on the following:

Program Scoring

Community Benefit – Rate (1 – 5) the potential community impact of the program/project if funded: 1 – minor impact, 2 – limited impact, 3 – moderate impact, 4 – strong impact, 5 – ideal impact	31%
Equity – Rate (1 – 5) does the project address disparities? 1 – not at all, 2 – limited, 3 – moderate, 4 – strong, 5 – deeply	10%
Implementation – Rate (1 – 5) the implementation ease of the program/project if funded: 1 – unlikely, 2 – difficult, 3 – unsure, 4 – easy, 5 – seamless	18%
Total	59%

Financial Scoring

Reasonable – Rate (1 – 5) the potential community impact of the program/project if funded: 1 – Excessive, 2 – too much, 3 – on the border, 4 – reasonable, 5 – ideal amount	16%
Proportional – Rate (1 – 5) the proportion of the budget of the funds requested by program/project if funded: 1 – 100% of costs, 2 – 75 – 99% of costs, 3 – 50 – 74% of costs, 4 – 30 – 49% of costs, 5 – 1 – 30% of costs	16%
Sustainable – Rate (1 – 5) the sustainability of the program/project if funded: 1 – high risk, 2 – significant risk, 3 – moderate risk, 4 – low risk, 5 – no risk	9%
Total	41%

7. **Applicant Response:**

- If your organization is interested in being considered to provide this service, please submit one (1) copy of your response to Rhonda Porter at Rhonda.porter@claycountymn.gov by **4:30pm on March 31, 2022**.
- At a minimum, please provide in your response:
 - Organization- name, address, type of organization, years in business
 - Personnel- name, education, experience, and other qualifications of the person(s) providing the services under this proposal
 - Documentation/statement of meeting requirements in section 4
 - Responses to RFP Questions in section 5
 - Assurance that if selected you will be able to comply with the following:
 - Data Privacy
 - Equal Employment Opportunity and Civil Rights Clause
 - Fair Hearing Appeal
 - Rehabilitation Act
 - Health Insurance Portability and Accountability Act (HIPAA)
 - General Liability Insurance
 - \$500,000 when the claim is one for death by wrongful act or omission
 - \$500,000 to any claimant in any other case.
 - \$1,500,000 for any number of claims arising out of a single occurrence.
 - No less than \$2,000,000 Aggregate coverage.
 - Policy shall include at least premises, operations, completed operations, independent contractors and subcontractors, and contractual liability and environmental liability.
 - Clay County shall be named as an Additional Insured on a primary and non-contributory basis.
 - Business Automobile Liability Insurance
 - \$500,000 for claims for wrongful death and each claimant.
 - \$1,500,000 each occurrence.
 - No less than \$2,000,000 aggregate.
 - Must cover owned, non-owned and hired vehicles.
 - Workers' Compensation
 - Per statutory requirements, Certificate of Compliance must be executed and filed with Clay County.
 - Professional Liability Insurance for Licensed Professionals
 - Provider shall maintain at its sole expense a valid policy of insurance covering professional liability, arising from the acts or omissions of Provider, its agent, and employees in the amount of not less than \$500,000 per claim and \$2,000,000 annual aggregate. This provision applies only in situations where Provider's staff or volunteers are performing licensed professional services under this Agreement.