

CHICAGO COOK WORKFORCE PARTNERSHIP

REQUEST FOR PROPOSALS FOR Community Hiring of Chicago Community Health Response Corps



FUNDING PERIOD: November 1, 2022 – June 30, 2023

CHICAGO COOK WORKFORCE PARTNERSHIP

RESPONSES DUE:

Friday, October 07, 2022, by 4:00 PM

Bidder Webinar:** Tuesday, September 20, 2022, 1:00 – 3:00 (CDT)

Webinar Registration:

<https://attendee.gotowebinar.com/register/8232874114031338508>

**Attendance is not mandatory, but respondents are highly encouraged to attend

RFPquestions@chicookworks.org

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SECTION I. Purpose, Performance Period, Funding, and Schedule

A. Purpose

The Chicago Cook Workforce Partnership (The Partnership) is issuing this Request-For-Proposals (RFP) to identify through competitive selection a minimum of 10 non-profit community-based organizations (CBOs) to serve as local employers of the City of Chicago Community Health Response Corps, and in so doing, invest in Chicago communities disproportionately impacted by COVID-19 and other public health determinates while creating a public health workforce representative of their residents. This investment strategy unites the City of Chicago’s commitment to public health with its deep commitment to racial and economic equity across neighborhoods. This strategy is designed to invest in communities most impacted by health inequity, including COVID-19.

Performance Period

The period of performance begins on November 1, 2022 and concludes on June 30, 2023. The Partnership reserves the right to renew grant agreements for (1) one additional extension, not to exceed 12 months based on programmatic need and the selected respondents’ achievement of benchmarks and compliance with the terms of this funding opportunity.

B. Funding

The Partnership anticipates releasing this initial RFP to fund a minimum of 10 CBOs to perform the requested scope of services from November 1, 2022, to June 30, 2023. A maximum award amount of \$649,090.91 is available to each selected entity. Of this award, \$454,363.64 is designated for wages, fringe benefits, and payroll costs for the Corps workers to be employed by the selected entities.

Successful respondents to this RFP will enter into a grant agreement with The Partnership and become part of The Partnership’s service network. Agreements executed as a result of this RFP process will be paid through **cost reimbursement** unless otherwise specified. Final agreements will be subject to any changes in legislation, regulations, or policies promulgated by the federal, state, and/or municipal funders. The Partnership reserves the right to vary or change the terms of any agreement executed as a result of this RFP, including funding levels, scope of services, performance standards, and contract terms, as it deems necessary.

C. Tentative Schedule

Release of RFP.....	September 08, 2022
Bidder Webinar.....	September 20, 2022
Question Submittal Deadline.....	September 26, 2022
Posting of Questions and Answers	September 30, 2022
Proposal Submittal Deadline	October 07, 2022
Proposal Review	October 2022
Anticipated Contract Commencement	November 2022

SECTION II. Background

A. Overview of The Partnership

Created in 2012, The Chicago Cook Workforce Partnership is an umbrella organization operating the public workforce system in the City of Chicago and Cook County. The Partnership combines federal and philanthropic resources to broaden the reach and impact of workforce development services for both employers and job seekers. The Partnership has programmatic and administrative responsibility for all Workforce Innovation and Opportunity Act (WIOA) services provided in Chicago and Cook County.

The Partnership administers a comprehensive workforce development system with multiple entry points throughout Chicago and suburban Cook County where job seekers and businesses can access the full range of available services and benefits. Our network comprises community-based delegate agencies, sector-based training providers, career pathway programs, industry-focused sector centers, and 10 high-capacity American Job Centers (AJCs).

In 2020 during the pandemic, the Chicago Department of Health (CDPH) established the Chicago Contact Tracing and Resource Coordination program to mitigate community transmission of COVID-19 while investing in hard-hit communities by creating a diverse public health workforce that reflects the City's residents. Through an RFP, the City of Chicago awarded The Partnership \$56M to oversee the program. As the program's Lead Coordinating Operator (LCO), The Partnership was responsible for creating and operating the City of Chicago community-based COVID-19 Contact Tracing Corps through a network of approximately 31 community-based organizations (CBOs) from August 2020 to June 2021, with two additional extensions from July 2021 to December 2022. At the start of the contract, The Partnership issued two rounds of requests for proposals (RFPs) to select approximately 31 CBOs to collectively employ the Contact Tracing Corps, comprising a minimum of 480 staff. Up to 800 Corps members were hired by the CBOs in the span of two and half years. Through the first extension, 30 CBOs remained in the Corps; through the second extension, 19 CBOs remained.

All efforts put forth by The Partnership are guided by the following vision, mission, and values.

Our Vision: Every person has the opportunity to build a career; every business has the talent to grow and compete in a global economy.

Our Mission: To create, promote, and effectively manage a network of workforce development organizations that:

- Designs innovative solutions to address business needs, and,
- Prepares individuals for, and connects them to, career opportunities.

Our Values:

- **Collaboration:** We strategically engage a variety of local, regional, state, and national partners in workforce and economic development to ensure program effectiveness. The breadth of these activities allows us to connect businesses and individuals to a wide array of resources.
- **Innovation:** We design and implement initiatives that result in dynamic outcomes for businesses and job seekers alike. We seek creative solutions to current and future workforce development challenges.
- **Transparency:** We clearly communicate our expectations, policies, and processes to stakeholders and partners. We openly and publicly share the results of our initiatives.
- **Financial Responsibility and Stewardship:** As stewards of public, private, and philanthropic funds, we ensure effective and efficient management of our resources to achieve the maximum returns on investment and greatest impact on the business or individual served.
- **Quality:** We commit to continuous improvement. We aspire to a standard of excellence that ensures the delivery of high caliber services for all stakeholders while identifying opportunities for further growth.
- **Dignity of Work:** We believe in the value of work and the mutually beneficial impact that it has on individuals and the companies that employ them. We support investment in human capital as a means of strengthening local communities and the regional economy.
- **Equity:** We intentionally acknowledge systems of oppression when providing the resources and supports people need to reach their full economic and human potential. We actively work to eliminate disparities people experience based on race/ethnicity, disability, background, gender, age, sexual orientation, or economic and educational status. We partner with employers who

share our belief and are committed to the idea that all residents of our region can achieve a meaningful career that provides family-sustaining income.

B. Overview of City of Chicago Community Health Response Corps

Through a competitive selection process, The Partnership has been awarded a two-year \$19.2 million grant by the City of Chicago's Department of Public Health (CDPH) to serve as the Lead Coordinating Organization (LCO) for the Department's Community Health Response Corps project from August 1, 2022, to June 30, 2024. The Partnership will implement the project in collaboration with pre-identified project partners, University of Illinois at Chicago School of Public Health (UIC), Sinai Urban Health Institute (SUHI), and Malcolm X College of the City Colleges of Chicago (MXC) including a consulting partner, The Illinois Community Health Workers Association (ILCHWA).

The City of Chicago ("City"), acting through the Chicago Department of Public Health (CDPH), is charged with supporting the response to and recovery from Chicago's COVID-19 pandemic. As outlined in Healthy Chicago 2025, their citywide community health improvement plan, CDPH is focused on closing the racial life expectancy gap in Chicago by addressing the root causes of health, including access to care and services. To meet these needs, CDPH requires a public health workforce to conduct community health outreach, education, and support in navigating to recovery and health-promoting resources.

The intensity and immediate life-and-death impact of health disparity during the COVID-19 crisis called for an urgent and forceful response. Over two years, the city invested deeply in community health outreach in high-risk communities, including through the formation of a COVID-19 Contact Tracing Corps (also known as the Chicago COVID-19 Community Response Corps in its extensions). Community-based organizations hired and deployed local response workers to engage residents to public health guidance, support vaccine outreach, and link people affected by COVID-19 to supportive resources.

Through this RFP, CDPH and The Partnership seek to sustain community outreach and public health workforce development through a Chicago Community Health Response Corps ("Response Corps") that will support residents in priority community areas most affected by the pandemic. The Response Corps will leverage the expertise and infrastructure of the CDPH, and its partners built for the COVID-19 emergency response – now with a focus on promoting overall health, resilience, and well-being. The Response Corps will have an expanded scope to help residents access reliable information, recovery support (e.g., economic, and social programs and services), and specific health resources.

Despite the City's equity-focused response, COVID-19 disease and pandemic impacts have expanded the racial life expectancy gap in Chicago and deepened underlying inequities. There is more work to do to build a healthier and more equitable city. The Response Corps will cultivate a public health workforce to tackle the drivers of disparity between predominantly White communities compared to predominantly Black and Hispanic/Latinx communities, with a major focus on chronic disease and communicable disease including COVID-19, and additional efforts on other drivers of the life expectancy gap (infant mortality, violence, and opioid overdose). This strategy unites CDPH's commitment to improving public health with the City's commitment to racial and economic equity across neighborhoods. The Response Corps is an important step toward achieving the vision of Healthy Chicago 2025: *Creating a city where all people and all communities are empowered, free from oppression, and strengthened by equitable access to resources, opportunities, and environments and opportunities that promote optimal health and well-being.*

C. Community-Based Hiring of Community Health Response Corps workers

As LCO, The Partnership issues this RFP to fund a minimum of 10 CBOs located in or primarily serving Priority and/or High Economic Hardship Community Areas to employ the Community Health Response Corps workers ("CHRC Workers or Health Response Corps Workers"). This RFP is dedicated to the selection of a minimum of 10 CBOs to complete the Corps. Each selected CBO will recruit and employ 11 CHRC workers including one (1) Health Response Supervisor in adherence to the hiring principles

described in Section IV of this RFP. The selected CBOs will additionally participate in delivering earn-and-learn services to CHRC workers employed through this funding opportunity.

The Partnership as the Lead Coordinating Organization (LCO) will work in conjunction with the sub-contracted community-based organizations (CBOs) to help them hire, manage, train, and staff the Community Health Response Corps across prioritized communities. The Partnership and the Community Health Response Corps (CHRC) will work with CDPH to address the priority concerns identified by the City, CDPH, and community-based organizations in prioritized neighborhoods. The goals of this Response Corps are to:

- **Create public health workforce employment and training opportunities** for people who live in communities that are most affected by health and economic inequities.
- **Increase community members' connections to and utilization of resources** to mitigate the social, economic, and health impacts of the pandemic.
- **Equip Chicagoans with health knowledge and resources** to achieve their desired health outcomes.
- Continue efforts to **promote resilience against COVID-19 and other public health threats** in high-risk communities.

To enable the CBOs hiring of approximately 130 CHRC workers by November 2022 as required by CDPH, organizations meeting these criteria must meet all eligibility criteria set forth in Section III of this RFP. The Partnership will award any number of grants, minimum of 10, to successful respondents under this funding.

SECTION III. Eligible Respondents

A. Eligible Respondents

Respondents must meet all criteria set forth below to be eligible for this funding opportunity.

Community-based organizations (CBOs) are eligible to respond to this RFP. As defined here, a CBO is a non-clinical/medical, not-for-profit organization that has demonstrated service delivery to specific populations and/or community areas. Service delivery includes programming being driven by an understanding of and/or direction by community voice.

Additionally, entities are eligible respondents to this RFP only if they: 1) operate in accordance with Federal, State, and local law; 2) are currently eligible to do business with the City of Chicago, Cook County, the State of Illinois, and The Partnership; and 3) possess the technical competence, administrative and fiscal capacity, and demonstrated fiduciary responsibility to accomplish the objectives and scope of work stated in this RFP.

Pursuant to the community-investment goals and funding requirements of CDPH's Community Health Response Corps grant program, The Partnership **strongly prioritizes the selection of CBOs that are in or primarily serve one or more of the City's priority and/or high economic hardship community areas**. As described in Section V of the RFP, service to priority and/or high economic hardship communities will be a scored component of submitted proposals.

The following priority community areas have been identified by the City based on a combination of factors, including health and social vulnerability; economic hardship; and communities that were most negatively impacted by the COVID-19 pandemic. Applicants should specify a plan for prioritizing these communities with this investment. Both hiring and deployment should be

prioritized in these areas, such that staff are hired from these areas when possible and that services are intentionally deployed to these areas.
 Priority community areas are those neighborhoods included in the table below.

Table 1: Priority Community Areas ¹²

Priority Community Areas as Defined for Community Health Response Corps Chicago Community Area Name (Number) and Region Number (R1, R2, and R3)	
Auburn Gresham (71) – R3	Austin (25) – R1
Belmont Cragin (19) – R1	Chatham (44) – R3
Chicago Lawn (66) – R2	East Garfield Park (27) – R1
Englewood (68) – R2	Greater Grand Crossing (69) – R2
Humboldt Park (23) – R1	New City (61) – R2
North Lawndale (29) – R1	Roseland (49) – R3
South Lawndale (30) – R1	South Shore (43) – R3
West Englewood (67) – R3	West Garfield Park (26) – R1
West Pullman (53) – R3	

In addition to priority areas, these additional community areas have been identified as having high economic hardship. Services may be deployed in these areas as long as it does not compromise services in priority areas.

High Economic Hardship Community Areas as Defined for Community Health Response Corps Chicago Community Area Name (Number) and Region Number (R1, R2, and R3)	
Archer Heights (57) – R2	McKinley Park (59) – R2
Armour Square (34) – R2	Oakland (36) – R2
Avalon Park (45) – R3	Riverdale (54) – R3
Brighton Park (58) – R2	South Chicago (46) – R3
Burnside (47) – R3	South Deering (51) – R3
East Side (52) – R3	Washington Heights (73) – R3
Fuller Park (37) – R2	Washington Park (40) – R2
Gage Park (63) – R2	West Elsdon (62) – R2
Grand Boulevard (38) – R2	West Lawn (65) – R2
Hermosa (20) – R1	Woodlawn (42) – R2

The Corps will be divided into three regions: Region 1 (North), Region 2 (Central), and Region 3 (South).

¹ High economic hardship is based on the Economic Hardship Index which includes six indicators: crowded housing, poverty, unemployment, education, dependency, and income. For more information, please visit the Chicago Health Atlas (<https://www.chicagohealthatlas.org/healthy-chicago>). The Chicago COVID-19 Community Vulnerability Index is based on high mobility during the pandemic, low socioeconomic status, high rates of COVID hospital admission and high rates of COVID-19 mortality. More information can be found here: <https://data.cityofchicago.org/Health-Human-Services/Chicago-COVID-19-Community-Vulnerability-Index-CCV/2ns9-phjk>

² Chatham, which is not a high economic hardship or high vulnerability area, is included because it has been identified as a priority area for community safety under the City’s Our City Our Safety plan.

To ensure the regions receive the needed support for this project as written by CDPH, The Partnership will select up to five CBOs in each region to cover the necessary priority and economic hardship communities.

As the pandemic is constantly changing conditions across Chicago, other community areas may be identified and/or included based on ongoing identification of needs.

Minority-owned, Disadvantaged Business Enterprises (DBEs), and women-owned entities are encouraged to respond to this RFP.

Entities are **ineligible** to respond to this RFP if they: 1) are currently barred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by a Federal, State, County or City department/agency, quasi-governmental agency (including but not limited to Chicago Housing Authority, City or Suburban community colleges, Chicago Public Schools et al.), or The Partnership; 2) have existing grants with any Federal, State, County or City agency that have been suspended or otherwise deemed not in good standing within the past two (2) years; or 3) are not in compliance with Illinois Department of Revenue, Federal Internal Revenue Service or Federal Office of Management and Budget requirements, 4) have had a previous Partnership contract terminated for inadequate performance within the previous 24-month period are ineligible to apply.

Awards made to entities subsequently found to have been ineligible may have funds clawed back at The Partnership's sole discretion.

SECTION IV. Scope of Work

A. Community Hiring of Community Health Response Workers

The requested scope of work comprises the recruitment of Chicago community residents for CHRC Worker positions; including onboarding, employment, management; and the professional development through earn-and-learn into a talent pipeline for community health and other public health and healthcare high demand occupations.

Each selected respondent will employ a maximum of 11 CHRC workers including one (1) Health Response Supervisor from November 2022 to June 2023. The CHRC Workers, including supervisor positions, must be filled at a full-time position, provided that the staffing model can support community engagement through community health work and call center support 7 days a week, weekend flexibility will be required. These will not be employees of The Partnership, but rather CBO employees only.

Depending on need, The Partnership may negotiate with selected respondents of this funding of the RFP to hire additional CHRC Workers.

The budget for the requested scope of work will include a set amount of funding for CHRC Worker wages and related payroll expenses. Selected respondents will utilize this funding to pay:

- CHRC Worker wages of \$22/hour.
- Health Response Supervisor wages of \$26/hour.
- 40 hours per week (coverage of lunch and breaks included)
 - No overtime permitted unless authorized by The Partnership or CDPH
- Applicable payroll taxes and other payroll expenses; and
- Fringe benefits per the selected respondent's employee benefits policy.

Corps Hours of Operation: Corps CBOs must be prepared to service at hours beyond the traditional office hours. The hours of operations are from Monday through Saturday 8:00 a.m. to 8 p.m. and Sundays from 8:00am to 4:00pm timeframe, unless precluded by external factors.

Workforce Activities of Community Health Response Corps (CHRC) Workers

The Health Response Corps should be prepared to carry out the following activities:

- Community Health Education
- Community Expertise
- Community Health Work
- Chicago Resource Navigation
- Other activities as determined by CDPH, including case investigation and/or contact tracing for COVID-19 and other communicable diseases

CHRC Workers will be deployed to respond to hyperlocal needs, in accordance with the City's policies and procedures of public health responses to clusters and outbreaks. CHRC Workers are required to work in a hybrid model, which includes both in-person and remote work (including community outreach.)

Depending on the volume of each project activation, CHRC Workers may perform additional duties in service of community health work, resource navigation, and COVID-19 prevention, response, and resource provision in communities disproportionately impacted by COVID-19 and high economic hardship, with a focus in priority areas. The Partnership will collaborate with selected respondents to define and plan any additional duties. These would be performed in the office/home environment or in the field at a prior-approved/designated location and may include:

- Prevention education
- General health and wellness education
- Community engagement to foster understanding of and support for disease mitigation efforts
- Identification of available healthcare and social assistance resources at the neighborhood level

The Partnership and project partners (named above in Section II of the RFP) will provide selected respondents and their CHRC Workers with guidance materials, training, and ongoing technical assistance to effectively conduct the requested community health work and activities. Selected respondents will coordinate with The Partnership and project partners to support all training and technical assistance efforts.

Recruitment of Community Health Response Corps (CHRC) Workers

Selected respondents will prioritize recruiting individuals who meet the following criteria:

- City of Chicago residents; and
- Residents that are 18 years of age or older; and
- Residents that are authorized to work in the United States; and
- Residents that consent to a background check; and
- Residents of priority and/or high economic hardship community areas as defined in Section III of the RFP; and/or
- Residents returning from incarceration and/or who have historical involvement with the justice system; and/or
- Residents with demonstrated barriers to employment, including but not limited to disability, housing insecurity, food insecurity, and healthcare insecurity; and/or
- Residents that are unemployed or underemployed; and/or
- Residents that are interested in pursuing healthcare, public health, or a social service career

Selected CBOs will be required to conduct a background check for all individuals offered employment within the Health Response Corps. The circumstances of justice involvement will be considered in the

CBO's hiring decision. Individuals are ineligible for employment by the CBO within the Health Response Corps if they have committed:

- Fraud crimes; and/or
- Identity theft crimes.

Selected CBOs will consider all other justice involvement on a case-by-case basis and will not disqualify individuals from employment based on criminal background unless it poses a threat to the well-being of members of the public who will be contacted by the Health Response Corps; other personnel of the Subgrantee; and/or the organization of the Subgrantee.

The Partnership and project partners will provide guidance on job descriptions for positions to be filled and on desired experience, qualities, characteristics, and skills of candidates.

B. Development of Community Area Outreach Work Plans

Each selected respondent will be expected to develop a quarterly, measurable work plan, tailored to the community area(s) that the CBO serves. Work plan activities should be evidence and data-informed based on the hyperlocal area(s) and must utilize community health work and resource navigation to respond to community health priorities. The Partnership will provide a template and further instructions upon CBO selection.

C. Engagement and Participation in CBO Capacity Building

Selected respondents will work with The Partnership and project partners to identify their unique needs as an organization and engage in mandatory capacity building/technical assistance services that are tailored to these needs, such as:

- Establishing fiscal and human resources standards, policies, and procedures.
- Strengthening existing organizational practices and systems, such as fiscal, human resources, development, and program planning.
- Employing strategies to support and retain staff, including self-care for employees.
- Sharing strategies that promote disease mitigation in employees' social and professional networks.
- Creating a trauma-informed workplace.

D. Engagement and Participation in CBO Community of Practice

Selected respondents will participate in an ongoing community of practice with The Partnership, project partners, selected CBOs, as well as other CBOs. Leadership (managers, directors, etc.) of selected respondents will engage in these convenings to coordinate service delivery, share best practices, troubleshoot issues, and overall maximize the available resources in each community.

Selected respondents will have the opportunity to engage in Health Literacy, Community Health Work, and Resource Navigation training made available to the Health Response Corps.

Selected respondents will also receive technical assistance from The Partnership and project partners on identifying potential public health positions and developing the sustainability of community health worker positions within their organization.

E. Human Resources and Payroll Management

Selected respondents will hire and onboard CHRC Workers and Health Response Supervisors and perform all Human Resources functions associated with their employment, including but not limited to mandatory background checks before onboarding; supervision; explanation of compensation, benefits, timekeeping, and paycheck procedures; staff scheduling; compliance with applicable labor standards and regulations; and safety trainings as relevant. The partnership will bear no employer liability with regard to these workers.

Selected respondents will be responsible for processing payroll for their hired CHRC Workers and Supervisors. Separately, The Partnership will reimburse selected respondents for their administrative and other program expenses under this project.

F. Professional Development

Selected respondents will collaborate with The Partnership and project partners to implement professional development activities for their CHRC Workers and Health Response Supervisors. The Partnership and project partners will establish earn-and-learn career pathway programs to advance interested CHRC workers and supervisors from their positions on this project to long-term employment in community health and other high demand occupations. Selected respondents will facilitate program implementation and support participation by CHRC Workers/Supervisors in their employment.

Additionally, selected respondents will offer on-the-job professional development to support general employment success of hired CHRC Workers/Supervisors, including training related to professional communication, teamwork, time management, problem solving, conflict resolution, and other skills.

G. Data Tracking

Selected respondents will collect, track, and submit data related to CHRC Workers and Health Response Supervisors. Selected respondents will be expected to report on their workforce activities and earn-and-learn activities in the following (non-exhaustive) list of reports and platforms:

- Hiring/Onboarding Report
- CBO Work Plan (including Outcomes and Reporting)
- After Action Report(s)
- Career Connect
- Deactivation Report for Resignations/Terminations

The Partnership will provide instruction on required data and will train relevant staff of selected respondents to use the different reports, platforms, and systems.

H. Performance and Reporting

Performance will be measured on the basis of selected respondents' ability to:

- Expediently hire the required number of CHRC Workers and Health Response Supervisors and rehire (backfill) as necessary.
- Retain hired CHRC Workers/Supervisors.
- Collect and update weekly hiring data of CHRC Workers/Supervisors.
- Effectively and efficiently implement workforce activities.
- Attend weekly Supervisor meetings and monthly Director meetings.
- Attend quarterly Community Centered Design Institute for CBO Leadership.
- Participate in CBO capacity building and community of practice.
- Provide meaningful professional development opportunities to their Health Response Workers.
- Submit reports in a timely manner.
- Report all Health Response Worker resignations, terminations, and system deactivation requests to The Partnership within 7 days from last day of employment.
- Submit fiscal reimbursement vouchers accurately and timely every 15th of each month

The Partnership will negotiate specific performance measures with selected respondents and will specify reporting modes and cadence.

SECTION V. Proposal Questions and Required Attachments

A. All Required Submittal Documents

Proposal responses must include all the following documents to be considered complete and eligible for review.

*Both the Program Proposal and Fiscal Proposal must include copies of all budget forms.

Program Proposal

- 1) [Organizational Leadership Survey \(Formsite.com\)](#)
- 2) Executive Summary (Signed by authorized representative)
- 3) Program Narrative (Response to Program Questions 1-9)
- 4) Staffing Plan Outline
- 5) Budget*

Fiscal Proposal

- 1) Fiscal Narrative (Response to Fiscal Questions a-o)
- 2) Completed W-9 Request for Taxpayer Identification Number and Certification
- 3) IRS 501(c)(3) Tax Exempt Determination Letter dated within past 3 years (required only if applicable)
- 4) Most Recent Audited Financial Statements
- 5) Certificate of Good Standing
- 6) List of Board Members
- 7) Cost Allocation Plan
- 8) Indirect Cost Determination Letter (required only if applicable)
- 9) Fiscal Policies and Procedures Manual
- 10) Budget*

Description of **other required fiscal attachments**:

- ***IRS W-9 Request for Taxpayer Identification Number and Certification***
All respondents must provide a completed form W-9 regardless of organization type. Form W-9 may be downloaded from the IRS website at <https://www.irs.gov/forms-pubs/about-form-w9>.
- ***IRS 501(c)(3) Tax Exempt Determination Letter***
If applicable, submit a current letter, dated within the last three (3) years, from the IRS verifying that the responding organization is exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code.
- ***Certificate of Good Standing***
Any respondent incorporated as a not-for-profit under the General Not for Profit Corporation Act of 1986 (805 ILCS 105/101.01 et seq.) is required to submit a Certificate of Good Standing from the Illinois Secretary of State's Office, Department of Business Services. A Certificate may be obtained through the Illinois Secretary of State's website at <https://www.ilsos.gov/corporatellc/>. The Department may be reached at (217) 782-6875; (217) 782-6961; or TTY: (888) 261-5280.

Any respondent organized as a charitable not-for-profit (including any individual, group of individuals, association, or other legal entity) under the Charitable Trust Act (760 ILCS 55/1 et seq.) is required to submit a Certificate of Good Standing from the Office of Illinois Attorney General, Charitable Trust Bureau, 100 W. Randolph Street, 11th floor, Chicago, IL 60601. The Bureau may be reached at (312) 814-2595 and TTY: (800) 964-3013, or <https://www.illinoisattorneygeneral.gov>.

Entities that are neither of the above but are exempt from paying sales/use tax under the Use Tax Act (35 ILCS 105/1 et seq.) are required to submit a copy of the tax exemption certificate

issued by the Illinois Department of Revenue, Regional Office Locations: Chicago, James R. Thompson Center – 7th floor, 100 West Randolph Street, Chicago, IL 60601, (800) 732-8866; Des Plaines, Suburban North Regional Building, 9511 Harrison Street, Des Plaines, IL 60016, (800) 732-8866, or <https://www.revenue.illinois.gov>.

- **Most Recent Audited Financial Statements**

Include Single Audit (if applicable), management letter, and federal and state tax returns (Form 990 / Form AG990-IL informational returns). Entities whose total public contributions (fundraising activities) in a single year are below the State of Illinois audit threshold should provide their most recent 2-year comparative financial statements (e.g., statements of financial position, statements of activities, statements of cash flows, and statements of functional expenses), if applicable.

NOTE: Per (225 ILCS 460/4-Solicitation for Charity Act), the audit threshold for charitable organizations is gross receipts of **\$300,000** or if the charity used a paid professional fund raiser and raised contributions in excess of **\$25,000**.

- **List of Board Members**

All non-governmental responding organizations must submit a list of current board members including names, affiliations, and titles (officers and professional titles), business mailing addresses (other than responding organization's address), email addresses, and phone numbers. **On this document, indicate the year the organization was legally established.**

- **Cost Allocation Plan**

Include your Cost Allocation Plan (CAP). For guidance on preparing a CAP, refer to the Uniform Guidance §200 (available electronically at <https://www.ecfr.gov/cgi-bin/text-idx?SID=54ede6d0d7aac0c36aab76d75373e48f&mc=true&node=pt2.1.200&rgn=div5>).

- **Indirect Cost Determination Letter**

If your organization has been approved for an indirect cost rate, include a copy of the Indirect Cost Determination Letter from the cognizant agency.

- **Proposed Budgets**

Budget forms and instructions are posted with this RFP on The Partnership's website at <https://chicookworks.org/our-network/request-for-proposals/>.

The budget forms must be submitted as an Excel spreadsheet file as part of the complete proposal. The budget forms must be signed by an authorized /organization signatory.

*Required forms can be downloaded or accessed with this RFP from The Partnership's website at <https://chicookworks.org/our-network/request-for-proposals/>.

Forms and attachments do not count toward page limits for narrative responses.

B. Proposal Questions

Provide narrative responses to the questions below to demonstrate your organization's technical, administrative, and fiscal capacity for performing the scope of services outlined in Section IV: Scope of Work. Responses related to prior experience should include concrete examples that clearly state the scope and scale of services/activities. Responses related to proposed program design should include detailed plans with specific action steps.

Program Questions

Executive Summary

1 page maximum. Required but unscored.

The Executive Summary must be submitted on the responding organization's letterhead and must include:

- Explanation of how your organization meets the definition of a CBO as a non-clinical/medical, not-for-profit organization that has demonstrated service delivery to specific populations and/or community areas, where service delivery includes that programming is driven by an understanding of or direction by community voice.
- Overview of your organization's interest in and qualifications for this funding opportunity.
- Overview of your proposed plan for establishing, managing, and supporting the employment success of a short-term community response corps workforce.
- **Signature of the President, CEO, Executive Director, or other authorized representative.**

Location in and Service to Priority and/or High Economic Hardship Community Areas

1 page maximum. (20 points)

1. Is your organization located in and does it primarily serve one or more priority and/or high economic hardship community areas as defined in Section III of the RFP? Address all the following in your response:
 - Address of worksite(s) where you will employ Health Response Workers
 - Name of community area(s) and ward(s) in which worksite(s) and satellite are located³
 - Name(s) of priority and/or high economic hardship community area(s) where your current service population resides, with corresponding percentage of service population residing in each given community area⁴
 - Percentage of your current service population (a) identifying as Black; and (b) identifying as Hispanic or Latinx

Respondent Qualifications

6 pages maximum for questions 2-7 combined. (30 points)

2. How does this funding opportunity align with your organization's vision and mission, services provided, and needs of your service population(s)? Address all of the following in your response:
 - Specific services provided by your organization and what community needs these address
 - Number of individuals served annually
 - Demographic and socioeconomic characteristics of individuals served
3. Describe how your organization works to transform or dismantle institutional policies and practices that compromise the wellbeing of communities of color. Include examples that address the following:
 - Employment of persons with criminal records (e.g., banning the box).
 - People of color involved in your organization's leadership and decision making.

³ A dynamic map of Chicago Community Areas can be accessed at:

<https://www.chicagohealthatlas.org/community-areas>

⁴ E.g., "Roseland, 51%" means that 51% of your current service population resides in Roseland.

- Holding your organization accountable to communities of color impacted by health and social inequities.
- Educational requirements (e.g., not requiring advanced degrees unless necessary).
- Time off and flexible scheduling (e.g., parental leave, flexible schedules to support employees with family care needs).
- Upward mobility (e.g., cultivating race/gender-specific mentors).
- Transportation (e.g., providing free/subsidized parking or public transportation); and
- Wages (e.g., paying a living wage to all employees)

4. What experience does your organization have providing services relevant to the requested scope of work as outlined in Section IV of this RFP?

In your response to this question, address at least three (3) areas of experience from the list below and describe your prior work in these areas. Describe performance outcomes for each example of relevant experience you provide.

- Engagement of and service to individuals with limited access to healthcare and/or whose health is compromised by factors such as food insecurity, housing insecurity, mental health conditions, substance use disorders, unemployment or underemployment, language barriers, and immigration status
- Culturally competent and trauma-informed work with diverse populations affected by discrimination, including but not limited to persons of color, women, LGBTQ persons, immigrants, refugees, justice-involved persons, persons affected by violence, speakers of languages other than English, and diversity of religious backgrounds.
- Public health interventions, including but not limited to contact tracing and/or other infectious disease mitigation activities, health education, care coordination and/or navigation, informal counseling, any work specific to COVID-19, and any work specific to other communicable diseases such as HIV/AIDS and sexually transmitted infections
- Implementation of workforce development initiatives such as earn-and-learn and transitional or temporary jobs programs
- Demonstrated understanding of culture, social networks, institutional assets, and needs of communities served
- Solicitation, such as cold calling or door-to-door canvassing, particularly of hard-to-reach populations

5. Describe an instance in the past three (3) years when your organization failed to deliver services as intended, whether COVID related or not. Address all the following in your response:

- Failure at hand (e.g., failure to serve intended service population, failure to meet performance goals, failure to deliver services within budget, etc.)
- Remediation actions undertaken by your organization in response to failure at hand
- Outcome of remediation actions taken by your organization

6. What is your organization's capacity for immediately hiring 11 Community Health Response Corps workers including one (1) Corps Supervisor upon notification of award? Address all the following in your response:

- Experience in recruitment, hiring, training, and retention in employment of individuals who have experienced barriers to employment

- Launch of new initiatives on a short timeline, requiring rapid hiring and training of staff, rapid establishment of processes and protocols, program adjustment in response to changing circumstances and emergent problems, etc.
- Existing candidate pipelines from among your organization’s service population(s) and/or elsewhere that meet the Community Health Response Corps principles outlined in Section IV of the RFP
- Existing screening and hiring processes available for rapid mobilization
- Existing payroll processing method and/or willingness to use third-party payroll processor if established
- Existing employee benefits

7. Staffing Plan

Applicants should outline a plan for staffing for this program. Staff dedicated to this grant should be named by staff name and title; if the position is yet to be filled, please specify, and include the title of the vacancy. Provide a justification and describe the scope of responsibility for each position, relating it to the accomplishment of program objectives outlined in the work plan. Provide job descriptions for all filled vacant, and new positions to be supported by this grant award. Provide resumes for all existing staff who will be supported by this award. Time allocation should be described per Salary and Wages below. Successful applicants will be required to have Fiscal and Grants Management staff dedicated to the fiscal and administrative elements of this grant. The staffing plan described in this section must match the budget submitted for this application.

Program Design

3 pages maximum questions for 8-9 combined. (20 points)

8. How will your organization establish and manage the short-term Community Health Response Corps workforce? Address all the following in your response:
 - Integration of short-term workforce into organization’s existing staff structure
 - Existing staff resources that will be utilized to establish and manage the short-term workforce
 - Shift schedules for full-time Health Response Workers and weekend rotation of staff per project needs
 - Staff time tracking systems and ability to manage a hybrid model between office, community outreach, and remote-at-home work
 - Supervision structure among Health Response Workers including Health Response Supervisor, and existing staff of the organization
9. How will your organization support the success of the Health Response Workers and Supervisor? Address all the following in your response:
 - Describe how you will create a public health workforce employment and training opportunities for people who live in communities that are most affected by health and economic inequities.
 - Support workforce to respond to existing and new public health needs with speed, dexterity, and flexibility.
 - Professional development activities and opportunities that will be provided to Health Response Workers.
 - Resources beyond immediate supervisor that will be available to Health Response Workers and Health Response Supervisor, e.g., organization HR staff, Employee Assistance Program, mentor

- Describe how your organization prioritizes the overall safety and wellbeing of its workforce.
- Describe practices that prioritize and promote trauma informed care, healing, and resilience for your staff.
- Describe in detail how your organization will monitor, support, and provide corrective action, as necessary, to employees, as they operate across multiple programmatic efforts to ensure they follow required protocols, guidance, and standards and collect and report all required data through CDPH-approved data collection systems (or through other approved methods). Please also include a description of how your organization will ensure that all.
- Describe a workforce development plan to support the Health Response Workers prior to exiting the program into permanent positions (. e.g., WIOA program, career coaching, other transitional employment support, etc.)

Fiscal Questions

No page limit. (30 points)

- a. What is your organization's legal status/registration? Briefly describe the entity's statutory reporting requirements.
- b. Describe leveraged funds that your organization will bring to this project. This can include cash contributions, staff effort, space, fee-for-service or other revenue generation, and in-kind contributions. In answering, list each source of leveraged resources, the dollar value, and the function of each leveraged resource (e.g., spread operating costs or broaden the scope of services). Note that budgets must back up this information with a breakdown of the funding from each source as it is utilized in the program.
- c. Describe your current capacity to manage the total funds available through this RFP, including all associated and anticipated contract and fiscal responsibilities. Describe your organization's experience receiving and managing large, multi-component governmental grants. Describe your organization's capacity to dedicate grants management and fiscal staff to this program's reporting, vouchering, and other administrative components to ensure fidelity to multiple funding sources that are applied to specific program elements.
- d. Describe your organization's capacity to establish a line of credit or other reserve funds' ability to support 1-5 months of funding while awaiting reimbursement from the Partnership, which depends on The Partnership's receipt reimbursement from the.
- e. Provide the organization's current total annual budget and individually list the grants over \$100,000 and their funding sources from the past 5 years.
- f. Does your organization manage its accounting functionalities internally? If not, indicate the firm name, address, contact person, phone number, email address, and time your organization has been working with this firm. If yes, describe your organization's accounting/financial procedures and system of oversight. Describe the type of accounting software being utilized by either your organization or by the contracted third party.
- g. How many salaried and hourly employees does your organization have? How many full-time and part-time employees does your organization have? What is your organization payroll frequency? (e.g., Weekly, bi-weekly, semi-monthly, etc.)?
- h. Who is your organization's payroll processor? Describe the payroll process/system including internal controls for accuracy, and validity, describe the review process. What is the method for

documenting employee time (e.g., electronic or paper) and what is the timeframe of review and authorization of documentation? Are time studies utilized? If so, how often are they prepared? Are payroll expenditures properly authorized, accurately recorded in a timely manner, and properly classified? (Please provide explanation)

- i. Describe how your organization will ensure that costs charged to the program are reasonable, allocable, allowable, and necessary.
- j. For audits, indicate what action has been taken regarding the following: a) auditor's opinions or recommendations regarding internal controls; b) cost disallowances; and c) any other changes your organization has undertaken in response to audits.
- k. Does your organization have an accounting system that allows for the proper recording of project financial transactions, including the allocation of expenditures in accordance with the respective components, disbursement categories, and sources of funds? If not, what accounting system will be used for the project?
- l. Describe your authorization process of goods and services and how they are determined to be reasonable and necessary.
- m. Describe your organization's policy for retention of accounting records including supporting documents.
- n. What are your organization's current efforts to identify, analyze, and prioritize legal/ethical misconduct and compliance risks specific to operations and culture of the organization?
- o. What training is provided by your organization for fiscal compliance and ethics? How often is it provided? Please provide the most recent date this training was provided.

C. Budget

The respondent CBOs may use up to fifteen percent of the sub-contracted award amount for program-related costs and each CBO may use an additional 15% of their subcontracted award amount for indirect/administrative costs within their agency. These percentages are calculated based on the allocation for each sub-contracted CBO, not on the cumulative program budget

Budget forms and instructions are posted with this RFP on The Partnership's website at <https://chicookworks.org/our-network/request-for-proposals/>.

Submit the following required item:

- Budget (Excel workbook inclusive of all sheets/tabs) – submit electronic copy in Excel format

Follow "**Community Health Response Corps RFP Budget Instructions**" to complete all budget forms.

SECTION VI. Electronic Submittal Procedures and Requirements

A. Submittal Procedure and Format

To be considered for funding, respondents must submit a complete response to this RFP as described above in **Section V: Proposal Questions and Required Attachments**. Narrative responses **may not** exceed page limits specified in Section V. Page limits exclude all attachments.

For each proposal submitted, please respond to the [Organizational Leadership Survey \(Formsite.com\)](#). This survey will capture demographic information and basic respondent contact information for tracking purposes.

All proposals must be submitted in **electronic form to ChiHealthRespCorpsRFP@chicookworks.org**

Any material considered proprietary must be designated by annotation within the document.

For the purposes of electronic submission, originals are scans of paper documents that contain **original signatures in blue ink** of the President, CEO, or equivalent person with legal signature authority for the organization and **marked “Original.”**

If your organization is unable to provide scanned signature originals, include unsigned forms in your proposal and include the following statement in the email body of your proposal submission: **“Respondent requires electronic signature follow-up.”**

The Partnership will contact your organization to obtain the electronic signature of its authorized signatory following receipt of your proposal. Please note that the electronic signature process may occur after the proposal submittal deadline. Proposals that include unsigned forms but are otherwise complete will be considered complete at the time of submission so long as respondents comply with the instructions herein regarding electronic signature follow-up.

Narrative responses must be formatted as follows:

- 8.5 x 11-inch (letter size)
- One-inch margins
- 12-point font
- Double spacing
- Numbered pages with organization name in footer
- Page break for each new section with clear section header

Submit your complete RFP **by email** with sections organized as follows:

Subject Line of Email	“Community Health Response Corps” + Organization Name
Body of Email	“Community Health Response Corps RFP” List of Email Attachments Organization Name Organization Address Contact Person for Proposal Contact Email and Phone Number **Include statement re: electronic signature follow-up if applicable**
Attachment 1 Named “CommunityHealthResponse_OrganizationName_Program” As <u>one</u> PDF	Organizational Leadership Survey Executive Summary Program Narrative Budget

<p>Attachment 2 Named “CommunityHealthResponse_OrganizationName_Fiscal” As <u>one</u> PDF</p>	<p>All Required Fiscal Attachments per RFP <u>Section V</u> Fiscal Narrative W-9 Tax Exempt Determination Letter Financial Statement Certificate of Good Standing List of Board Members Cost Allocation Plan Indirect Cost of Determination Letter Fiscal Policies and Procedures Budget</p>
<p>Attachment 4 Named “CommunityHealthResponse_OrganizationName_Budget” As Excel</p>	<p>Budget</p>

B. Submittal Address and Deadline

Completed RFP responses must be submitted **electronically to:**
ChiHealthRespCorpsRFP@chicookworks.org

RFP responses must be received **before or by 4:00 PM CDT on Friday, October 07, 2022. Proposals received after this date and time will not be accepted.**

Technical Problems with Submission

If you experience a technical problem when submitting your proposal (e.g., file size is too large), immediately email RFPquestions@chicookworks.org to explain the problem. Enter **“submission problem + your organization name”** in the email subject line.

If you experience a technical problem when submitting your proposal within three (3) hours of the submittal deadline, email RFPquestions@chicookworks.org as instructed above and call:

RFP Submission Support Hotline: (312) 848-7174*

*Calls to this number will only be answered within three (3) hours of the submittal deadline, from 12:00 p.m. to 4:00 p.m. on Friday, October 07, 2022. Do not call this number at any other time.

SECTION VII. Evaluation Process and Criteria

A. Proposal Review Process

Proposals will be evaluated by a team of reviewers, which may include Partnership staff, project partners described in Section II of this RFP, and other outside experts.

Program Review: Members of the review team will conduct an in-depth assessment of the narrative response and relevant attachments pertaining to program questions in the RFP. Reviewers will use a scoring instrument based on the evaluation criteria given in the RFP.

Fiscal Review: The Partnership will conduct a fiscal review of all qualified proposals including budgets, audits, and responses to questions related to fiscal operations. The Partnership reserves the right to review and request further information regarding the respondent’s financial situation, if not sufficiently outlined in the submitted proposal. The Partnership reserves the right to assess the risk posed by any

recent, current, or potential litigation, court action, investigation, audit, bankruptcy, receivership, financial insolvency, merger, acquisition, or other event that might affect an entity’s ability to operate the requested program.

The review team will perform an in-depth evaluation of all responsive proposals based upon the criteria herein. Prior to its final funding decision, The Partnership may also:

- a. Meet with representatives of the responding entity to discuss the proposed program and budget.
- b. Identify and/or negotiate program or budget changes the responding entity must make as a condition of funding; and
- c. Identify other documentation the entity must provide as a condition of funding.

The Partnership will select successful respondents based on program, fiscal reviews, and geographical distribution.

An entity’s failure to submit a complete proposal or to respond in whole or in part to RFP requirements may cause The Partnership to deem the proposal non-responsive and thus ineligible for review. Entities that fail to meet the evaluation criteria specified herein, or proposals that do not meet the service needs will not receive further consideration for funding. Failure to meet evaluation criteria can include, but is not limited to, non-responsive language in the submission, failure to clearly address all RFP questions, lack of required documentation, and proposing services that do not meet the specified scope of work.

Proposals evaluated with a score below 70 (out of a possible 100 points) will not be considered. Proposals that do not conform to submission requirements will be considered non-responsive. The Partnership reserves the right to contract with any respondent that falls within the acceptable point range and is not required to contract with the entity receiving the highest score as a result of the proposal review process due to considerations of geography, populations served and other considerations of particular service needs.

B. Evaluation Criteria

All eligible proposals will be scored according to the evaluation criteria set forth below.

CRITERIA	POINT VALUE
Program Proposal	
Location in and Service to Priority and/or High Economic Hardship Community Areas (Q. 1)	20
Respondent Qualifications (Q. 2-7)	30
Program Design (Q.8-9)	20
Fiscal Proposal (a-o)	30
Total Points Available	100

SECTION VIII. Solicitation and Terms

A. Period of Solicitation

This RFP will be released on Thursday, September 08, 2022. **The deadline to submit a response to the RFP is Friday, October 07, 2022, by no later than 4:00 pm (CDT).** Submit your proposals electronically to ChiHealthRespCorpsRFP@chicookworks.org

B. RFP Inquires, Questions, and Answers

All questions pertaining to the RFP must be received in writing via email at RFPquestions@chicookworks.org by **5:00 pm (CDT) on Monday, September 26, 2022**. Use subject line "**Community Health Response Corps RFP.**" Questions received after 5:00 pm on September 26, 2022, will not receive a response.

The primary mode of communication between The Partnership and potential bidders will occur via <https://chicookworks.org/our-network/request-for-proposals/>. The Partnership anticipates posting answers to all questions by Friday, September 30, 2022. A Question-and-Answer page will appear on The Partnership website at <https://chicookworks.org/our-network/request-for-proposals/>. It is the bidder's responsibility to check the website page frequently to stay apprised throughout the process. Only those questions directed to the above email or received on the Bidder Webinar will be answered. Questions will not be answered over the phone or in person.

C. Bidder Webinar

The Partnership will host a Bidder Webinar for all prospective respondents to this RFP, where Partnership staff will review program information, key proposal requirements, and contract terms, as well as respond to questions. Attendance is highly recommended.

A brief period will be reserved on the Bidder Webinar for questions. Every effort will be made to answer questions posed on the Webinar; however, no answers are final until posted on the website. Questions not answered on the Webinar should be submitted to RFPquestions@chicookworks.org with subject line "**Community Health Response Corps RFP Questions.**"

Other than during the Bidder Webinar, staff members are unable to provide technical assistance during the application process. Please do NOT contact staff directly with any questions. All questions should be directed to RFPquestions@chicookworks.org with subject line "**Community Health Response Corps RFP.**"

The Bidder Webinar will be held on:

**Wednesday, September 20, 2022
1:00 – 3:00 PM CDT**

Please register **in advance** for the Bidder Webinar at:

<https://attendee.gotowebinar.com/register/8232874114031338508>

After registering, you will receive a conformation email containing information about joining the webinar.

D. Limitations

The Partnership shall not pay for any costs incurred by the applicant(s) in the completion of this RFP. Submission of an RFP does not, in any way, oblige The Partnership to award a contract. The Partnership reserves the right to accept or reject any applications, to negotiate with all qualified sources, or to cancel in part or in its entirety this RFP, if it is in the best interest of The Partnership to do so. The Partnership will require any successful applicant(s) to participate in contract negotiations prior to contract finalization. The Partnership shall reserve the right to terminate, with or without cause, any contract entered as a result of this RFP process.

E. Disclaimers

All contract awards by The Partnership, pursuant to this RFP, are contingent upon the availability of funds. The respondent is liable for all costs incurred prior to final authorization by the Chicago Cook Workforce Innovation Board and the execution of a contract with The Partnership.

The Partnership also reserves the right to:

- Rescind an award and/or reallocate the funding to another applicant should the successful respondent fail to execute its grant agreement in a timely fashion;
- Increase funding levels for any or all entities selected pursuant to this RFP, if additional funds become available, based on performance, effectiveness, and other recorded metrics.
- Change and amend as necessary its policies or procedures governing the delivery or scope of services described herein; and
- Perform an assessment of the risk that any recent, current, or potential litigation, court action, investigation, audit, bankruptcy, receivership, financial insolvency, merger, acquisition, or other event might have on an entity's ability to operate a proposed program and adjust the award accordingly.

F. Notice of Award

All respondents will be notified by email as to their award status. Unsuccessful respondents are encouraged to re-apply in subsequent funding cycles.

G. Disallowed Costs and Cancellations

Successful proposals must accept liability for all aspects of the Community Health Response Corps program conducted under contract with The Partnership. The successful respondents will be liable for any disallowed costs or illegal expenditure of funds or program operations conducted. The Partnership reserves the right to cancel an award immediately if new City or federal regulations or policy make it necessary to change the program purpose or content substantially, or to prohibit such a program.

H. Contracting

The Partnership reserves the right to make an award without further discussion of the proposal submitted. No program activity may begin prior to the appropriate approval of the award and execution of an award letter and/or contractual agreement between the successful bidder and The Partnership. Reductions in the funding level of any contract resulting from this solicitation process may be considered during the contract period when a sub-recipient fails to meet expenditure, participant, and/or outcome goals specified in the contract or when anticipated funding is not forthcoming from federal or state governments. The Partnership reserves the right to determine both the number and the funding levels of contracts finally awarded. Such a determination will depend upon overall fund availability and other factors arising during the proposal review process.

I. Cost and Negotiations

The Partnership reserves the right to reject any or all proposals received and to negotiate with all offers on modifications to proposals. Proposals submitted which are over the maximum amount of funds specified for this RFP will be rejected. The proposal warrants that the costs quoted for services in response to the RFP are not in excess of those that would be charged any other individual for the same services performed by the bidder.

J. Modification of Contracts

Any contract awarded pursuant to this RFP may be unilaterally modified by The Partnership upon written notice to the contractor under the following circumstances:

- a. The contractor fails to meet performance and service expectations set forth in the contract; or
- b. The federal or state government increases, reduces or withdraws funds allocated to The Partnership, which impacts services solicited under this RFP; or

- c. There is a change in federal or state legislation and/or their regulations, local laws, or applicable policies and procedures.