

# **Financially Assisted Agencies FY 2019 Request for Proposals Bidder's Conference**

**March 7, 2018**

**Palm Beach County  
Community Services Department**

**AGENDA**  
**Financially Assisted Agency (FAA) Request for Proposals (RFP)**  
**Bidder's Conference**  
**March 7, 2018**  
**1:00 p.m.**

**Sign In**

**Welcome & Introductions**

James Green, Director, CSD

Taruna Malhotra, Assistant Director, CSD

**Overview of 2018 FAA RFP Process and Guidance**

Meghan Parnell, Manager of Planning and Evaluation, CSD

**Outcomes Overview of Logic Model and Evaluation Plan**

Vivian Blackmon-Taylor, Program Evaluator, CSD

**Developing the Scope of Work**

Amalia Hernandez, Contracts Manager, CSD

**Fiscal Overview for RFP Budgets**

Thomas Eaton, Fiscal Manager, CSD

**FAA Application Website Overview**

Stessy Cocerez, Planning Technician, CSD

**Questions & Answers**

**Adjournment & Distribution of RFP Invitation Code**





# WELCOME & INTRODUCTIONS

James Green

*Department Director*

Taruna Malhotra

*Assistant Department Director*

## Community Services Department FAA Objectives and Performance Measures

### **FAA Goal**

To follow the Health and Human Services Element of the *Comprehensive Plan of Palm Beach County* goals and objectives and the recommendations of the Citizens Advisory Committee that address the availability of health and human services necessary to protect the health, safety and welfare of its residents, by providing funding to qualifying non-profit organizations to provide health and human services related to the approved service categories.

### **FAA Objectives**

- Provide monitoring, evaluation and technical assistance to contracted providers to improve program effectiveness and performance.
- Enhance quality management activities to measure the quality of services and program effectiveness utilizing the newly implemented network of client databases.

### **FAA Performance Measures for Homelessness and Domestic Abuse/Sheltering**

Expected outcomes are listed in guidance. Outcomes will be discussed in detail later in presentation.

## Community Services Department FAA Program

There will be additional details throughout today's presentation regarding the proposal components. There are a few that I would like to highlight. It will be critical in this year's proposals to:

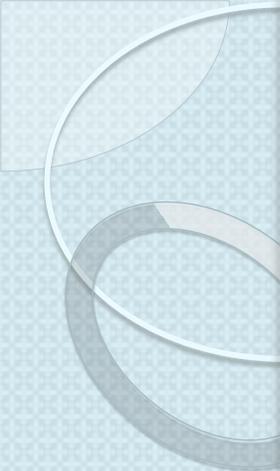
**Response to Community Data** This is a new section. Community data will be provided which support the need for the service categories. Describe how your program will respond to the provided data sources

**Avoid Duplication** To emphasize proposed services are not a duplication of what other agencies provide. It is encouraged that the FAA funding only be used when there are no other existing resources.

**Collaboration** Strong community collaboration and service linkage will be important in the success of your proposal. Describing how your program will leverage community resources and link clients to the broad array of health and human services within Palm Beach County will be important.

## Applicant “Insider Tips”

- Make sure to review all of the resource documents that have been posted online for both Homelessness and Domestic Abuse/Sheltering
- Make sure that your Partner Letters / MOUs:
  - ✓ Are well-written
  - ✓ Outline the partnership(s) between community agencies as detailed as possible
  - ✓ Are as updated as possible
- Be mindful that FAA dollars are limited and we receive many proposals.
- Make sure to follow the proposal outline as written in the application so the reviewers can easily follow what is being asked for and what the responses are.
- Be very careful with copying and pasting sections; if sections are copied and pasted, make sure that any necessary updates are made to match what is being asked.
- Use the total work time allotted to complete your grant application. Do not wait until the last minute as rushing often leads to mistakes.
- Any incomplete or inconsistent proposals will not be reviewed or considered.
- Answers should be simple, concise, and to the point, while still informing the reviewer of what your program does.
- While going through your grant application, please keep in mind that this is a highly competitive grant and we often receive more applications than we can fund.



# **Overview of 2019 FAA RFP Process and Guidance**

**Meghan Parnell**  
**Manager of Planning and Evaluation**

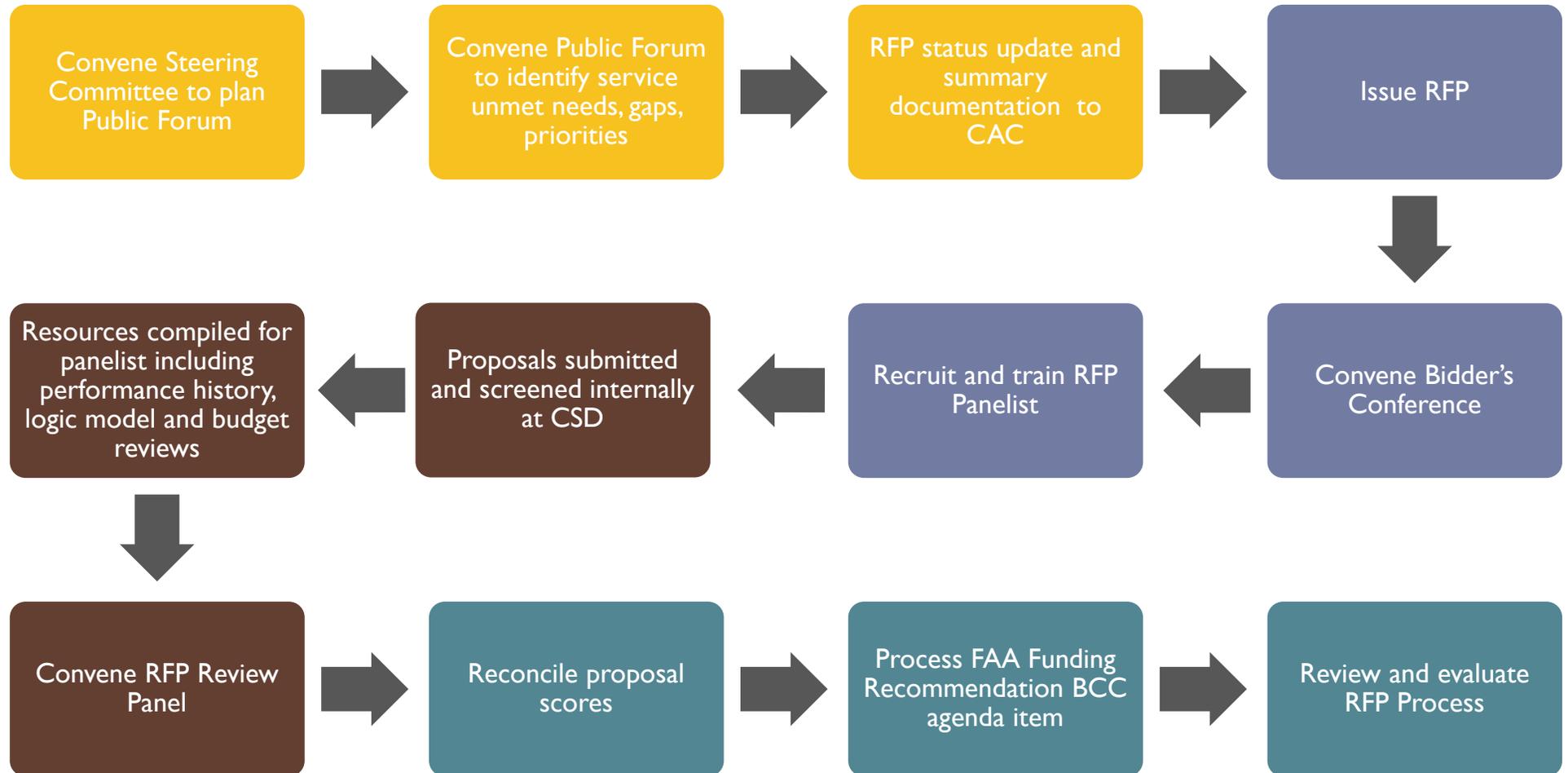
# FAA Funding Cycle

## **FY 2019 RFP Categories:**

Homelessness

Domestic Abuse/Sheltering

# FAA RFP Process



# FINANCIALLY ASSISTED AGENCIES FY 2019 REQUEST FOR PROPOSAL TIMELINE

- February 25:** RFP advertised
- March 1:** RFP available for public
- March 7:** Mandatory Bidder's Conference
- March 12-23:** Reviewer Training
- March 29 - Noon:** Final day to submit written questions

## **March 30 @ 11:59 PM: RFPs submission deadline**

- April 16-18:** Homelessness Review Panel  
CSD Administration, 810 Datura Street, Basement  
  
Domestic Abuse/ Sheltering Review Panel  
CSD Administration, 810 Datura Street, Basement
- April 20-May 1:** Staff reconciles committee rankings, funding availability and develops recommended allocations
- May:** County Administration reviews FAA recommendations
- July:** Presentation of FY 2019 FAA recommendations to BCC

## CONE OF SILENCE

**This RFP includes a Cone of Silence.** The Cone of Silence will apply from the date the RFP is due, which is March 30, 2018, until the final FAA contracts are approved by the Board of County Commissioners.

Respondents are advised that the "Palm Beach County Lobbyist Registration Ordinance" (Ordinance), a copy of which can be accessed at: [http://www.pbcgov.com/legislativeaffairs/pdf/Lobbyist\\_Registration\\_Ordinance.pdf](http://www.pbcgov.com/legislativeaffairs/pdf/Lobbyist_Registration_Ordinance.pdf) is in effect. The Respondent shall read and familiarize themselves with all of the provisions of said Ordinance, but for convenience, the provisions relating to the Cone of Silence have been summarized here. **"Cone of Silence" means a prohibition on any non-written communication regarding this RFP between any Respondent or Respondent's representative and any County Commissioner or Commissioner's staff, any member of a local governing body or the member's staff, a mayor or chief executive officer that is not a member of a local governing body or the mayor or chief executive officer's staff, or any employee authorized to act on behalf of the commission or local governing body to award a contract.** A Respondent's representative shall include but not be limited to the Respondent's employee, partner, officer, director or consultant, lobbyist, or any, actual or potential subcontractor or consultant of the Respondent.

The Cone of Silence is in effect as of the submittal deadline. The provisions of this Ordinance shall not apply to oral communications at any public proceeding, including pre-bid conferences, oral presentations before selection committees, and contract negotiations during any public meeting. The Cone of Silence shall terminate at the time that the BCC awards or approves a contract, rejects all proposals or otherwise takes action which ends the solicitation process.

### **Ethics Commission**

If anyone has a question regarding ethics they should not be addressed to our department, but should be addressed directly with the Ethics Commission.

<http://www.palmbeachcountyethics.com/>



# Non Profits First Certification and Exemption Process

County recognizes the certification process for nonprofit agencies through Nonprofits First: [www.nonprofitsfirst.com](http://www.nonprofitsfirst.com).

Non-Profits First Certification may be exempt for agencies that provide documentation of certification from another funding or oversight body recognized by their industry or if their agency has received two (2) consecutive monitoring reports from FAA with no findings. Exemptions must be requested and approved by the Department of Community Services each contract year.

**Requests for exemption must be indicated in the proposal Cover Page- Non Profits First section.**

All non-exempted agencies contracting with the County will be required to maintain certification or be certified within 18 months of their initial contract date.

# Proposal Highlights

All applicants attending the mandatory bidder's conference will be approved to submit a full proposal.

The full proposal is due no later than

***March 30, 2018 at 11:59 p.m. .***

Proposals should:

- Address all components of the Community Services FAA RFP Submission website <https://www.cybergrants.com/pbc/rfp2019>.
- Be written in plain language; a narrative that fully addresses all questions in the FAA RFP Guidelines.
- Be understandable to people unfamiliar with your organization or your area of expertise.
- Specifically address the funding priorities set out in this Request for Proposal.

# Proposal Components

- 1. Project Narrative:** (25 points)
  - Description of client/population served
  - Description of Organization
  - Specific questions related to priority areas ( questions I-L)
- 2. Evaluation Approach:** (15 points)
  - Complete Logic Model
  - Use of Program Evaluation
- 3. Prior Outcomes and Response to Community Data** (10 points)
  - Discussion of Prior outcomes
  - Respond to Community Data
- 4. Data Management** (10 points)
  - Quality data collection, data entry and reporting
  - Use of data to inform program changes
- 5. Partnerships, Resources and Collaboration:** (20 points)
  - Relationship to larger system of care
  - Formal partnerships
  - Address need after funding ends
- 6. Budget:** (20 points)
  - Follow directions in the budget template.
  - Unit cost service description and Unit cost of service.

# Priority Area Score

The Review Panel will rank all proposals based on how critical they deem the program is for the system of care.

The SCORE awarded to a proposal is reflective of how competitive the proposal is.

The RANKING of the proposals is reflective of how imperative and critical the services are to ensure availability and access.

# Homelessness Recommendations

## Resource Documents

### **Outcomes:**

Funded programs are expected to perform in the following ways:

- Permanent Supportive Housing should ensure clients increase or maintain their earned income or non-employment cash income
- Rapid Re Housing should ensure that 80% of clients remain permanently housed 1 year after exit from the program
- Case Management should include support services to increase the number of clients served by the program and increase the capacity of the agency to house formerly homeless individuals/families
- Prevention programs should ensure that households avoid seeking or entering emergency shelter and do not request additional housing-related financial assistance during a six-month follow up period
- Homeless Families and Individuals including youth will be served through the acuity/chronicity lists currently managed at the senator Philip D Lewis Center

# Homelessness Recommendations

## Funding Priorities

### **1. End Homelessness through Affordable Housing**

**Strategy #1** Permanent Supportive Housing

**Strategy #2** Rapid Re-Housing

### **2. Housing Focused Case Management**

**Strategy #3** Housing Focused Case Management supporting a Permanent Supportive Housing program

**Strategy #4** Housing Focused Case Management supporting a Rapid Re-Housing program

### **3. Prevent Homelessness**

**Strategy #5** Homeless Prevention – eviction prevention

**Strategy #6** Diversion of those at risk of homelessness

FY 2019 Allocation \$ 764,798

# Domestic Abuse/Sheltering Recommendations

Resource Documents

# Domestic Abuse/Sheltering Recommendations

## Outcomes

Funded programs are expected to perform in the following ways:

- Provide safe shelter for individuals and families seeking safety while fleeing from domestic violence
- Reduce the occurrence of domestic violence through preventive programs
- Provide a transition from emergency shelter to housing resulting in 80% of clients exiting to safe violence free housing

## Funding Priorities

- 1. Emergency Shelter**
- 2. Rapid Re-Housing**
- 3. Education and Prevention programs**

FY 2019 Allocation: \$ 487,155

# LOGIC MODEL/ EVALUATION PLAN



**Bidder's Conference FY 19 RFP Funding**

**March 7, 2018**

**Mayme Frederick Building**

**1440 MLK Boulevard**

**Riviera Beach**

# Presented By

Vivian Blackmon-Taylor, MPA  
Program Evaluator

# Logic Model/Evaluation Plan

The **FY19 Logic Model/Evaluation Plan** will establish the foundation for evaluating FAA funded programs.

- The template has been revised!
- **Be sure to use the FY 19 template!**
- FY 19 template is a two page document.

# Logic Model/Evaluation Plan



Program Outcome  
Program Procedures  
Program Performance

# Keys to Creating A Good Logic Model/Evaluation Plan

Who What Where When Why & How

# Who, What, Where, When, Why, How?

- Who are you helping?
- What activities, interventions, services will be provided? What **CHANGE** (outcome) is expected from participation in the program?
- When will the program begin and end? When are clients expected to accomplish the program outcome?
- Where are activities conducted? (agency, job site, client's home, etc.)
- Why are you running this program? Does the need exist?
- How is the program outcome measured?

# Keys to Creating A Good Logic Model/Evaluation Plan



Read The Description For Each Section



Use Specific & Concise **Bullet Points**



Provide Only What Is Asked For Each Section

# Page 1 - Logic Model



**Page 1** FY 2019 (Contract Year 2019-21) Financially Assisted Agencies (FAA) **Logic Model**/Evaluation Plan  
**All INFO MUST FIT ON THIS PAGE**

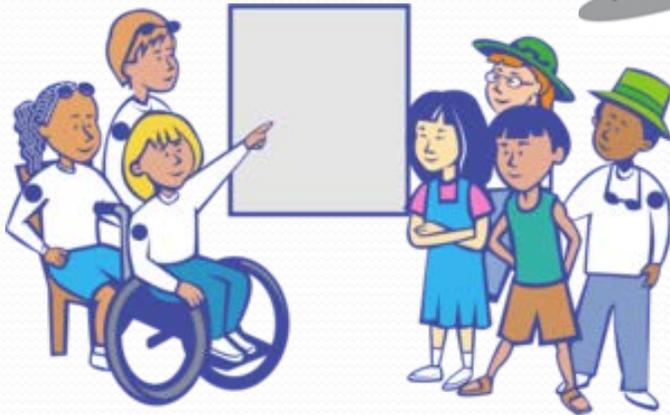


Agency Name	ENTER AGENCY NAME		Program Name	ENTER PROGRAM NAME
Problem Statement	ENTER A BRIEF BUT CONCISE PROBLEM STATEMENT TO FIT IN THIS PLACE			
Program Goals	ENTER THE PROGRAM GOALS TO FIT IN THIS SPACE			
ACTIVITIES	OUTPUTS	OUTCOME STATEMENT	OUTCOME INDICATOR	
The activities or interventions provided to the target population in order to achieve the outcome.	(1) The size and scope of the activities (interventions, treatments, workshops, classes, services, etc.) that result in a change in the participant (successful outcome). (2) Timeframe for completion of the activity. (3) Total # of participants provided the activity/intervention.	The qualitative statement of positive change in knowledge, attitude, skills, behavior, or condition of the participant(s) receiving the activity/intervention for the specified timeframe. The statement does not include numbers. <b>Example:</b> Participants will move to stable (or violence free) housing.	The quantitative measure of the projected number/percentage of participants to achieve the outcome in the expected timeframe during the contract period. <b>Enter the outcome indicator in the following format</b> <b>example:</b> 25 out of 50 participants, or 50%, will move to stable (or violence free) housing upon exiting the program.	





# ACTIVITIES



# Activities

The activities or interventions provided to the target population in order to achieve the outcome.

# ACTIVITIES

NO

- At least 10 persons will be provided **training in personal financial management** to improve the quality of life for the entire family.

Yes

- **Financial management classes including:**
  - Budgeting
  - Savings
  - Credit
  - Checking Account

# OUTPUTS

The size and scope of the activities

Result in a change in the participant

Timeframe for completion of the activity

Number of participants

# OUTCOME STATEMENT

- Only one outcome will be measured for FAA programs.
- The qualitative statement of positive change in knowledge, attitude, skills, behavior, or condition of participants for the specified timeframe.
- Does not include participant quantitative measure
- Example: Participants will move to stable (violence free) housing.

# Domestic Abuse/Sheltering Outcome Expectations

Funded programs are expected to perform in the following ways:

- Provide safe shelter for individuals and families seeking safety while fleeing domestic violence;
- Reduce the occurrence of domestic violence through preventive programs;
- Provide a transition from emergency shelter to housing resulting in 80% of clients exiting to safe violence free housing.

# Homelessness Outcomes

Funded programs are expected to perform in the following ways:

- Permanent Supportive Housing should ensure clients increase or maintain their earned income or non-employment cash income;
- Rapid Re Housing should ensure that 80% of clients remain permanently housed 1 year of exit from the program;
- Case Management should include support services to increase the number of clients served by the program and increase the capacity of the agency to house formerly homeless individuals/families;
- Prevention programs should ensure that households avoid seeking or entering emergency shelter and do not request additional housing-related financial assistance during a six-month follow up period;
- Homeless Families and Individuals including youth will be served through the acuity/chronicity lists currently managed at the Senator Philip D Lewis Center.

# Outcome Indicator

- The quantitative measure of the projected number of participants to achieve the outcome in the expected timeframe during the contract period, written in the following format:

25 out of 50 participants, or 50%, will move to stable (or violence free) housing upon exiting the program.

# Page 2 - Evaluation Plan



**Page 2** FY 2019 (Contract Year 2019-21) Financially Assisted Agencies (FAA) Logic Model/**Evaluation Plan**

**All INFO MUST FIT ON THIS PAGE**



Agency Name:	ENTER AGENCY NAME	Program Name:	ENTER PROGRAM NAME
<b>TRACKING</b>	<b>MEASURING</b>	<b>INTERNAL REPORTING</b>	<b>INTERNAL EVALUATION</b>
Describe the process for tracking or documenting clients, from program entry to exit, that will be served by FAA funds. Describe how data is maintained. If a data management system is used include the name of the data system.	(1) Describe the method (when, how, any requirements and/or exceptions) for measuring clients, beginning with baseline data when clients enter program, and additional measurement periods (example - quarterly, after 6 months, upon exiting program). (2) Enter name of the tool (survey, instrument, attendance log, case record, pre/post test, etc.) used to measure achievement of outcome.	(1) Identify staff, by name and title, responsible for compiling an INTERNAL FAA outcome report. (2) Describe the content and frequency of the report. Include program accomplishments and/or challenges. (3) Submit the INTERNAL FAA Outcome Report to <a href="mailto:vblackmo@pbcgov.org">vblackmo@pbcgov.org</a> by the 15th of the month following the end of the preceeding quarter as shown below: Qtr 1: Oct - Dec (Report by Jan 15) Qtr 2: Jan - Mar (Report by Apr 15) Qtr 3: Apr - Jun (Report by July 15) Qtr 4: Jul - Sep (Report by Oct 15)	Describe the process for internal evaluation of the FAA program outcome including, but not limited to the following: (1) When and by whom are FAA data reports reviewed. (2) Determination if program is on track for achievement. The program must define the requirements for being on track. If not on track for achievement provide explanation and/or strategy for improving.

**EXTERNAL REPORTING:** Following the FAA Program Data Reporting Instructions, quarterly reports from Client Track and SAMIS CDG will be run by Community Services staff on the 15th of the month as shown above for Internal Reporting. For Behavioral Health programs, submit the FAA Outcome reports based on the same quarterly schedule shown in Internal Reporting above.



# Tracking

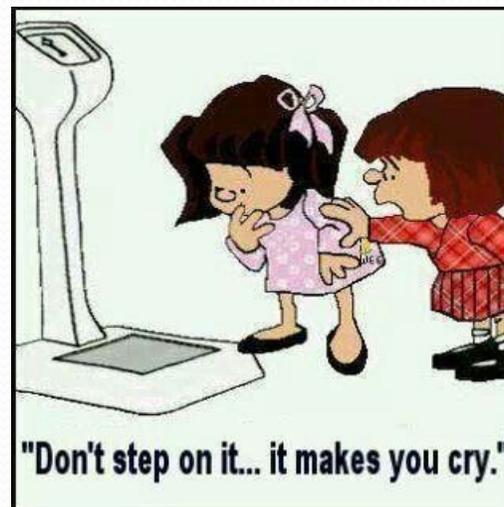
Describe the process for tracking or documenting the clients, from program entry to exit, that will be served by the FAA funds.



# Measuring

Describe the method (when, how and any requirements and/or exceptions) for measuring clients beginning with baseline data, when clients enter program, and additional measurement periods (please identify).

Enter name of the tool (scale, survey, instrument, attendance log, case record, pre/post test, etc.) used to measure achievement of outcome.



## REPORTING

“This is  
gobbledygook.  
I asked for  
mumble jumble”



# Internal Reporting

1. Identify staff, by name and title, responsible for compiling internal FAA outcome report.
2. Describe the content and frequency of the report. Include program accomplishments and/or challenges.
3. Submit the internal FAA Outcome Report to [vblackmo@pbcgov.org](mailto:vblackmo@pbcgov.org)

# So What Do We Do With the Reports

??????????



# Internal Evaluation

**Describe the process for internal evaluation of the FAA program outcomes including, but not limited to the following:**

- 1. When and by whom are reports reviewed.**
- 2. Determination if program is on track for achievement. The program must define the requirements for being on track.**
- 3. If not on track for achievement provide explanation and/or strategy for improving.**

# Benefit of Internal Evaluation

## **EFFECTIVE INTERNAL PROGRAM EVALUATION:**

- Is a formative and summative tool that will help manage your organization.
- Will help identify when to change tactics, expand, or cut your losses.

# Questions







# GUIDELINES TO A SUCCESSFUL CONTRACT (Scope of Work)

Presented by

Amalia Hernandez

*FAA Contracts Manager*





## GOAL: Avoid any ambiguity

The problem with most Scopes of Work (SOW) is a lack of specificity; namely, when the two parties disagree on what should have been delivered between the overview and services section of the SOW, there should be no ambiguity as to what is expected of the performing party.

Together, these elements should paint a thorough picture of what is expected, when, and in what form, while noting any special requirements.





# Contract

The Contract is made up of the terms and conditions required by the County. Also included in the contract is the Scope of Work and Payment Terms.\*

Contract will be for a 3 year period until the next RFP Cycle.

*\*Note: A Logic Model is also required prior to the approval of the final contract and will be part of the contract negotiations; however, it is not part of the contract going to BCC for approval.*





# Scope of Work

The Scope of Work (SOW) is the section in the contract specifying the work that will be performed. This information will be on Exhibit A of the contract.

The information contained in the SOW will be included in the yearly monitoring. A good SOW must include an overview of the program and the services within the program that each Agency will perform for the clients they serve.

The SOW can be written as deliverable based or by cost units. This information will be on Exhibit B of the contract.





# Overview

The Overview section gives essential information about the content of the services to be provided. The overview only summarizes the provisions of the services. It is not intended to cover every aspect of the services to be provided.

In the overview, explain the area of need or the problem that you are trying to solve. Then, explain how your Agency can fill that need or provides a solution.





# Overview - Example

According to the 2018 PIT Count data, Palm Beach County has seen a increase in unsheltered Families. There is a lack of affordable housing in Palm Beach County and these families would benefit from a Rapid Re- Housing Program.

The ABC Rapid Re- Housing Program was designed to help families living in Palm Beach County who are living on the street or in their vehicles and are homeless. The program provides housing location, rental assistance and housing focused case management to assist families in moving from the street to a rental apartment.





# Services

**In this section, please describe the services that your agency will provide for the clients. A service is a means of delivering value to clients by facilitating want needs to be achieve.**

As the Agency entering into the contract, you are responsible for a particular type of activity or for providing a particular service that the client needs.

Identifying the service enables both the client and the service provider to know what to expect and not expect from a service. This clearly defines the services provided and enable each party to understand what is being offered.

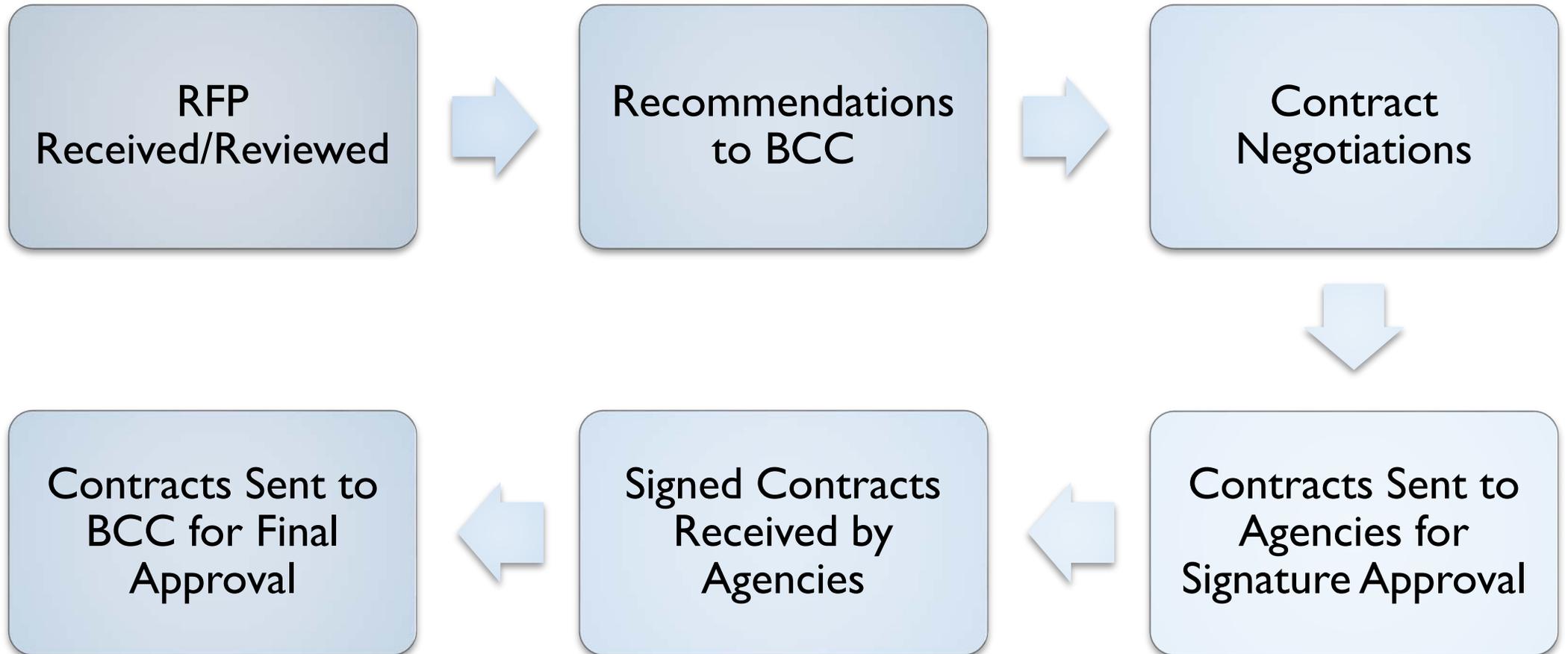




# Overview - Services

The Agency will provide a Housing Focused Case Manager, through the ABC Rapid Re-housing Program, who will provide the following services:

- Housing location
- Assessment of barriers to housing
- Assistance in overcoming barriers to housing
- Coordination of rental subsidy





**Fiscal Overview for RFP  
Budgets**  
Thomas Eaton  
Fiscal Manager

FAA Budget Items	FAA Program Name	Palm Beach County FAA	Program Funder #2	Program Funder #3	Program Funder #4	Total Program Funding (All Sources)
		Proposed	Confirmed	Pending	Pending	Pending
<b>Program Period: FY 2019</b>						
<b>TOTAL PROGRAM FUNDING AMOUNT =</b>		<b>\$112,045.00</b>	<b>\$45,000.00</b>	<b>\$17,500.00</b>	<b>\$7,500.00</b>	<b>\$ 182,045.00</b>
<b>Program Expenses</b>	<b>Narrative</b>	<b>Amount</b>	<b>Amount</b>	<b>Amount</b>	<b>Amount</b>	<b>Amount</b>
<b>Personnel</b>		<b>\$ 72,445.00</b>	<b>\$45,000.00</b>	<b>\$17,500.00</b>	<b>\$7,500.00</b>	<b>\$ 142,445.00</b>
Program Manager	Program manager position for community support service. Salary expense is 100% funded by PBC FAA award and includes fringe benefits.	\$ 25,000.00	\$30,000.00			\$ 55,000.00
Program Assistant	Program Assistant role is to support the program manager and community educator with daily tasks. This salary expense is 50% funded by PBC FAA award. Total salary expense is \$15,000, with 50% allocated to PBC (\$7,500). (Salary expense does not include fringe benefits)	\$ 7,500.00	\$15,000.00	\$ 7,500.00	\$7,500.00	\$ 37,500.00
Fringe Benefits - Program Assistant	Fringe benefits expense for Program Assistant. Fringe benefits for this position total (\$1,800), with 50% allocated to Palm Beach County FAA in the amount of \$900.	\$ 900.00				\$ 92,500.00
Community Educator	Community Educator position is the primary interface with local schools, charities and support groups. Total Salary (including fringe benefits) billed to Palm Beach County FAA = \$39,045	\$ 39,045.00		\$10,000.00		\$ 49,045.00
<b>Building /Occupancy</b>		<b>\$ 27,050.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 27,050.00</b>
Programmatic Rent/Lease	*Note: Rent for areas that house admin staff should be listed separately under admin section* Rent expense for Lake Worth facility. Total rental expense for FY16 = \$35,000. All location to Palm Beach County FAA award= \$20,000. Remaining \$15,000 will be paid by other operating income.	\$ 20,000.00				\$ 20,000.00
Building Maintenance	Maintenance expense for building XYZ	\$ 3,800.00				\$ 3,800.00
Insurance	Commercial, General, Liability Insurance	\$ 3,250.00				\$ 3,250.00
<b>Utilities</b>		<b>\$ 2,400.00</b>	<b>\$ -</b>	<b>\$ 1,500.00</b>	<b>\$ -</b>	<b>\$ 3,900.00</b>
Electric	Electric Utility Services expense for location X	\$ 1,200.00		\$ 1,000.00		\$ 2,200.00
Water	Water Utility service for location X	\$ 850.00		\$ 500.00		\$ 1,350.00
Telephone	Telephone expense for landline at location X	\$ 350.00				\$ 350.00
<b>Project Supplies/Equipment</b>		<b>\$ 4,900.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 4,900.00</b>
Office Supplies	Office supplies for program staff	\$ 500.00				\$ 500.00
Postage/Shipping	Postage expense for client related mailing	\$ 750.00				\$ 750.00
Printing	Printing expense for program brochures	\$ 650.00				\$ 650.00
Materials/Program Supplies	Program related supplies used to support client base	\$ -				\$ -
Equipment Rental	Monthly Equipment rental fee for use of X = \$500 (\$6000 per year). Palm Beach County to cover 50% of this expense (\$3000).	\$ 3,000.00				\$ 3,000.00
<b>Professional Fees</b>		<b>\$ 2,950.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 2,950.00</b>
Conference Registration Fees	Professional development program fee	\$ 350.00				\$ 350.00
Training	Staff training expense for program/medical/intervention training for client support	\$ 1,500.00				\$ 1,500.00
Travel/Mileage	Program staff mileage reimbursement for client and training related meetings	\$ 1,100.00				\$ 1,100.00
<b>TOTAL PROGRAM EXPENSES =</b>		<b>\$104,845.00</b>	<b>\$45,000.00</b>	<b>\$19,000.00</b>	<b>\$7,500.00</b>	<b>\$ 176,345.00</b>
<b>Administrative Expenses</b>	<b>Narrative</b>					
<b>Personnel</b>		<b>\$ 4,250.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 4,250.00</b>
Executive Position #1 (JL)	A 5% allocation of the Executive Director salary expense (including fringe benefits) will be billed to Palm Beach County FAA. Executive Director total salary expense = \$85,000. 5% allocation to Palm beach County FAA = \$4,250	\$ 4,250.00				\$ 4,250.00
<b>Consulting Fees</b>		<b>\$ 2,950.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 2,950.00</b>
XYZ Consultants	Accounting and audit expenses for FAA program. Annual Accounting fee = \$950, Annual Audit fee = \$2,000. Total expense = \$2,950	\$ 2,950.00				\$ 2,950.00
<b>TOTAL ADMINISTRATIVE EXPENSES =</b>		<b>\$ 7,200.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 7,200.00</b>
<b>Administrative % of PBC Award</b>		<b>6%</b>				

# Budget Template

- To be completed with all FY19 submissions
- Includes clearly defined sections for programmatic and admin expenses
- Will allow for better transparency and understanding of each program
- Please be as descriptive as possible for each section.

# Budget Template

- Sheet will tally your **program** and **admin** expenses and show what your **budgeted %** is at

FAA Budget Items	FAA Program Name	Palm Beach County FAA	Program Funder #2	Program Funder #3	Program Funder #4	Total Program Funding (All Sources)
Program Period: FY 2019		Proposed	Confirmed	Pending	Pending	Pending
TOTAL PROGRAM FUNDING AMOUNT =		\$112,045.00	\$45,000.00	\$17,500.00	\$7,500.00	\$ 182,045.00
<b>Program Expenses</b>	<b>Narrative</b>	<b>Amount</b>	<b>Amount</b>	<b>Amount</b>	<b>Amount</b>	<b>Amount</b>
Personnel		\$ 72,445.00	\$45,000.00	\$17,500.00	\$7,500.00	\$ 142,445.00
Building /Occupancy		\$ 27,050.00	\$ -	\$ -	\$ -	\$ 27,050.00
Utilities		\$ 2,400.00	\$ -	\$ 1,500.00	\$ -	\$ 3,900.00
Project Supplies/Equipment		\$ 4,900.00	\$ -	\$ -	\$ -	\$ 4,900.00
Professional Fees		\$ 2,950.00	\$ -	\$ -	\$ -	\$ 2,950.00
TOTAL PROGRAM EXPENSES =		\$104,845.00	\$45,000.00	\$19,000.00	\$7,500.00	\$ 176,345.00
<b>Administrative Expenses</b>	<b>Narrative</b>					
Personnel		\$ 4,250.00	\$ -	\$ -	\$ -	\$ 4,250.00
Consulting Fees		\$ 2,950.00	\$ -	\$ -	\$ -	\$ 2,950.00
TOTAL ADMINISTRATIVE EXPENSES =		\$ 7,200.00	\$ -	\$ -	\$ -	\$ 7,200.00
Administrative % of PBC Award			6%			

- Will allow us to review and discuss with you any items that may be questionable before approving contracts
- Narratives should be completed for each item with details about the cost to clarify

# Other Funders

FAA Budget Items	FAA Program Name	Palm Beach County FAA	Program Funder #2	Program Funder #3	Program Funder #4	Total Program Funding (All Sources)
Program Period: FY 2019		Proposed	Confirmed	Pending	Pending	Pending
<b>TOTAL PROGRAM FUNDING AMOUNT =</b>		<b>\$112,045.00</b>	<b>\$45,000.00</b>	<b>\$17,500.00</b>	<b>\$7,500.00</b>	<b>\$ 182,045.00</b>
<b><u>Program Expenses</u></b>	<b><u>Narrative</u></b>	<b><u>Amount</u></b>	<b><u>Amount</u></b>	<b><u>Amount</u></b>	<b><u>Amount</u></b>	<b><u>Amount</u></b>
Personnel		\$ 72,445.00	\$45,000.00	\$17,500.00	\$7,500.00	\$ 142,445.00
Building /Occupancy		\$ 27,050.00	\$ -	\$ -	\$ -	\$ 27,050.00
Utilities		\$ 2,400.00	\$ -	\$ 1,500.00	\$ -	\$ 3,900.00
Project Supplies/Equipment		\$ 4,900.00	\$ -	\$ -	\$ -	\$ 4,900.00
Professional Fees		\$ 2,950.00	\$ -	\$ -	\$ -	\$ 2,950.00
<b>TOTAL PROGRAM EXPENSES =</b>		<b>\$104,845.00</b>	<b>\$45,000.00</b>	<b>\$19,000.00</b>	<b>\$7,500.00</b>	<b>\$ 176,345.00</b>
<b><u>Administrative Expenses</u></b>	<b><u>Narrative</u></b>					
Personnel		\$ 4,250.00	\$ -	\$ -	\$ -	\$ 4,250.00
Consulting Fees		\$ 2,950.00	\$ -	\$ -	\$ -	\$ 2,950.00
<b>TOTAL ADMINISTRATIVE EXPENSES =</b>		<b>\$ 7,200.00</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 7,200.00</b>
Administrative % of PBC Award		6%				

- The form has been further revised from prior versions to include columns for other funders of your program
- Please complete as much detail as you are able to in order to allow reviewers to have a full scope of the program
- If funding is not confirmed you can list is as pending

# Administrative Costs

- Must be approved in your submitted budget.
- Must be tracked separately in your General Ledger.
- 15% cap on admin costs.
- Program staff work directly with clients or supervise staff who work directly with clients. All other positions are admin.
- Cost allocation plan or activity logs needed for split funded/dual responsibility staff members.
- If submitting an indirect cost rate for admin costs, you must also include the approved cost plan from a cognizant agency.

# Development of Unit Rates

- Agency should determine all costs that will be incurred to run the program (including administrative costs) and how much of those will be charged to the FAA program.
- Agency should review historical outputs (if available) and expected outcomes/client totals to determine the total amount of units they plan to produce.
- The total dollar amount of the program divided by the number of units expected should be your proposed unit rate.

# Backup Documentation

- General ledgers should be kept for each program, split by admin and program costs.
- Costs in the general ledger should align to the costs in the submitted budget and any changes to the budget should be submitted to the County for review before they are incurred.
- General ledgers should not include excess costs above the revenue being earned for the program year. If it is not being paid for with FAA funds it should not be in the general ledger.
- Submitted units must have backup documentation readily available for review upon request or at time of annual monitoring. Units being submitted should be for services and employees that are paid for by the FAA funding when at all possible.

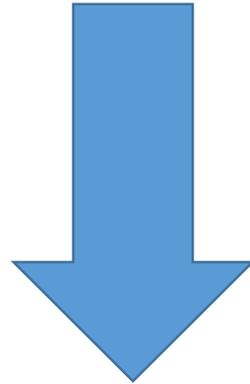
# FAA Application Website Overview

By:

Stessy Cocerez

Planner I

# Where do I go to access the online grant application?



<https://www.cybergrants.com/pbc/rfp2019/>

Browser address bar: <https://www.cybergrants.com/pbc/rfp2019/>

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First time user? [Create your password](#)

Please Log In

\* indicates required field

\* E-mail Address:

\* Password:

Invitation Code (optional):

[Forgot your password?](#)

Please note that you must have cookies and JavaScript enabled on your browser in order to successfully log in.

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Enter the Grant Application website for FAA

If you have never created an account with CyberGrants before, please click on "Create your password"

If you already have an account, type in your email address, your password, and the invitation code that has been provided to you today. Click "Log In" to proceed.





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## Welcome, Stessy Cocerez!

The organization you are currently associated with is PALM BEACH COUNTY TEST ORGANIZATION.

If you work with multiple organizations, [click here to add a new organization to your account](#).

The Apply Online grant application consists of three main sections, each of which must be completed for your proposal to be considered.

1. Contact information pertaining to your organization.
2. Basic information pertaining to your organization.
3. The proposal your organization is submitting for approval.

Once completed, all applications created in Apply Online are immediately submitted to Palm Beach County Board of County Commissioners.

We recommend that you [familiarize yourself with the online application](#) before you begin. To create a new application, click the "Start a New Application" link at the bottom of this page. You may also save your applications now and return to work on them later. To continue work on an unsubmitted application, click the "Continue" link next to the application's Project Title. To view an application previously submitted to Palm Beach County Board of County Commissioners, click the "View" link next to the appropriate Project Title.

Each page will have a timeline like the one below to help you monitor your progress. The line and text will indicate your current position within the application process. If you have technical questions regarding this application, use the link located at the bottom of every page to contact our support team.

Make sure to read all of the instructions provided on the screen.  
If possible, familiarize yourself with the links on how to "Add a new organization to your account" and "Familiarize yourself with the online application"

Applications Requiring Action			
Action	Project Title	Application Date	Application Amount
<a href="#">Revise</a>	Financially Assisted Agencies	04/12/2016	\$500,000.00
<a href="#">Continue</a>	(No Project Title) 	02/24/2017	\$0.00
<a href="#">Start a New Application</a>			

The bottom half of the screen will show any applications that you may have started or submitted in the past. You can see your project titles, application dates, and application amounts. If you have never used CyberGrants for a grant application before, this section will be blank. Before today, you would've received a message telling you to return on Wednesday, March 7, 2018 to begin your application. In order to begin, you will click on "Start a New Application".

Once you've started an application, you can save and proceed to work on it at a later time if need be. Just select "Continue" from this Welcome page.

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## Contact Information

\* indicates required field

Match: Check the box to associate this individual with this application.

**Name:** [STESSY COCEREZ](#)

**Telephone Number:** 561-355-4718

**E-mail Address:** [scocerez@pbcgov.org](mailto:scocerez@pbcgov.org)

**Contact Type:** Primary Contact

Save and Proceed

Create New

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On the Contact Information page, you will be prompted to select a main contact for the application from the available list IF you have already used CyberGrants before. If not, you will have to add new contacts by clicking on "Create New".

You will be able to navigate through the different tabs at your own pace and in the order that you desire. Just make sure that every required question from each section is completely filled out to the best of your ability. Make sure to press "Save and Proceed" every time that you wish to save your changes in each section and move onto a different tab to ensure that you do not lose any information.



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## Request Information

\* indicates required field

\* **Project Title** Please enter the name of your project.

\* **What service category are you applying for?**

\* **REQUIRED FY 2019 Cover Sheet** [Click Here](#) to download the **REQUIRED** FY 2019 Cover Sheet template.

Please upload once you have completely filled it out.

**NOTE:** Please upload your document in the same format as the template: **.doc or .docx**

Upload File

\* **1A. Clients/Population to be served** Describe the clients/population that will be served:

- Homeless Families with Children
- Homeless Individuals
- Homeless Youth (Ages 18-24)
- Victims of Domestic Violence
- Individuals and/or families at risk of Homelessness

(1500 character maximum)

\* **1B. Number Served** List the total number of unduplicated persons that will be served. Specify the number on a monthly and annual basis.

(500 character maximum)

Be very meticulous during this section. This is the MEAT of your grant sandwich. Many important details about your program will be outlined in this section. Many important documents will need to be downloaded and re-uploaded in this section.

\* **1C. Coordinated Entry** How will your proposed activity coordinate with the Senator Philip D. Lewis Center (Homeless Resource Center)? How has your agency been involved with Coordinated Entry? If your agency has not been involved, please describe your willingness and timeline for participation.

(1500 character maximum)

\* **1D. Staff** Describe key staff that will be working on your project. The description should include position titles, education and experience required. Including specific staff names is optional.

(1500 character maximum)

\* **1E. Capacity** Describe the capacity of your organization. Include the following in your description:

- Length of time in business
- Length of time undertaking activity for which funding is being requested
- Number of full-time, paid administrative and/or fiscal staff
- Number of full-time, paid programmatic staff
- Number of active volunteers

(1500 character maximum)

\* **1F. Inclusivity** Describe how your agency is (or is working to become more) inclusive and equitable, both in terms of internal practices and programming, and in terms of external partnerships and other with community.

(1500 character maximum)

**\* 1G. Racial Equity** What steps has your agency taken or plans to take in order to establish, develop or continue policies, practices, and procedures that increase racial equity in the following areas:

- Training
- Hiring and retention
- Board development
- Community engagement and partnerships and
- Other organizational work?

(1500 character maximum)

**\* 1H. Trainings** Describe prior or planned efforts to ensure staff receives the following trainings and how they would be incorporated into service delivery:

- Racial Equity Training
- Adverse Childhood Experiences Training (ACE's)
- Cultural Competency Training
- Trauma Informed Care Training

(1500 character maximum)

**\* 1I. For Rapid Re-housing & Housing Focused Case Management -** For Rapid Re- Housing Projects (RRH) and Housing Focused Case Management that supports RRH, include the following information:

- How clients will be selected for service(s)
- The maximum amount of assistance to be provided per individual/family
- The maximum period to receive such assistance
- Types of services to be offered
- Who will provide the service(s)
- The process for procuring rental property for clients
- How the Continuum of Care (CoC) Homeless and Housing Alliance (HHA) RRH standards and Housing Focused Case Management standards have been utilized in establishing/operating the program

(10000 character maximum)

**If a section has an asterisk, it is a REQUIRED field.  
If a required field does not apply to your service category, please type "N/A" in the box.**

**There are several sections throughout the application that ask you to download a template and re-upload the file. Please make sure to DOWNLOAD THE ATTACHED TEMPLATE AND RE-UPLOAD THE SAME COMPLETED TEMPLATE.  
If certain formats are required, the section will let you know.**

**\* 1J. For Permanent Supportive Housing Projects and Housing Focused Case Management**

For Permanent Supportive Housing (PSH) Projects and Housing Focused Case Management that supports PSH including the following information:

- How clients will be selected for service(s)
- Types of services to be offered
- How the CoC HHA PSH standards and Housing Focused Case Management standards have been utilized in establishing/operating the program

(1500 character maximum)

**\* 1K. For Homeless Prevention Programs**

For Homeless Prevention Programs:

- How clients will be selected for service (s)
- Types of services to be offered

(500 character maximum)

**\* 1L. For Domestic Violence Services**

For Domestic Violence Services please include the following information:

- How clients will be selected for service (s)
- How will you ensure the safety of those you are providing services to
- Types of services to be offered

(1500 character maximum)

**\* 2A. Evaluation Plan / Logic Model**

Complete the 2019-21 Financially Assisted Agencies (FAA) Evaluation Plan/Logic Model and upload into the designated section.

- Ensure outcomes are SMART (specific, measurable, achievable, realistic, time bound).
- Ensure outcomes are reflective of those stated in the FAA RFP Guidance.

[Click here](#) for the FY2019 FAA Evaluation Plan/Logic Model template and instructions (refer to different tabs).

**NOTE:** Uploaded documents should be in the same format as Evaluation Plan/Logic Model template: **.xls or .xlsx**

Upload File

**\* 2B. Program Evaluation and Best Practices**

How does your agency use program evaluation and best practice program models to develop and implement the programs that you operate?

(1500 character maximum)

**2C. Overall Evaluation Approach**

What is your agency's overall approach to building these practices into your programs?

Please give an example of a change made to an existing program or a time your agency developed a new program based on a best practice or the results of an evaluation.

(1500 character maximum)

**\* 3A. Prior Outcomes**

Discuss prior outcomes and other relevant data that demonstrates success of the services in this proposal.

For PSH include data that can be supported in CMIS:

- The percent of clients that have increased or maintained their income in the last year of the program
- The percent of leavers that exited to Permanent housing
- The percent of returns to homelessness within the last two years

For RRH include data that can be supported in CMIS:

- The percent of clients that have increased or maintained their income in the last year of the program
- The percent of leavers that exited to Permanent housing
- The percent of returns to homelessness within the last two years

For Domestic Violence include data that can be supported by your data management system:

- The percent of clients that exited to safe, violence free housing from housing programs including the type of program (shelter, transitional housing, rapid rehousing)
- The percent of clients that learned strategies to enhance personal safety

(1500 character maximum)

**\* 3B. Data Sources**

Review the data sources provided that demonstrate a need for services in the category you are applying for.

Describe how your proposal will respond to the need demonstrated by the data provided.

(1500 character maximum)

**\* 4A. Data Management for Homelessness Only**

For homelessness category only:

- How does your agency ensure quality data collection, data entry, and reporting for homeless services programs in ClientTrack, the Client Management Information System (CMIS)?
- If your program is not currently participating in ClientTrack, describe your plan for increasing agency capacity to quickly begin collecting and entering data.

*NOTE: All agencies awarded FAA funds must participate in CMIS. All clients served with FAA funds must be entered into CMIS. Funding requires that all clients served be entered and exited in CMIS during the applicable fiscal year. Agencies must execute the required partner and user agreements with Palm Beach County and must participate in the data sharing of CMIS on an ongoing basis throughout the term of their FAA contract in order to maintain eligibility for reimbursement. Provisions are in place within CMIS to protect client confidentiality, yet still report statistical data.*

(1500 character maximum)

**\* 4B. Data Management for Domestic Violence Only**

For Domestic Violence category only:

- How does your agency ensure quality data collection, data entry, and reporting for programs in your data management system?

(1500 character maximum)

**Character maximums have been established for each section. The maximum number of allowed characters is visible under the section. Yes, it does include spaces.**

**\* 4C. Program Changes** Provide an example of program changes your agency has made based on data collected.

For each example, describe briefly:

- How the problem was identified
- What steps your agency took to make the improvement and
- The measurable impacts of these changes.

Examples may come from CMIS as well as other data sources such as participant feedback and staff observations.

(1500 character maximum)

**Make sure to read through the Budget sections very carefully. Don't forget to upload the necessary files BUT please keep your documents as concise as possible.**

**\* 5A. Partnerships** Describe how your agency is part of the larger system of care and/or housing resources for people experiencing homelessness and/or domestic violence. Give an example of how your agency is connected to other organizations that are or have supported your agency's program participants.

(1500 character maximum)

**\* 5B. Collaboration** How will your agency work collaboratively to support exits to permanent housing or other services as needed in a seamless, person friendly way? Describe any key, formal partnerships that are jointly designed with other agencies and indicate whether they are formalized through a Memorandum of Understanding (MOU) or subcontract.

(1500 character maximum)

**\* 5C. Resources** How will your organization continue to address this need (or solve this problem) if current funding ends?

(750 character maximum)

**\* 6A. Proposed Program Budget** Complete proposed program budget using the template provided below. Review the "sample" and "guidelines" tabs provided before completing the template. Ensure the requested fund justifications are complete.

[Click here](#) for FY19 FAA Budget Template.

*NOTE: Please submit budget in one of the following formats: .xls, .xlsx, or .pdf - While .pdf is acceptable, note that if changes must be made, this format will make it more difficult for you to make adjustments.*

Please read through the bottom guidelines prior to completing the template.

Upload File

**6B. Budget Guidelines** Ensure administration expenses are limited to 15%. The Budget Justification must be thoroughly completed. (Please describe in detail each of the line items requested in the budget. Employee positions should include brief descriptions of their duties in the program). If you are charging an indirect/administrative cost rate then you must remove any other line items related to indirect/administrative expenses. If an indirect cost rate is being requested, an approved cost plan from a cognizant agency must be included.

**\* 6C. Total Agency Budget** Total Agency Budget - to be attached to the proposal. The Budget forms that are part of the proposal do not need to be utilized for this budget as it can be in any form, but it should include all agency funding sources as well as expenditures by program.

Please note the additional information below.

Upload File

**6D. Total Agency Budget Guidelines** Ensure FAA requested funding is not more than 25% of the Total Agency Budget.

**\* 6E. Audit Report** Submit most recent audit report.

Upload File

**\* 6E. Audit Report (cont.)** If there were findings, describe corrective actions.

(500 character maximum)

**6F. Year-End Financial Statement and IRS Form 990**

Submit Year-End Financial Statements and IRS Form 990

Upload File

**\* 6F. Year-End Financial Statement and IRS Form 990 (cont.)**

If Year-End Financial Statement and/or IRS Form 990 are not submitted, explain why.

(500 character maximum)

**\* 6G. Unit Cost**

What is your proposed Unit Cost service description?  
What is your proposed Unit Cost of service rate?  
Is this an industry standard? If so, please state source.

**Please note the guidelines below.**

(500 character maximum)

**6H. Unit Cost (cont.)**

Ensure both the unit cost service description and cost rate are clear and accurately calculated.  
Formulas used to arrive at the cost rate should be included.

**\* 6I. FAA Funding**

Is FAA funding being used as match for another funding source? If so please explain.

(500 character maximum)

**Please read through the official proposal authorization section AND the section about sharing your proposal VERY CAREFULLY.**

**\* Scope Of Work Template**

Describe project activities and services and include a timeline and work plan as part of a Scope of Work for the project.  
The scope of work should establish an organized and logical series of project activities, services, and expected results that are specific, measurable, achievable, realistic, and time sensitive.  
Please upload a completed [Scope of Work Template](#) for the project.

Upload File

**\* Partner Letter or MOU**

Please upload a letter of support or MOU from all project partners.  
Each letter of support (or MOU) must include detail regarding:

- Partner roles and responsibilities
- Partner capacity to assist your organization with this project
- Resources the partner brings to the project

Upload File

**Official Proposal Authorization By submitting this proposal, I certify that:**

- I have the authority or I have been given authority to legally bind and represent the organization(s) with which I am associated, to this proposal.
- The information contained in this application is true and correct to the best of my knowledge.
- If I used information that was from a previous grant application, I reviewed and updated it.
- I understand that the submission of information that is not current and valid may nullify my organization's application.
- I am the sole user of the user name and password provided and that I will not share my user name and password.

**Sharing of Proposal**

**Proposers are hereby notified that all information submitted as part of, or in support of, proposals will be available for public inspection in compliance with the Florida Public Records Act.**

Save and Proceed

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## Request Information

\* indicates required field

Your work has been saved, however, you must address the following item(s) before you can submit your application:

- "Sharing of Application" is required.

**NOTE:** If you try to save and proceed in a section without filling out all the required fields, you will get a notice at the top of the screen that will inform you of the required sections still needing a response.

Once all the required questions have been answered, you can then "Save and Proceed" to move onto the next section OR to move onto the final application Review.





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## Review Your Application

Please review your proposal information. If you are not ready to submit your proposal at this time, click the "Save Only" button. The proposal will then be available to edit from the Welcome page. Clicking the Submit button will immediately send the application to Palm Beach County Board of County Commissioners and you will then be unable to perform further editing.

Contact Information

Organization Information

Request Information

Submit Save Only

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The final page will allow you to Review your application. You can either "Save Only" to save your responses and come back to work on the application at a later time OR click "Submit" to submit your application.

Any questions ?

# Information

All questions must be emailed to:

**[CSD-FAARFP@pbcgov.org](mailto:CSD-FAARFP@pbcgov.org)**

All questions and answers will be posted on the FAA website:

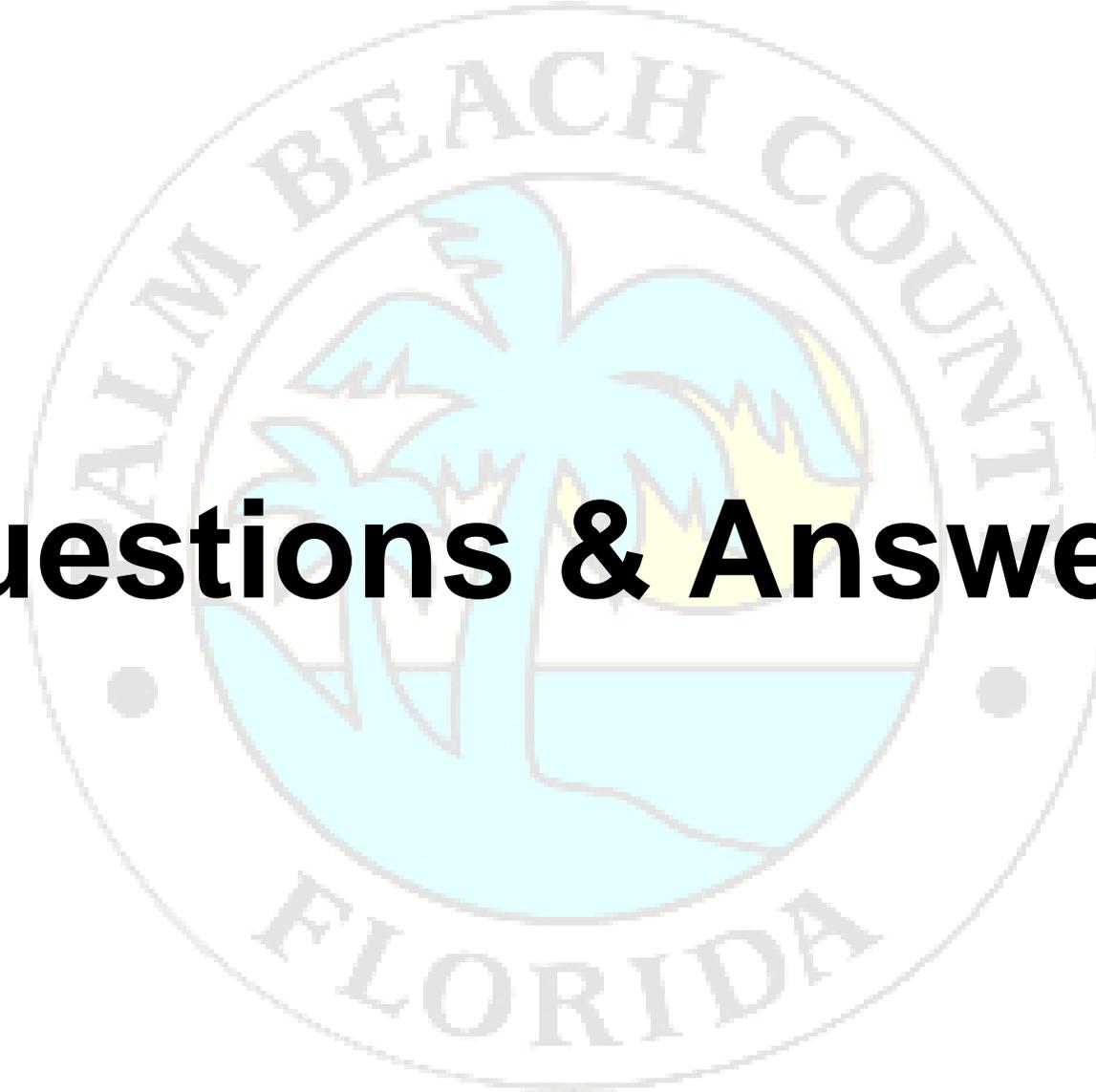
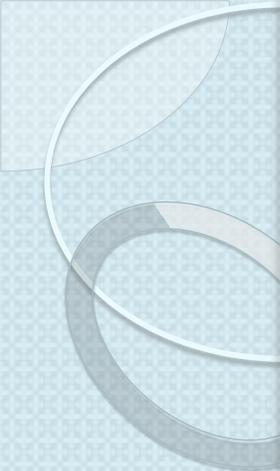
**[http://discover.pbcgov.org/communityservices/financiallyassisted/  
Pages/default.aspx](http://discover.pbcgov.org/communityservices/financiallyassisted/Pages/default.aspx)**

All proposals must be submitted electronically to

**<http://www.cybergrants.com/pbc/rfp2019/>**

by

**Friday, March 30, 2018 before 11:59 PM**



# Questions & Answers

**Remember to like us on Facebook**



**<https://www.facebook.com/pbccsd/>**