

**Nevada County Adult & Family Services Commission
as authorized by the
Nevada County Board of Supervisors**

**Request Proposals for
2022/2023 Community Service Block Grant Funding**

AFSC Mission

“To engage and empower our community to eliminate poverty, to create equity and prosperity, and assist people in achieving self-sufficiency through direct services, advocacy and community partnership”

Program Overview

The Nevada County Adult & Family Services Commission (AFSC) announces a Request for Proposal (RFP) for the Nevada County Community Services Block Grant Funding (CSBG). The AFSC seeks proposals from local non-profit agencies to provide services that will enhance the priority set forth by the Community Services Block Grant Community Action Plan (CSBG CAP) in the area of **Improving Household Income**.

One CSBG award will be funded in the total amount of \$120,000, in support of the mission of the AFSC in order to improve the lives of low-income residents of Nevada County. A single award totaling \$120,000, will be disbursed in the amount of \$46,000 for calendar year 2022 and \$74,000 for calendar year 2023, based on the availability of funds.

Non-Profit organizations may submit an application for CSBG funds.

CSBG Funding

Funding requests are for May 1, 2022 – December 31, 2023. The maximum funds available will be \$120,000, with funds distributed as outlined above. These funds are limited to program support and are subject to the Nevada County Board of Supervisors’ approval and fiscal resources. These funds are to provide direct program support with indirect costs not to exceed 10% of direct program expenses. These funds may not be used to purchase of assets. Funding priorities will be aligned with activities in support of **Improving Household Income** as set forth by the Community Services Block Grant Community Action Plan (CSBG CAP).

CSBG funding must be targeted to very low-income residents as identified by the California Department of Community Services & Development, see ATTACHMENT F – 2021 CSBG Poverty Guidelines (income limits are subject to change). Proposals must meet the priority objective of **Improving Household Income** as outlined in the CSBG CAP. The CSBG CAP may found at https://mynevadacounty.com/DocumentCenter/View/42653/CAP-2022-2023- Nevada-County_Final . Please note that CSBG defines Improving Household Income as those services which directly lead to increased income such as job training and employment placement programs.

A downloadable copy of the proposal application will be available March 8, 2022, at:

<https://mynevadacounty.com/2633/Adult-Family-Services-Commission>. For questions or additional information, contact rob.choate@co.nevada.ca.us

**Nevada County Department of Social Services
950 Maidu Avenue, Nevada City, CA 95959
Phone: (530) 265-1645
rob.choate@co.nevada.ca.us**

**The Application Deadline is April 5, 2022, no later than 3:00 P.M.
Selection process will occur at the April 21, 2022, AFSC meeting
All applicants are encouraged to attend**

Proposal Application Instructions

The proposal application consists of the following:

- Cover Sheet (not to exceed one (1) page)
 - A Proposal Narrative that has two sections: The Organization and the Proposed Project (not to exceed two (2) pages)
 - Attachments – required attachments
 - Attachments A and B are required and may not to exceed one (1) page each
 - Attachments C and D are required
 - Attachment E is required for proposals of services that are aligned with other agencies
- Documents or materials not specifically requested will NOT be reviewed.
- No font smaller than 10 point.
- Incomplete applications will result in proposals not being considered for funding. All required attachments must be submitted as part of the application.

E-mail one (1) PDF version of your Proposal Application. The proposal must include the signature of the Authorized Representative for the agency submitting the application.

- **E-Mailed PDF applications must be received by April 5, 2022, no later than 3:00 P.M.**
- Any applications other than e-mailed versions will **not be accepted.**
- Any applications received after the due date will **not be accepted.**
- Submit applications to rob.choate@co.nevada.ca.us
- Selection process will occur at the April 21, 2022, AFSC meeting, all applicants are encouraged to attend.

Nevada County Department of Social Services
950 Maidu Avenue, Nevada City, CA 95959
Phone: (530) 265-1645
rob.choate@co.nevada.ca.us

Cover Sheet

I. Applicant Information:

Submitting Organization Phone Number

Physical Address City State Zip

Mailing Address City State Zip

Contact Person Phone Fax

Job Title E-mail address

Authorized Agency Representative, if different from Contact Person:

II. Project Information:

Project/Program Title

Type of Funding Requested: CSBG

Requested amount may not exceed \$120,000.

Listed below are the required attachments to the project application. Proposals will not be considered if the following attachments are not included with the application:

- Attachment A** - Itemized Agency and Proposed Project Budget
- Attachment B** - Proposed Project Budget Narrative
- Attachment C** – Most recently filed copy of IRS 990
- Attachment D** - Attach your 501 (C) (3) status verification and/or related documentation (*current* IRS tax-exempt status classification letter)
- Attachment E** – Current CSBG Poverty Guidelines are to be used to determine the targeted population (low-income) for the use of funding as published by the California Department of Community Services & Development..

If awarded, your agency will be required to enter into a County Funding Agreement and must comply with all of the following requirements:

- Insurance Documents (proof of):
 - Up-to-date Commercial General Liability, minimum of two million dollars coverage (certification and additional insured endorsement with matching policy numbers)
 - Up-to-date Auto Commercial, minimum of one million dollars coverage (certification and endorsement with matching policy numbers)
 - Workers’ Compensation certification (indicate if not applicable)
 - Errors and Omissions Insurance or Professional Liability insurance certification, minimum of two million dollars coverage
 - Primary and Noncontributory - Other Insurance Condition" Endorsement page showing the policy number
 - Notice of Cancellation" page showing policy number and listing County of Nevada to receive notice
- One of the following Financial Statements:
 - Federal Single Audit, if applicable
 - Professionally prepared audit, if available
 - Most current Profit and Loss statement
 - Most current Balance Sheet
 - Copy of most recently submitted tax return
- Contract exhibit “A” & “B” attached/

PROPOSAL NARRATIVE

This Proposal Narrative has two sections: 1) The Organization and 2) The Proposed Project. Please read the instructions on the left hand side of the chart and type your responses in the corresponding box to the right. The boxes will expand as you type. Please remember that the total Proposal Narrative **cannot exceed two (2) typed pages**.

I. The Organization (Please use 10 point font or larger)

State your organization's mission	
Describe your organization's short and long term financial solvency	

II. The Proposed Project/Program (Please use 10 point font or larger)

<u>Community Impact:</u>	
<ul style="list-style-type: none"> • What will change for low-income individuals/families to improving household income as a result of your project? 	
<u>Project/Program Description:</u>	
<ul style="list-style-type: none"> • Specific service(s) that will be provided • Specific population to be served • Geographic area(s) to be served • Estimated number of people that will be served/impacted 	
<u>Project/Program Objectives:</u>	
<ul style="list-style-type: none"> • List the objectives that will lead to the changes you envision. • Include the specific activities that will be performed to meet each objective. 	
<u>Project/Program Results:</u>	
<ul style="list-style-type: none"> • How will you show success in meeting these objectives? • What will be measured? • How will it be measured? List any formalized programs or tools you will use. • How will you verify the Low-income status of each individual served (Refer to ATTACHMENT E) 	

CHECKLIST – Before you submit your proposed project application, did you remember to:

- Complete the one (1) page Cover Sheet
- Have your Authorized Representative sign the Cover Sheet
- Ensure the Proposal Narrative does not exceed two (2) typed pages
- Complete and submit required attachments A, B, C and D
- E-mail a PDF version (1) copy of your Proposal Application. **The application must be received no later than 3 P.M. on April 5, 2022. An e-mail receipt will be sent to you upon timely submission.**

Signature of Authorized Representative:

I hereby certify that information in this application is true and correct and reflects our agency's intended use of funds.

Name and Title:

Signature: _____ **Date:** _____

Community Services Block Grant (CSBG) Application

Evaluation Criteria for CIF Proposals 100 Total Possible Points

I. **Proposal Summary** (Points possible-10)

The summary of the proposed program:

- A. Clearly describes an overview of the proposed program,
- B. Describes the services and resources intended for program participants,
- C. Describes the anticipated participant/family outcomes,
- D. Is reasonable in its scope and design, and
- E. Does not exceed two pages in length

II. **Proposal Responses**

1. Statement of Need and Description of Target Group and Area: (Points possible - 15) The description of the target group and target area was complete, in-depth and demonstrated extensive experience working with this proposed target group or in the proposed target area. Proposer included a description of all the conditions they hope to ameliorate. The response demonstrates an awareness of other organizations serving the same target group/communities. Sources of all numerical data presented (e.g. census, public agency) or unsupported general statements defining strategies or target groups/target areas (e.g. reports, experts) were identified.

2. Linking Program Goals with Activities and Services: (Points possible - 15) Proposer described its program goals and listed all the proposed services and activities intended to achieve the stated goals. The services and activities listed are reasonably linked to proposer achieving the described goals. Proposers not requesting support services have provided a reasonable description of how support services will be provided to vulnerable and in-crisis households, when indicated.

3. Service Delivery System (Points possible - 15) The proposer presented a timeline of how participant households will be stabilized and encouraged to improve household income in order to establish self-sufficiency. Many factors contribute to a household's ability to provide for oneself and one's family. In addition to employment, measures to improve household income in order to achieve self-sufficiency may include seeking and maintaining housing, or the ability to maintain a healthy, stable and independent life. Appropriate services and supports are available to individuals with these needs. Proposer described its process for letting residents of proposer's target community know that the proposed services are available at their site.

III. **Budget Item Justifications, Accounting System and Fiscal Control:** (Points possible – 5)

The proposer described the necessity and purpose of each of the proposed CIF funded Personnel Costs, other costs or direct participants costs as noted on Attachments A & B.

IV. **Experience:** (Points possible – 10)

The proposer described a history of successful outcomes operating similar programs for the same target groups and in the same geographic areas targeted in the proposal, or convincingly described its ability to do so.

V. **Required Documentation:** (Points possible – 20)

Proposer has completed the Application Cover Sheet and Attachments A-F and have assembled them in the proposal order as noted on page 5 of the RFP.

VI. **Past Performance/References:** (Points possible – 10)

Past performance with Nevada County, or the required qualifying references for proposing organizations with no recent record of past performance.

ATTACHMENT A

(Required)

Agency and Project Budget

Directions: The Agency and Project/Program Budget should not exceed one page and should follow the format below. Please indicate the dates covered by your annual Agency Budget as different fiscal calendars use different time frames (i.e., some fiscal calendars start January 1st, some start July 1st and others start October 1st).

Annual revenue to the Agency for the time period starting _____ and ending on _____:
(month/year) (month/year)

Agency Revenue Source	Amount
Government grants	
Foundations	
Corporations	
United Way	
Individual contributions	
Fundraising events and products	
Membership income	
Investment Income	
Other (specify):	
Total Revenues	

Annual expenses for the Agency for the time period starting _____ and ending on _____:
(month/year) (month/year)

Agency Expenses	Amount
Salaries and Wages	
Benefits	
Consultants and professional fees	
Travel	
Equipment	
Supplies	
Rent and Utilities	
In-kind expenses	
Other (specify):	
Total	

Please provide a budget for the proposed project/program and amount of matching funds from the agency.

Project/Program Expenses	Amount Requested from CSBG Award	As applicable, show amount to be funded from other sources. List the amount and source.	Total Budget from all sources
Salaries and Wages (Program Only)		\$ from	
Benefits (Program Only)		\$ from	
Consultants and professional fees		\$ from	
Travel		\$ from	
Equipment		\$ from	
Supplies		\$ from	
In-kind expenses		\$ from	
Other (specify):		\$ from	
		\$ from	
		\$ from	
Total – may not exceed \$120,000			

ATTACHMENT B

(Required)

Proposed Project/Program Budget Narrative

Directions: The Budget Narrative should not exceed one page and should follow the format below.

<p>Salaries and Wages (Program Staff Only)</p> <p>List each position by title and name of employee, if available. Show annual salary rate and the percentage of time to be devoted to the project.</p>	
<p>Benefits (Program Staff Only)</p> <p>Fringe benefits should be based on actual known costs or an established formula.</p>	
<p>Consultants and Professional Fees</p> <p>For each consultant enter the name, if known, service to be provided, hourly or daily fee (8-hour day), and estimated time on the project.</p>	
<p>Travel</p> <p>Itemized travel expenses of project personnel by purpose (i.e., staff to training, home visits, community outreach, etc).</p>	
<p>Equipment</p> <p>List non-expendable items that are to be purchased. Explain how the equipment is necessary for the success of the project.</p>	
<p>Supplies</p> <p>List items by type (office supplies, postage, training material, copying paper, and other expendable items) and show the basis for computation. Generally, supplies include any materials that are expendable or consumed during the course of the project.</p>	
<p>Other (specify)</p>	
<p>Total</p> <p>The total is the sum of the requested amount not to exceed \$120,000.</p>	

ATTACHMENT C
Most recent copy of IRS 990
(Required)

ATTACHMENT D
(501 (C) 3 Status)
(Required)

ATTACHMENT E

**2021 Community Services Block Grant (CSBG)
Income Eligibility Chart**

Persons In Household	Annual Income
1	\$25,760.00
2	\$34,840.00
3	\$43,920.00
4	\$53,000.00
5	\$62,080.00
6	\$71,160.00
7	\$80,240.00
8	\$89,320.00
For families/households with more than 8 persons, add \$9,080 for each additional person.	

**EXHIBIT “A”
SUBRECIPIENT SERVICES AGREEMENT
CSBG FUNDING REQUIREMENTS, TERMS AND CONDITIONS**

Purpose

The purpose of this Agreement is to provide funding to the Subrecipient so that Subrecipient may provide _____ to ameliorate the causes of poverty in the Nevada County service area. Funding for this Agreement is provided by the United States Department of Health and Human Services through the Community Services Block Grant (CSBG) Program (42 U.S.C. § 9901 et seq).

Specific Terms

- A. In conducting activities pursuant to this Agreement, Sub-recipient specifically agrees to and certifies that it will comply with applicable provisions of 42 U.S.C. § 9901 *et seq.*, and 45 C.F.R. Part 96; the administrative requirements specified in subparts A, D, E and F of 45 CFR 75; and all other applicable federal, state, and local laws, rules, regulations, administrative procedures, guides, manuals, program rules, regulations, and definitions, and any amendments thereto, in performing its obligations under this Agreement.
- B. In providing services or conducting activities with funds provided through this Agreement, Sub-recipient agrees to abide by the applicable certifications required by HHS identified in 42 U.S.C. § 9908(b).
- C. Sub-recipient acknowledges and agrees that it may not use any funds provided through this Agreement for the purchase or improvement of land, or the purchase, construction, or permanent improvement (other than low-cost residential weatherization or other energy-related home repairs) of any building or other facility, without the express written consent of the CAA.
- D. In making any procurement or entering into any contract that requires the expenditure of funds provided pursuant to this Agreement, Sub-recipient shall adhere to the 45 CFR 75.327 -75.335 and CAA policies regarding procurement.

Administration of Funds

- A. Funding shall be paid to Sub-recipient as a reimbursement for authorized expenses incurred pursuant to this Agreement and in accordance with the fiscal policies and procedures of the Commission. Sub-recipient must maintain and implement written procedures to minimize the time elapsing between the transfer of funds to Sub-recipient and Sub-recipient’s issuance or redemption of checks, warrants, or payments by other means for program purposes.

(Program Details to be entered based of AFSC Sub-recipient selection)

Grant Contracts and Amendments

All grant contract agreements will be administered in accordance with applicable Federal and State rules and regulations. The contract outlines the legal requirements and agreements between the County of Nevada and the grantee, Gold Country Services.

The funding cycle for CSBG is on the calendar year (January 1-December 31), to coincide with reporting contracts on an annual basis. The contract is effective on the date of the final signature by the County of Nevada.

A grant contract amendment must be processed anytime a change needs to be made to the language/funding of an existing contract. Amendments are required to add a budget line item, extend the term of the agreement, and to increase/decrease the total contract award.

Quarterly Reporting and Reimbursement

No later than the 15th of the month following the end of each quarter, Subrecipient shall provide County with a quarterly invoice and report of expenditures along with the programmatic quarterly report. The report shall be submitted to County as stated in Exhibit B. After the report is submitted and approved, the County will issue reimbursement to Gold Country Services for the most recent quarter.

The County shall provide the quarterly reporting template for use by Subrecipient. The designated quarterly report shall include all demographic data, program outcome indicators and data sources for collection of outcomes. Failure to provide timely and adequate quarterly reports, will inhibit Contractor's ability to draw down funds.

Reports are due on April 15th, July 15th, October 15th and January 15th.

Unallowable Activities

The following uses are unallowable for CSBG funds:

1. CSBG funds may not be used for the purchase or improvement of land, or the purchase, construction or permanent improvement (other than low-cost residential weatherization or other energy-related home repairs) of any building or other facility.
2. Leasing of space, buildings and/or other assets not associated with a CSBG purpose or allowable activity.
3. Participation in any partisan or nonpartisan activity or any political activity in an election for public office and activities to provide voters and prospective voters with transportation to the polls or similar assistance in connection with an election, and any voter registration activity with CSBG funding.

Funding Termination and Reduction of Funding

The County may reduce or terminate CSBG funding for a grantee if the County determines that cause exists for such termination or reduction as outlined in the County's standard agreement to include:

- A statewide redistribution of funds
- The failure of the grantee to comply with the terms of an agreement or a state plan, or to meet a state requirement.

Retention

Contractor shall retain all books and records pertaining to this contract which must be retained for at least five (5) years from the close out date of the CSBG contract with the California Department of Community Services and Development (CSD).

EXHIBIT "B"
SCHEDULE OF CHARGES AND PAYMENTS
GOLD COUNTRY SERVICES

Subject to the satisfactory performance of services required of the Contractor pursuant to this Agreement, and the terms and conditions set forth in this Agreement, the County shall pay Contractor a maximum amount not to exceed \$120,000 for the entire contract term of May 1, 2022-December 31, 2023. Of this amount, \$46,000 is allocated for May 1, 2022 through December 31, 2022 and \$74,000 is allocated for January 1, 2023 through December 31, 2023. The contract maximum is based on the following project budget:

Program Expenses	Amount Awarded
Total	\$120,000

Should modification or changes to the budget line items of more than 5% of the total grant amount be needed, a written request for modification shall be submitted for approval to the Director of Social Services or to his/her designee. The County, at its sole discretion, shall determine if the change will continue to meet the contract objectives and approve or deny the request.

The contract maximum is contingent and dependent on the County receiving anticipated annual CSBG program funding. In addition, this Agreement is subject to any additional restrictions, limitations or conditions enacted by or imposed by county, state or federal governments that may affect the provision, terms or funding of this Contract in any manner.

All payments shall be made on a reimbursement basis for expenses incurred by Contractor for program expenses. Payment shall be made within thirty (30) days of receipt and approval of invoice and any required report needed for that period. The County shall retain the final 10% of the total contract amount to be paid to Contractor upon submission of all grant required reporting to the County. All invoices are due to the County the 15th of the month following the end of the quarter.

The Contractor shall submit invoices/ reports to:
Nevada County Department of Social Services
Attn: Fiscal Staff/Admin Staff (CSBG Funding)
950 Maidu Avenue
Nevada City, California 95959