



Children's Board
HILLSBOROUGH COUNTY

www.ChildrensBoard.org

**Request for Applications
Technical Assistance Grants – Cycle One
Fiscal Year 2017**

RFA Designation: Pro 2017 - 01

Issue Date: October 3, 2016

Total Allocation: \$100,000

Deadlines:

**Funding Information Workshop
October 24, 2016 at 10 AM**

**Questions Due:
October 26, 2016 by 4:00 PM**

**Applications Due:
November 14, 2016 by 4:00 PM**

**Kelley Parris, Executive Director
Doretha Edgecomb, Board Chair**

**For further information, please contact:
Irene DeRosa Hill, Project Manager
hilli@childrensboard.org
(813) 204-1758**

PART 1 – GENERAL INSTRUCTIONS

1.1 INTRODUCTION TO THE CHILDREN’S BOARD OF HILLSBOROUGH COUNTY

In 1988, Hillsborough residents agreed that improving supports and services to our county’s children and families was a major priority for our community’s future. Thus, the Children’s Board was established in 1989 as a Special Taxing District allowing a levy not to exceed 50 cents per \$1,000 of the assessed property tax.

Strategic investments in the community include developing local prevention and early intervention services; convening community partners to work on shifting outcomes to improve the lives for children and their families; providing venues for community engagement and advocacy efforts; maximizing funding revenues through strategic grant making principles and leveraging strategies; developing innovative services and supports; and, catalyzing the research and community perspective to promote learning, improve professional training, and enhance service systems.

Our Vision

By the year 2020, Hillsborough County will be recognized as one of the top places in the nation to raise children.

Our Mission

The Children’s Board invests in partnerships and quality programs to support the success of all children and families in Hillsborough County.

Technical Assistance Grants

Awarded to build capacity through a variety of activities in the areas of Governance, Management, Finance, Fund Development and Program Improvement.

To be eligible an Applicant must be a not-for-profit corporation that 1) have an overall budget of \$2 million or less, 2) serves children and families in Hillsborough County, and 3) were not awarded Technical Assistance Grants during FY 2016 (October 1, 2015 – September 30, 2016).

1.2 TIMELINE AND SUMMARY (DATES SUBJECT TO CHANGE)

[This is a summary only and does not alter the requirements contained in other sections of this Request for Applications procurement document.]

Date	Description
October 3, 2016	Request for Applications released and posted on www.childrensboard.org Click on the Budgeting tab for Funding Opportunities.
October 24, 2016	Funding Information Workshop 10:00 AM Children’s Board 1002 E. Palm Avenue Tampa, FL 33605
October 26, 2016	Deadline for written questions by 4:00 PM. Please email questions to Irene DeRosa Hill , Project Manager at hilli@childrensboard.org Please use email subject line: Pro 2017-01 Technical Assistance Funds – Cycle One
October 28, 2016	Answers to Questions posted on www.childrensboard.org by 4:00 PM.
November 14, 2016	Submission deadline is 4:00 PM (Children’s Board’s Wall Clock) at Children’s Board of Hillsborough County — Front Desk Reception. See Section 2.5 for label and address requirements. Applicant will use Part 2 to submit an Application. Responses may be delivered in person, courier, or US mail. <u>No facsimile or emailed Applications will be accepted.</u>
Week of November 29, 2016	Community Review Team will evaluate all Applications and determine the most qualified Applicant(s) using scoring criteria on Part 3 Rating Sheet . Contracts will be approved based on completeness and most qualified Applicants.
Week of December 12, 2016	Grant Awards are Announced.
January 3, 2017	Letter of Agreement contract begins with selected Applicants.

1.3 DEFINITIONS

1. “**Children’s Board**” or “**CBHC**” means the Children’s Board of Hillsborough County, a special district political subdivision of the state of Florida. The Children’s Board of Hillsborough County is not a corporation. All records submitted to the Children’s Board become public records under Chapter 119, Florida Statutes, unless exempted by state law. The Children’s Board is also subject to the Florida’s Sunshine Law; see Chapter 286, Florida Statutes.
2. “**Cost Reimbursement**” means CBHC reimbursement of expenses actually paid and disbursed by the Grantee after Services have been performed.
3. “**Grantee**” means the selected Applicant(s) awarded a contract with the Children’s Board to provide the Services to build Grantee capacity to operate effectively over the long term.
4. “**Project Manager**” means **Irene DeRosa Hill**, Community Service Program Manager.
5. “**Application**” means the written application submitted by an Applicant in response to this procurement document and includes any written clarifications submitted by an Applicant in response to a written request from the Project Manager.
6. “**Applicant**” or “**You**” or “**Agency**” means the eligible not-for-profit corporation that submits or intends to submit an Application to the CBHC pursuant to this procurement document.
7. “**RFA**” or “**Request for Applications**” or “**Procurement Document**” means this Request for Applications, whose RFA designation is shown on the first page of this RFA, and includes any addendum and the answers to Applicant’s questions.
8. “**Services**” or “**Activities**” or “**Project**” or “**Program**” means all labor, equipment, and materials necessary for the selected Applicant to build capacity to operate effectively over the long term as described in Applicant’s Application and carried out as required by procurement document.
9. “**Registration**” means training event registration fees or cost associated with registering for training event not to exceed \$500.00 dollars.

1.4 SCOPE OF SERVICES

Introduction:

Technical Assistance Grants are intended to assist not-for-profit corporations in building their capacity through strategic activities to strengthen their ability to operate effectively over the long term. Appropriate capacity-building Activities (also called the Services) should focus on improving internal infrastructure in the areas of **Governance, Management, Finance, Fund Development and Program Improvement**.

Organizations awarded Technical Assistance Grants during FY 2016 (October 1, 2015 – September 30, 2016) are not eligible to apply for funding under this Request for Applications.

Appropriate activities include, but are not limited to, technology upgrades, staff development/training, the purchase of materials and equipment, marketing, board development/training, strategic, and sustainability planning.

Technical Assistance Funds will not cover salaries, direct services, grant writers, construction, renovations, or cost related to start-up (Program or Agency) activities.

Applications for **one-time, time-limited grants** will be considered with a maximum award of \$5,000.00 dollars. Request can be considered for up to \$500.00 dollars per Agency to cover the cost of registration fees for training events, or conference attendance.

A **Funding Workshop** will be hosted by the Children's Board to explain the Application process in detail on:

Date	Time	Location
October 24, 2016	10:00 AM	Children's Board 1002 E. Palm Avenue Tampa, FL 33605

Attendance at the workshop is not mandatory but **highly recommended**. This event is considered the most efficient process of obtaining answer to questions from the subject matter experts on the Technical Assistance Grants process. A copy of the presentation will be posted on the Children's Board website at www.childrensboard.org.

1.5 **EQUAL OPPORTUNITY AND NONDISCRIMINATION**

The Children's Board encourages the participation of minority faith-based and grassroots organizations in all contracts. No person or legal entity will be excluded from participation in, denied the benefits of, or otherwise discriminated against in connection with the award and performance of any Children's Board procurement on the basis of race, color, religion, national origin, age, gender, sexual orientation, disability or marital status.

1.6 **NO ORAL INTERPRETATIONS**

Interpretations, explanations, corrections and changes in this Request for Applications will be made only by written answers to Applicants' questions submitted prior to the deadline for such questions and/or by addendum.

1.7 **QUESTIONS FROM APPLICANTS AND CHILDREN'S BOARD'S ANSWERS**

Answers to Applicants' written questions will be made in writing and posted on CBHC website as described in Section 1.2. Should any questions or response require revisions to the Request for Applications, such revisions will be by addendum only and furnished by posting on CBHC website.

1.8 **ADDENDUM AND INCOMPLETE APPLICATIONS**

Applicants are responsible for complying with any addendum issued. **FAILURE TO RESPOND TO ANY ITEM INCLUDING ANY REQUESTED INFORMATION, OR FAILURE TO FOLLOW THE PROCUREMENT DOCUMENT MAY RESULT IN THE SUBMISSION OF AN INCOMPLETE**

APPLICATION AND MAY RESULT IN DISQUALIFICATION OF THE APPLICATION FROM FURTHER CONSIDERATION.

1.9 RIGHT TO SEEK AND CONSIDER CLARIFYING INFORMATION

The Children's Board may seek clarifying information regarding any Application. Such clarifying information shall be provided by the Applicant in writing.

1.10 REJECTION OF APPLICATIONS OR APPLICANTS

Children's Board reserves the right to reject all Applications with or without cause, to waive technicalities or informalities, and/or to accept an Application which best serves the interests of the Children's Board as described in this procurement document. Cost of preparing an Application is an operational cost of the Applicant and shall not be passed on to or incurred by CBHC.

Any Application determined to be nonresponsive to any specification or requirement of this RFA, including instructions governing submissions of Applications, may be disqualified without evaluation. An Applicant who violates the provisions of this procurement document may be rejected from the selection process.

1.11 RESTRICTED COMMUNICATIONS

Communication with Children's Board personnel and/or Children's Board's Board members, other than **Ms. Irene DeRosa Hill, Project Manager**, regarding the Application, from the date the RFP is issued and the date of the awards announcement may result in rejection of such Application.

1.12 COST REIMBURSEMENT PAYMENTS

Awarded organizations will be paid on a Cost Reimbursement basis. This will require applying organizations to have the financial resources available to cover all operating expenses prior to receiving payment from CBHC.

1.13 CHILDREN'S BOARD'S CONTRACT

By submitting an Application, the Applicant agrees that, if the Children's Board selects such Applicant to perform the Services, the Applicant will, upon such selection, execute a standard Children's Board Letter of Agreement. Execution of the **Letter of Agreement** will be contingent on availability of funds.

1.14 AWARD OF CONTRACT

The contract for the Services will be awarded to the Applicant determined in writing to be in the best interests of the Children's Board. No contract shall exist between the Children's Board and the selected organization until the written contract is signed by the Children's Board and the selected organization. The Children's Board reserves the right to negotiate the revision of the scope of Services with the successful Applicant or Applicants as determined necessary in the best interests of the Children's Board.

The Children's Board reserves the right to make partial awards that fund only certain elements or components of an Application when determined to be in the best interest of the Children's Board.

1.15 PROHIBITIONS ON APPLICANTS WHO ARE FORMER CBHC EMPLOYEES AND BOARD MEMBERS

For a period of two years from the date a Children's Board employee or Board member ceases his/her employment or Board member duties with CBHC, the CBHC will not award a consulting or services contract to that individual.

PART 2 – APPLICATION FORMAT AND GUIDELINES

2.0 The Application cannot exceed 3 pages (excluding the cover page and required attachments). The following must be included:

- **Cover Page**
- **Concept Paper (3 page limit)**
- **Required Attachment: Budget and Narrative Form**
- **Relevant attachments such as quotes, and consultant scope of service and resumes, may be included if applicable.**

Submission must be on a Microsoft Word document with:

- 1 inch margins on all sides,
- 12 point font (Arial, Times New Roman or Cambria)
- All pages must be numbered.
- The required attachment format should not be altered, edited or changed;
- Budget Detail and Narrative Form are in Excel format.
- One (1) electronic copy of the Application must be submitted on a CD ROM or a USB Drive in Microsoft Word format for all documents except Attachment 1A (Budget) is in Excel format.

Submit four (4) identical copies, including attachments.

- If the original contains color the copies must also be in color.
- One of the four copies must have original signature by the Applicant.
- The three other copies are to be identical except they may contain a copy of the signature page.

2.1 APPLICATION COVER PAGE

The cover page of the Application must include the following:

- Organization or Company Registered Name
- Address
- Telephone
- Website (if available)
- Executive Director/CEO Name
- Executive Director/CEO contact information including email and telephone number
- Full name, and contact information including email and telephone number for the person with whom the CBHC should communicate regarding the Application.
- Technical Assistance Project Name and Number (see first page of this Procurement Document)
- Amount of applicant's total agency budget for most recent fiscal year
- Amount of funding requested

2.2 CONCEPT PAPER (3 PAGE LIMIT)

Project Summary – Provide a summary of the amount and purpose of the request, how the Applicant plans to use the requested funding, who will benefit, and the expected impact/outcome. Address how the Project will enable the Applicant to increase capacity through strategic activities that strengthen its ability to operate effectively over the long term and how this supports the overall vision and mission of the CBHC.

Organizational Capability – A major factor in the success of any project is the capability of the organization responsible for the implementation. Provide relevant information in the following areas that demonstrates the Applicant’s capability to carry out the objectives and activities described in the Application:

- Applicant’s History (include established date if appropriate) and Mission;
- Background and experience of Applicant’s Senior Staff listed by name and title, indicate if paid or volunteer;
- Financial capability to manage this Project, including cost reimbursement for expenses;
- Describe how the proposed Project will impact the Applicant and its long term viability;
- If the Applicant is proposing using a consultant or vendor to implement this Project, provide documentation of relevant background and experience;
- List of Board of Directors (if applicable) and contact information for chairperson.

Implementation Plan and Timeline – Provide a detailed implementation plan and timeline for this Project. All technical assistance projects must be completed within six (6) months. Letters of Agreement will begin on **January 3, 2017** and all activities must be completed by **June 30, 2017**.

2.3 BUDGET AND BUDGET NARRATIVE INSTRUCTIONS (ATTACHMENT 1)

The budget (Attachment 1) summarizes the revenues and expenditures for the project proposed in your Application. Verify that the Agency and Program name match the information provided on the Applicant’s Cover Page. The contract period for this Technical Assistance award will be **January 3, 2017 – June 30, 2017**.

Technical Assistance grants are awarded on a cost-reimbursement basis: You must spend the money for the authorized purchases and submit paid receipts or invoices to the CBHC for reimbursement. If you are requesting technical assistance funds to support the cost of attending a conference or training event, the maximum request is \$500 and CBHC funds may only be used to pay for registration.

The Budget has three columns:

- Column 1 (left side): includes the Total Program Budget for the proposed project

- Column 2 (middle): details the funds you are requesting in this Application from the Children's Board for this project.
- Column 3 (right side): The Budget Narrative is the agency description of how the total program budget amounts were determined for each line item. Use the Budget Narrative to describe the revenues and expenses in detail. Describe how the figures were calculated and what items or services will be purchased with the dollars budgeted. Quotes and/or estimates that support your cost should be submitted as attachments to your Application, if applicable.

A. Revenues:

Include all funding for the project you are proposing. In Column 1 titled, "Total Program Budget", indicate all sources of revenue. List the CBHC funds requested in this application funds on Line 1. Line 2 should include all other sources of funds. These funds could be from individuals, corporations or businesses, foundations and trusts, special fund-raising events, etc. In column 2, list the CBHC funds being requested in this Application (line 1)

In the budget narrative, start by explaining these sources of revenue and indicate whether funds are committed or anticipated (i.e., fund raising), and the timeframe the funds are available.

Sub-total and Total Revenues lines are automated. **DO NOT CHANGE.**

B. Expenditures:

- Column 1 should include all expenditures for the total project you are proposing in your Application.
 - Column 2 includes all the expenditures for the CBHC funds you are requesting.
1. **Other Contractual Services:** List costs of services rendered to the project by consultants and other independent contractors. Contracted services are primarily used for one-time or time-limited activities. Define the contracted service in the narrative section, including a description of the service or deliverable and proposed fee. Attachments such as quotes, scope of services and consultant resume should be submitted with the Application, if applicable.

The Subtotal Contractual Services line is automated. **DO NOT CHANGE.**

2. **Facility Rental:** Facility rental cost for training or other event related to the project you are proposing.

The Subtotal Occupancy Cost line is automated. **DO NOT CHANGE.**

3. **Local Travel (Mileage):** Cost of travel in Hillsborough County. Describe the estimated miles, rate paid (up to the federal rate - see www.gsa.gov for current rate), for who and how it is related to this project.

4. **Conference Registration Fee:** Include the name of the conference, registration cost and who will be attending. Attach a copy of the brochure or agenda as an attachment to the application, if available.
5. **Transportation for Clients:** Include vehicle expense, vehicle rental, driver, bus passes, cab vouchers, and/or any other expense to transport clients to services or events.
6. **Rent & Lease/Equipment:** Include the rental cost for equipment. Briefly describe the cost and how it will be used in this project.
7. **Insurance:** Include the cost of insurance requested as part of this project. Indicate the type and term of coverage.
8. **Postage:** Explain how the amount was determined and the purpose of mailing items.
9. **Printing & Copying:** Include outside printing cost and briefly describe specific items to be printed.
10. **Advertising:** Include the cost of advertising related to the organization and briefly describe commercial ads to be purchased/or what items will be purchased.
11. **Outreach:** Include advertising for program activities or events, purchases of give-away items for outreach events, and vendor fees. Include a description of where the ads will be purchased and/or what types of items will be purchased and for what purpose.
12. **Membership/Subscriptions/License:** Include items that support and directly relate to the project. Be specific with titles and if purchased for the agency or a staff member.
13. **Fingerprint & Background Screening:** Include costs for staff and volunteers as related to this project only.
14. **Information Technology Expense:** Include IT expense for data systems, servers or other organizational IT infrastructure. Provide detail of what is being purchased and how the amount was determined.
15. **Office Supplies:** Include consumable staff supplies. Provide detail of what will be purchased and how the amount was determined
16. **Computer Supplies:** Include computers, software, printer ink and other computer supplies. Provide detail of what will be purchased, how the amount was determined, and if for staff or community use. Attach quotes or estimates to

support your cost as attachments to your application, if appropriate.

- 17. Operating Supplies:** Include consumable supplies that are not educational, office or computer supplies such as program cleaning supplies, paper products, and supplies for drug screening clients. Provide detail of what will be purchased if known and how the amount was determined in the budget narrative.
- 18. Educational/Curriculum Supplies:** Include all supplies that staff or clients use during program activities (these are items that do not go home with clients or participants). This includes books, curriculum, etc. Provide detail of what will be purchased and how the amount was determined.
- 19. Evaluation Supplies:** Include tools and/or questionnaires purchased in order to evaluate the program and/or participants in this line. Provide detail of what will be purchased and how the amount was determined.
- 20. Training Supplies:** Include the cost of supplies when the agency is providing the training for the community, program participants or staff members. Provide detail of what will be purchased and how the amount was determined in the budget narrative.
- 21. Client/Participant Supplies:** Includes program materials and items given to the client to take with them in this line. Examples are educational toys, educational materials, gift cards, snacks, back packs, and basic needs items. Provide detail of what will be purchased, how the amount was determined, and how it supports the program/curriculum.
- 22. Client/Participant/Community Activities:** Include items purchased for group or community activities including events with volunteers in this line. Examples are food, volunteer stipends, items for events, and the cost for field trips. Describe the kind of activity, how many, and estimated cost per each item/activity. Provide detail of what will be purchased and how the amount was determined.
- 23. In-Kind Expense:** Include all services and items donated to the program except in-kind rent in this line. List each type separately, for example, volunteers, donated goods, food, etc.

The next two lines, "Subtotal Other Operating Cost and Total Operating Expenditures are automated. **DO NOT CHANGE.**

- 24. Capital Outlay:** Includes capital expenditures for property used in performing Services under the program. Such items must have a useful life of one year or more and a cost of \$5,000 or more. The Children's Board will not fund real property acquisition or building construction. Capital expenditures should be individually listed in the narrative with the estimated price per item. The agency must maintain insurance on the full insurable value of capital goods purchased with funds

provided by the CBHC. At the termination of the agreement for services, the CBHC reserves the right to recover fixed assets purchased with CBHC funds. Capital outlay costs are not included when admin/indirect costs are calculated.

The next two lines, "Subtotal Capital Outlay and Total Expenditures are automated. **DO NOT CHANGE.**

25. Excess (Deficit): Difference between total revenue and total expenditures. (All Children's Board Budget Request columns must be in balance – no excess or deficit is allowed.)

2.4 SIGNATURE PAGE AND SUBMISSION REPRESENTATIONS

The Applicant proposes to provide the Services in accordance with the terms specified in the Request for Application

Signature(s) – The original Application is to be signed by an official/individual who is legally authorized to bind the Applicant.

Authorized Signature:	
Printed Name and Title:	
Date:	

2.5 SUBMISSION PROCESS

Applications must be delivered in person, courier, or US mail. No facsimile or emailed Applications will be accepted:

The outside envelope shall be clearly labeled:

Pro 2017 - 01
Technical Assistance Grants RFA - Cycle 1

Irene DeRosa Hill, Project Manager
Children's Board of Hillsborough County
1002 E. Palm Avenue
Tampa, FL 33605

PART 3 – Pro 2017 - 01 Technical Assistance Funds RFA Rating Criteria

AGENCY:	PROGRAM:		
Evaluation and Selection Criteria	Points Range	Points awarded	
2.1 Application Cover Page			
<p>The first page of the Application must include the following:</p> <ul style="list-style-type: none"> • Corporation’s Legal Name • Address • Telephone Number • Website (note if unavailable) • Executive Director/CEO • Executive Director/CEO contact information including email and telephone number • Full name and contact information for the person with whom the CBHC should communicate regarding the Application. • Amount of applicant’s total agency budget for most recent fiscal year • Project Name/Amount 	0-7		
2.2 Concept Paper			
Project Summary			
<p>The extent to which the Applicant describes amount and purpose of the request, how the requested funding will be used, who will benefit, and the expected impact/outcome. This includes how the Project will increase the Applicant’s capacity through strategic activities to strengthen its ability to operate effectively over the long term and how this supports the overall vision and mission of the CBHC.</p>	0-25		
Organizational Capability			
<p>The extent to which the Applicant has the organizational capacity to carry out objectives and activities described in the Application. Includes the ability to successfully implement a grant administered by the CBHC, background and experience of staff & volunteers, viable board of directors, And fiscal capability. If using a consultant or vendor, does Applicant have the relevant background and expertise for the proposed Project?</p>	0-25		
Implementation Plan & Timeline			
<p>The extent to which the Applicant has provided a well-defined implementation plan and time for the proposed Project.</p>	0-18		
2.3 Budget and Budget Narrative			
(also includes scoring for Sections 2.4 and 2.5)			
<p>The extent to which the budget is appropriate to carry out the objectives and activities described in the Application. The extent to which the narrative clearly explains details of the line item costs and matches the budget form amounts.</p>	0-25		

Bonus Points		
2 Bonus points are awarded to organizations that are not currently receiving programmatic funding from the CBHC. The CBHC will determine this, Applicants do not need include this information in their Application.	2	
TOTAL POINTS	102	

RATER _____ **DATE:** _____
NUMBER: _____

This rating form is subject to public records and is open for inspection and copying in accordance with the Chapter 119, Florida Statutes.

CBHC - TECHNICAL ASSISTANCE APPLICATION BUDGET					
Agency: _____					
Program: _____					
Contract Period: 1/3/17 - 6/30/17					
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: center;">Total Program Budget (1)</th> <th style="width: 50%; text-align: center;">CBHC Budget (2)</th> </tr> </thead> </table>	Total Program Budget (1)	CBHC Budget (2)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 100%; text-align: center;">Budget Narrative (3)</th> </tr> </thead> </table>	Budget Narrative (3)
Total Program Budget (1)	CBHC Budget (2)				
Budget Narrative (3)					
REVENUES:					
(please list individually)					
Children's Board Allocation					
Other Funding Sources:					
In-Kind Contributions					
Sub-Total of Other Funding Sources	-				
TOTAL REVENUES	-				
EXPENDITURES:					
Other Contractual Services					
Subtotal Contractual Services	-				
Facility Rental					
Subtotal Occupancy Costs	-				

CBHC - TECHNICAL ASSISTANCE APPLICATION BUDGET			
Agency: _____			
Program: _____			
Contract Period: 1/3/17 - 6/30/17			
	<u>Total Program Budget</u> (1)	<u>CBHC Budget</u> (2)	<u>Budget Narrative</u> (3)
Local Travel (Mileage)			
Conference Registration Fee			
Transportation for Clients			
Rent & Lease/Equipment			
Insurance			
Postage			
Printing & Copying			
Advertising			
Outreach			
Memberships/Subscriptions/License			
Fingerprint & Background Screening			
Information Technology Expense			
Office Supplies			
Computer Supplies			
Operating Supplies			
Education/Curriculum Supplies			
Evaluation Supplies			
Training Supplies			
Client/Participant Supplies			
Client/Participant/Community Activities			
In-Kind Expense			
Subtotal Other Operating Costs	-	-	
TOTAL OPERATING EXPENDITURES	-	-	
Capital Outlay			
Subtotal Capital Outlay	-	-	
TOTAL EXPENDITURES	-	-	
Excess (Deficit)	-	-	