

**REQUEST FOR PROPOSAL (RFP)  
TO PROVIDE TITLE III C-2  
HOME DELIVERED MEAL PROGRAM  
FROM 7/1/2012 THROUGH 6/30/2013**

Proposal Control Number 2012-03

**Issued By:**



**DIVISION OF AGING AND ADULT SERVICES  
10 North San Pedro Road, Suite 1023  
San Rafael, CA 94903  
Phone: 415-473-7118  
Website: [www.co.marincounty.org](http://www.co.marincounty.org)**

**COUNTY OF MARIN, DIVISION OF AGING AND ADULT SERVICES  
REQUEST FOR PROPOSAL (RFP) TIMELINE  
HOME DELIVERED MEAL PROGRAM**

Program	Older Americans Act Title IIIC Elderly Nutrition Program Home Delivered Meal Programs
Awarding agency	Marin County Department of Health and Human Services, Division of Aging and Adult Services 10 North San Pedro Rd., Suite 1023 San Rafael, CA 94903
Contact person	Ana P. Bagtas Phone: (415) 473-6947 E-mail: abagtas@marincounty.org
Available Funding	<b>Title IIIC-2 Home Delivered Meals     \$420,000</b>
Grant Period	July 1, 2012 through June 30, 2013
RFP date of issuance	Friday, February 10, 2012
Bidder's conference	Thursday, February 23, 2012 10:00 a.m. – 12:00 p.m. 20 North San Pedro, Conference Room A & B San Rafael, CA 94903
Deadline for AAA to post written technical assistance and Q & A	Friday, March 2, 2012
Proposal submission deadline	<b>Friday, March 14, 2012, Noon</b>
Proposal submission address and instructions	Proposals may be submitted in person, via courier service, or mailed (not recommended) by Friday March 14, 2012 at Noon. at: Marin County Division of Aging and Adult Services 10 North San Pedro Rd., Suite #1023 San Rafael, CA 94903 Attention: Gary Lara  Mailed proposals must be received at the Division office by the deadline, <u>not the date stamp of mailing</u> . A certificate of receipt of application will be issued for all proposals submitted. Faxed or e-mailed proposals and proposals received after the deadline will not be considered.
Required copies to be submitted	1 original, 4 copies, and 1 electronic copy on a CD or flash drive
Grant award announcement*	Thursday, March 29, 2012
Protest submission deadline	NOON - Thursday, April 5, 2012
Commission on Aging meeting	Thursday, April 12, 2012, 11:30 a.m.
Board of Supervisors contract approval	Tuesday, May 8, 2012
Initiation of services	July 1, 2012

\* Date subject to Board of Supervisors schedule and County budget and contract processes.

## **I. INTRODUCTION**

The Marin County Department of Health & Human Services, Division of Aging and Adult Services is issuing this REQUEST FOR PROPOSAL (RFP) from qualified private or nonprofit providers for the provision of home delivered meal services to Marin County older adults funded through the Older Americans Act Title IIIC-2. Through this RFP, qualified service provider(s) will be identified and selected to provide home delivered meal services as described in this announcement to persons 60 years and above during the period from July 1, 2012 through June 30, 2013. Contracts awarded through this RFP may be negotiated and renewed annually for up to three additional years following the period specified in this announcement ending on June 30, 2016.

### **A. About the Marin County Division of Aging and Adult Services**

The Division of Aging and Adult Services (DAAS) is one of five major divisions within the Marin County Department of Health and Human Services. DAAS administers the Area Agency on Aging in Marin County and works closely with the Commission on Aging (COA), a 23-member advisory council appointed by the Board of Supervisors and each of the 11 towns and cities of Marin. In partnership with the COA, DAAS has the overall responsibility of planning, coordinating, and advocating for a comprehensive, integrated community-based service system to meet the needs of older persons and family caregivers in Marin County. DAAS also includes Adult Protective Services, In-Home Support Services, Veterans Services, Public Guardian, Ombudsman and Transitions Public Health Nurse Case Management Services.

### **B. About the Planning and Service Area**

The State of California is divided into 33 Planning and Service Areas or PSAs for the administration of the Older Americans Act and Older Californians Act. In each PSA, a single agency has been designed as its Area Agency on Aging (AAA) charged with fulfilling the statutory mandates contained in both Acts. Marin County is designated as Planning and Service Area 5 (PSA 5) with the Board of Supervisors governing the Area Agency on Aging and the Division of Aging and Adult Services carrying-out its operational responsibilities.

## **II. REQUEST FOR PROPOSAL**

The Marin County Department of Health & Human Services, Division of Aging and Adult Services (referred to as “County” hereinafter) is seeking qualified private or nonprofit agencies (referred to as “Applicant” hereinafter) to provide Home Delivered Meal Services and related administrative functions to eligible older adults residing in all parts of Marin County. Selected Applicant(s) will be required to ensure that priority is given to hard-to-reach rural geographic areas and in neighborhoods and towns where high density of minority and low-income older adults reside. The program will provide meals to older adults 60 years and above who need nutritionally balanced meals to sustain health and maintain independence. The contract period will be July 1, 2012 through June 30, 2013 with annual renewal options for three additional years

contingent upon the success of the program and funding availability. The County reserves the right to make multiple or partial awards of contracts through this RFP or to award none.

To recognize the specialized operational knowledge and expertise required to provide home-delivered meal services, this RFP contains descriptions of the following three program components essential in the administration and operation of the program: (1) Assessment, intake and data reporting; (2) Meal Preparation; and (3) Meal Delivery/Volunteer Coordination. Applicant(s) may apply for one, any combination, or all three components for providing this service to Marin County older adults.

Both **Marin County** and **Marin Community Foundation** recognize that adequate funding must be provided to ensure adequate volunteer coordination to assist in delivering meals to clients. Past history has shown that a program using no volunteer drivers is not sustainable with this funding. To assist in the development and coordination of a volunteer home delivered meal driver component, both Marin County and Marin Community Foundation have dedicated funds to support this shift in operations. In addition to the Older Americans Act funding allocated through this RFP, **\$50,000 in County General funds will be added to the Meal Delivery/Volunteer Coordination component** to ensure adequate operational capacity. Separately, Marin Community Foundation has released an RFP that supports volunteer coordination and can be used in conjunction with the funding provided through this RFP.

The contract period will be July 1, 2012 through June 30, 2013 with annual renewal options for three additional years contingent upon the success of the program and funding availability. The total amount of Area Agency on Aging funding available for home delivered meal services to serve Marin County is **\$420,000**. Demand for this service has increased in recent years. This funding is intended to provide qualified Marin County residents with at least **72,000** home delivered meals per year.

Payment for all services provided in accordance with provisions under this contract shall be contingent upon the availability of Federal and State funds for the purpose of providing home-delivered nutrition services. The County shall not be required to provide any definite number of meals nor does the County guarantee any minimum amount of funding for the service.

The County has the right to negotiate the Applicant's proposed Scope of Services in response to this RFP prior to finalizing the contract. By submitting a response to this RFP, Applicant agrees to be bound by, and to sign, the contract with the County. All information included in the RFP, with the exception of what may be renegotiated in the Scope of Services, will be referenced.

### **III. PROGRAM DESCRIPTION AND REQUIREMENTS**

The Home Delivered Meal Program requires compliance with and performance of Federal, State, and County standards for Elderly Nutrition Program. As stated above, there are three components to this RFP for the provision of home-delivered meal services:

- Assessment, intake and data reporting
- Meal Preparation
- Meal Delivery/Volunteer Coordination

Applicant(s) may apply for any combination or all three components for providing this service to Marin County older adults. Successful Applicant(s) shall demonstrate the ability to comply with Federal, State, and County program requirements outlined in the Sample Scope of Service (Attachment E), including those described below:

. The three components of the home-delivered meal program are described as follows:

## **PROGRAM DESCRIPTION**

**Assessment, Intake, and Data Reporting:** Applicant(s) must demonstrate the capacity to conduct annual assessments with quarterly reassessments of clients. As well, Applicant(s) must have the ability to accurately record required data on each individual client. Data management and reporting to the County is a significant part of this process. A separate sum must also be included in the proposal to reflect cost of this component.

**Meal Preparation:** meals must be provided according to applicable standards described below. Consideration will be given to meal preparation that occurs within the closest possible proximity to the delivery area allowing for the freshest and most cost effective means of production and delivery. The proposal must show a separate sum that reflects meal cost.

**Meal Delivery/Volunteer Coordination:** delivery of meals is expected to be operated primarily through volunteer drivers. Any volunteer per Applicant shall be covered by Applicant Worker's Compensation and liability insurance. Suggested contributions for home delivered meals will be solicited by the provider of this component and the funds received will be dedicated to the volunteer coordination and meal delivery. The contractor is expected to budget proposed donations from program participants and to use these funds to cover the costs of the program. This component must also be reflected as a separate sum to reflect the cost dedicated to meal delivery and volunteer coordination.

## **PROGRAM REQUIREMENTS**

The Applicant must comply with all applicable federal, state, and local laws, including non-discrimination and conflict of interest requirements. Title III C Elderly Nutrition Program requirements are found in the Older Americans Act (OAA 42 USC Section 3001-3058), Code of Federal Regulations (45 CFR XIII, 1321); Title 22, California Code of Regulations (CCR), Section 7000 et seq.; California Retail Food Code (CRFC); and California Department of Aging Program Memoranda.

*Home-Delivered Meals Intake:* An initial determination of HDM eligibility, which may be accomplished by telephone or in person using an intake form approved by the Marin Division of Aging and Adult Services.

*Home-Delivered Meals Assessment:* The assessment covers physiological, socioeconomic, and psychological factors including the acute or chronic disease, syndromes or conditions, limited functional ability and family/support system, which contribute to an individual's need for meals and other related services.

*Nutrition Risk Screening:* Each senior receiving home-delivered meal service is required to be screened for his or her nutritional status using the nutrition risk-screening checklist.

*Title III C Home-Delivered Meals (HDM):* Nutrition services provided to homebound seniors including meals and nutrition risk screening. Each Meal shall provide one-third (1/3) of the recommended dietary allowance (RDA) and comply with the current Dietary Guidelines for Americans.

*Client Contribution:* The contractor selected for volunteer coordination and meal delivery shall provide opportunities for program participants to voluntarily donate towards program cost in a confidential manner. Donations will be treated as program income and must be used to defray the costs of volunteer coordination and meal delivery. No one will be denied services for not contributing to the program.

*Food Safety Certification:* The individual overseeing meal preparation for the home delivered meal operation must have the capacity to obtain a valid certificate two months after granting the award.

*Meal Production Kitchen:* Meals must be prepared from kitchens that maintain valid health certification. An agreement with the meal production kitchen must be developed if the Applicant does not operate a kitchen.

*Budget:* The home delivered meal program is broken down into three components. When developing the budget, a maximum of \$4.50 may be used for meal production. The contractor is expected to budget proposed donations from program participants and to use these funds to cover the costs of the delivery portion of the program. An overall program matching contribution of at least 10% is required. Matching contribution is defined as the value of the portion of program and administrative costs funded by cash or in-kind contribution by the contractor, subcontractor, or other local resources. A Program Budget must be submitted with your RFP Application. Use the form (Attachment D) included in this RFP.

*State Contract Compliance:* This award is made based on funding from the federal Older Americans Act for senior nutrition program administered locally by the Division of Aging and Adult Services through a contract with the state Department of Aging. As such, the agency awarded this grant is subject to compliance with all the terms and conditions entailed in the AAA contract with the state Department of Aging.

#### **IV. TARGET POPULATION**

Services must target older adults aged 60 years and above and must give preference to older individuals in greatest economic or social need with particular attention to low-income minority. The number of minority elders to be served, at a minimum, should be in the same proportion as represented in Marin's older population according to the most recent U.S. Census. Contractor must ensure provision of programs and services to all classes that are protected by State and Federal law.

## V. MINIMUM QUALIFICATIONS

Applicant should possess all of the following minimum qualifications:

1. A minimum of 2 years of same or similar services to that required in this RFP
2. A minimum of 2 years serving the target population.
3. A valid food safety certificate, or the ability to obtain one within two months of the award

## VI. CONTENT OF THE RESPONSE PACKAGE

A complete request for proposal application package must include an original, four copies, and an electronic copy saved in a USB device or CD. The application package must contain all of the following items and must be presented in the order listed below:

### A. Application Face Sheet (Attachment A)

Complete the Application Face Sheet provided in this RFP. Include the completed Face Sheet in each copy of a complete application packet. The Face Sheet includes an Application checklist. Applicants must complete the checklist and ensure that all required documents are provided in the response package.

### B. Blank Scoring Sheet (Attachment B)

Include a blank Scoring Sheet provided in this RFP in each copy of a complete response package.

### C. Narrative Responses (Attachment C)

Using the **Narrative Response form** provided in this RFP, respond to the questions and information requested in order to describe the Applicant's capacity to administer the congregate nutrition program and successfully fulfill its requirements and deliver the services. Narrative responses should be provided directly on the Narrative Response form and must not exceed 12 pages total, including the form itself.

### D. Program Budget (Attachment D)

Using the Program Budget form included in this RFP, provide a breakdown of all the costs associated with providing the services proposed in this application. In addition to the grant being sought from the County, identify other funding sources to cover all costs outlined in the budget.

**Matching Contributions** mean local cash and/or in-kind contributions by the Contractor, subcontractor, or other local resources that qualify as match for the contract funding. Cash and/or in-kind contributions may count as match, if such contributions are used to meet program requirements. Matching contributions must be used for allowable costs in accordance with the Office of Management and Budget (OMB) circulars.

**Non-Matching Contributions** mean local funding that does not qualify as matching contributions and/or is not being budgeted as matching contributions. (e.g., federal funds, overmatch, etc.).

**Program Income** means revenue generated by the Contractor or subcontractor from contract-supported activities. Program income is:

- a. Voluntary contributions received from a participant or responsible party as a result of services.
- b. Income from usage or rental fees of real or personal property acquired with grant funds or funds provided under this Agreement.
- c. Royalties received on patents and copyrights from contract-supported activities.
- d. Proceeds from sale of items fabricated under a contract agreement.

E. Letters of Support

Include a minimum of two letters of support from partner organizations. The letter of support should highlight the partnership of the recommender with the Applicant, citing specific examples of projects and efforts to coordinate services and improve clients' access to local resources.

## **VII. SUBMISSION OF THE REQUEST FOR PROPOSALS**

A complete REQUEST FOR PROPOSAL APPLICATION must include an original and four copies. No faxed or e-mailed application is accepted and will result in automatic disqualification of the Applicant without further review. Application packet must be hand-delivered or received by mail no later than **NOON on March 14, 2012** at the following address:

**Marin County Department of Health and Human Services,  
Division of Aging and Adult Services  
10 North San Pedro Road, Suite #1023  
San Rafael, CA 94903  
Attention: Nicholas Trunzo, Director**

The Applicant bears the risk of non-delivery of Request for Proposals Application within the deadline specified herein. Application should be submitted by a means that will objectively establish the date the County received the Application. A statement of receipt will be issued to all Applicants for applications received by the deadline.

## **VIII. EVALUATION CRITERIA**

An Application Scoring Sheet is included in this RFP. Proposals are going to be evaluated based on the following criteria:

- a. Organizational Capacity: history, experience, and capacity of the organization in providing similar services to the target population.
- b. Program Design and Approach:

- c. Administrative and Fiscal Qualifications: cost effectiveness and efficiency of the services proposed.

A committee comprised of parties with expertise in the services intended in this RFP will evaluate the proposals. The County reserves the right to seek clarifying or additional information from applicants, potentially including site visits or agency interviews.

## **IX. NOTICE OF AWARD**

Contract award will be issued on **March 29, 2012**. All Applicants will be notified of the intent to award the contract by email with a hard copy to follow by post.

## **X. PROTEST PROCEDURE**

Within five calendar days of the issuance of a notice of intent to award the contract, any respondent that has submitted a responsive proposal and believes that the Division of Aging and Adult Services has incorrectly selected another respondent for award may submit a written notice of protest. The notice of protest must include a written statement specifying in detail each and every ground asserted for the protest. The protest must be signed by an individual authorized to represent the respondent, and must cite the law, rule, local ordinance, procedure or RFP provision on which the protest is based. In addition, the protestor must specify facts and evidence sufficient for the County to determine the validity of the protest.

### **A. Delivery of Protests**

All protests must be submitted in writing and received by **NOON on Thursday April 5, 2012** at the following address:

Marin County Department of Health and Human Services,  
Division of Aging and Adult Services  
10 North San Pedro Road, Suite #1023  
San Rafael, CA 94903  
Attention: Nicholas Trunzo, Director

If a protest is mailed, the protestor bears the risk of non-delivery within the deadlines specified herein. Protests should be transmitted by a means that will objectively establish the date the County received the protest. Protests or notice of protests made orally (e.g., by telephone) or via e-mail will not be considered.

### **B. Protest Decision**

The protest will be reviewed by Nicholas Trunzo, Director, Division of Aging and Adult Services. The decision of the Director on the protest is final and will be sent to the protestor by email with a hard copy to follow by post.

## **XI. BIDDER'S CONFERENCE**

A Bidder's Conference has been scheduled on **Thursday February 23, 2012, 10:00 a.m. – 12:00 p.m.** at 20 North San Pedro Road, Conference Rooms A & B, San Rafael, CA. Potential Applicants will have a chance to address questions and clarify specific elements of the RFP announcement at this meeting. Questions, comments, and request for technical assistance received prior to the Bidder's Conference will not be accepted. Proceedings of this meeting will be posted within 72 business hours through an online County web link that will be announced at the Bidder's Conference (see section XII below). Potential Applicants need not be present at the Bidder's Conference to submit an application.

## **XII. QUESTIONS, COMMENTS, AND TECHNICAL ASSISTANCE**

The Division of Aging and Adults Services will be available from **February 23, 2012 – March 2, 2012** to provide technical assistance and respond to questions and inquiries from potential Applicants. A County web link to post questions, comments, and requests for technical assistance that will be announced at the Bidder's Conference. In order to maintain a fair and open bidding process, the County will only accept inquiries received in writing from this site. The County will post responses to these inquiries only through this site. Applicants unable to attend the Bidder's Conference may contact Ana Bagtas at 415-473-6947 or e-mail [abagtas@marincounty.org](mailto:abagtas@marincounty.org) after February 23 to get the web link obtain instructions on how to subscribe to the site.

## **XIII. LIST OF ATTACHMENTS**

1. Attachment A: Application Face Sheet & Checklist
2. Attachment B: Scoring Sheet
3. Attachment C: Narrative Response
4. Attachment D: Program Budget Form
5. Attachment E: Exhibit A - Program Scope of Services

## **XIV: ADDITIONAL DOCUMENTS REQUIRED FOR REVIEW**

The following links outline the program requirements regulations governing the Elderly Nutrition Program. Copy and paste the link to your web browser to access the document. Applicants must review these documents and make sure you understand the program requirements before submitting an application.

1. California Retail Food Code January 1, 2011:  
<http://www.cdph.ca.gov/services/Documents/fdbRFC.pdf>
2. Title 22 California Code of Regulations relating to the Elderly Nutrition Program:  
<http://weblinks.westlaw.com/toc/default.aspx?Abbr=ca%2Dadc&Action=ExpandTree&AP=I7E25BE40D4B711DE8879F88E8B0DAAAE&ItemKey=I7E25BE40D4B711DE8879F88E8B0DAAAE&RP=%2Ftoc%2Fdefault%2Ewl&Service=TOC&RS=WEBL12.01&VR=2.0&SPa=CCR-1000&pbcd=DA010192&fragment#I7E25BE40D4B711DE8879F88E8B0DAAAE>

3. Office of Management and Budget Circular 133:  
<http://www.whitehouse.gov/sites/default/files/omb/circulars/a133/a133.pdf>
4. Sample Contract with California Department of Aging  
[http://www.co.marin.ca.us/depts/HH/main/ag/PDFs/Title\\_III\\_VII\\_State\\_Contract.pdf](http://www.co.marin.ca.us/depts/HH/main/ag/PDFs/Title_III_VII_State_Contract.pdf)
5. Sample County Contract Boilerplate  
<http://mine/mine/AD/Main/contracts.cfm>

**ATTACHMENT A: APPLICATION FACE SHEET**

Agency Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Website (if applicable): \_\_\_\_\_ Fax: \_\_\_\_\_

Executive Director: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Total Grant Request (7/1/12-6/30/13): \$ \_\_\_\_\_

This application package includes the following (check all items included in Applicant’s response package):

- Cover letter
- Completed Application Face Sheet (Attachment A)
- Blank Scoring Sheet (Attachment B)
- Narrative Response (Attachment C)
- Program Budget (Attachment D)
- Letters of Support
- One original, four copies, and electronic copy in a USB device or CD

I, the undersigned am an official authorized to bind the Applicant to this Request for Proposal. I understand that the Department of Health and Human Services, Division of Aging and Adult Services (DAAS) reserves the right to modify the specifics of this application at the time of funding and/or during the contract negotiation; that no officer, employee or agent of DAAS, exercising any function or responsibility in connection with the proposed services contract or with planning or carrying out any agreement relative to this proposal has any personal financial interest, direct or indirect, in the operation of the Applicant; that a contract may be negotiated for a portion of the amount requested; and that there is not contract until a written contract has been signed by both parties and approved by all applicable County agencies and agents.

Signature of authorized representative(s):

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ATTACHMENT B: SCORING SHEET**

**ELDERLY NUTRITION PROGRAM  
Home Delivered Meal Program Request for Proposal 2012**

<b>I. ORGANIZATIONAL CAPACITY</b>			
<b>Evaluation Criteria</b>	<b>Max Points Available</b>	<b>Reviewer's Score</b>	<b>Reviewer's Notes</b>
1. The organization is well established, has clearly stated priorities, and a mission that is consistent with the stated program goals.	<b>2</b>		
2. The organization possesses the capacity, resources, and experience to successfully implement the service described in the RFP.	<b>7</b>		
3. The applicant demonstrates recognition and understanding of the needs and characteristics of the population to be served by this program. The applicant demonstrates experience and success in serving the needs of the targeted populations.	<b>7</b>		
4. The applicant clearly demonstrates recognition of the importance of coordinating with local service programs within the County. Response clearly describes how the partnership has led to better coordination of services and improved access to local resources for clients. Letters of support (minimum of 2) are provided.	<b>5</b>		
5. The applicant demonstrates past and current experience in providing services similar to the one described in this RFP.	<b>4</b>		
<b>Subtotal</b>	<b>25</b>		

## II. PROGRAM DESIGN & APPROACH

Evaluation Criteria	Max Points Available	Reviewer's Score	Reviewer's Notes
1. The proposed program directly addresses the needs of older adults consistent with the goals of the program. Proposed services are appropriate and clearly fit the program goals.	6		
2. The organization demonstrates a clear understanding of the targeted populations and communities prioritized by the Older Americans Act. The Applicant has a clear method and demonstrated ability and experience in reaching the targeted groups and communities.	10		
3. The applicant has clearly articulated goals with measurable objectives that and address identified needs and service priorities.	5		
4. Proposal addresses service priorities and targets areas with the most need. Program activities and service unit plan are meaningful, reasonable, and achievable in the stated timeframe. If Applicant is not providing services directly to the site, is the proposed collaborative plan with the site(s) clear, effective, and feasible.	8		
5. The applicant has designed a system for evaluating the quality of internal operations and processes as well as service delivery, including client satisfaction and a system for measuring program outcomes.	5		
6. The applicant has a clearly-articulated outreach/marketing plan to promote the program in the community and reach new clients not previously served. The Applicant describes specific methods and processes that allow the program to reach maximum client capacity.	6		
<b>Subtotal</b>	<b>40</b>		

### III. ADMINISTRATIVE & FISCAL QUALIFICATIONS

Evaluation Criteria	Max Points Available	Reviewer's Score	Reviewer's Notes
1. The organization's structure and staff are adequate to support the administration of the program and for meeting program standards and requirements. The proposed reporting relationships are clear and assure good communication with staff at all levels. The proposed salary and benefit structure are fair and consistent with similar organizations.	10		
2. The organization provided clear methods for collecting, maintaining, and submitting data and other administrative reports. For current or previous DAAS contractors, records indicate accurate and timely submission of data.	5		
3. The organization has in place accounting procedures that will assure effective control and accountability, and which meet state and federal standards. Applicant has a sound method for ensuring timely fiscal reporting. For current or previous DAAS contractors, records indicate current and timely submission of fiscal reports.	5		
4. The proposed budget is appropriate, cost effective, accurate, and includes a clear, comprehensive narrative. The organization has a clear method for collecting program income. The organization has sufficient resources to assure successful operation of the program.	15		
<b>Subtotal</b>	<b>35</b>		
<b>PROPOSAL TOTAL SCORE</b>			
<b>PASSING SCORE TO BE CONSIDERED FOR FUNDING</b>			<b>70</b>

**Reviewer's Additional Comments:**

# ATTACHMENT C: NARRATIVE RESPONSE FORM

REQUEST FOR PROPOSAL (RFP) to provide Home Delivered meal PROGRAM

July 1, 2012 through June 30, 2013

**Please provide complete and concise responses to the following questions directly on this form. Limit your responses to no more than 12 pages total, including this Narrative Response Form.**

## **ORGANIZATIONAL CAPACITY**

1. *Describe your organization's history, purpose, and mission statement.*
2. *Provide a summary of your organization's skills, resources, and experience relevant to the services described in this Request for Proposal (RFP).*
3. *Describe how your organization is going to reach the targeted populations considered priority groups and areas for this program (refer to Section IV of this RFP).*
4. *Describe your organization's experience in coordinating with local and regional community services to integrate the service delivery system in Marin County. Provide specific examples of how these efforts have led to increased opportunities for older adults to access services. Please include a minimum of two letters of support (excluded from the page limit of this application form) from partner organizations describing the nature of the collaboration.*
5. *Provide a statement listing all of your organization's contracts (both public and private) relevant to the services solicited that have been completed during the last two (2) years. The statement must also list any failure or refusal to complete a contract, including details and dates.*

## **PROGRAM DESIGN AND APPROACH**

6. *Provide a summary of the proposed program and describe how it will enhance and strengthen the nutritional health of older adults in Marin County. Identify and explain the appropriateness of planned services and how they fit the program goals.*
7. *Describe how the organization will target services to targeted communities and populations, particularly those with the greatest economic or social needs. Proposal must identify strategies to reach older adults from minority, limited English-speaking, low-income, and rural communities. Applicant may include relevant data and other information to make the case for the service approach being proposed.*

8. *Identify overall **goals** of the proposed program. Describe specific measurable outcome-based **objectives**, with timelines, that will support the fulfillment of the established program goals.*
  
9. *Describe your organization's plan for meal production (agency's own kitchen or caterer) and menu development that meet the Title III C requirements. Carefully review the California Retail Food Code and the California Code of Regulations Title 22 relating to the Elderly Nutrition Program (see web links provided in section XIV above) to find out about the requirements of the program. Include in your response an explanation of how your organization will manage and monitor meal production to ensure quality and safety, as well as how it will obtain a valid health certificate and food safety certificate.*
  
10. *Describe methods for which the effectiveness of the proposed service will be evaluated. Identify ways the agency's proposed program will impact the well-being and independence of older adults in Marin County. Identify strategies the agency plans to continuously improve the quality of the program.*
  
11. *Describe the outreach/marketing methods the organization intends to employ to generate participation in the program. Identify strategies to reach older adults who have not previously been served by the program.*

### **ADMINISTRATIVE AND FISCAL QUALIFICATIONS**

Total amount of funding requested: \$ \_\_\_\_\_

12. *Describe the organizational structure and proposed job descriptions and duties of paid staff and volunteers in the program.*
  
13. *Discuss how the organization will comply with data reporting requirements. Describe the agency's client intake process and data management, including ensuring the completeness and accuracy of gathering the required data elements from client data, maintaining privacy/confidentiality of client data, and procedures for handling and reporting data/client information breach. Describe the agency's procedures for ensuring timely submission of data and other administrative reports as requested by the County.*
  
14. *Describe the organization's current accounting system, including the following: areas and frequency of accounting for receivables and payables; payroll processing; financial statement preparation, and internal/external auditing. Describe the agency's procedures for ensuring timely submission of invoices and other fiscal reports as requested by the County.*

15. *Using the Budget Form (Attachment D) provided in this RFP, prepare a budget for the program/service proposed. Describe the organization's program budget by providing clear and specific descriptions of the following to demonstrate the Applicant's ability to cover all costs of the service proposed:*

*a. Agency's fundraising Plan*

*b. Source of cash match and in-kind support to cover costs not covered by the grant.*

*c. System for collecting voluntary contributions (program income) for services and how program income will be distributed to help defray the cost of the service. Describe the agency's mechanism for supporting those who cannot afford to make donations.*

# ATTACHMENT D: PROGRAM BUDGET FORM

NOTE: this budget form is available in electronic format and may be furnished upon request to potential Applicants.

AGENCY NAME:

Original\_\_XXX\_ Revision No.\_\_\_\_

## ELDERLY NUTRITION PROGRAM BUDGET SUMMARY

Program: Congregate Meal Program

Fiscal Year: 2012-2013

Contract Period: July 1, 2012 - June 30, 2013

Total Meals: xxx

BUDGET CATEGORRY	TOTAL BUDGETED COSTS	ACTIVITIES			FUNDING SOURCES			
		Meals Delivery	Program Mgmt	Home Delivery	AAA Grant	Match Cash	Match In-Kind	Project income
	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Personnel	0	0	0		0	0	0	0
Travel & Training	0	0	0		0	0	0	0
equipment	0	0	0		0	0	0	0
Raw food	0	0	0		0	0	0	0
Food Service Supply	0	0	0		0	0	0	0
Food Transport	0	0	0		0	0	0	0
Site Costs	0	0	0		0	0	0	0
Other Costs	0	0	0		0	0	0	0
<b>Grand Total Costs</b>	0	0	0	0	0	0	0	0
Cost Per Meal	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
Cost %	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Project Director Name: \_\_\_\_\_

Signature: \_\_\_\_\_

**AGENCY NAME:**

Original XX

Revision No. \_\_\_\_

**ELDERLY NUTRITION PROGRAM BUDGET DETAIL COST ALLOCATION**

Program:

Congregate Meal Program

FY: 2012-2013

Total # Meals to be Served

XXX

BUDGET CATEGORY	TOTAL BUDGETED COSTS	ACTIVITIES			FUNDING SOURCES			
		Meals Delivery	Program Mgmt	Home Delivery	AAA Grant	Match Cash	Match In-Kind	Project income
		(a)	(b)	(c)	(d)	(e)	(f)	(g)
Personnel:								
Executive Director (\$X/hr x %FTE/wk x #wks)	0							
Driver (\$X/hr x #hrs/wk x #wks)	0							
Program Director (\$X/hr x #hr/wk x #wks)	0							
Site Coordinator (\$X/hr x #hrs/wk x #wks)	0							
Volunteers (\$11/hr x #/wk x #vol x #wks)	0						0	
<b>Total salaries:</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Benefits	0	0	0			0		
<b>Total salaries and benefits:</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Total personnel</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Travel and training:								
Mileage, parking and tolls	0							
Conferences and meetings	0							
Staff training	0							
<b>Total travel and training</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Equipment</b>	<b>0</b>							
<b>Catered food</b>	<b>0</b>							
<b>Food service supplies</b>	<b>0</b>							
Food transport:								
Vehicle fuel	0							
Vehicle maintenance	0							
Vehicle insurance	0							
Vehicle licenses	0							
<b>Total food transport</b>	<b>0</b>	<b>0.00</b>			<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Site costs:								
Building rent	0						0	
Utilities	0						0	
Telephone	0						0	
Facility maintenance	0						0	
Facility supplies	0						0	
Equipment rental	0							
Insurance	0						0	
Incentives/gifts	0							
Computer related	0							
Office supplies	0						0	
Postage & delivery	0						0	
Recruitment Costs	0							
Dues, subscriptions, licenses	0							
<b>Total site costs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Other costs:								
Marketing, advertising & PR	0					0		
Printing & publication	0					0		
Indirect costs	0			0	0	0	0	
<b>Total other costs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Total Costs</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Cost Per Meal	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!	#VALUE!
Cost %	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

**Attachment E**

**EXHIBIT “A”**

**MARIN COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES  
DIVISION OF AGING AND ADULT SERVICES**

**SCOPE OF SERVICES  
July 1, 2012 - June 30, 2013**

1. **Provider:**

2. **Program Name:**

3. **Program Goal:**

To maintain or improve the physical, psychological, and social well-being of older persons in Marin County through appropriate nutrition services.

4. **Performance Objectives:**

- ◆ At least 70% of clients will report “high” to “very high” satisfaction with the program.
- ◆ At least 50% of clients will report improvements in their well-being as a result of participating in the congregate nutrition program.

5. **Program Definition:**

HOME-DELIVERED services are meals provided to an eligible individual 60 years or older in his or her place of residence that meet all of the requirements of the Older Americans Act and State/Local laws and assure a minimum one-third of the current Dietary Reference Intake and comply with dietary guidelines for Americans.

6. **Minimum Units of Services Required:**

<b>Program</b>	<b>Unit</b>	<b>Number of Meals to be Served</b>	<b>Unduplicated Number of Clients</b>
Home-Delivered	one meal	72,000	425

7. **Reimbursement:**

Home-Delivered Meal Program

8. **Contract Award:**

Title IIC-2 Home-Delivered Meal Program	\$
Health and Human Services Additional Funding	\$
<b>Total Grant Award FY 2012-13</b>	<b>\$</b>

9. **Standards:**

- a. Meals must include a minimum of one third of the current Dietary Reference Intakes (DRIs) as established by the Institute of Medicine National Academy of Sciences, follow the current Dietary Guidelines for Americans by U.S. Department of Health and Human services and U.S. Department of Agriculture, and reflect cultural and ethnic dietary needs of participants, when feasible and appropriate.
- b. Menu and health and safety requirements must at minimum comply with the Elderly Nutrition Program regulations under CCR, Title 22, Division 1.8, Chapter 4, and Article 6. Menus must be planned for a minimum of five (5) weeks and certified by the AAA prior to use.
- c. Menus must be planned by Registered Dietitian (R.D.), registered by the Commission on Dietetic Registration and qualified as specified in Sections 2585 and 2586, California Business and Professions Code.
- d. Menus must follow the California 1600 calorie component meal pattern developed to reflect the new DGA requirements and one of the following two meal patterns: 1) The Dietary Approaches to Stop Hypertension (DASH) diet, 2) The USDA Food Guide meal pattern.
- e. Weekly, fat calories must not exceed 30%, and sodium content not to exceed 1,000 mg per average meal. Menu items that exceed 1,000 mg sodium must be identified on the menus.

10. **SERVICE CONTRACTOR shall have the capacity to conduct, at a minimum, the following activities:**

- a. Determine client eligibility according to Older American's Act Regulations. Eligible service population means individuals 60 years of age or older, with emphasis on those in economic and social need with particular attention to low income minority individuals and older individuals residing in rural areas. [OAA, Section 305 (a)(2)(E)][Title 22, CCR, Sections 7125, 7127, 7130, and 7135].
- b. Comply with applicable regulations and standards set forth in the Marin County Division of Aging and Adult Services nutrition policies and procedures. Comply with Title III program requirements in the Older Americans Act (OAA 42 USC Section 3001-3058), Code of Federal Regulations (45 CFR XIII, 1321); Title 22, California Code of Regulations (CCR), Section 7000 et seq.; California Retail Food Code; California Department of Aging Program Memoranda.

- c. Comply with additional standards set forth by the Division of Aging and Adult Services, as approved by the Marin County Commission on Aging.
  - d. Conduct quarterly safety and sanitation monitoring of the caterer's kitchen and site operation.
  - e. Show proof of Food Handler Certification within 60 days of commencement of this contract (California Uniform Retail Food facilities Law §113716).
  - f. Prepare and submit, in a timely manner, all required reporting – monthly financial statement, monthly MIS and Project Income by program and congregate site, and quarterly in-service training and nutrition education report for volunteers, paid staff, clients and caterer. Monthly invoices must be submitted to the Division of Aging and Adult Services no later than the **15 of the month** for the month prior.
  - g. Participate in the evaluation of the nutrition program. Evaluation may entail a review of the financial records, fundraising strategies, marketing and outreach, and other related program activities. Continued funding of the program will be determined by the results of the evaluation, as agreed upon by the Contractor and the Division of Aging and Adult Services
  - h. Increase use of environmentally sound methods in meal service operation and delivery.
  - i. Review suggested meal donation rate for approval by the Commission on Aging and the Division of Aging and Adult Services staff prior to implementation. Use project income generated, or voluntary contributions received from participants to increase the service level or facilitate access to service.
  - j. Include the following statement in all publications and written materials developed by the program: “Funding for this program, at least in part, is made available by the Older Americans Act, administered locally by the Marin County Department of Health and Human Services, Division of Aging and Adult Services.”
  - k. Attend all mandatory contractors' meetings scheduled by the Division of Aging and Adult Services.
  - l. Serve, the number of minority elders at a minimum, in the same proportion as represented in Marin's older population according to the most recent US Census.
11. **Minority Service Priority:** [pursuant to Older Americans Act Sec. 306. (a)(5)(A)(ii)] In order to satisfy the service needs of low income minority individuals, the contractor will give priority to minority persons when hiring new staff or recruiting new volunteers as permitted by law.
12. **Services to lesbian, gay, bisexual, and transgender older adults:** [pursuant to the Older Californians Equity and Protection Act (AB 2920)]: provider must ensure that programs

and services are available to all older adults regardless of sexual orientation and gender identity. Evaluation of outreach efforts to gay, lesbian, bisexual, and transgender older adults will be included in the Division of Aging and Adult Services contract monitoring requirements.