



HEAL Together Request for Proposals:

The Basics / Due Dates:

- 1. **July 15, 2021** All agencies must begin with a Letter of Interest, which is due no later than July 15, 2021.
- 2. **July 30, 2021** Agencies approved to submit a full proposal will be notified.
- 3. **Sept. 22, 2021 –** Due date for submission of full proposal
- 4. Proposals must be based on a two-year project budget of \$750,000. If the agency anticipates requiring more than \$750,000, a separate financial justification must be included (no longer than one page).
- 5. Narrative Summary should not exceed 8 pages. All narrative summaries must be double spaced, 1" margins, with 11-12 sized standard font (Calibri, Arial, etc.)
- 6. Prepare application packet including narrative, budget form, and requested attachments, except the agency audit, merged into a <u>single file PDF.</u>
- 7. Please attach as a separate PDF file most recent audited financial statement.
- 8. Submit application packet via email to: Siobhan Greene, Pres/CEO sgreene@hospicegiving.org

Eligibility:

Only non-profit, 501(c)3 agencies serving Monterey County that demonstrate the following may apply:

- Strong collaboration with the community
- Capacity to provide/coordinate bi-lingual, bi-cultural services.
- Strong board involvement and competent leadership
- Proven track record of relationships fostered with other organizations and constituencies in the community; seen as a trusted source of support and services.

<u>For Partnerships</u>: Partner Applicants will be defined as two or more agencies who are submitting one application as a collaborative entity. This does not require a new 501c3 status, but does require the agencies have a formalized agreement, such as an MOU or fiscal sponsorship, reviewed and approved by legal counsel. Please use sections 2 – 6 to explain how each organization will function as collaborators.

RFP Required information: Please provide a narrative summary addressing the following elements in the order presented.

- 1. Organizational Background: (1-2 paragraphs)
 - o Provide an overview of your organization, mission, purpose, governance structure, and years in operation.
 - o For Partnerships: Please provide description above for each organization.
- 2. Current Services: (2-3 paragraphs)
 - o Define your existing services as they relate to grief and bereavement support and/or community engagement. Be specific about the current





communities/demographics you serve. Explain how this project would either compliment or change your current service model.

3. Project Strategies:

This project will require extensive system management and coordination of services, along with leveraging community partners and providers. Explain the unique approaches you will employ for this project to improve and expand grief support services in our communities, considering the following:

- o The various types of grief and services with which to address them.
- Reaching and building trust with the Latinx communities; engaging trusted messengers
- o Methods to meet the diversity of the communities: vastness of the county, access to care, culture, ethnicity, traditions, age.
- o Program accessibility and "meeting people where they are."
- o Services to support the evolving impact of the pandemic on direct care providers.
- o Natural community partners and how you intend to work with them.
- Explain how you will engage bi-lingual grief support providers and the variety of service providers you intend to coordinate.

4. Capacity:

- o How will this project impact your current capacity and what steps / actions are needed to scale your services to meet this need?
- What is your staffing/personnel plan for this project? # FTEs, in office, remote, hybrid, contractor vs employee, etc.
- Define internal operating tools or systems that will facilitate coordination of services, intake and/or clinical assessments, referral systems, and tracking tool to measure outcomes.

5. Communications Plan:

o Provide a detailed communications plan that you will implement to reach individuals, families, and referral sources.

6. Provider Support / Training:

 Describe programs, if any, you will make available to providers of grief and bereavement care such as in-services, support programs, consultations, or training.

7. Project budget:

Current funding is \$750,000. Please provide a budget using the excel project budget form provided. Address the following in your narrative summary.

- o Provider reimbursement structures
- o Fee structure and/or insurance reimbursement, if applicable.
- o If you feel additional resources will be needed, explain specifically how much more funding you would need and how that funding would impact your services. Also provide information on strategies your agency could employ to add to the resources through fundraising and/or grants.





 For Partnerships: Who will be the recipient funds as agreed to in MOU or fiscal sponsor?

8. Metrics:

- Provide specific goals/objectives/metrics in the SMART format that tie to narrative sections 3 – 6, to measure your success, such as #s of clients to be served, partner agencies involved, communities served, scope of services to offer, and allocation of resources.
- o For Partnerships: Who will measure which metrics?

9. Other/Concluding Comments:

 Please use this section to add other information not addressed in other sections of this RFP.

Required documentation and attachments are to be submitted in the following order:

- 1. Cover letter from Board Chair and Chief Executive Officer supporting this request.
- 2. Verification of tax-exempt status (IRS determination letter)
- 3. Narrative Summary
- 4. Project Budget
- 5. List and affiliations of Board of Directors
- 6. Key Staff Biographies and list/titles of other staff
- 7. Balance Sheet as of 6/30/2021
- 8. Operating Budget v Actual for current fiscal year (or as of 6/30/21 if on a fiscal year)
- 9. Audited Financial Report
- 10. Most recent Annual Report (if available)
- 11. Support letters or endorsements (limited to two)
- 12. Collaborators' commitment/interest letters (not partner agencies)

For Partnerships:

- A letter signed by each organization's board chair supporting the structure of the partnership.
- Formalized agreement such as an MOU or fiscal sponsor agreement that has been reviewed by legal counsel.
- Attachments # 2, 5,6,7,8 for each partner agency.
- Audited Financial report ONLY for the lead agency.

Grant Review Process – September through November

We will acknowledge your application within 3 days of its receipt.

Upon review of your application, we will contact you if any information is missing or incomplete. A committee will review and analyze your proposals.

Site Visits will be scheduled with top candidates.

Decision: Award decisions will be made no later than December 2021.