



# DEPARTMENT OF HUMAN SERVICES

Town of Greenwich • 101 Field Point Road • Greenwich, CT 06830

Department of Human Services  
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Alan D. Barry, Ph.D.  
Commissioner of Human Services

May 7, 2020

Mr. John Doe  
Title  
Agency  
Greenwich, CT 06830

Re: Community Partnerships  
Request for Proposal

Dear Community Provider:

The Greenwich Department of Human Services (GDHS) invites you to submit a response to the accompanying Request for Proposal (RFP). The Department has limited funds available to provide grants to support programs that supplement its basic mission in meeting basic human needs for the period July 1, 2021-June 30, 2022.

We recognize that our Department cannot provide a complete range of the essential services that our clients require in meeting their basic needs. GDHS also recognizes that to efficiently and effectively provide essential services requires a collaborative effort across the service continuum.

Our goal is to establish a strong relationship with an agency network to strengthen the community's capacity in providing basic human services. We plan on selecting agencies that reflect both a commitment to GDHS' service need priorities in the areas of education, employment, housing, medical/mental health, and personal safety but also collaborate with other agencies.

Please read the RFP thoroughly to ensure you adhere to the response requirements. I will serve as the primary contact to this RFP and can be reached at 203-622-7782 to answer any questions.

Yours Sincerely,

Alan D. Barry, Ph.D.  
Commissioner, Greenwich Department of Human Services

*Department Mission Statement: "To enhance the quality of life of Greenwich residents through support in meeting basic human needs and promoting services that foster self-sufficiency."*

An Equal Opportunity Employer, M/F/H



**COMMUNITY PARTNERSHIPS  
REQUEST FOR PROPOSAL  
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## **A. BACKGROUND**

The mission of the Town of Greenwich's Department of Human Services (GDHS) is to enhance the quality of life of Greenwich residents through support in meeting basic human needs and promoting services that foster self-sufficiency and economic independence. To achieve our mission, we are focusing our efforts on five key areas of need, which have also been highlighted in the United Way's Needs Assessment Report. These five areas of need are as follows:

- **Education**—positive youth development (behaviors and choices) and mentoring for children 7-14 years of age
- **Employment**—vocational and job development
- **Housing**—emergency/crisis shelter
- **Medical/Mental Health**—access to timely and quality health and counseling services
- **Personal Safety** — protection against abuse, neglect, and domestic violence

GDHS recognizes that we, alone, cannot effectively meet all these needs. Our goal is to foster a strong collaborative spirit across the agency network to strengthen the community's capacity to provide basic human services to individuals and families in need through the efficient and effective use of resources.

GDHS understands the importance of having a coordinated and collaborative relationship with non-profit organizations in the community so that our residents are provided the best and most cost-effective services. We also recognize our responsibility in supporting these services and ensuring their sustainability so they are available when needed.

## **B. PURPOSE OF RFP**

This Request for Proposal (RFP) invites responses from organizations related to one or more of the five need areas specifically mentioned. We plan to fund the selected agencies for the development (start-up), maintenance, or expansion of services/programs that complement the Department's mission. Our objective is two-fold: 1) address key areas of community need (education, employment, medical/mental health, personal safety, and housing) and 2) foster collaboration between organizations to strengthen the community's response to these needs.

The purpose of this RFP is to provide interested parties with an understanding of GDHS' requirements and sufficient information to complete the Community Partnerships Proposal Response Form (refer to Attachment B) within the prescribed timeline. All respondents are expected to complete Attachment B, as this will be the only document that will be considered for further evaluation by GDHS.

### **C. PROPOSAL REQUIREMENTS**

There are three key requirements for responding to this RFP.

**#1: Complete the Letter of Intent (Attachment A).** Once completed, provide Attachment A to the designated person on or before May 25, 2020. The receipt of the Letter of Intent reflects your organization's interest in submitting a response to this RFP and does not bind you in any way to respond to the RFP.

**#2: Complete the Community Partnerships Proposal Response Form (Attachment B).** Submit Attachment B to Dr. Alan Barry on or before June 22, 2020. All respondents must submit Attachment B for their responses to be formally considered in GDHS' funding evaluation process.

**#3: Submit a customized Progress Report (First time RFP submission).** GDHS and its Board wishes to objectively review and evaluate both the use and influence of any provided funds. As such, GDHS expects there to be a rigorous exchange of information between each agency and the Department on a quarterly basis. To accommodate our expectations, we ask that each agency consider the information/metrics (including outcome information) that they propose to report and design a customized Progress Report for their particular organization. The sample Progress Report is submitted along with a completed Attachment B on June 22, 2020.

### **D. EVALUATION & SELECTION CRITERIA**

The responses to our RFP will be evaluated in accordance with the procedures contained in this section. During the evaluation process, GDHS reserves the right to validate selected data provided and may request additional information from an agency that responds in order to make the most informed decision.

The evaluation process spans five major categories. Each category has specific criteria that will be evaluated against the received responses. A certain number of points will be assigned to each category and the criteria set forth will be used as the basis for ultimately determining the precise number of points awarded and for selecting those agencies that will be funded under the Community Partnership program.

The five categories to be evaluated, their specific criteria, and the points allotted to each category are as follows:

**Proposal Response Assessment—100 Points**

- Thoroughness/Completeness
- Timeliness
- Reliability/Integrity of Data Provided
- Extent of Supplementary Information Provided

**Strategic Fit Assessment—300 Points**

- Alignment with DHS' Priorities
- Description of Service/Program
- Service/Program Track Record
- Accessibility of Location

**Funding Request Assessment—300 Points**

- Urgency of Need
- Reasonableness of Amount Requested based on Defined Need vs. Financial Resources Available To The Agency
- Budget For The Proposed Year
- Description Of All Funding Sources and Funding Strategy

**Progress Reporting Assessment—100 Points**

- Supportive Data
- Proposed Outcomes
- Mix of Figures/Narrative
- Improvement Of Progress Reports Submitted vs. Current Report Form

**Collaborative Spirit Assessment—200 Points**

- Responsiveness to DHS' Clients
- Referrals to/from DHS
- Interest/Track Record in Collaboration
- Extent Of Collaboration With Another Agency in Proposal Response

**Total Possible Points—1000 Points**

## **E. KEY DATES**

There are a number of dates that merit careful consideration in responding to this RFP.

<b>Date</b>	<b>Event</b>
May 7, 2020	RFP Announced/Released
May 25, 2020	Deadline for Letter of Intent (4PM)
May 25, 2020	Deadline for Written Questions (4PM)
June 4, 2020	Official Responses to Questions Released
June 22, 2020	Deadline for Proposal Response Form and Sample and Progress Report (4PM)
June 25-July 27, 2020	GDHS Evaluation Process
August 6-17, 2020	Site Visits for Selected Entities
August 20-24, 2020	Appointments Arranged with Evaluation Committee
September 3-21, 2020	Meetings with Evaluation Committee
September 18, 2020	Preliminary Funding Review by GDHS Board
October 5, 2020	Terms and Conditions (T&C) Letter Released
October 15, 2020	Due Date for Return of Signed T&C Letter
October 26, 2020	Final Funding Recommendation by GDHS Board
November 17, 2020	GDHS Board approval and budget submission

## **F. TERMS AND CONDITIONS**

1. All responses to this RFP become the property of GDHS, and as such may be subject to public review.
2. Any costs and expenses incurred by an organization in preparing or submitting responses are the sole responsibility of the respondent.
3. This RFP does not commit GDHS to award funds.
4. GDHS reserves the right to request additional information and/or clarification from any of the respondents to this RFP.
5. A respondent must be prepared to present evidence to their responses to satisfactorily meet the requirements set forth or implied in the RFP.
6. In some cases, respondents may be asked to attend a meeting or be interviewed to provide further explanation to GDHS' RFP Evaluation Committee.
7. If a response involves two or more respondents the precise amount of funding requested by each respondent needs to be clearly stated and a signed letter be provided that sets forth the specific amounts for each party.

8. All respondents to the RFP must conform to instruction. Failure to include required signatures, meet deadlines, answer all questions, follow the required format, or failure to comply with other requirements of the RFP may be considered appropriate cause for rejection of the response. All communication must be done through the DHS Commissioner.
9. The contract produced from the selection process will represent the entire agreement between the respondent and GDHS and will supersede all prior negotiations, representations, or agreements—alleged or made—between the parties. Terms of contract are for one year with no guarantee of automatic renewal.
10. GDHS may terminate the funding agreement, in whole or in part, for default based on the following conditions: (i) Respondent fails to provide GDHS with timely and/or acceptable progress reporting data; (ii) insolvency of the respondent; (iii) loss of key personnel responsible administering the program/service; (iv) lack of responsiveness to GDHS inquiries; or (v) respondent fails to fulfill any of its obligations. Prior to termination, GDHS shall notify respondent of the default condition and shall allow respondent thirty (30) calendar days within which to rectify the condition. If the condition is ameliorated within the allowed period, the funding agreement shall remain in full force and effect. If the default condition remains beyond the allowed period; GDHS may terminate the funding agreement, in whole or in part by written Notice of termination to the respondent. All notices of termination shall minimally state the basis for termination, and the date upon which such termination will become effective.

**ATTACHMENTS FOLLOW**

**Attachment A**  
**Letter of Intent to Submit a Proposal**

**LETTER OF INTENT TO SUBMIT A PROPOSAL**

**Town of Greenwich**  
**Department of Human Services**  
**RFP for Community Partnerships**

**Return To:** Ms. Jennafer Kalna  
Asst. to Department of Human Services Commissioner  
Greenwich Town Hall, 3<sup>rd</sup> Floor  
101 Field Point Lane  
Greenwich, CT 06830  
203-622-7780 (Phone)  
203-622-7781 (Fax)

**Return Deadline:** 4:00 P.M., Friday, May 25, 2020

The organization/agency below intends to submit a proposal in response to the above referenced RFP.

The agency intends to respond to the following basic need areas:

Education\_\_\_ Employment\_\_\_ Housing\_\_\_ Medical/Mental Health\_\_\_ Personal Safety\_\_\_

*Note: This letter is a non-binding expression of interest and does not obligate the sender to submit a proposal.*

**Name:**

**Mailing Address:**

**Contact Person:**

**Telephone:**

**FAX:**

**E-mail:**

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Signature

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Title

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Date



**ATTACHMENT B**

**Town of Greenwich  
Department of Human Services  
Community Partnerships Proposal Response Form  
July 1, 2021-June 30, 2022**

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***I. Application Information***

Organization/Agency		Executive Director	
Contact Person		Title	
Address	City	State	Zip
Telephone	Federal ID Number	Contact Person's Email Address	

***II. Organization/Agency History***

	Key Programs/Services (Top 5 only please)
	1
Total # of Clients Served (FY'19)	2
Estimated # of GDHS Clients Served (FY '19)	3
# of Locations	4
Greenwich Location <input type="checkbox"/> Yes <input type="checkbox"/> No	5

***III. Specific Service/Program Requested For Funding Consideration:  
(Restrict response to specific program/service that funds are being requested)***

Description:

Strategic Fit with GDHS' Priorities:

Education       Employment       Housing       Medical/Mental Health       Personal Safety

*Continued on next page*

**III. Specific Service/Program Requested For Funding Consideration:**  
 (Restrict response to specific program/service that funds are being requested)

Continued

Client Demographics:		
1. # of Unduplicated Clients Served _____  4. Average # of Visits _____  5. Average Duration of Service _____ Months	2. Representative Age Distribution (Age Groups) 0 - 17 _____ 18 - 24 _____ 25 - 44 _____ 45 - 64 _____ Over 65 _____ Total 100% _____	3. % Greenwich Residents (of prior question- item #2) (Age Groups) 0 - 17 _____ 18 - 24 _____ 25 - 44 _____ 45 - 64 _____ Over 65 _____ Total _____
Expected Use of GDHS Funds: <input type="checkbox"/> Development of new service/program <input type="checkbox"/> Maintenance of current service/program <input type="checkbox"/> Expansion of current service program <input type="checkbox"/> Other _____		Current Staff Resources Supporting Program/ Service _____ # Full-time _____ # Part-time _____ Total

**IV. Funding Requested of GDHS**

<b>Funding Request:</b> <input type="checkbox"/> \$10,000 or less <input type="checkbox"/> \$11,000 - \$20,000 <input type="checkbox"/> \$21,000 - \$30,000 <input type="checkbox"/> \$31,000 - \$40,000 <input type="checkbox"/> \$41,000 - \$50,000	<input type="checkbox"/> \$51,000 - \$60,000 <input type="checkbox"/> \$61,000 - \$70,000	<b>Specific Amount Requested</b> \$ _____ _____ % of total funding
<b>Aggregate Funding History With GDHS (Last 5 Years)</b> <input type="checkbox"/> \$25,000 or less <input type="checkbox"/> NA <input type="checkbox"/> \$26,000 - \$50,000 <input type="checkbox"/> \$51,000 - \$100,000 <input type="checkbox"/> Over \$100,000		
<b>Total Amount Received from GDHS</b> \$ _____		

**Nature of Request**  
 Explanation:

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How will services be impacted and targeted population assisted with the GDHS funding?

Proposed Metrics for monitoring service Utilization and Impact/Outcome to show how program will meet need	
<u>Utilization</u>	<u>Impact/Outcome</u>

## V. Financial Profile

### 1. Overall Organization (Please also provide latest audited Financial Statement)

		2019	2018	2017
<b>Total Revenues</b>	\$	_____	_____	_____
a. Fee-based Income	\$	_____	_____	_____
b. Donations/Fundraising/Grants	\$	_____	_____	_____
c. Other government funds	\$	_____	_____	_____
i. Total Expenses	\$	_____	_____	_____
ii. Surplus/Deficit		_____	_____	_____

### 2. Target Program/Service (Please provide Program/Service Budget vs. Actual)

		2019	2018	2017
a. Total Revenues Generated	\$	_____	_____	_____
b. Development Dollars Allocated (from above)	\$	_____	_____	_____
c. Total Cost	\$	_____	_____	_____
d. Surplus/Deficit (a + b) – (c)	\$	_____	_____	_____

### 3. Costs of Target Program (for FY'19 only)

% related to Salaries	\$	_____
% related to General & Admin Costs	\$	_____
% related to Other Costs	\$	_____

Provide any other explanation (if desired) \_\_\_\_\_

## VI. Representations

Question	Representation		
	Yes	No	Other
1. Is the information supplied as accurate as possible to the best of your knowledge?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you aware that the contract term for the proposed funding spans July 1, 2021 to June 30, 2022?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you acknowledge that any funding agreed to for the proposed contract term does not guarantee future funding?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you agree that you will only contact Dr. Alan Barry, Commissioner of Human Services for the Town of Greenwich, with any questions/comments regarding the funding evaluation process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Will you provide a P&L of your organization (for your past fiscal year)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Will you provide a P&L for the target program/service (for the last fiscal year)? If a new program/service, please provide the Budget.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Are you receptive to meeting 2-3 times during FY '21-22 to review program progress?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you aware that GDHS is expecting to receive quarterly progress reports from you throughout FY '21-22?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Are you receptive to GDHS assisting in the format and content requirements of the progress reports?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Are you supportive of the proposed funding payout schedules (tied to GDHS' fiscal year and in percentage terms as a percent of the total funding amount)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Upfront payment (July 30)		20%	
b. Process payment (within three weeks of receiving first quarterly report covering July 1 – September 30)		20%	
c. Process payment (within three weeks of receiving second quarterly report covering Oct. 1 – Dec. 30)		20%	
d. Process payment (within three weeks of receiving third quarterly report covering Jan. 1 – March 30).		20%	
e. Process payment (within three weeks of receiving fourth quarterly report covering April 1 – June 30).		20%	
11. Have you read the RFP's Terms and Conditions (T&C's)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are you supportive of all T&C's?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Is the contact person indicated in Section I of this response aware that we may contact him/her as part of our evaluation process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Did the contact person complete this Proposal Response Form?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Did the Executive Director sign-off on Response?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>