

Contra Costa County

REQUEST FOR PROPOSAL (RFP)

**County Measure X Innovation Fund
Phase II: Project Implementation Plan**

RFP #: 2306-665

RELEASE DATE: June 23, 2023

Proposal Due Date: August 7, 2023

NO LATER THAN 3:00 P.M. PDT

Contact: Julie Enea, Senior Deputy County Administrator

**CONTRA COSTA COUNTY
COUNTY ADMINISTRATOR'S OFFICE
1025 ESCOBAR ST., 4TH FL.
MARTINEZ, CALIFORNIA 94553**

Table of Contents

Section I: Introduction 3
Section II: Phase 2 Qualification and Requirements..... 5
Section III: Evaluation and Selection Process.....7
Section IV: Instructions to Responders.....9

Exhibits	Attachments
<ul style="list-style-type: none">• Exhibit 1 – Project Description	Attachment A: Addenda Acknowledgement
<ul style="list-style-type: none">• Exhibit 2 – Sample Project Budget	Attachment B: Contra Costa County Terms and Conditions
<ul style="list-style-type: none">• Exhibit 3 – Logic Model	Attachment C: Anti-Collusion Statement
<ul style="list-style-type: none">• Exhibit 4 – Timeline/Milestones	

Section I: Introduction

A. Purpose

The County is soliciting a Request for Proposal (RFP) from interested and qualified California registered nonprofit organizations who wish to develop and submit comprehensive Project Grant proposals for innovative projects that respond to local service needs, improve equitable access to public services, remove structural barriers that cause inequities and poverty, provide the greatest impact for every dollar spent, and have potential for transformative change in Contra Costa County.

B. Objectives

The County Board of Supervisors has approved a one-time allocation of Two Million (\$2,000,000) of FY 22-23 Measure X sales tax dollars to fund the planning and implementation of one or more selected projects in the following categories:

1. **Safe & Engaged Communities** – Improving health, wellness, and public safety outcomes through community outreach/awareness, education, and engagement.
2. **Agriculture and Food Systems** – Improving environmental health, economic profitability, and social and economic equity.
3. **Economic Vitality** – Providing education, job training, decent jobs, and viable businesses to reduce the number of people at a poverty level.
4. **Clean & Sustainable (Clean and Green) Environment** – Safe food and water, proper waste disposal, clean air, pest control; preventing waste.
5. **Reliable & Accessible Infrastructure** – Modernization, technology, or equity in digital access, cybersecurity, and resilience.

Phase I – (COMPLETED) Planning Grants. The County awarded Planning Grants, each in the amount of \$5,000, to eight applicants for development of selected project concepts into comprehensive Phase II-Project Grant proposals.

Phase II of the Innovation Fund grant process will offer up to One Million Nine Hundred Sixty Thousand (\$1,960,000) to one or multiple eligible Phase I grantees.

Award of a Planning Grant will not guarantee award of a Project (Implementation) Grant.

C. Calendar of Events

Event	Date
RFP Release date	6/23/2023

Last date to submit written questions	7/14/2023 no later than 3:00 p.m. PDT
RFP due date	8/7/2023 no later than 3:00 p.m. PDT
Applicant's Interview date	TBD (likely between 9/1/2023 and 9/22/2023).
Contract award date	TBD

D. Questions

All questions regarding the proposal will be accepted through the Periscope S2G/BidSync site only. The deadline for submitting questions for this RFP is on or before 7/14/2023 no later than 3:00 p.m. PST. All questions will be answered and disseminated to those registered on the Periscope S2G/BidSync website. Contact customer service if you need technical assistance with any part of the bid process; support@bidsync.com or call (800) 990-9339.

E. Correspondence

As of the issuance of this RFP, vendors are specifically directed not to contact County personnel for meetings, conferences, or technical discussions related to this RFP. Failure to adhere to this policy may result in disqualification of the vendor.

F. Addenda Acknowledgement

All the Contractors participating on this bid shall acknowledge receipt of any amendments to this bid event by returning a signed hard copy with the bid. Failure to acknowledge receipt of any amendments may render the proposal to be non-responsive. Changes to this bid event shall be issued only by the County. See attachment A.

Section II: Phase II Qualification and Requirements

The County is soliciting responses from Contra Costa County Innovation Fund Phase I grantees that have innovative project concepts meeting the County's Objectives that cannot be implemented without supplemental funding.

Your response shall include, at a minimum, the following information. Failure to include these items may be grounds for rejection of your response.

A. Qualifications. The qualified proposer must include copies of documents demonstrating eligibility that were not already provided in the Phase I submittal. Eligibility requirements and the acceptable evidentiary documents are listed below.

- ✓ Tax Exempt Organization. Documents certifying:
 - IRS designation under section 501(c)(3) of the Internal Revenue Code (most nonprofits), or
 - IRS designation under section 501(c)(6) of the Internal Revenue Code (chambers of commerce)
 - Most recent IRS Form 990, 990-EZ, 990-N (postcard) or Form 1023/1024 indicating religious or other exemption from filing
- ✓ "Current" status with the California Secretary of State
 - California Business Portal printout (bizfileonline.sos.ca.gov), attached to e-application
- ✓ Meet County insurance requirements, including insurance certificates demonstrating:
 - General Liability Insurance coverage of at least \$500,000
 - Indemnifying the County, and covering for any emergent liabilities
 - Workers compensation insurance is required for organizations that have employees, or if volunteers receive ANY stipends/payment
- ✓ Copies of bylaws or policies that describe the way business is conducted including management, fiscal policies and procedures, and policies on nepotism and the management of potential conflicts of interest.

B. Requirements. All eligible participants shall complete the attached application. The grant award funds will be disbursed on a cost reimbursement basis following execution of a grant contract.* (See below for exceptions.) Within a year of grant

funding approval, or within one month of project completion, whichever comes sooner, recipients must submit a final project report that includes invoices and receipts documenting how funds were spent and the results of the project. Grant awardees may request a budget modification to address any proposed changes to the project costs. This request must be made in writing prior to incurring the unapproved expenses. Unapproved expenses will not be reimbursable. Innovation Fund grants will be disbursed after receipt and approval of the final project report. Details will be outlined in the grant award letter that is sent to all successful applicants.

The County will make grant awards for prospective expenditures from selected Phase I grantees. Project expenditures eligible for reimbursement must be made after Board of Supervisors approval of grant funding.

*Exception For Non-Profit Organizations That Can Demonstrate Financial Hardship: Private, non-profit entities that can demonstrate that providing Innovation Fund grant funding on a cost reimbursement basis will create a financial hardship and be detrimental to the operation of the program will be eligible to receive up to one-half of the grant amount after the grant is awarded. The remaining amount of the grant will be disbursed after the entity has submitted information including invoices and receipts documenting how the initial disbursement was spent. Within a year of initial notification of the grant funding award (October 15, 2024), or within one month of project completion, whichever comes sooner, the entity will be required to submit information including invoices and receipts documenting how the second disbursement was spent and provide a final project report documenting the results of the project.

If selected, the grantee (s) shall provide evidence of eligibility and proof of insurance, as specified in their contract with the County.

Section III: Evaluation and Selection Process

A. Selection Process

All proposals received will be evaluated by an RFP Review Panel. The following criteria, not listed in the order of importance, will be used to determine which concept proposals best meet the needs of the County. Proposals will be evaluated based on the following criteria:

- Experience and technical competence, project management, financial management, communications, track record and credibility of the organization, and organizational capacity and expertise of the applicant to achieve the intended outcomes
- Potential of the project for transformative change
- The extent to which the project can be scaled up or replicated in the future with additional funders, through collaborations, or through other methods and systemic approaches (if applicable)
- The extent to which the project will improve equitable access to public services
- The extent to which the project will remove structural barriers that cause inequities and poverty
- Potential of the project to provide greatest impact per dollar spent
- Overall quality of the concept and proposal (consistency with Innovation Fund guiding principles; measurable and identifiable objectives, timelines, benchmarks, impact, and results of the project; the extent to which the project activities are directly tied to desired outcomes)

B. Evaluation and Interview

Upon completion of the review period, the County shall notify those Proposers who will be considered for an interview. Any delay caused by Proposer's failure to respond to direction from the County may lead to a rejection of the Proposal. The individual and/or team members identified in the proposal should attend the interview. Applicants should prepare to make a 10-minute presentation to the Review Panel. Interviews may be conducted virtually, at the discretion of the Review Panel.

C. Award of Agreement

If the County determines to award a Phase II Grant, a Professional Services Contract shall be sent to the successful Proposer for the Proposer's signature. No proposal or award shall be binding upon the County until after the Agreement is signed by duly authorized representatives of both Proposer and the County.

D. Proposals are Public Records

California Government Code section 6250, the Public Records Act, defines a public record as any writing containing information relating to the conduct of the public's business prepared, owned, used or retained by any state or local agency regardless of physical form or characteristics. The Public Records Act provides that public records shall be disclosed upon request and that any resident has a right to inspect any public record unless the document is exempted from disclosure.

Unless otherwise compelled by a court order, the County will not disclose any proposal while the County conducts its deliberative process in accordance with the procedures identified in this RFP. However, after the County either awards an agreement to a successful Proposer, or rejects all proposals, the County shall consider each proposal subject to the public disclosure requirements of the California Public Records Act. Each Proposer is hereby informed that, upon submittal of its proposal to the County in accordance with this RFP, the proposal becomes the property of Contra Costa County.

E. Protest Procedures

In the event a dispute arises concerning the proposal process prior to the award of the contract, the party wishing resolution of the dispute shall submit a request in writing to the attention of:

Cindy Shehorn, Purchasing Services Manager

Contra Costa County

Public Works Department
40 Muir Road, 2nd Floor
Martinez CA, 94553

Section IV: Instructions to Responders

All proposals shall include the following information, organized as separate sections of the proposal. The proposal should be concise and to the point.

A. Format

Respondents shall submit proposals that are concise and respond to the specifications posted in this RFP. Respondents shall submit each bid with a cover letter signed by an authorized person and include the following documents:

- a. Cover Letter – Signed by an authorized representative of the company.
- b. Completed Phase 2 Innovation Fund Application.
 - Project Description – 1,000 words or less – see Exhibit 1
 - Completed Project Budget – Exhibit 2 – Excel spreadsheet attached.
 - Logic Model – see Exhibit 3
- c. Anti-Collusion Statement – See Attachment C
- d. Addenda Acknowledgement – See Attachment A

B. Proposal Submission

- a. Response to this RFP MUST be submitted electronically through the Periscope S2G/BidSync web site – NO EXCEPTION
- b. Late submittals WILL NOT be accepted – NO EXCEPTION
- c. Fax submittals WILL NOT be accepted – NO EXCEPTION

C. Proposal Expenses

Respondents shall be fully responsible for all costs incurred in the development and submission of this RFP.

D. Applicant's Responsibility

The applicant assumes sole responsibility for the complete effort required in submitting a bid proposal in response to this RFP. No special consideration will be given after bid proposals are opened because of a proposer's failure to be knowledgeable as to all of the requirements of this RFP.

E. Interpretation

Should any discrepancies, omissions, or doubt as to their meaning be found in the RFP specifications or requirements, the Respondent shall notify the County in writing through the

Periscope S2G/BidSync website. The County will send written instructions or addenda to all participants in the RFP process. The County shall not be responsible for oral interpretations.

F. Reservation

The County reserves the right to do the following at any time and for its own convenience, at its sole discretion:

- To reject any and all proposals without indicating any reasons for such rejection.
- Terminate this RFP and issue a new Request for Proposals anytime thereafter.
- Extend any or all deadlines specified in the RFP, including deadlines for accepting proposals by issuing an Addendum at any time prior to the deadline for receipt of responses to the RFP.
- Disqualify any respondent based on any real or perceived conflict of interest or evidence of collusion that is disclosed by the proposal or other data available to the County. Such disqualification is at the sole discretion of the County.
- Reject the proposal of any Respondent that is in breach of or in default under any other agreement with the County.
- Reject any Respondent deemed by the County to be non-responsive, unreliable, unqualified, or non-responsible.

G. Truth and Accuracy of Representation

False, misleading, incomplete, or deceptively unresponsive statements in connection with a proposal shall be sufficient cause for rejection of the proposal.

H. Addenda

No one is authorized to amend any of these documents in any respect by an oral statement or to make any representation or interpretation in conflict with their provisions. Any changes to these documents will be issued in writing via Addenda to be posted on the Periscope S2G/BidSync website.

I. Addenda Acknowledgement

All addenda shall include an acknowledgement of receipt that must be returned. The addenda must be signed and attached to the final response. Failure to attach any addendum may result in the rejection of the response. See Attachment A.

J. Non-Collusion

By submitting a signed proposal, the applicant certifies that there has been no collusion with any other applicant. Reasonable grounds for believing the applicant has an interest in more than one proposal will result in rejection of all proposals in which the applicant has an interest. Any party to collusion may not be considered in future proposals for the same or similar work. See attachment D.

Attachment A: Addenda Acknowledgement

TO BE RETURNED WITH REQUEST FOR PROPOSAL

RFP No.: _____ Title: _____

ADDENDUM ACKNOWLEDGEMENT (Please initial for addendums received)

Addendum #1: _____ Addendum #3: _____

Addendum #2: _____ Addendum #4: _____

Company Name: _____

Contact Name: _____

Email Address: _____ Phone No.: _____

Address: _____

Authorized Signature: _____

Date: _____

Attachment B: Contra Costa County Terms and Conditions

Place Holder

See Attached

Attachment C: Anti-Collusion Statement

By signing this form, the applicant agrees that this quote is made without any other understanding, agreement, or connection with any person, corporation, or firm submitting a quote for the same purpose and that the quote is in all respects fair and without collusion or fraud,

IT IS AGREED BY THE UNDERSIGNED APPLICANT, THAT THE SIGNING AND DELIVERY OF THE QUOTE REPRESENTS THE APPLICANT'S ACCEPTANCE OF THE TERMS AND CONDITIONS OF THE FORGOING SPECIFICATIONS AND PROVISIONS, AND IF AWARDED, THIS CONTRACT WILL REPRESENT THE AGREEMENT BETWEEN THE APPLICANT AND THE COUNTY.

NAME OF FIRM: _____

[Sign in ink in the space provided below]

SIGNED BY: _____

TITLE: _____

ADDRESS: _____

CITY & STATE: _____

TELEPHONE: _____



CONTRA COSTA COUNTY

PHASE 2 INNOVATION FUND APPLICATION

Summary

1. In what geographic area(s) will the requested funds be used to serve residents?
Click or tap here to enter text.
2. What is the approximate total value of your application (how much are you requesting from the Innovation Fund)? Click or tap here to enter \$ amount.
3. In which category is your project primarily focused?
Choose an item.

Organization Profile

4. What is the name and mailing address of the fiscal agent?
Click or tap here to enter text.
Click or tap here to enter text.
5. Enter the name of your organization or EIN number:
Click or tap here to enter text.
6. Should this request be approved, what is the name to which payment should be directed?
Click or tap here to enter text.

7. Organization web site address (if available):
Click or tap here to enter text.

8. Facebook Page (eg. <http://www.facebook.com/username/>) (if available):
Click or tap here to enter text.

Contact Information

9. Provide the Name, Title, Phone #s, and email address of the primary contact person for this application.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Organization Profile

10. Please tell us about this organization's mission or purpose. (1-2 sentences only)
Click or tap here to enter text.

11. Please describe the programs and services this organization provides (100 words or less).
Click or tap here to enter text.

12. Please list your organization's board, council or committee members' information below: (Max. 10 entries)

Name	Title	Address

13. What is the annual budget of your organization? [Click or tap here to enter \\$ amount.](#)

Project

14. Please provide the name of this project.

[Click or tap here to enter text.](#)

15. Complete or attach as Exhibit 1 a brief description of the project in roughly 1,000 words (approx. two typed pages). Include the general purpose, approach, and target population (clients) of the project, and key milestones.

16. Please enter the amount you are requesting from the Innovation Fund:

[Click or tap here to enter \\$ amount.](#)

17. What is the total project budget?

[Click or tap here to enter \\$ amount.](#)

18. Please attach a detailed budget for your project showing ALL funding sources and uses, including the use of Phase II Innovation Funds. The budget must reflect the entire operational cost of the project. Attached as Exhibit 2, for your convenience, is an Excel template that you may use for your proposed budget. You will need to save it to your computer, fill it out, then re-attach it to the application.

19. How much funding have you raised to date for this project?

[Click or tap here to enter \\$ amount.](#)

20. Do you have other funders involved in this project. Please enter up to five other funders.

Status	Name	Total Amount	Term (Years)

21. Please list the individuals responsible for performing and overseeing the project.

Name	Role

Request Details

22. What are the eligibility criteria for client receipt of services? Be specific in stating the criteria. Simply residing in the geographic area to be served does not constitute an adequate basis for eligibility.

Click or tap here to enter text.

23. Describe the need for your project (use research data to quantify the need).

Click or tap here to enter text.

24. Identify if any other organizations or agencies provide the same or similar services.

Click or tap here to enter text.

25. Outline the goal(s) for the project. Goals should be general in nature, but measurable, attainable, and relevant to the purpose of the project.

Click or tap here to enter text.

26. Provide the specific objectives of the project that will assist your agency in meeting the goal(s).

Click or tap here to enter text.

27. What are the predicted outcomes of the project?

Click or tap here to enter text.

28. What measurable indicator(s) will determine that you have been successful in achieving the above-described outcomes?

Click or tap here to enter text.

29. Complete or attach a simple logic model indicating inputs, outputs, and expected outcomes. See Exhibit 3 for an example of a logic model.

30. Tell us how this project will have an impact on the community to be served.

Click or tap here to enter text.

31. Is your project ongoing? Yes No

32. What is the start date for commencement of your proposed project? Click or tap to enter a date.

33. What is the end date for commencement of your proposed project? Click or tap to enter a date.

34. A visual representation of a timeline will strengthen the proposal. Please attach a timeline as Exhibit 4 to identify major project milestones and target dates.

Format

- Your proposal packet, exclusive of the attachment Documents listed below, must not exceed ten single-sided pages or five double-sided pages, 8.5 by 11 inches in size. Electronic submittals are required. Please use 11-point font or larger and ½ inch margins or larger on your pages. If you exceed these guidelines, your proposal may be disqualified without review.
- Do not attach or send brochures, posters, publications, CDs, DVDs, large maps or yellow-sticky paper (e.g. Post-It™).
- Your complete application packet including digital signature must be submitted in the County’s Bidsync/Periscope purchasing portal by **3:00 p.m. on Monday, August 7, 2023** (Pacific Standard Time) to be considered for funding. If submitted after the deadline, your proposal will be disqualified). There can be no exceptions, so early submittal is recommended!

Other Related Documents

Nonprofit Organizations who are direct applicants or fiscal agents for other applicants must include various attachments with your Phase II application if not already provided during Phase I:

- Please attach a Non-Profit Status Determination letter from the Internal Revenue Service – 501(c).
File Attached?: Yes: No:
- Please attach the most recent (current) Internal Revenue Service Form 990, 990-EZ, or 990-N (e-postcard).
File Attached?: Yes: No:
- Please attach California Business Portal printout (proof that your agency is currently registered with the California Secretary of State). Go to: <https://businesssearch.sos.ca.gov>. Enter your agency's name, find it in the matrix and then print or produce a PDF of the page.
File Attached?: Yes: No:
- Please attach a copy of your agency bylaws that address nepotism and management of conflicts of interest.
File Attached?: Yes: No:

- Please attach copies of any Commitment Letters or MOU for all approved funding sources needed to carry out the proposed project.
File Attached?: Yes: No:
- County contracts for Innovation Funds required that your organization maintain General Liability Insurance (in the amount of \$500,000), Worker's Compensation, and the County is listed as an additional insured. Please attach a statement indicating that your agency can meet these requirements if funds are awarded, and you understand that failure to meet these requirements is a basis for denying a grant award and/or terminating a contract if the requirements are not maintained during the project implementation.
File Attached?: Yes: No:
- Statement describing the status of any permit approvals necessary to perform project (if applicable).
File Attached?: Yes: No:

Final Checklist Before You Submit Your Proposal

Please note that your proposal will not be considered if you provide more materials than required below:

- Exhibit 1: Up to a 1,000-word project description
File Attached?: Yes: No:
- Exhibit 2: Project budget (see sample Excel template)
File Attached?: Yes: No:
- Exhibit 3: Logic Model (see sample Model)
File Attached?: Yes: No:
- Exhibit 4: Project Timeline and Major Milestones
File Attached?: Yes: No:

Agreement

By submitting this application, I confirm that I have the authority to submit this application and agree to the conditions described below.

- (a) All information contained herein is true and accurate to the best of my knowledge;
- (b) Should Contra Costa County agree to provide funding for the project proposed in this application, I agree that information about this project may be highlighted in some of Contra Costa County public documents;
- (c) Should Contra Costa County agree to provide funding for the project proposed in this application, I agree to abide by any contracting requirements of Contra Costa County;
- (d) Should Contra Costa County agree to provide support for the project proposed in this application, I agree to complete periodic reports as required by the County Administrator's Office; and
- (e) I consent to receiving email notifications regarding this application and any subsequent emails from Contra Costa County that relate to this application or any future Innovation Fund grant cycles.

EXHIBIT 1: PROJECT DESCRIPTION IN 1,000 WORDS OR LESS (approx. two typed pages)

Click or tap here to enter text.

EXHIBIT 2: SAMPLE PROJECT BUDGET (SEE EXCEL FILE FOR ACTUAL WORKSHEET)

AGENCY NAME:		Please fill in the peach highlighted field that apply to your Full Project Budget. Include your project's two largest secured revenue sources in the columns labeled "Secured Amt from (Insert Source)," and sum the remaining revenue sources in the column labeled "Secured Amt from Other Sources." List the names of other revenue sources in that column header.				
PROJECT NAME:						
Line Item:	Budget Item	Innovation Fund Grant	Secured Amt from (Insert Source)	Secured Amt from (Insert Source)	Secured Amt from List other sources	Total Project Budget
	Name & Title	Rate/Hr.	# of Hrs.			\$ -
Salaries and Wages						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
	Total Salaries & Wages	\$ -	\$ -	\$ -	\$ -	\$ -
Fringe Benefits	Item					\$ -
	FICA					\$ -
	SUI					\$ -
	Workers' Compensation					\$ -
	Medical Insurance					\$ -
	Retirement					\$ -
	Other					\$ -
	Total Fringe Benefits	\$ -	\$ -	\$ -	\$ -	\$ -
Contractual Services	Item					\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
	Total Contractual Services	\$ -	\$ -	\$ -	\$ -	\$ -
Equipment (Including leasing)	Item					\$ -
						\$ -
						\$ -
						\$ -
						\$ -
	Total Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
Other	Item					\$ -
	Travel					\$ -
	Office and/or Project Space Rental					\$ -
	Office and/or Project Supplies					\$ -
	Telecommunications					\$ -
	Insurance					\$ -
	Utilities					\$ -
	Total Other	\$ -	\$ -	\$ -	\$ -	\$ -
Indirect	Total Indirect					\$ -
	TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -

EXHIBIT 3: LOGIC MODEL

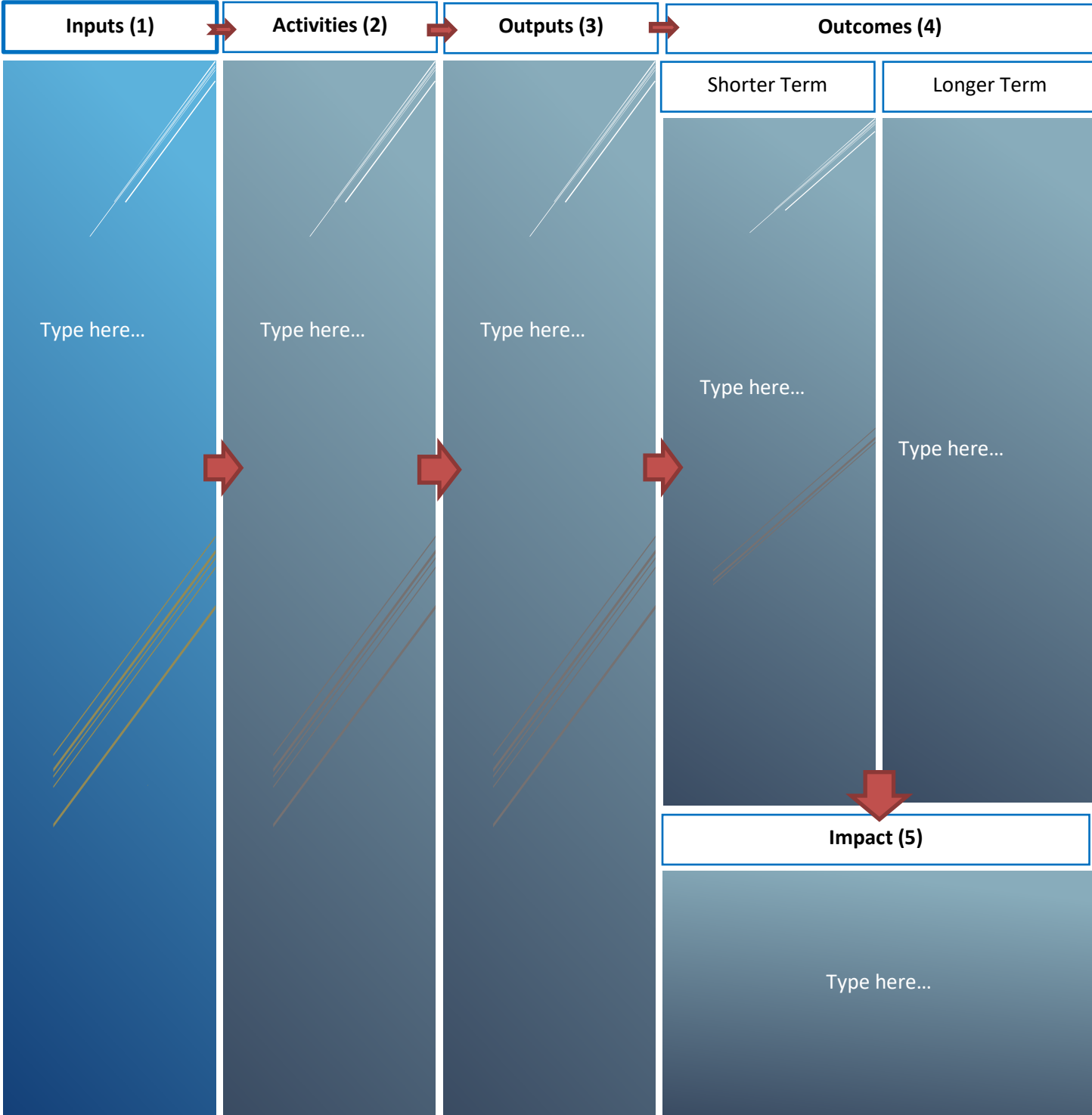


EXHIBIT 4: Placeholder for Timeline/Milestones