The City of Albuquerque has established priorities for funding and they include the following goals:

**Goal 1**: Human and Family Development: People of all ages have the opportunity to participate in the community and economy and are well sheltered, safe, healthy, and educated.

**Goal 2**: Public Safety: The public is safe and secure, and shares responsibility for maintaining a safe environment.

The Department of Family and Community Services mission is to provide quality health and social services, housing, recreation and education to improve the quality of life for the entire Albuquerque Community.

In addition, the Department of Family and Community Services has established a priority to fund projects that address the Social Determinants of Health to achieve greater well-being and equity for all. Substantial evidence confirms the link between social, economic and physical conditions and health outcome disparities. Social Determinants of Health include access to healthcare services, availability of services to support housing and behavioral health stability, lifelong education options, public safety and social services[^1].

The City of Albuquerque Department of Family and Community Services adopted a process to solicit and review project proposals through the promulgated rule update October 10, 2019, as specified in the FCS Social Services Contracts Procurement Rule available on the Department’s website at https://www.cabq.gov/family/partner-resources/request-for-proposals.

Funds for projects in this RFP are subject to final approval of the City Council and availability of City General Funds and where applicable, receipt of state and/or federal grant funds.

1.1 City Acknowledgement of Federal Funding

A contract awarded pursuant to this RFP will include federal funds as follows: (1) 0% ($0) of the total program or project costs financed with federal funds, and (2) 0% ($0) of the total costs financed by non-governmental sources. If the percentage of federal funds that makes up the total program or project costs is greater than 0%, please prepare and attach APPENDIX #13.

2.0 Purpose, Deadline and Submission Method

The purpose of this Request for Proposals (RFP) is to solicit effective proposals from qualified non-profit organizations interested in providing supportive housing through housing vouchers, case management and other services for people with a behavioral health diagnosis who are precariously housed or are experiencing homelessness.

Proposals will be accepted until 4:00 pm MST on Wednesday, January 12, 2022, and must be submitted online through the City’s Bonfire portal at: https://cabq.bonfirehub.com/portal/?tab=openOpportunities

In order to submit, responders must be registered in the Bonfire system. Registration takes some time to complete. It is recommended responders register in advance of the deadline as late proposals will not be accepted. For information on how to access and interact with Bonfire, please visit https://cabq.bonfirehub.com/portal/support or contact support@gobonfire.com.

3.0 Administrative Requirements and Guiding Regulations

Potential responders to this RFP are strongly advised to become familiar with the content of the most current version of the publication entitled "Administrative Requirements for Contracts Awarded under the City of Albuquerque, Department of Family and Community Services Social Services Program" (hereinafter referred to as the “Administrative Requirements”). The publication contains uniform administrative rules for contracts awarded pursuant to the Department’s Social Services Program. Contractors are expected to understand and comply with all applicable rules contained within the publication.

The Administrative Requirements are available on the Department’s website at https://www.cabq.gov/family/partner-resources/request-for-proposals.

Certain priority areas detailed below may also be required to comply with applicable sections of the most recent version of the Albuquerque Minimum Standards for Substance Abuse Treatment and Prevention Services (hereinafter referred to as the “Minimum Standards”), depending on the
proposals. Contractors are expected to understand and comply with all applicable rules contained within the publication. The Minimum Standards are available on the Department’s website at https://www.cabq.gov/family/partner-resources/request-for-proposals

4.0 Outcome Measures and Scope of Services

4.1 Outcome Measures and Social Determinants of Health

The City of Albuquerque is focused on improving the well-being of all people and has identified racial equity as a priority goal to address longstanding, racially disparate economic and social outcomes. In addition, the Department of Family and Community Services prioritizes investment in services that can demonstrate improved outcomes related to the customer’s needs.

The City of Albuquerque Department of Family and Community Services is committed to providing cost effective services that will improve the well-being of participants and Albuquerque as a whole. Respondents will be required to participate in evaluation activities that will be designed to protect individual privacy and aligned with the service delivery.

The Department of Family and Community Services has established a priority to fund projects that lead to improved outcomes to 1) Increase Behavioral Health Stability, 2) Increase Housing Stability, 3) Increase Public Safety, 4) Increase Individual and Family Resilience, and 5) Seniors are Able to Age with Dignity. This involves a focus on addressing the Social Determinants of Health to achieve greater well-being and equity for all. Substantial evidence confirms the link between social, economic and physical conditions and health outcome disparities. Social Determinants of Health include access to healthcare services, availability of services to support housing and behavioral health stability, lifelong education options, public safety and social services. Entities contracting with the Department of Family and Community Services may be expected to collect Social Determinants of Health data in a uniform manner to inform the City and public on unmet needs that need attention and aggregate progress of City-funded services.

Explanation of Outcomes
Offeror should select at least one primary indicator of progress that will be reported by race/ethnicity or other relevant demographics.

1) Increased Behavioral Health Stability: People who have otherwise experienced substance use and/or mental health disorders are actively engaged in services that address their identified needs and have reduced or eliminated the utilization of crisis services, are able to maintain employment and have increased daily functioning in the community and at home.

Indicators of progress during the service period may include:
- Progress on individual treatment plans
- Progress and completion of education and/or training
- Increase of stable employment and income
- Obtainment of supportive housing with case management
- Reduction of crisis events and utilization of crisis services (metrics include 911 calls, emergency and inpatient hospital use, detox services, or interactions with the criminal justice system).

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2) **Increased Housing Stability:** People who have otherwise been precariously housed or experienced homelessness maintain residence in a safe and affordable dwelling.

Indicators of progress during the service period may include:
- Successful placement in housing
- Retention of housing for 6, 12 and 18 months after placement
- Retention in a housing program and/or exit to permanent housing
- Obtainment of affordable housing (e.g., 30% or less of total household income)
- Reduction of homeless events as measured by data collection systems and use of emergency shelters.

3) **Increased Public Safety:** Through engaging in prevention and intervention programs, participants gain skills, knowledge and support in order to reduce the incidence of violence and adult and/or juvenile criminal justice system involvement.

Indicators of progress during the service period may include:
- Reduced involvement with the criminal justice system for participants otherwise arrested, incarcerated or court involved
- Increase in compliance with juvenile time waivers, adult probation and/or parole
- Reduced perpetration of violence
- Increase in skills for constructive conflict resolution practices in lieu of violence
- Increase skills and knowledge around gun safety
- Reduction in the number of suspensions/expulsions from school
- Reduction in the number of youth dropping out of school
- Increase in skills and knowledge around gun safety

4) **Increasing Individual and Family Resilience:** Individuals and families are actively engaged in activities and services that enhance their health, education and skills; and when necessary, to gain strength and resourcefulness to better withstand and rebound from disruptive life challenges.

Indicators of progress during the service period may include:
- Increase in family employment and income
- Increase in food security
- Increase in pay equity
- Reduction of domestic/family violence or maltreatment
- Increase of community services such as out-of-school-time enrichment activities
- Young parents engage with programs that increase parenting skills
- Continued or increased enrollment in health insurance including Medicaid
- Increased linkages to and engagement with health services
- Individuals gain employment and training experience
- Individuals complete high school or equivalence
- Youth are linked to programming and complete services adapted to their learning needs
- Families and individuals increase engagement with out-of-school-time enrichment activities and other community services
- Adults, youth and children increase skills and knowledge around gun safety
5) **Seniors are Able to Age with Dignity:** Vulnerable seniors access and utilize the appropriate care and support resources of their choice so they are can age in place and maintain health, safety, independence and dignity. Seniors maintain connection to their community and access services that support their health and well-being.

Indicators of progress during the service period may include:

- Increase/maintain access to home-based services and supports to age in place
- Reduce/maintain nutritional risk score
- Engage with community services, social events and educational opportunities

**Community Building**

In addition to the above outcomes, the City is dedicated to helping all our residents and neighborhoods to be their best selves. Contractors are expected to engage with the community and build productive relationships with their neighbors as they provide services to improve outcomes for all of Albuquerque. Examples include, but are not limited to, joining the local Neighborhood Association, updating neighbors on services and progress, maintaining their surroundings as clean and litter free, reminding participants to maintain respect of the neighborhood and promptly responding to any 311 inquiries.

**4.2 Scope of Work**

This request for proposals is focused on providing supportive housing through housing vouchers, case management and other services for people with a behavioral health diagnosis who are precariously housed or are experiencing homelessness.

In order to effectively address these service needs, offerors must demonstrate a connection between the proposed activities and outputs to the identified outcomes, and define metrics and measurement tools to reliably assess progress toward achieving the identified outcomes.

The proposed project may be required to work collaboratively with other entities as identified and requested by the City.

**4.2.1 Supportive Housing and Case Management for Persons who have a Behavioral Health Diagnosis and are Experiencing Homelessness or are Precariously Housed**

The Department will allocate up to $480,000 for the provision of supportive housing and case management for persons who are homeless or precariously housed AND have a behavioral health diagnosis to a minimum of thirty-five (35) households. Case management shall include an array of wrap around services as appropriate to client needs identified in individual service plans, to be provided by the applicant or in partnership with other agencies. Services should include, but not be limited to: intensive case management; individual and group therapeutic treatment; life skills training; vocational assistance where appropriate; access to medical and psychiatric health care as well as medication when appropriate; access to public benefits; and support in maintaining stable housing through the duration of the funding period. Successful applicants will describe how case managers will connect with and follow through with relevant referrals to community-based services, and describe a plan to ensure all participants have an opportunity to complete a common assessment for the Coordinated Entry System and VI-SPDAT while receiving outreach services under this contract. Successful proposals will also discuss...
collaboration with the City funded Westside Emergency Housing Center and forthcoming Gateway centers to ensure that emergency housing residents have access to the services described in the proposal.

The proposal must include how the agency will leverage Medicaid Funds to cover the cost of services, and explicitly detail how Medicaid is utilized, and how the City funds are used to bolster services for those clients who are Medicaid eligible. If not currently a Medicaid provider, the proposal must detail the agency plans to become a Medicaid provider. Please note, these funds are not limited to Medicaid eligible clients, only that Medicaid reimbursements are expected to leverage City funds.

The successful respondent that also includes the provision of Behavioral Health Services will adhere to the Department’s Minimum Standards.

The proposal should demonstrate the evidence and/or logic of how proposed activities will lead to improved outcomes and describe the use of practices that might include trauma informed care, harm reduction, a person-centered approach, and community collaboration. Proposals should include a description of how services impact at least 2 out of the 4 outcomes described in 4.0, and suggest at least one measurable progress indicator per outcome (such as a decrease in stress symptoms, improved psychological functioning, and/or improvement of the Social Determinants of Health for the clients served).

4.3 Service Period
Services funded by this RFP are to commence July 1, 2022 and continue through June 30, 2023. with the possibility of two one-year extensions depending on availability of funds and performance of agency.

5.0 Eligible Responders

5.1 General Eligibility
An agency which is a unit of state or local government and/or an agency currently incorporated as a nonprofit corporation, duly registered and in good standing with the State of New Mexico Secretary of State, which has not-for-profit status under 501(c)(3) of the U.S. Internal Revenue Service Code and which has demonstrated capability in providing the services for which it is applying is an eligible responder for award of a contract pursuant to this RFP. Basic eligibility requirements are identified in the Administrative Requirements for Contracts Awarded Under the City of Albuquerque Department of Family and Community Services (Administrative Requirements), § 10 (A)(1).

Ineligible entities as defined in Section 7 (C) of the Social Services Contracts Procurement Rules of the Department are restricted from submitting a proposal.

Entities that have had an Agreement terminated by the City for cause for a period of two (2) years beyond the date of Agreement termination, are not eligible to submit a proposal, unless such entities request and receive written authorization of eligibility from the Director of the Department, based upon adequate, written justification for allowing an exception. Such written justification will include an explanation of how the previous cause for termination will not impact the project for which funding is being requested due to specific remedial actions taken by
the entity. The written request and Director determination shall be maintained on file with the relevant RFPs, RFQs and/or contracts within the two-year timeline.

The Administrative Requirements and Social Services Contracts Procurement Rules are available on the Department’s website at https://www.cabq.gov/family/partner-resources/request-for-proposals

5.2 Limitations on Assistance to Primarily Religious Organizations
Contractors are required to assure that no funds awarded through the program will be used for sectarian religious purposes. Independent, not-for-profit entities established by primarily religious organizations, however, may be assisted as long as: a) there is no religious test for admission for services; b) there is no requirement for attendance at religious services; c) there is no inquiry as to a client’s religious preference or affiliation; d) there is no proselytizing; and e) services provided are secular and non-sectarian. See Administrative Requirements, § 10 (C) (4) (c). This provision does not prohibit a primarily religious organization from carrying out the eligible activities as long as such activities are carried out in a manner free from religious influences pursuant to conditions prescribed in the Representations and Certifications form (Appendix #8) attached to this RFP and required as an attachment to the responder’s proposal.

5.3 Minority and Women’s Business Enterprises § 5-6-1 et seq. ROA 1994
It is the policy of the City to take affirmative action to assure that a fair share of City purchases of goods and services is made from enterprises owned and controlled by minorities and women.

As part of this policy, the City undertakes to assure there are no undue or unnecessary requirements imposed by the City that inhibit or prevent purchases of goods and services from businesses that are otherwise qualified to provide such goods and services. It is further City policy to impose similar affirmative action upon prime contractors providing goods and services to the City with regard to subcontractors involved in such work to assure a fair share of business for minority and women’s business enterprises.

As part of the above-described policy, the City shall directly solicit bids and offers of goods and services from minority and women’s business enterprises to the extent necessary to ensure that they are aware of the opportunities in this RFP. § 5-6-6 ROA 1994. The City uses the following website to identify minority and women’s business enterprises, and solicits bids from the enterprises identified: https://web.sba.gov/pro-net/search/dsp_dsbs.cfm.

In addition to the requirements of § 5-6-1 et seq. ROA 1994, the City will implement and fulfill any Federal requirements applicable to the City with regard to minority and women’s business enterprises. § 5-6-10 ROA 1994.

5.4 Preferences for City Local, Small and/or Veteran-Owned Businesses and Pay Equity
According to City Ordinance § 5-5-17 and § 5-5-31 ROA 1994, Public Purchases, and § 13-1-22 NMSA 1978 for resident business and Veteran business, scoring preferences may be available for this procurement. Please refer to the form found online at https://www.cabq.gov/dfa/documents/vendor-documents/vendor-preference-affidavit-of-eligibility-final.pdf/view and attached as APPENDIX #14 of this RFP for additional information on how to certify for a maximum of 10% preference in Scoring Criteria in Section 10 of this RFP. Please Note: preference points are NOT available for any solicitation for which all or a part of the funds used are from federal grant sources.
If eligible, an Offeror may apply for a 5% Small Business Preference, a 5% Local Business Preference, a 5% Pay Equity Preference, a 5% State Resident Business Preference, and/or a 10% State Resident Veteran Business Preference (the latter two collectively referred to as “State Preference”), up to a maximum of 10%. To qualify for a maximum of 10% preference points, an Offeror MUST complete and attach the Vendor Preference Affidavit of Eligibility WITH ITS OFFER. A valid Pay Equity Reporting Form MUST be attached, regardless of whether an Offeror is requesting this preference. A valid Pay Equity Certificate is required in order for this preference to be applied. For State Preference the New Mexico State certification of eligibility MUST be attached. If a Proposal is received without this Preference Certification Form and any required certifications attached, completed, signed and certified, or if this Preference Certification Form is received without the required information, the preference shall not be applied. NO FORM SHALL BE ACCEPTED AFTER THE DEADLINE FOR RECEIPT OF BIDS OR PROPOSALS, except the pay equity form shall be accepted if submitted within 24 hours of the response deadline per § 5-5-31 ROA 1994.

To qualify for the small business or local business preference, a business must have its principal office and place of business in the Greater Albuquerque Metropolitan Area. The business location identified on the Preference Certification Form must be a physical location, street address, and may not use a post office box or other postal address.

**Pay Equity Documentation.** All bids and proposals shall include a Pay Equity Reporting Form or Certificate which can be accessed at [https://www.cabq.gov/gender-pay-equity-initiative](https://www.cabq.gov/gender-pay-equity-initiative) or in the Solicitation Instructions. Offerors who believe they are exempt because they are an out-of-state contractor that has no facilities and no employees working in New Mexico are not required to report data, but must still submit a Pay Equity Reporting Form with the box verifying their exempt status checked. Any Proposal that does not include a Pay Equity Reporting Form or Certificate shall be deemed nonresponsive, as stated in the Public Purchases Ordinance, 5-5-31 (A). NOTE: THE PAY EQUITY REPORTING FORM REQUIRED BY THIS PROVISION IS NOT A PAY EQUITY CERTIFICATE, NOR DOES IT QUALIFY YOU FOR THE PAY EQUITY PREFERENCE. PAY EQUITY CERTIFICATES ARE AUTOMATICALLY ISSUED TO QUALIFYING VENDORS WITHIN TWO BUSINESS DAYS OF SUBMITTING THE PAY EQUITY REPORTING FORM. PLEASE VISIT THE WEBSITE OR CONTACT THE GENDER PAY EQUITY TASK FORCE WITH QUESTIONS: OEI@CABQ.GOV

### 5.5 ADA Compliance
Contractors must agree to meet all the requirements of the Americans with Disabilities Act of 1990 (ADA), and all applicable rules and regulations which are imposed directly on the Contractor or which would be imposed on the City as a public entity. The Contractor must agree to be responsible for knowing all applicable requirements of the ADA.

### 5.6 Additional Requirements

#### a. Personnel Policies:
Organizations applying for a contract under this solicitation must have a written set of personnel policies and procedures that have been formally adopted by its governing board. This document must specify policies governing terms and conditions for employment;
compensation and fringe benefits; holidays, vacation and sick leave; conflict of interest; travel reimbursement; and employee grievance procedures.

b. **Conflict of Interest Policies:**
Organizations submitting proposals under this solicitation must have in force a written conflict of interest policy that at a minimum:

i. Applies to the procurement and disposition of all real property, equipment, supplies, and services by the agency and to the agency's provision of assistance to individuals, businesses, and other private entities.

ii. Provides that no employee, board member, or other person who exercises any decision making function with respect to agency activities may obtain a personal or financial benefit from such activities for themselves or those with whom they have family or business ties during their tenure with the agency or for one year thereafter.

c. **Accounting Policies:**
Responder organizations must have in place a set of financial, accounting, and procurement policies and procedures that meet the standards established by the City in the *Administrative Requirements*, §13, Accounting for DFCS Social Services Contract Funds.

d. **Active Board:**
Nonprofit responders must be able to document that its governing board is constituted in compliance with approved bylaws and that it actively fulfills its responsibilities for policy direction, including regularly scheduled meetings for which minutes are kept. The organization must verify board compliance with the City Open Meeting ordinance ROA, 1994, §2-5-1, et. seq.

e. **Nepotism:**
The organization shall not employ “immediate family” or any “close relative” of any board member, officer or managing employee and shall not employ any two people who are immediate family or close relatives of each other. See definitions contained in the *Administrative Requirements*, § 10 (A)(3)(c).

f. **Background Checks:**
If the Social Services provided require the contractor selected through this RFP to work with or be in proximity to children, or other vulnerable populations, the contractor will not employ any person or volunteer who is registered as a sex offender in any United States jurisdiction, or who has a criminal background unacceptable to the City. The contractor shall ensure that all its employees, interns and volunteers directly involved in performing services have been screened for a criminal background and reference checks, finger-printing, and interviews. See *Administrative Requirements*, § 10 (A)(2).

g. **Reporting Requirements**
The final contract between the successful responder(s) and the City will contain specific reporting requirements that include, but may not be limited to, quarterly program data and data regarding outcomes for program participants. A critical component of initiatives funded through the City of Albuquerque, Department of Family and Community Services will be a rigorous evaluation to determine program success and cost-effectiveness. Selected Offerors
must comply with participant data reporting requirements conducted by the City or evaluation and research partners as part of ongoing evaluation activities.

6.0 Eligible Beneficiaries

Programs supported, in whole or in part, with funding awarded as a result of this RFP must be targeted to residents of Albuquerque.

a. Income:
Programs should target those whose annual family incomes are at or below 80% of the median family income for the Albuquerque Metropolitan Statistical Area (MSA) as established by the U.S. Department of Housing and Urban Development, unless otherwise specified.

b. Programs Serving Lower Income Populations:
Support may be made to available programs, services, and activities that do not require all participants to meet an income test, if it can be demonstrated that support of such activities offers the most efficient and expeditious means of serving the eligible population, and if at least 70% of those served meet the income test.

c. Critical Emergency Needs:
Services designed to meet critical emergency needs such as rape crisis assistance, assistance to victims of domestic violence, assistance to abused and neglected children, the homeless, and the like, need not meet an income test.

d. Other Characteristics:
Specific characteristics, such as persons with disabilities, senior citizens or other individual requirements applicable to specific funding sources.

e. Community Development Strategy Areas:
Certain public facilities improvement activities which contribute to the development of local communities must be targeted primarily to benefit designated Community Development Strategy Areas.

7.0 Technical Assistance

It is the responsibility of the Offeror to stay up to date with any clarifications to this RFP that will be issued through the bonfire portal.

Technical assistance will be provided at the written request of responder agencies by the City of Albuquerque Department of Family & Community Services, Sandra Archuleta, Community Outreach Coordinator. Requests for technical assistance must be submitted through the bonfire portal up until seven calendar days prior to submission deadline. Responses to questions in writing will be posted on the Bonfire Portal.

An optional pre-proposal meeting is scheduled for Tuesday, December 14, 2021, at 2:00 pm to 3:00 pm MST via zoom.
8.0 Instructions for Completing Proposal

8.1 Proposal Format
Proposals must address all required areas listed in this section, in the order requested. See Section 12 for further clarification. Appendices or non-required attachments including letters of endorsement, agency brochures, or news clips may be included if uploaded. Please paginate.

8.2 Cover Sheet
Responders must use the attached Proposal Summary and Certification Form (APPENDIX #1) as a cover sheet for their proposals. An authorized official of the governmental agency or of the policy board of a non-profit agency to whom agency staff are responsible must sign the form.

8.3 Project Narrative
The project narrative, not including attachments, shall not exceed 13 typed, double-spaced, 8 1/2" x 11" pages, with 12-point font. Neither the section 8.3.c.vi résumés and job descriptions nor 8.5 APPENDIX #7 Work Plan will be counted in the 13-page limit. Project Narrative must be organized according to sections numbered as indicated in this section (e.g., 8.3.a Comprehensive Explanation of Project Purpose, Target Population(s), Service Delivery, and Outcomes, 8.3.b. Measuring Progress, etc.).

a. Comprehensive Explanation of Project Purpose, Target Population(s), Service Delivery, and Outcomes:
Provide a comprehensive explanation of the project design. Given that the service delivery landscape has changed as a result of the COVID-19 pandemic, describe how services will reach the intended population if public health orders continue to require modified service delivery tactics.

i. Describes proposed services/activities that would be provided to each target population, including:
   A. Rationale (evidence/logic basis) for the effectiveness of the proposed service model and practices to facilitate meaningful impacts and lead to improved outcomes for the specific target population(s).
   B. Proposed practices (for instance, trauma-informed care, harm reduction, a person-centered approach, community collaboration, etc.) and how they facilitate client progress to stated outcomes;
   C. How proposed services address unmet needs/service and potential disparities/inequities/gaps in the community, justified with local/applicable data, including addressing current demographic disparities (e.g., race/ethnicity, age, disability, sexual/gender orientation, socioeconomic, etc.) and how proposed services can be modified or delivered under public health orders related to communicable illnesses;
D. Methods to conduct client outreach that extends into the target community to recruit and retain populations that have been historically underserved and deprived of access to services populations to increase equity and access to opportunity.

ii. Provide a comprehensive explanation of how project services will reach output and outcome goals, including, as applicable:

A. Identify at least two of the outcomes described in Section 4.0 that the Offer will impact with proposed services/activities, and describe how they will meet the needs of the community
B. Illustrate the services that will be provided as a result of the proposed City funding by describing the activities, timeframe, number of participants/units of service (outputs), linkage to improved outcomes, and indicators that verify progress toward outcomes, and the measurement tool to track progress to outcomes that has been proven effective with the target population(s).
C. Describe at least one primary indicator of progress that will be reported by race/ethnicity or other relevant demographics.
D. If applicable – Recommended frequency and duration of client engagement to support client progress/achievement of outcomes
E. If applicable - Typical tiers of service (e.g., intensity and duration that may vary during contract year for case management)

b. Measuring Progress:

i. Describe the process to accurately collect, analyze and report the data of activities, outputs, indicators of progress and outcomes as outlined in the APPENDIX #7 Work Plan and Narrative Section a.

ii. Describe the process and schedule for monitoring the quality of project activities, methods and how continuous quality improvement will be incorporated.

iii. Describe process to identify primary indicators by race/ethnicity in aggregate form, as applicable.

c. Organizational Capacity: Service Delivery Capabilities

Describe the agency’s resources, not limited to dollars requested in this proposal, dedicated to the project to ensure successful implementation of proposed project, and reach output and outcome goals including alignment with current program operation and proposed budget. Description of agency resources must also indicate appropriate level of financial capacity to meet the Department’s Administrative Requirements and reporting requirements.

i. Describe the agency’s capacity to administer programs that must comply with applicable regulations.

ii. Describe agency’s flexibility in modifying services to reach the intended population as public health orders continue to require modified service delivery tactics.

iii. Identify specific source, type and amount of leveraged funding for the project, and if those funds are committed or anticipated, pending approval.

iv. Describe collaborative partnerships and/or strategies for collective impact to support participant success, and provide associated MOUs, and/or CWAs.
v. Identify the job title and role of agency staff/contractors that will conduct key activities, including key fiscal staff.

vi. Attach job descriptions, and provide résumés for staff/contractors identified in 8.6.d.v. (Will not be counted in the Project Narrative page limit. Attach after Project Budget Forms. See Section 12.)

vii. As applicable, describe how the program will engage clients in major systems such as Medicaid, the Coordinated Entry System (CES), etc.

d. Organizational Capacity: Past Performance
i. If the agency has had a contract with the City providing similar services in the past three years, describe how the agency met output and outcomes goals, and how agency performed during annual monitoring. Describe innovations that were implemented to continue service delivery during the COVID-19 pandemic.

ii. If the agency did not have a contract with the City providing similar services in the past three years, describe how the agency delivered services and activities similar to those contained the Offer. Describe innovations that were implemented to continue service delivery during the COVID-19 pandemic.

8.4 Project Budget Forms
The responder must submit a complete budget on the attached forms, detailing the funds needed to support the project as detailed in the proposal. (APPENDIX #2-APPENDIX #6) OR using the forms provided in Excel online at https://www.cabq.gov/family/documents/fiscal-forms-cabq-fy20-excel.xlsx

8.5 Proposed Work Plan
Responders must use the attached Applicant Work Plan (APPENDIX #7) to provide a succinct Work Plan that details the narrative described in Section 8.3.a. APPENDIX #7 will not be counted in the Project Narrative page limit. APPENDIX #7 details should match the information described in the narrative.

8.6 Preference Points (up to 10% of total for non-federally funded contract Offers)
Responders must use the Vendor Preference Form (APPENDIX #14) to apply for preference points. APPENDIX #14 will not be counted in the Narrative page limit. Preference points are described in Section 5.4 and in links shown in APPENDIX #14. Please note: no preferences shall be applied if federal funds support the Offer.

8.7 Insurance Requirements
All contractors selected pursuant to this RFP will be required to procure and maintain, through the life of each of their contracts, a commercial general liability and an automobile liability insurance policy with limits detailed below. If any part of the contract is sublet, the contractor must include the subcontractor in its coverage or require the subcontractor to obtain all necessary coverage. Policies must be written by companies authorized to write such insurance in the State of New Mexico.

A. Commercial General Liability Insurance ("CGL"): A CGL insurance policy with combined limits of liability for bodily injury or property damage as follows:
The CGL insurance policy must include coverage for all operations performed for the City by the Contractor, and the contractual liability coverage shall specifically insure the hold harmless provisions of the City’s contract with the Contractor. The City shall also be listed as an “additional insured” by endorsement onto the CGL policy. Proof of this additional insured relationship shall be evidenced on the Certificate of Insurance (COI) and on the insurance endorsement.

B. Commercial Automobile Liability Insurance (“CAL”): A CAL policy with not less than a $1,000,000 combined single limit of liability for bodily injury, including death, and property damage in any one occurrence. The CAL policy must include coverage for the use of all owned, non-owned, and hired automobiles, vehicles and other equipment both on and off work. This CAL policy cannot be a personal automobile liability insurance policy as most personal automobile liability policies exclude coverage for work related losses.

C. Workers’ Compensation Insurance: Workers’ Compensation Insurance for the Contractor’s employees when required by, and in accordance with, the provisions of the Workers’ Compensation Act of the State of New Mexico (“Act”). The Contractor must have three (3) or more employees to trigger the Act’s workers’ compensation insurance requirement. Per the Act, this number includes the owner of the business. If the Contractor is not required to carry Workers’ Compensation coverage, the Contractor will need to sign and return the Worker’s Comp Statement enclosed in this packet.

ADDITIONAL INSURANCE COVERAGES
The following coverages should be considered based on the course and scope of the individual contract:

D. Professional Liability (Errors and Omissions) Insurance: Professional liability (errors and omissions) insurance in an amount not less than $1,000,000 combined single limit of liability per occurrence with a general aggregate of $1,000,000.

Professional liability insurance cannot be waived for medical directors, psychologists, psychiatrists, mental health counselors, laboratories.

E. Sexual Abuse Molestation Coverage: Sexual abuse molestation insurance in an amount not less than $1,000,000 combined single limit of liability per occurrence with a general aggregate of $1,000,000. This coverage should be required, unless specific circumstances that eliminate potential risks indicate otherwise, if the vendor/contractor will be working with, or in physical or virtual contact with, children under the age of 18 or a compromised client base (deaf and hard of hearing, blind, senior and older adults, persons with mental disabilities, intellectual disabilities and/or have a developmental disability).

F. Cyber Liability Coverage: Cyber liability insurance in an amount not less than $2,000,000 combined single limit of liability per occurrence with a general aggregate of $2,000,000. This coverage should be required, unless specific circumstances that eliminate potential risks indicate
otherwise, if the vendor/contractor may have cybernetic access to the City’s confidential information, taxpayer data, information technology, personnel, healthcare, accounting, or finance systems.

Policies must include coverage for all operations performed for the City by the contractor, coverage for the use of all owned and all non-owned hired automobiles, vehicles, and other equipment both on and off work, and contractual liability coverage shall specifically insure the hold harmless provision of the contract. The City must be named an additional insured on commercial general liability and the policies must provide that 30 days written notice will be given to the City before a policy is canceled, materially changed, or not renewed.

The contractor shall ensure that all staff for whom professional liability is required by their licensing agent, including but not limited to, professionals providing health and behavioral health services, maintain professional liability insurance, errors and omissions coverage, or other additional coverages the city deems necessary, in amounts not less than required by the New Mexico Tort Claims Act as it is amended from time to time, for single limit of liability per occurrence and for the general aggregate.

The contractor must also comply with the provisions of the Worker's Compensation Act, the Subsequent Injury Act, and the New Mexico Occupational Disease Disablement Law.

During construction, if any, a contractor must maintain Builders Risk Insurance in an amount equal to the full construction cost to cover the construction work for fire, theft, extended coverage, vandalism and malicious mischief.

If, during the life of the contract, the Legislature of the State of New Mexico increases the maximum limits of liability under the Tort Claims Act (Section 41-4-1 through 41-4-27 NMSA 1978), the City may require the contractor to increase the maximum limits of any insurance required.

Proof of insurance is not a requirement for submission of a proposal, but responders should be aware that no work may begin under a contract funded through this program until the required insurance has been obtained and proper certificates (or policies) are filed with the City. Before submitting a proposal, the agency should contact its insurance agent to determine if it can obtain the required coverage.

8.8 Other Assurances

a. Compliance with Civil Rights Laws and Executive Orders
   Contractors are required to comply and act in accordance with all federal laws and Executive Orders related to the enforcement of civil rights. In addition, recipients will be required to comply with all New Mexico State Statutes and City of Albuquerque Ordinances regarding enforcement of civil rights (APPENDIX #8).

b. Assurance of Drug Free Facilities
   Applicants for funding must submit an assurance that they will administer a policy designed to ensure that the assisted program is free from the illegal use, possession or distribution of drugs or alcohol by its staff and beneficiaries (APPENDIX #10).

c. Certification of Receipt of Administrative Requirements
Applicants for funding must submit a certification signed by an authorized board official and the organization director of receipt and adherence to the Department Administrative
Requirement for Social Services Contracts.

d. Audit Requirements
Contractors who expend $750,000 or more of federal funds during the year must have an audit conducted in accordance with the Federal Government’s Office of Management and Budget Circular A-133 as amended. The audit shall be made by an independent auditor in accordance with generally accepted government auditing standards. Contractors who receive $25,000 or more in funding from the City, and who do not fall under A-133, must have a financial statement audit conducted by an independent auditor in accordance with generally accepted auditing standards. If the contractor is not subject to this requirement because it has not previously had a contract with the City, the Contractor must provide Form 990. Additional audit requirements are set out in the Administrative Requirements.

e. Goods Produced Under Decent Working Conditions
It is the policy of the City not to purchase, lease, or rent goods for use or for resale at City owned enterprises that were produced under sweatshop conditions. The responder certifies, by submittal of its proposal in response to this solicitation, that the goods offered to the City were produced under decent working conditions. The City defines “under decent working conditions” as production in a factory in which child labor and forced labor are not employed; in which adequate wages and benefits are paid to workers; in which workers are not required to work more than 48 hours per week (or less if a shorter workweek applies); in which employees can speak freely about working conditions and can participate in and form unions.

f. Pay Equity Documentation. All bids and proposals shall include a Pay Equity Reporting Form or Certificate which can be accessed at https://www.cabq.gov/gender-pay-equity-initiative or in the Solicitation Instructions. Offerors who believe they are exempt because they are an out-of-state contractor that has no facilities and no employees working in New Mexico are not required to report data, but must still submit a Pay Equity Reporting Form with the box verifying their exempt status checked. Any Proposal that does not include a Pay Equity Reporting Form or Certificate shall be deemed nonresponsive, as stated in the Public Purchases Ordinance, 5-5-31 (A). NOTE: THE PAY EQUITY REPORTING FORM REQUIRED BY THIS PROVISION IS NOT A PAY EQUITY CERTIFICATE, NOR DOES IT QUALIFY YOU FOR THE PAY EQUITY PREFERENCE. PAY EQUITY CERTIFICATES ARE AUTOMATICALLY ISSUED TO QUALIFYING VENDORS WITHIN TWO BUSINESS DAYS OF SUBMITTING THE PAY EQUITY REPORTING FORM. PLEASE VISIT THE WEBSITE OR CONTACT THE GENDER PAY EQUITY TASK FORCE WITH QUESTIONS: OEI@CABQ.GOV

8.9 Required Attachments
The Offeror, including all parties to a joint venture or consortium, an individual or a non-profit agency, as applicable, must attach to its Offer, the items listed as Mandatory in Section 11.0. Offerors are encouraged to attach the Preferred items listed in Section 11.0.

9.0 Compliance with Social Services Contracts Procurement Rules and Regulations
Applicants must comply with all applicable procurement rules and regulations, including, but not limited to, the City of Albuquerque Procurement Rules and Regulations for the Department of Family and Community Services, found at: [https://www.cabq.gov/family/partner-resources/request-for-proposals](https://www.cabq.gov/family/partner-resources/request-for-proposals)

Applicants should also be guided by the Albuquerque Code of Ordinances, Article 5, which may be found at: [http://library.amlegal.com/nxt/gateway.dll/New%20Mexico/albuqwin/cityofalbuquerquenewmexicocodeofordinanc?f=templates$fn=default.htm$3.0$vid=amlegal:albuquerque_nm_mc$anc=JD_TopofInfobase](http://library.amlegal.com/nxt/gateway.dll/New%20Mexico/albuqwin/cityofalbuquerquenewmexicocodeofordinanc?f=templates$fn=default.htm$3.0$vid=amlegal:albuquerque_nm_mc$anc=JD_TopofInfobase)

10.0 Review Criteria and Scoring Process

Proposals will be reviewed and scored based on the criteria in Section 10.1. Please note: It is acceptable to bid one or on multiple Scopes of Services in Section 4.2, but a separate proposal packet must be submitted for each Scope of Services.

10.1 Scoring

a. Comprehensive Explanation of Project Purpose, Target Population(s) Service Delivery, and Outcomes: 25 pts.
   Provided a clear and measurable project design and addresses every section detailed in section 8.3.a, including outputs and associated outcomes. Project described is reasonable and attainable with the resources described.

b. Measuring Progress: 5 pts.
   Describes the process used by the agency to analyze and report on data collected, provide quality improvement as detailed in each item listed in section 8.3.b.

c. Organizational Capacity: Service Delivery Capabilities: 25 pts.
   Response to each item in 8.3.c clearly describes how the agency/organization has the capacity to provide the services described contained within their proposal.

d. Organizational Capacity: Past Performance: 10 pts.
   i. If the agency has had a contract with the City providing similar services in the past three years, performance will be scored based on program delivery meeting output and outcome goals; and the presence/absence of monitoring findings/critical concerns over the previous three years. If the Offeror has had a contract with the City in the past three years, the past fiscal performance has met City requirements. Agency was successful in modifying service delivery to ensure continuity of services during the COVID 19 related public health orders.
   ii. If the agency did not have a contract with the City providing similar services in the past three years, prospective ability to deliver on the proposed services will be justified by demonstration of agency and staff operation/delivery of services and activities similar to those contained the Offer. Agency was successful in modifying service delivery to ensure continuity of services during the COVID 19 related public health orders.

e. Demonstrates ability to expend City funds in a fiscally responsible manner: 15 pts.
   i. Budget forms (APPENDICES 2-6) are complete and provide adequate detail to convey the planned expenditure of City funds to support proposed services.
ii. Clearly represents the complementary/leveraged funds that may provide services to a larger population beyond the number that can be served with the requested City funds.

iii. Requested City funds are aligned with the work plan.

iv. Proposed budget allocations for services and staff are reasonable.

v. Proposed budget for administrative/overhead costs is reasonable and proportional to all funding sources contributing to the project or agency as applicable.

vi. Overall cost per output(s) is reasonable.

vii. Demonstrates appropriate level of financial capacity to meet the Department’s Administrative Requirements and reporting requirements.

viii. Audit results/financial documentation provide evidence of financial responsibility.

g. **Proposed Work Plan (APPENDIX #7): 20 pts**

Work plan proposal scores will be based on the clarity, effectiveness, viability and alignment with all narrative sections and budget.

Work plans will be evaluated and scored based on how:

i. Work Plan directly informs the potential scopes of services if Offer is selected

ii. Work Plan chart explain major project services to be performed using the requested City budget

iii. Activities/sub-activities/units of services to be provided

iv. Time frame to offer each activity/service

v. Specific number of participants (outputs) for each major activity/service - aligned with requested City funds

vi. Connection of activities/services to improved outcomes (e.g., client impacts)

vii. Outcome progress indicator (selected from list or other suggested indicator)

viii. Measurement tool(s)

ix. Work Plan is clearly connected with proposed budget

x. Evidence that City funds will be invested in personnel and activities that can demonstrate produce stated outcomes

xi. The cost per service unit is a cost-effective investment of City funds

10.2 **Review Process/Deadlines**

**a. Preliminary Staff Review**

Proposals will be initially reviewed by staff of the Department of Family and Community Services to determine if the proposal is complete and conforms to this RFP. Completeness means that all required forms and attachments are included and comply with the FCS Procurement Rule and Administrative Requirements. Conformity means that the proposal has been prepared according to guidelines regarding length, organization, and format as
specified in section 8.0 above. Incomplete (as defined in 11.0), nonconforming or late proposals may be deemed unresponsive.

b. Review Panel
The Department Director will, in writing, approve the composition of an ad hoc committee (minimum of 3 persons) from the Department of Family and Community Services and may include a representative(s) from affected neighborhoods, constituents, service users and/or citizens that will review all proposals. The proposals will be rated according to the review criteria specified in section 9.1 above. Based on these ratings, the committee will recommend contract awards and amounts to the Director of the Department. A recommendation for award does not constitute an award of contract. The award occurs after a contract is negotiated and Approved by the City.

If, during the review process, additional information is needed regarding a proposal, the Department staff will request such information from the responder. In addition, responders may be interviewed directly as part of the review process. Agencies will be advised of the time and date of such interviews.

During evaluation, proposals submitted shall be kept confidential. The Department will use its best efforts to restrict distribution to those individuals involved in the review and analysis of the proposals, but in any event, the City shall not be liable for disclosure of any information contained in the proposals during the review process. The proposals shall be open to public inspection after award of contract.

10.3 Competitive Considerations
Proposals will be rated according to the review criteria in section 10.1 above. The Department may require responders being considered for an award to participate in interviews or other discussions to explain or verify any aspect of the proposal submitted. The Department reserves the right to reject any or all proposals. The Department may negotiate the terms of any proposal after making a recommendation of award, in order to development a contract in the best interest of the City or the target population. The Department may award more than one contract per Priority Activity.

10.4 RFP Appeals Process
Responders whose proposals are not selected may submit a written appeal. Letters of Appeal must be submitted and arrive in the office of the Department Director not later than ten (10) working days after receipt of the notice of non-selection. Letters must be specific as to the matter being appealed. Appeals not submitted in writing, not specific in nature, or which arrive late may not be considered. The Department Director’s decision concerning the Appeal is final and will be provided within 30 days of receipt of the Appeal letter. Letters must be addressed as follows:

Carol M. Pierce, Director
Department of Family and Community Services
City of Albuquerque
P.O. Box 1293
Albuquerque, NM 87103

The envelope must clearly indicate:
All Appeals will be responded to by the Department Director in writing.

11.0 Submission Process

11.1 Submission Requirements
Submit your complete proposal including all sections listed in Section 8 using the eProcurement System at https://cabq.bonfirehub.com/portal/?tab=openOpportunities. Please allow a minimum of 24 hours to submit your proposal. If you do not have a username and password, please register as this is the only method to submit electronically on the Bonfire portal. Please note the City has a new eProcurement System as of September 16, 2019; please make sure to register on the new system in order to receive notices and submit a response to a bid or proposal. For assistance, please contact support@gobonfire.com.

RFP Advisories to Offerors:
Proposals must be received prior to 4:00 pm MST on Wednesday, January 12, 2022 via the City’s eProcurement system, Bonfire. Proposals will not be accepted by the eProcurement system later than 4:00 p.m. local time, on Wednesday, January 12, 2022 and will not be considered for award.

Entities that have had an Agreement terminated by the City for cause for a period of two (2) years beyond the date of Agreement termination, are not eligible to submit a proposal, unless such entities request and receive written authorization of eligibility from the Director of the Department, based upon adequate, written justification for allowing an exception. Such written justification will include an explanation of how the previous cause for termination will not impact the project for which funding is being requested due to specific remedial actions taken by the entity. The written request and Director determination shall be maintained on file with the relevant RFPs, RFQs and/or contracts within the two-year timeline.

11.2 Clarification
Any explanation desired by a responder regarding the meaning or interpretation of this RFP must be requested in writing not less than five (5) working days prior to the hour and date specified for the receipt of proposals to allow sufficient time for a reply to each responder before the submission of their proposals. All inquiries must be directed to Sandra Archuleta, Community Outreach Coordinator, through the bonfire system. Oral explanations or instructions given before the deadline for receipt of proposals will not be binding. Any information given in writing concerning this RFP will be furnished on the Bonfire portal, if such information is necessary to responders in submitting proposals on this RFP or if the lack of such information would be prejudicial to uninformed responders.

11.3 Acknowledgment of Amendments to the Request for Proposal
Receipt of an amendment to the RFP by a responder must be acknowledged (a) by signing and returning the amendment or (b) by letter. Such acknowledgment must be received prior to the hour and date specified for receipt of proposals and can be submitted as attachment to the Offer. It is the responsibility of the Offeror to stay up to date with any clarifications or amendments to this RFP that may be posted on the Bonfire Portal including addenda and information materials.
11.4 Modification
Proposals may be modified or withdrawn by written notice provided such notice is received prior to the hour and date specified for receipt of proposals.

11.5 Budget Forms
Budget forms can be submitted in Excel format. The Excel forms can be downloaded at [http://www.cabq.gov/family/partner-resources/administrative-requirements](http://www.cabq.gov/family/partner-resources/administrative-requirements)
In “Financial Forms” section, click on “Fiscal Forms – Excel version” to download.
12.0 PROPOSAL CHECKLIST

Proposals must address all required areas listed in Section 8. Prior to submitting the proposal, Offerors are recommended to use the following checklist to ensure that the proposal contains all elements required for a complete submittal. Appendix numbers refer to the Department of Family & Community Services forms included as attachments to this RFP.

Items in this checklist are part of the technical review of the Application, and failure to submit mandatory items may result in the Offer being deemed as non-responsive.

Additional items will be requested should your agency be recommended for award. Those items are detailed under the heading “Requested Upon Recommendation for Award and Subsequent Contracting.”

Mandatory

- Acknowledgment of Amendments to the RFP, if applicable.

- **8.2 APPENDIX #1: Proposal Summary and Certification Form** completed and signed by an authorized official.

- **8.3 Project Narrative**
  - 8.3.a Comprehensive Explanation of Project Purpose, Target Population(s), Service Delivery, and Outcomes
  - 8.3.b Measuring Progress
  - 8.3.c Organizational Capacity: Service Delivery Capabilities
  - 8.3.d Organizational Capacity: Past Performance

- **8.4 Project Budget Forms**
  Excel versions of Budget Forms (Appendices 2-6) are available at: https://www.cabq.gov/family/partner-resources/administrative-requirements.
  In “Financial Forms” section, click on “Fiscal Forms – Excel version” to download.
  - APPENDIX #2: Expense Summary Form
    As applicable, attach explanation of basis for each indirect cost or an approved cost rate letter from cognizant Federal agency.
  - APPENDIX #3: Revenue Summary Form
  - APPENDIX #4: Project Budget Detail Form - Personnel
  - APPENDIX #5: Project Budget Detail Form - Operating Costs
    As applicable, attach cost allocation plan
  - APPENDIX #6: Budget Detail Form: Projected Drawdown Schedule

- **8.5 APPENDIX #7: Original Applicant Work Program Summary**

- **8.3.d.vi Résumés and job descriptions of key personnel for filled and unfilled positions applicable to the proposed project**

- **8.8.d Copy of the organization’s most recent audit or applicable financial statement.**
APPENDIX #8: Representations and Certifications

- IRS Certificate of Non-Profit Incorporation
- Offeror’s Articles of Incorporation filed with the State of New Mexico
- Copy of current By-Laws.
- Copy of the organization’s written accounting policies and procedures, which include procurement procedures.
- Copy of the organization’s personnel policies and procedures.
- Copy of the organization’s conflict of interest policy.

APPENDIX #9: Attachments on File for previously funded re-application;

APPENDIX #11: Debarment, Suspension, Ineligibility and Exclusion Certification

APPENDIX #13: Certification of Compliance with Federal Funding Requirements, Refer to Section 1.1 for further information

APPENDIX #14: if seeking preference points: City of Albuquerque Preference Affidavit of Eligibility

DUNS Number and SAM Registration Acknowledgement

Written Authorization of Eligibility from the Director of the Department for entities that have had an Agreement terminated by the City for cause within last two (2) years, if applicable.

Pay Equity Reporting Form

Pay Equity Documentation. All bids and proposals shall include a Pay Equity Reporting Form or Certificate which can be accessed at https://www.cabq.gov/gender-pay-equity-initiative or in the Solicitation Instructions. Offerors who believe they are exempt because they are an out-of-state contractor that has no facilities and no employees working in New Mexico are not required to report data, but must still submit a Pay Equity Reporting Form with the box verifying their exempt status checked. Any Proposal that does not include a Pay Equity Reporting Form or Certificate shall be deemed nonresponsive, as stated in the Public Purchases Ordinance, 5-5-31 (A). NOTE: THE PAY EQUITY REPORTING FORM REQUIRED BY THIS PROVISION IS NOT A PAY EQUITY CERTIFICATE, NOR DOES IT QUALIFY YOU FOR THE PAY EQUITY PREFERENCE. PAY EQUITY CERTIFICATES ARE AUTOMATICALLY ISSUED TO QUALIFYING VENDORS WITHIN TWO BUSINESS DAYS OF SUBMITTING THE PAY EQUITY REPORTING FORM. PLEASE VISIT THE WEBSITE OR CONTACT THE GENDER PAY EQUITY TASK FORCE WITH QUESTIONS: OEI@CABQ.GOV

Requested Upon Recommendation for Award and Subsequent Contracting

- Relevant licenses to operate as a business and conduct proposed activities.
- Listing of current board members.
- Current organizational chart.
- Copy of the organization’s travel reimbursement policies if travel funds are requested.
- Certificate of Current Good Standing issued by the State of New Mexico.
- APPENDIX #10: Drug Free Work Place Requirement Certification Form;
- APPENDIX #12: Certification of Receipt of *Administrative Requirements*
- APPENDIX #15: Modified W-9
- APPENDIX #16: Disclosure of Lobbying Activities
INSTRUCTIONS - APPENDIX #1: Proposal Summary and Certification Form

Section 1. Enter the name of the organization submitting the Application.

Section 2. Enter the mailing address of the organization.

Section 3. Enter the name and telephone number of a contact person from whom information about the proposal can be obtained.

Section 4. Enter the name of the City program from which funding is being requested. The name of the program should be taken from the Request for Proposals.

Section 5. Enter the number assigned to the RFP from the Request for Proposals.

Section 6. Enter the Scope of Work from Section 4.2 of the Request for Proposals if one is assigned to the area in which the Applicant is seeking funds.

Section 7. Enter the date the proposal is due to be received by the City of Albuquerque from the Request for Proposals.

Section 8. Enter the title of the project for which the Applicant is seeking funds and a brief narrative description of that project. The length of the narrative must be limited to the space available.

Section 9. Enter the total amount of City funding requested in the proposal.

Enter the amount of matching funds to be provided by the Applicant, if matching funds are requested in the Request for Proposal.

Enter the Date Submitted
1. Name of Applicant Organization:

2. Mailing Address (City, State, and Zip Code) | 3. Contact Name:
| Telephone # and email address:

4. City Program Name (from Request for Proposals):

5. RFP Number: | 6. Scope of Services: | 7. Due Date:
| RFP-2022-241-FCS-EB | January 12, 2022

8. Title of Applicant’s Project and Brief Descriptive Summary:

9. Amount of City Funding requested: | Matching Funds Amount (if requested): | Date Submitted:

Certification: It is understood and agreed by the undersigned that: 1) Any funds awarded as a result of this request are to be expended for the purposes set forth herein and in accordance with all Applicable Federal, state, and city regulations and restrictions; and 2) the undersigned hereby gives assurances that this proposal has been prepared according to the policies and procedures of the above named organization, obtained all necessary Approvals by its governing body prior to submission, the material presented is factual and accurate to the best of her/his knowledge, and that she/he has been duly authorized by action of the governing body to bind the Corporation.

| Typed Name of Authorized Board Official: | Title | Telephone Number |
| Signature of Authorized Board Official | Date signed:
INSTRUCTIONS - APPENDIX #2: Expense Summary Form
Submit this form in EITHER Word (next page) OR Excel in Separate Attachment

Excel version available at:  
https://www.cabq.gov/family/partner-resources/administrative-requirements  
In Financial Forms section, click on “Fiscal Forms – Excel version” to download.

Expenditures charged to Social Services category must conform to the FCS Administrative Requirements, be reasonable, be allowable and be allocable.

Personnel Costs
Salaries and Wages: A formula is embedded in the Excel worksheet to automatically enter the amounts from Appendix #4. Manual Calculation: Enter the amounts budgeted to pay salaries and wages for regular staff of the organization employed to carry out project-related activities.

Payroll and Benefits: A formula is embedded in the Excel worksheet to automatically enter the amounts from Appendix #4. Enter the amounts budgeted to pay payroll taxes, and employee benefits. Payroll taxes should include legally mandated payroll taxes for regular employees of the organization, including FICA and unemployment insurance tax. The amounts charged to the City must constitute an allocable percentage of salaries and wages.

Total Personnel Costs: A formula is embedded in the Excel worksheet to automatically enter the sums of salaries, wages, payroll taxes, and employee benefits. Manual Calculation: provide a subtotal for Personnel costs in this section.

Operating Costs
Contractual Services: Enter the amount budgeted to pay the costs of services provided to the project through contractual agreements with organizations and individuals who are not regular employees, with the exception of the costs for conducting annual or special audits.

Audit Costs: Enter the amount budgeted to pay the costs of conducting annual or special audits of the organization. The amount budgeted to the City shall not exceed the proportion that the City contract revenue is of the total agency revenue budget.

Consumable Supplies: Enter the amount budgeted to pay the costs of supplies and equipment utilized by the project which have a price which does not exceed $5,000 per unit.

Telephone: Enter the amount budgeted to pay for the costs of project telephone services, including installation, local service, and long-distance tolls.

Postage and Shipping: Enter the amount budgeted for project postage and shipping.

Occupancy
Rent: Enter the amount budgeted for space lease/rental costs allocable to the project.

Utilities: Enter the amount budgeted for the cost of project allocable electrical services, heating and cooling, sewer, water, and other utilities charged not otherwise included in rental or other charges for space.
Other: Enter the amount budgeted for other project allocable occupancy costs including the costs of security, janitorial services, elevator services, upkeep of grounds, leasehold improvements not exceeding $5,000, and related occupancy costs not otherwise included in rental or other charges for space.

Equipment Lease: Enter the amounts budgeted for the purchase or lease of equipment allocable to the project.

Equipment Maintenance: Enter the amount budgeted to maintain or repair existing agency equipment utilized in a funded project that is allocable to the project.

Printing and Publications: Enter the amount budgeted for the purchase and/or reproduction of project- printed materials, including the cost of photo-reproduction that is allocable to the project.

Travel Costs
Local Travel: Enter the amount budgeted for the costs of project travel within Bernalillo County, including costs for mileage reimbursement and/or allocable operating and maintenance costs of agency owned or hired vehicles use to provide transportation to staff or clients within Bernalillo County that is allocable to the project.

Out-of-Town Travel: Enter the amount budgeted for the costs of project travel outside of Bernalillo County, including costs for transportation, lodging, subsistence, and related expenses incurred by employees, board members, or clients who are in travel status on official business allocable to the project.

Conferences, Meetings, etc.: Enter the amount budgeted for the costs of registration and materials for staff, board, or clients’ attendance at meetings and conferences allocable to the project or for the costs of meetings conducted by the agency in connection with that contract.

Direct Assistance to Beneficiaries: Enter the costs budgeted for the payment of participant wages and benefits, stipends, food, clothing, and other goods and services purchased directly on behalf of clients funded in this project.

Membership Dues: Enter the amount budgeted to pay the costs of dues paid by the agency on behalf of staff, board members, or the agency itself to professional organization related to the purposes of the project.

Equipment, Land, Buildings: Enter the amount budgeted for the purchase of equipment, land, and for the acquisition or construction of buildings allocable to the project, the cost of which exceeds $5,000. Costs charged to Equipment, Land, Buildings, or renovation capital costs must conform to Administrative Requirements.

Insurance: Enter the amount budgeted to pay the costs of insurance, including bonding, allocable to the project.
Fuel and Vehicle Maintenance: Enter the amount budgeted to pay for fuel and maintenance not covered under local travel, i.e. fuel for a bus.

**Total Operating Costs:** A formula is embedded in the *Excel* worksheet to sum the total. Manual calculation: Enter the sum of all line items under operating costs.

**Total Direct Costs:** A formula is embedded in the *Excel* worksheet to sum the Total Personnel Costs and Total Operating Costs. Manual calculation: Enter the sum of Total Personnel Costs and Total Operating Costs.

**Indirect Costs:** Enter the amounts budgeted to pay indirect costs for the project. Costs charged to Indirect must conform to *Administrative Requirements*. As applicable, attach explanation of basis for each indirect cost or an approved cost rate letter from cognizant Federal agency.

**Total Program Expenses:** A formula is embedded in the *Excel* worksheet to sum the total of Direct and Indirect Costs. Manual calculation: sum the Direct and Indirect Costs.

Percent Requested: A formula is embedded in the *Excel* worksheet to calculate the Percent Requested. Manual Calculation: Divide City Funding Request in Column C by Project Total in Column B for each individual row. Display as a percentage with one decimal point (e.g. 33.3%).
City of Albuquerque  
Department of Family and Community Services  
APPENDIX #2: Expense Summary Form in Word

1. Applicant Agency:

2. Project Title:

<table>
<thead>
<tr>
<th>Expenditure Category</th>
<th>Program Total</th>
<th>City Funding Requested</th>
<th>Percent Requested</th>
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<tbody>
<tr>
<td>Personnel Costs</td>
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<td>Salaries &amp; Wages</td>
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<td>Payroll Taxes and Employee Benefits</td>
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<td><strong>Total Personnel Costs</strong></td>
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<td>Operating Costs - Direct</td>
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<td>Contractual Services</td>
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<td>Audit Costs</td>
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<td>Consumable Supplies</td>
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<td>Postage and Shipping</td>
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<td>Occupancy</td>
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<td>a. Rent</td>
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<td>b. Utilities</td>
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<td>c. Other</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Equipment Lease</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Equipment Maintenance</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Printing &amp; Publications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Local Travel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Out of Town Travel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conferences, Meetings, Etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct Assistance to Beneficiaries</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership Dues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equipment, Land, Buildings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fuel and Vehicle Maintenance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Operating Costs</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Direct Costs</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>(Personnel &amp; Operating)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indirect Costs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(____%); attach Rate Letter</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL PROGRAM EXPENSES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
INSTRUCTIONS - APPENDIX #3: Revenue Summary Form

Submit this form in EITHER Word (next page) OR Excel in Separate Attachment

List each agency of government providing funding in the column “Revenue Source.” Enter the anticipated revenues for the total agency budget from each of the listed funding sources in the column headed “Agency Total.” Insert lines as needed. When inserting line items, check to ensure data from new lines were included in totals and percentages.

A formula is embedded in the Excel worksheet to calculate the "Percent of Agency Budget" subtotals and totals. Manual Calculation: Divide the Subtotals in the Agency Total Column by the Total in Total Revenue From All Sources. Display as a percentage with one decimal point (e.g., 33.3%).

Definitions:
- **Fees from Federal Government Agencies** are fees paid to the Agency by a unit of Federal government for goods or services provided as a contractor other than Medicaid.
- **Grants from Federal Government Agencies** are funds paid to the agency as a recipient or sub-recipient by a unit of Federal government other than Medicaid.
- **Medicaid Reimbursements** are funds paid to the agency as a result of billing Medicaid for reimbursable expenses for services to eligible clients.
- **Fees from State Government Agencies** are fees paid to the Agency by a unit of State government for goods or services provided as a contractor.
- **Grants from State Government Agencies** are funds paid to the agency as a recipient or sub-recipient by a unit of State government.
- **Revenues from County Government** are funds paid to the agency from a County.
- **Revenues from City of Albuquerque** are funds paid to the agency from the City of Albuquerque. List each funded project on a separate line. Exclude the request in this proposal.
- **Contributions** means money income donated to the agency by any non-government sources.
- **United Way Revenue** means all funding provided by the United Way of Central New Mexico.
- **Other Revenue** means income to the agency from sources not falling into another category.
- **Total Revenue From all Sources** means the total of money revenue from all sources including public, private and foundation sources.
City of Albuquerque  
Department of Family and Community Services  
APPENDIX #3: Revenue Summary Form in Word

1. Applicant Agency: 

2. Project Title: 

<table>
<thead>
<tr>
<th>Revenue Source</th>
<th>Agency Total</th>
<th>% of Agency Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Government Revenues</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenues from Federal Government</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>(On separate lines, list each Federal Agency providing fees/funding and the amount of funding)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fees from Federal Government Agencies other than Medicaid Reimbursement:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants from Federal Government Agencies:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicaid Reimbursements:</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal Federal Agencies</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenues from State Government</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>(On separate lines, list each State Agency providing fees/funding and the amount of funding)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fees from State Government Agencies:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants from State Government Agencies:</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal State Agencies</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenues from County Government</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenues from the City of Albuquerque (other than this proposal)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Municipal Government Revenues</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal Local Government</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL GOVERNMENT REVENUES FROM ALL SOURCES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>-------</td>
<td></td>
</tr>
<tr>
<td><strong>Other Revenue:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contributions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>United Way Revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subtotal Other Revenues</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL REVENUE FROM ALL SOURCES:</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
INSTRUCTIONS - APPENDIX #4: Project Budget Detail Form – Personnel Expenses
Submit this form in EITHER Word (next page) OR Excel in Separate Attachment

Section 1. Enter the name of the agency submitting the proposal.

Section 2. Enter the project title as shown on the Proposal Summary and Certification form.

Section 3. Detail each staff member included in Personnel Costs in the Expense Summary Form in APPENDIX #2. Use one line per staff member working on the project. Add rows and use additional sheets as necessary. The following illustration is provided for clarification purposes only.

Sample Illustration

<table>
<thead>
<tr>
<th>FTE on Project</th>
<th>Position Title</th>
<th>Salary for the Project</th>
<th>Amount Requested From the City</th>
<th>Percent Requested (Amount Requested / Salary to the Project)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>Case Manager</td>
<td>$40,000</td>
<td>$20,000</td>
<td>50%</td>
</tr>
</tbody>
</table>

This individual is dedicated full-time to this project, however their salary is covered 50% by the City and 50% by other funding sources.

| .50            | Case Manager   | $20,000                | $15,000                       | 75%                                                      |

This individual works full time but splits time 50/50 between this project and unrelated projects. Their salary is covered 75% by City funds and 25% by another funding source.

| .50            | Case Manager   | $20,000                | $20,000                       | 100%                                                     |

This individual works half time. They dedicate all their time to this project, and the agency seeks 100% coverage by City funds – no other funding sources.

- In the column labeled “FTE on Project” list each individual staff working on the project, regardless of funding source (e.g., if an FTE will spend half time on this City-funded project, insert .50).

- In the column labeled “Position Title” give the title of each position working on this project.
In the column labeled “Salary Dedicated to this Project” enter the salary amount dedicated to the project for each individual by multiplying the %FTE by total annual salary (a change from previous years’ forms that may have included multiple FTEs).

In the column labeled “Amount Requested” enter the amount of funding requested from the City for each individual position.

In the column “Percent Requested” calculate as: Amount Requested / Salary on Project.  Note: The Annual Salary dedicated to the project / % FTE should = Annual Salary for this position.

Section 4. Provide a sum of the columns for "Salary for the Project" and "Amount Requested" and calculate "Percent Requested" by dividing the sum of “Amount Requested” by the sum of “Annual Salary Dedicated to Project”

Section 5. Enter the total amount of payroll taxes and employee benefits for project salaries in the column labeled “Salary for the Project,” the “Amount Requested” from the City, and the percent of the total to the charged to the City.

Section 6. Enter the sum of the lines 4 and 5 in the column’s labeled “Salary for the Project,” and “Amount Requested.” Enter the percentage of the total amount requested from the City.

Section 7. Enter the percentage of salaries and wages charged to FICA, Unemployment Compensation, health insurance, retirement, and other employee benefits in Section 5.
City of Albuquerque
Department of Family and Community Services

APPENDIX #4: Project Budget Detail Form – Personnel in Word
Page 1 of _______

1. Agency Name:  

2. Project Title:  

3. Personnel costs: Use this form to identify all salaries, wages, payroll taxes and fringe benefits shown on the Expense Summary Form. One individual per row. Add additional rows as necessary.

<table>
<thead>
<tr>
<th>FTE on Project</th>
<th>Position Title</th>
<th>Salary for the Project</th>
<th>Amount Requested from the City</th>
<th>Percent Requested (Amount Requested / Salary for the Project)</th>
</tr>
</thead>
</table>

4. Salaries & Wages

5. Payroll Taxes & Employee Benefits*

6. Total Personnel Costs

7. *Payroll Taxes: FICA@_______%: Unemployment Insurance @_______%  
   Employee Benefits: Health Insurance @_______%  Retirement@_______%  
   Other @_______%
INSTRUCTIONS - APPENDIX #5: Program Budget Detail Form – Operating Expenses
Submit this form in EITHER Word (next page) OR Excel in Separate Attachment

Section 1. Enter the name of the agency submitting the proposal.

Section 2. Enter the project title as shown on the Proposal Summary and Certification form.

Section 3. Detail each Operating Cost line item on the Expense Summary Form in APPENDIX #2. Use one line per expense included in project. Add rows and use additional sheets as necessary. The following illustration is provided for clarification purposes only.

Sample Illustration

<table>
<thead>
<tr>
<th></th>
<th>Project Total</th>
<th>Amount Requested</th>
<th>Amount Other Sources</th>
<th>Percent Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Contractual Services</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contractor #1: 50% of Contractor 1 costs at $150 per month for 12 months</td>
<td>$900</td>
<td>$450</td>
<td>$450</td>
<td>50%</td>
</tr>
<tr>
<td>Contractor #2: 50% of Contractor 2 costs at $150 per month for 12 months</td>
<td>$900</td>
<td>$450</td>
<td>$450</td>
<td>50%</td>
</tr>
<tr>
<td><strong>Consumable Supplies</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paper</td>
<td>$100</td>
<td>$50</td>
<td>$50</td>
<td>50%</td>
</tr>
<tr>
<td>Pencils</td>
<td>$100</td>
<td>$25</td>
<td>$75</td>
<td>25%</td>
</tr>
<tr>
<td><strong>Travel</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local Travel: 150 of miles/month * $0.58/per mile * 12 months</td>
<td>$1,044</td>
<td>$1,044</td>
<td>$0</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Direct Assistance to Beneficiaries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rental assistance for 50 clients at $700 per month for 12 months</td>
<td>$420,000</td>
<td>$315,000</td>
<td>$105,000</td>
<td>75%</td>
</tr>
</tbody>
</table>

- Describe all elements included in the line item costs and indicate the basis used for determining the costs in the first column.
- In the column headed “Project Total” enter the agency total program costs of the line item.
- In the column headed “Amount Requested” enter the amount requested from the City.
- In the column headed “Amount Other Sources” enter the amount to be paid from other sources.
- In the column headed “Percent Requested” enter the percent of the total program expenditures requested from the City.

- Include detail for each separate item as shown in the above illustration (e.g., each contractor, each type of direct assistance to beneficiaries).

- If cost is allocated, provide the allocation plan.
1. Applicant Agency:

2. Project Title:

3. Direct and Indirect Costs:

<table>
<thead>
<tr>
<th>Line Item and Basis (Non-Personnel)</th>
<th>Project Total</th>
<th>Amount Requested</th>
<th>Amount Other Sources</th>
<th>Percent Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Contractual Services</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>List all costs and assumptions in this area (e.g., 50% of Contractor #1 costs @ $150 per month for 12 months)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Audit Costs</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Consumable Supplies</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Telephone</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Postage and Shipping</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>Occupancy</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Rent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Utilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Equipment Lease/Purchase</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Equipment Maintenance</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>Printing &amp; Publications</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Travel</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Conferences, Meetings, Etc.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Direct Assistance to Beneficiaries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
List all costs and assumptions in this area e.g., Rental assistance for 50 clients at $700 per month

<table>
<thead>
<tr>
<th>Membership Dues</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Equipment, Land, Buildings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Fuel and Vehicle Maintenance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Operating Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

- As applicable, attach cost allocation plan
INSTRUCTIONS - APPENDIX #6: Budget Detail Form: Projected Drawdown Schedule
Submit this form in EITHER Word (next page) OR Excel in Separate Attachment

The applicant must estimate the amount and percent of City funding it anticipates expending during each quarter of the fiscal year and the unit rate (if applicable).

Section 1. Enter the appropriate Quarter Ending dates (e.g., September 30, December 31, March 31, June 30).

Section 2. For each of the quarterly periods indicated, enter the amount of City funding the agency projects expending in the column headed “Amount to be Requested.”

Section 3. In the column headed “Percent of Total,” enter the percentage of all City funds projected to be expended during the quarter.

If the applicant anticipates expending more than 25% of the total requested from the City in any one quarter, provide a brief explanation of these expenditures in the space provided.

Section 4. As applicable, if reimbursement will be based on a unit rate, identify the per unit reimbursement rate for services to be provided, the unit basis (unduplicated client, hour, etc.) and the proposed number of annual units. Rate shall include any applicable taxes and shall constitute full and complete compensation for the successful applicant’s services under this proposal.

If separate rates are required for services based on factors such as service location, service type or other factors, please provide a list of specific rates, one individual rate at a time, and explain in the Rate Justification section (5).

Section 5. As applicable, if a reimbursement will be based on a unit rate, provide a rate justification. The intent of the justification is to tie together the budget with program activities and outcomes. To accomplish this, applicants should identify the basis used in establishing the reimbursement rate in context of the proposed services. Include the rationale used in developing cost components noted on the required budget forms. Additionally, indicate how the proposed reimbursement rate is necessary and reasonable to accomplish the program proposed in the narrative.
1. Applicant Agency:  

2. Proposal Title:  

3. Amount and percent of total requested funds on a quarterly basis:  

<table>
<thead>
<tr>
<th>Quarter Ending</th>
<th>Amount to be Requested</th>
<th>Percent of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL**  
Explanation if any projected drawdowns exceed 25% of the total requested funds:  

4. As applicable: *Reimbursement Rate* – only applicable to *unit of service* contracts:  
   
   Rate: $_________ per__________________________ (hour, client, etc.)  
   
   Annual units: ____________________________  

5. As applicable: *Rate Justification* – only applicable to *unit of service* contracts:
INSTRUCTIONS - APPENDIX #7: Applicant Work Plan Summary

The Work Plan requires activities to be aligned with outcomes and outputs must be specific and related to achieving the outcomes.

Section 1. Enter the name of the agency.
Section 2. Enter the project title, from the Proposal Summary and Certification form.
Section 3. If the work summary is submitted as part of an initial Application (e.g., RFP Offer), check the box marked “new”; if it is submitted as a contract renewal application, check the box “renewal”; if it is submitted as part of a request for work program revision, check the box marked “revision.”

Section 4. Project Description: Please enter a brief description of the proposed services

Section 5. Measurable Results:

A. Under the column headed “Major Project Services/Activities”: enter the major activities/sub-activities to be undertaken through the project.

B. Under “Timeframe”: enter the quarters in the fiscal year that these activities will be performed/services will be provided

C. Under column headed “Outputs from Requested City Funds”: For each listed activity, enter the measurable outputs, such as the number of people served/service units, that match the requested City funding level and proposed budget allocation in Appendix #5. The expectation is that funding of service outputs are directly associated with the budget allocation and must not reflect funding from multiple sources per output. Please separate different outputs associated with an activity in different rows.

D. Under “Measurable Outcomes”: insert the applicable measurable outcomes from Section 4.0. An outcome is the specific benefit to well-being for the participant that results from the activity or services provided by your organization. Multiple outcomes associated with an activity may be listed in one row.

E. Under “Outcome Progress Indicator”: insert a measurable indicator from Section 4.0 or other applicable, measurable indicators of progress to achieve outcomes. An indicator is a measurable marker of progress that represents improvement as a result of the activity or services provided by your organization (for instance, % of customers who obtain and maintain permanent housing upon completion of the program as a measurable indicator of Increased Housing Stability).

F. Under “Measurement Tool”, enter the method/name of measurement tool you will use to collect data to report on outputs and progress to outcomes.

Applicants should not try to include every project activity, but should restrict entries to major activities for which measurable outputs and outcomes can be provided and for which they will be accountable if a contract is awarded.

Applicants may add additional pages as needed.
City of Albuquerque  
Department of Family and Community Services  
APPENDIX #7: Applicant Work Plan Summary

1. Agency Name:

2. Project Title

3. Applicant Type
   - □ New
   - □ Renewal
   - □ Revised

4. Project Description:

5. Measurable Results: List the major project tasks/activities, the outputs for each that will be associated with City funds only, outcomes, outcome indicators of progress and measurement tools

<table>
<thead>
<tr>
<th>Major Project Services/Activities</th>
<th>Timeframe</th>
<th>Outputs from Requested City Funds</th>
<th>Outcomes</th>
<th>Outcome Indicator of Progress</th>
<th>Measurement Tool(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

*Format in landscape and add rows and pages as necessary*
APPENDIX #8: Representations and Certifications

The undersigned HEREBY GIVE ASSURANCE THAT:

The Applicant agency named below will comply and act in accordance with all federal laws and Executive Orders relating to the enforcement of civil rights, including but not limited to, Federal Code, Title 5, USCA 7142, Sub-Chapter 11, Anti-discrimination in Employment, and Executive Order number 11246, Equal Opportunity in Employment; and

That the Applicant agency named below will comply with all New Mexico State Statutes and City Ordinances regarding enforcement of civil rights; and

That no funds awarded as a result of this request will be used for sectarian religious purposes, as specified in the Administrative Requirements for Contracts Awarded Under the City of Albuquerque, Department of Family and Community Services, § 10 (E)(2), that: (a) there shall be no religious test for admission for services; (b) there shall be no requirement for attendance of religious services; (c) there shall be no inquiry as to a client’s religious preference or affiliations; (d) there shall be no proselytizing; and (e) services provided shall be essentially secular, however, eligible activities, as determined by the fund source, and inherently religious activities may occur in the same structure so long as the religious activity is voluntarily and separated in time and/or location.

Agency Name

Typed Name of Authorized Board Official:

Title:

Signature:_____________________________ Date:___________
City of Albuquerque  
Department of Family and Community Services  
APPENDIX #9: Attachments on File

Instructions: If an Applicant has received a social services contract from the Department of Family and Community Services within the past 12 months and submitted the required attachments, it is not necessary to resubmit the attachments if there has been no change in the information requested. If the documents currently on file with the City remain current, check the box marked current. If there has been any change in status of documents currently on file (e.g., changes in board members, organizational structure, etc.) check the box marked “Revised Attached” and submit the revised document with the project proposal.

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<tr>
<th>Document</th>
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<th>Revised Attached</th>
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<td>Certificate of Non-Profit Incorporation</td>
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<td>Articles of Incorporation</td>
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<td>Current By-Laws</td>
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<td>Applicable Licenses</td>
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<td>Travel Reimbursement Policies (if Applicable)</td>
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<td>Personnel Policies and Procedures</td>
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<td>Conflict of Interest Statement</td>
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<td>New Mexico Certificate of Good Standing</td>
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<tr>
<td>Job Descriptions / Résumés of Key Personnel</td>
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<td>Agency’s Most Recent Audit</td>
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APPENDIX #10: Drug Free Workplace Requirement Certification Form

The agency certifies that it will provide a drug-free workplace by:

1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the agency’s workplace, and specifying the actions that will be taken against employees for violation of such prohibition;

2. Establishing a drug-free awareness program to inform employees of:
   a. The dangers of drug abuse in the workplace;
   b. The agency’s policy of maintaining a drug-free workplace;
   c. Any available drug counseling, rehabilitation, and employee assistance programs; and
   d. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

3. Making it a requirement that each employee to be engaged in the performance of an agreement with the City be given a copy of the agency’s drug-free workplace statement.

4. Notifying each employer that as a condition of employment under the City’s agreement, that employee will:
   a. Abide by the terms of the agency’s drug-free workplace statement, and
   b. Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace, no later than five (5) days after such conviction.

5. Notifying the City of Albuquerque, Department of Family and Community Services within ten (10) days after receiving an employee notice or otherwise receiving actual notice of an employee drug statute conviction for a violation occurring in the workplace.

6. Taking one of the following actions within thirty (30) days of receiving notice of an employee’s drug statute conviction for a violation occurring in the workplace:
   a. Taking appropriate personnel action against such an employee, up to and including termination; or
   b. Requiring such employee to participate satisfactorily at a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State or local health, law enforcement, or other appropriate agency; and

7. Making a good faith effort to continue to maintain a drug-free workplace through the implementation of the above requirements.
8. The agency also certifies that the agency’s drug-free workplace requirements will apply to all locations where services are offered under the agreement with the City of Albuquerque. Such locations are identified as follows:

Street Address: ____________________________  City: ____________

State: _______  Zip: _______  E-mail: _______________________

Agency Name________________________________________________________

Typed Name of Authorized Board Official: ______________________________

Title: ______________________________________________________________

Signature:__________________________ Date: ____________
City of Albuquerque  
Department of Family and Community Services  
APPENDIX #11: Debarment, Suspension, Ineligibility and Exclusion Certification

I certify that the agency has not been debarred, suspended or otherwise found ineligible to receive funds by any agency of the executive branch of the federal government.

I further certify that should any notice of debarment, suspension, ineligibility or exclusion be received by the agency, the City of Albuquerque, Department of Family and Community Services will be notified immediately.

Agency Name:__________________________________________________________

Typed Name of Authorized Board Official:________________________________

Title:_______________________________________________________________

Signature:________________________________________Date:______________
City of Albuquerque
Department of Family and Community Services

APPENDIX #12: Certification of Receipt of Administrative Requirements

The undersigned HEREBY CERTIFY THAT:

1. The agency/organization has received and reviewed a copy of the Administrative Requirements for Contracts Awarded Under the City of Albuquerque, Department of Family and Community Services, as revised and effective July 1, 2019; and

2. The agency/organization named below will adhere to these Administrative Requirements in its operation of City-funded programs; and

3. The Administrative Requirements are shared and accessible to all relevant staff.

Agency/Organization Name:________________________________________________________

Typed Name of Authorized Board Official __________________________________________

Typed Name of Executive Director _________________________________________________

Signature __________________________________________ Signature _______________________

Date: __________________________ Date: __________________________


The undersigned HEREBY GIVE ASSURANCE THAT:

If the percentage of federal funds that makes up the total program or project costs is greater than 0%, the Applicant agency named below will specifically comply and act in accordance with all applicable federal law governing programs receiving federal funds, including but not necessarily limited to:

2. Civil Rights Act of 1964 (Title VI), providing that no person in the United States will, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination. 45 CFR Part 80.
3. Education Amendments of 1972 (Title IX of the Education Amendments of 1972, 20 U.S.C. 1681, 1682, 1683, 1685, and 1686), providing that no person in the United States will, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any educational program or activity. 45 CFR Part 86.
4. Rehabilitation Act of 1973 (Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. 794, as amended, providing that no otherwise qualified handicapped individual in the United States will, solely by reason of the handicap, be excluded from participation in, be denied the benefits of, or be subjected to discrimination.
5. USA Patriot Act (amending 18 U.S.C. 175-175c), prescribing criminal penalties for possession of any biological agent, toxin, or delivery system of a type or in a quantity that is not reasonably justified by a prophylactic, protective, bona fide research, or other peaceful purpose. The act also establishes restrictions on access to specified materials. “Restricted persons,” as defined by the act, may not possess, ship, transport, or receive any biological agent or toxin that is listed as a select agent.
6. Public Health Security and Bioterrorism Preparedness and Response Act, provides protection against misuse of select agents and toxins, whether inadvertent or the result of terrorist acts against the US homeland, or other criminal act. 42 U.S.C. 262a; 42 CFR Part 73.
7. Controlled Substances Act provides that grantees are prohibited from knowingly using appropriated funds to support activities that promote the legalization of any drug or other substance included in Schedule I of the schedule of controlled substances established by Section 202 of the Controlled Substances Act, 21 U.S.C. 812. This limitation does not apply if the recipient notifies the GMO that there is significant medical evidence of a therapeutic advantage to the use of such drug or other substance or that federally sponsored clinical trials are being conducted to determine therapeutic advantage.
8. Limited English Proficiency. Recipients of federal financial assistance must take reasonable steps to ensure that people with limited English proficiency have
meaningful access to health and social services and that there is effective communication between the service provider and individuals with limited English proficiency. Title VI of the Civil Rights Act of 1964.

9. Construction-Related Requirements
   a. Architectural Barriers Act of 1968 (as amended 42 U.S.C. 4151 et seq.) sets forth requirements to make facilities accessible to, and usable by, the physically handicapped and include minimum design standards. All new facilities designed or constructed with HHS grant support must comply with these requirements. 41 CFR 102-76; 36 CFR 1191.
   b. Clean Air and Clean Water Act provides for the protection and enhancement of the quality of the nation’s air resources to promote public health and welfare and for restoring and maintaining the chemical, physical, and biological integrity of the nation’s waters. 42 U.S.C. 7606 and EO 11738.
   c. Safe Drinking Water Act provides for the protection of underground sources of drinking water that have an aquifer, which is the sole source of drinking water. No grant may be entered into for any project that the EPA Administrator determines may contaminate such aquifer.

10. Health, Safety, and Related Requirements
   a. HHS funds may not be spent for an abortion.
   b. Funds appropriated for HHS may not be used to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug.
   c. Standards for Privacy of Individually Identifiable Health Information (the Privacy Rule) implements the Health Insurance Portability and Accountability Act (HIPAA) of 1996, 42 U.S.C. 1320d et seq., which governs the protection of individually identifiable health information. The Privacy Rule is administered and enforced by HHS’s OCR and is codified at 45 CFR Parts 160 and 164. The Privacy Rule applies only to covered entities.
   d. Confidentiality of Patient/Client Records. Section 543 of the PHS Act, 42 U.S.C. 290dd-2, requires that records of substance abuse patients be kept confidential except under specified circumstances and purposes. The covered records are those that include the identity, diagnosis, prognosis, or treatment of any patient maintained in connection with any program or activity relating to substance abuse education, prevention, training, treatment, rehabilitation, or research that is conducted, regulated or directly or indirectly assisted by any department or agency of the United States. 42 CFR Part 2.
   e. Drug Free Workplace Act of 1988, requires that all organizations receiving grants from any federal agency agree to maintain a drug free workplace. The recipient must notify the awarding office if any employee of the recipient is convicted of violating a criminal drug statute. 42 U.S.C. 701 et seq.; 45 CFR Part 82.
   f. Pro-Children Act imposes restrictions on smoking in facilities where federally funded children’s services are provided. The Act specifies that smoking is prohibited in any indoor facility (owned, leased, or contracted for) used for the routine or regular provision of kindergarten, elementary, or secondary education or library services to children under the age of 18. In addition, smoking is prohibited in any indoor facility or portion of a facility (owned, leased or
contracted for) used for the routine or regular provision of federally funded health care, day care, or early childhood development. 20 U.S.C. 7183.

Agency Name

Typed Name of Authorized Board Official:

Title:

Signature: ___________________________ Date: __________
Vendor Preference Form and instructions are online at:


NO PREFERENCES SHALL BE APPLIED IF FEDERAL FUNDS ARE USED.
City of Albuquerque
Department of Family and Community Services
APPENDIX #15: City of Albuquerque Substitute W-9

City of Albuquerque Substitute W-9 and instructions are online at:

https://www.cabq.gov/dfa/onlineservices/modified-w9-supplier-form
Disclosure of Lobbying Activities and instructions are online at:

https://www.gsa.gov/Forms/TrackForm/33144

City of Albuquerque
Department of Family and Community Services
Pay Equity Reporting Form PE10-249

Pay Equity Reporting Form PE10-249 and instructions are online at:

https://www.cabq.gov/gender-pay-equity-initiative
Organization Name: _________________________

DUNS Number: __________________________

I, ________________________, as representative of ___________________________, hereby acknowledge that I have obtained the above DUNS Number in association with the above-mentioned organization, and registered that DUNS Number with the System for Award Management (SAM).

________________________________
Name

________________________________
Title, as Authorized Representative of

________________________________
Organization