



Request for Qualifications

Help Me Grow Early Care and Education Initiative

RFQ # - 2018 - 1

**Availability of Funds from:
San Francisco Office of Early Care and Education
First 5 San Francisco
San Francisco Department of Children Youth and Their Families**

Date March 9, 2018

**Request for Qualifications
Help Me Grow Early Care and Education Initiative**

Non-Mandatory Bidders Conference	March 19, 2018 at 10am 1390 Market St., Ste. 1125, San Francisco, CA
Mandatory Letter of Intent	March 29 th , 2018
Proposal Due Date:	April 16, 2018 at 4 p.m.
Contact Person:	Theresa Zighera, Senior Program Officer First 5 San Francisco 415.934.4873 or theresa.zighera@first5sf.org

Introduction

The Office of Early Care and Education, as the steward of the county’s early care and education system, First 5 San Francisco, as the contracting agent for the county’s implementation of Help Me Grow (HMG), and the City’s Department of Children Youth and Their Families, are seeking an experienced entity to oversee, implement, and enhance over time the county’s Help Me Grow Early Care and Education Initiative. This entity will implement a system for early care and education that aligns with the National HMG framework and: promotes administration and tracking of developmental screens; educates and engages programs and families in utilizing screening results; ensures a coordinated response to identified concerns; and offers systems navigation and family support for high-risk developmental concerns.

\$1,000,000 has been allocated by the Joint Funders for this project annually for a two-year period with up to (3) three one-year renewals pending funding availability. Costs should be reasonable and well justified.

<u>OECE</u>	<u>First 5</u>	<u>DCYF</u>	<u>TOTAL</u>
\$667,043	\$251,259	\$81,698	\$1,000,000
67%	25%	8%	100%

The closing date for the submission of applications is 4:00 p.m. SHARP on Monday, April 16, 2018. All applications received after 4:00 p.m. will be considered late and will **not** be accepted. No electronic or faxed submissions will be accepted.

Hand-deliver one (1) original and three (3) copies of the application to:

First 5 San Francisco
1390 Market Street, Suite 318
San Francisco, CA 94102
Attn: Theresa Zighera

ESTIMATED TIMELINE	
Application Release	March 9 th , 2018
Non-Mandatory Bidders Conference	March 19, 2018 at 10am 1390 Market St., Ste. 318 San Francisco, CA
Mandatory Letter of Intent	March 29 th , 2018
Proposal Due Date	April 16, 2018 at 4 p.m.
Notice of Recommendation for Funding	May 9 th , 2018
Tentative Commission Approval	June 6 th , 2018
Anticipated Contract Start	July 1, 2018

Background

The Office of Early Care and Education, the Department of Children Youth and Their Families, and First 5 San Francisco (The Joint Funders) are committed to ensuring the early well-being, school readiness, and long-term school success of San Francisco’s children. However, despite gains in school readiness over time, a 2015 Kindergarten Readiness study showed that 38% of entering kindergartners in San Francisco are still not adequately prepared for school. These children were more likely to come from low-income, non-English-speaking, Latino, or African American households and were more likely to have a special need. Six percent (6%) of children in the study sample had designated special needs, and 70% of them did not meet the readiness standard. This is likely attributable to the fact that only 58% of parents whose children were identified with a need reported having received help by kindergarten entry and a majority of those connected to supports were from higher income, white families.

The study also found that up to 8% of children may have had undiagnosed special needs, according to teachers and parents. Early screening and intervention for developmental concerns can help children thrive and reduce the need for expensive services later, but less than half of all children received developmental screening prior to kindergarten. Even when children do receive developmental screenings, we know from a long history of evidence that the path to services is rife with challenges and issues, such as: confusing and complex eligibility requirements; insufficient service availability – particularly those of low or no cost - and long wait times; social, linguistic and geographic isolation of families and fear of stigma; as well as mixed messages from the myriad professionals helping families to navigate it all.

This research points to the need for a more robust and unified approach to developmental screening, referral, and early intervention for children with developmental concerns or identified special needs and their families. Given the multiple reasons that timely linkage to appropriate supports can be delayed or disrupted, it is important to have a clear pathway to services and a coordinated process that enhances access, integrates with the larger system of care to remove barriers, and ultimately helps families to act quickly and with confidence when they have concerns about their child’s development.

Help Me Grow (HMG) is a systems-change model which helps entire communities of care unite around timely developmental screening, early intervention, and successful outcomes for children. Numerous states throughout the United States, and an ever-expanding set of California counties, are implementing this system to support early identification and referral for children ages birth to 5 with developmental, behavior and/or social-emotional concerns. HMG builds collaboration

across sectors, including health care, early care and education and family support to ensure better outcomes for children. The four core components of a comprehensive *HMG* system are:

1. *Centralized access point* for connection of children and their families to services and care coordination
2. *Community outreach* to promote awareness and use of *HMG* and to provide information about developmental milestones
3. *Child health care provider outreach* to support early detection and promote awareness and use of *HMG*
4. *Data collection and analysis* to understand all aspects of the *HMG* system, including the identification of gaps and barriers

The Joint Funders have implemented HMG for the past four years, along with a complimentary Inclusion Networks Initiative through the Center for Inclusive Early Care and Education. In preparation for this RFQ, the Joint Funders have conducted a comprehensive review of these programs, as well as HMG and other early intervention models in counties outside San Francisco, combined with stakeholder interviews and focus groups. Several key findings emerged that have helped to inform this funding application. They are outlined below.

- A) The service components of Inclusion Networks and HMG hold potential for positive changes in the desired areas. Families and providers who work closely with the initiatives report impactful relationships, effective support navigating resources and programs, and on-site coaching supports that are responsive and helpful with the more complex developmental concerns. However, the supports seem to be under-utilized and have not yet “scaled-up” to meet the need. The two initiatives – HMG and Inclusion Networks – could benefit from greater integration in order to better leverage the strengths that each brings including:
- On-site relationships with early care and education providers has proven to be a critical service access point. Early care and education providers value the on-site inclusion supports they have received, and for many this has been the first and best access point to intervention services and support for the children and families in their care.
 - On-site coaching supports combined with citywide training and ongoing professional learning cohorts has also helped early care and education providers gain the skills and confidence to successfully adapt instruction and approaches for children with lower levels of risk within the classroom environment.
 - Providers in all sectors (early care and education, pediatric, family support) have built capacity to conduct developmental screens and offer some follow-up supports for identified risk, but none of these settings is currently structured or financed to offer intensive care coordination, advocacy, and ongoing support for children with more complex developmental needs who require formal early intervention referrals. Therefore, it is important to maintain, and potentially expand, the function of community-based family resource specialists and/or social workers who will be able to provide this additional expertise for children at the highest levels of risk.
- B) First 5 San Francisco has been requiring developmental screening within funded programs for the past 10 years and screening rates have continued to be on the rise in the city, with

rates of screening at kindergarten entry increasing from 20% in 2007 to 44% in 2015, according to kindergarten readiness studies. However, there is less indication that screening results are consistently utilized to understand a comprehensive picture of the various developmental risk levels that exist among the children at a given site, in order to formulate intentional prevention and early intervention follow-up actions, whether for individual children or across groups of children. Similarly, it does not appear that screening results and subsequent rescreening results, are tracked in such a way that helps determine progress over time and effectiveness of interventions.

- C) The HMG core components remain relevant to San Francisco's early intervention efforts, but do pose some shortfalls that could be addressed locally:
- The HMG framework does not clearly articulate the role of developmental screening and its connection to the other four components within the framework.
 - While the HMG framework emphasizes centralized access, an important step in the linkage process, it does not specifically elevate the desired outcome of long-term service linkage, but rather assumes that this will be the end result of centralized access. The framework could benefit from more intentional articulation of what service linkage means and how it will come about, above and beyond just the initial central access point.
 - The HMG framework rests heavily on a highly financed, robust community outreach campaign to direct families to the central access point/call center. Even in communities with a massive outreach campaign, a lot can be left to chance with this approach, and it is difficult to ensure that the families most in need of the service will actually self-refer to the access point. Further, this approach does little to intentionally support non-English speaking families and/or families who are geographically and socially isolated and therefore least likely to self-refer and connect to service. A county like San Francisco, with a highly diverse population and fewer dollars to spend on large community campaigns, leaves even more to chance in this regard and should consider a more intentional approach of centralizing access; one that maximizes the strong foundations and practice gains made within other large-scale, systems change efforts such as Early Care for All, Quality Rating and Improvement System, and the Family Resource Center Initiative.
- D) The Multi-tiered System of Support framework from the field of special education offers an important contribution to this effort, in that it looks to systematically deliver a range of developmental interventions based on demonstrated levels of need. It steers away from a "one-size fits all" intervention solution and rather reinforces the use of screening and assessment to inform differentiated strategies (universal to targeted) that will best match educational settings and individual children's unique needs and circumstances. It also incorporates continuous monitoring of progress to determine the impact of interventions and has expectations for parent involvement throughout the process. This type of intentional, differentiated approach holds a lot of value in a system of somewhat scarce service resources that are often based on strict eligibility requirements and must be targeted appropriately. It encourages universal prevention and more integrative problem-solving approaches and is therefore a much clearer and more feasible way to look at the challenges of service connection.

- E) Discussions with families and early care and education programs indicate that San Francisco continues to lack a clear consistent message and set of intentional strategies for early identification and intervention across service sectors, often leaving families caught in the middle of conflicting information. It will be vitally important to bring consistency, continuity, and parallel approaches to the two sectors where families turn for the majority of their child development needs – the pediatric community and early care and education. Families and children will benefit most from a uniform message and strategy encompassing and integrating both sectors toward a common goal of universal identification and linkage to service before kindergarten entry.

Together, these findings have helped to validate that the HMG umbrella as a promising early intervention framework when also combined with a Multi-tiered Systems of Support lens and adjusted slightly to match the San Francisco service landscape. Findings also support a specific and intentional focus on Early Care and Education as a strong setting to pilot and refine this restructured HMG approach. Ultimately the goal would be to extend out to the pediatric sector as well for a fully integrated, sustainable early intervention system.

Purpose of RFQ

The intent of the Joint Funders is to fund an experienced entity to oversee, implement, and enhance over time the county's Help Me Grow (HMG) Early Care and Education Initiative. This entity will implement a system for early care and education that aligns with the National HMG framework, but also represents a restructuring to match the unique San Francisco service system landscape. Specifically the HMG components of provider/family outreach and education, central access point, and data tracking have been re-sequenced and modified slightly to the following: 1) administration and tracking of developmental screens; 2) education and engagement of programs and families in utilizing results and extending screening process to make informed early intervention decisions; 3) coordinated response to identified concerns, including on site inclusive supports and warm hand-off to family navigation; and 4) systems navigation and family support for high-risk developmental concerns requiring community referrals. The funded entity will implement a set of services that correspond with these components. They will also apply reflective practice and data driven decision-making to assess, strengthen and improve upon this basic framework in each successive funding year.

San Francisco's early care and education workforce has itself developed considerable expertise and capacity to provide early intervention and service linkage for children in their care. This initiative is intended to support sites and professionals that need additional assistance, enhance individual site's capacity over time, as well as build the overall capacity of the San Francisco's early intervention system. It is not intended to replace or supersede staff and director expertise in this area, nor is it intended to eliminate the desire and expectation that the early care and education field be fully inclusive and responsive to the developmental and educational needs of all children as these capacity-building initiatives mature and practices become institutionalized.

It is further intended that with refinement and continuous quality improvement, the HMG Early Care and Education Initiative will provide the foundation for similar efforts across multiple

sectors - expanding next to the medical/pediatric sector - for a large-scale, fully integrated, sustainable early intervention system in the coming years.

Available Funding and Terms of Grant

The Joint Funders have allocated a total of \$1,000,000 annually for a two-year period with up to (3) three one-year renewals pending funding availability.

<u>OECE</u>	<u>First 5</u>	<u>DCYF</u>	<u>TOTAL</u>
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Contract renewal and award amounts are subject to Joint Funder staff review of the project, negotiation of contracts and scope of work, and continued availability of funds. Also, the contract award in future years may be decreased or eliminated. Funding renewal and amount of funds allocated to the purposes of this RFQ are at the sole discretion of the Joint Funders.

Scope of Work

The scope of work for this initiative has been divided into two overarching areas – Service Delivery and Infrastructure Building.

Service Delivery

Developmental Screening and Results Consultation. HMG Early Care and Education staff will support the administration and tracking of developmental screening results. The Quality Rating and Improvement System (QRIS) accountability matrix assesses to see that programs are working with families to ensure screening of all children using a valid and reliable screening tool. However, many sites continue to experience challenges in consistently meeting this requirement despite county-wide training and technical assistance on using the Ages and Stages Questionnaire. This service component would support administration and tracking of developmental screening results through consultation visits early in the program year to sites that demonstrate a need as evidenced by their QRIS scores in this area of Developmental and Health Screening.

It is anticipated that attention during the early phases of the initiative will focus primarily on sites that have little experience screening as well as sites that are screening but have been unable to utilize results to inform programming and interventions. For the first group of sites (i.e. score a “1” on the QRIS matrix for Developmental and Health Screening), support will focus largely on assisting them with screening protocols, procedures, and point person (s), as well as any additional staff training that may be needed to build screening competency. For the latter group of sites (i.e. score a “2” or “3” on QRIS matrix for Developmental and Health Screening), support will consist initially of putting mechanisms in place that allow them to compile and

produce summary information on screens conducted and screening results. At the outset of the initiative, this group will also be the primary recipients of the next service categories listed below.

As the initiative expands and moves out of pilot phases, sites that rate high on the QRIS matrix for Developmental and Health Screening will also receive assistance in documenting their screening and linkage efforts. All city-funded Early Care and Education Centers and Family Child Care Homes will also receive initial outreach so that they can access site-based support for specific children when the need arises.

Service Target: Approximately 50 sites served, including a learning cohort of 6-12 Family Child Care Homes and their Quality Network Consultants.

Service Outcome: 90% of Tier 1 sites served will move up a level on QRIS matrix for Health and Developmental Screening upon their next QRIS rating and/or self-assessment.

ECE Program and Parent Engagement and Education. As noted above, in the early phases of the initiative, this effort will focus on sites that score a “2” or “3” on QRIS matrix for Developmental and Health Screening. Program and parent engagement will be timely, following screening, and will initially take a whole classroom focus. Following the compilation of summary screening information on screens conducted and levels of risk, each site in the service cohort will be provided with a classroom profile based on developmental screening results. The profile will be paired with an initial classroom plan detailing suggested strategies and next steps. The classroom plan will draw from, and be inclusive of, the other professional supports available on site and in the community that could be leveraged to meet student and program needs. Sites can also request and receive support in implementing their classroom plans and enhancing related skills and practices, when needed. Additionally, this phase will begin to engage providers and parents in gathering additional information for children at higher risk levels that could benefit from a child specific planning process and more intensive supports. Typically this aspect of the work will involve a minimum of one site visit, but depending on the complexity of the classroom plan, number of individual children identified, and the availability of other on-site supports, a more extensive series of visits may be offered.

Service Target: Approximately 30 sites served, including a learning cohort of 6-12 Family Child Care Homes and their Quality Network Consultants; 60 classroom profiles and plans developed; 120 classroom visits conducted.

Service Outcome: 90% of sites served will move up from Tier 3 to Tier 4 on QRIS matrix for Health and Developmental Screening upon their next QRIS rating and/or self-assessment.

Coordinated Response to Identified Concerns. This service is intended to be a direct follow-up to the Program and Parent Engagement process described above, however, the focus will shift to the child level and will be based on screening results and demonstrated level of need. This service area, will involve the same cohort of sites/classrooms already engaged in the preceding service components, but will be targeted to a specific subset of children identified as being at moderate to high risk for ongoing developmental concerns and/or children for whom screening results have been inconclusive. Providers will receive guidance, if desired, in involving the family to further examine screening results. Other on-site professional supports, in addition to

the HMG Early Care and Education team, may also be involved to more fully understand the child within the family, and classroom context and identify specialized strategies and approaches. Where appropriate, the process may include a more formal child plan and linkage to additional community resources such as Family Resource Centers. Sites can also request and receive support in implementing their child action plans and enhancing inclusive practices and other related skills, when needed. For many children, this will constitute an adequate level of service linkage and connection, particularly where monitoring and re-assessment indicate that the child is continuing to make developmental gains. For children with higher levels of risk and/or more complex developmental needs, a warm-hand off will be available to a team of social workers for ongoing care coordination, systems of care navigation and family support.

As noted above, all city-funded Early Care and Education Centers and Family Child Care Homes will also receive initial outreach so that they can also access these services for specific children when needed and appropriate, including a warm-hand off to Systems Navigation and Family Support team.

Service Target: Approximately 20% of classroom population at participating sites, or 250 children who have identified moderate to high risk for developmental concerns. This includes the children within the learning cohort of 6-12 Family Child Care Homes and their Quality Network Consultants.

Service Outcome: 100% of children will receive some combination of on-site early intervention strategies, child action planning, and/or connection to care coordination/management; 85% of children in “monitoring” or moderate risk levels will demonstrate developmental gains upon re-screening.

Systems Navigation, Family Support and Advocacy, and Long-term Linkage Plan. This is the most targeted level of service available to a smaller group of children and families and stemming directly from all the earlier service levels. It provides ongoing care coordination/case management for children eligible for formal early intervention services, and/or those at moderate/high risk in communication and problem-solving domains. Care coordination/case management will be provided by the HMG Early Care and Education Social Work team. Having a point person to help the family navigate eligibility requirements, service barriers, additional options for community support, and transition points in between services will greatly improve chances of timely, successful service linkage. This service area, will also include connection to additional family supports as needed to help families further develop the skills and assets to advocate for their children over time and manage the personal stress and challenges that can naturally arise as a result of navigating multiple, complex systems of care.

Service Target: Approximately 10% of classroom population at participating sites, or 100 children who are eligible for more formal early intervention services, and/or are at moderate/high risk in communication and problem-solving domains. This includes the children within the learning cohort of 6-12 Family Child Care Homes and their Quality Network Consultants.

Service Outcome: 80% of children will be successfully linked to more formal early intervention/special education services (Golden Gate Regional Center, San Francisco Unified School District) and/or other therapeutic community services.

Infrastructure Building

Planning and Ramp-up. The funded entity will have an opportunity to work with partners, Joint Funder staff, and stakeholders to refine the operational details of the restructured HMG Early Care Education framework, as outlined above, and to staff accordingly. This might also include development of protocols, procedures and supporting documents for the early care and education community.

Additionally, this will include the development of an advisory group that will provide strategic direction for the initiative in order to ensure its responsiveness to community needs, alignment and coordination with other early care and education quality and capacity building supports, expansion and growth, and integration with other related early intervention initiatives.

Resource and Site Match. While services will primarily be targeted to sites that demonstrate a need as evidenced by their QRIS scores in this area of Developmental and Health Screening, the specific details of site/services matches and needed resources will need to be further established and worked through during the early implementation phases since not all sites have a recent QRIS assessment and even with a relatively recent QRIS assessment, site practices may have changed during the intervening time periods. In addition, there may be other factors to consider when identifying sites as potential recipients of service. As the initiative grows, and/or changes to the QRIS matrix and surrounding processes occur, site/service matching criteria will also likely need to be continuously reviewed and modified. Site/service matching processes will be developed and reviewed in partnership with Joint Funders in order to help ensure corresponding accountability and participation on the part of sites and site staff.

Training and Professional Development for Family Child Care Quality Network Consultants. The HMG Early Care and Education Initiative will take a two-tiered approach to building the capacity of Family Child Care and specifically the Family Child Care Quality Network Consultants. At one level, the initiative will establish training and orientation sessions for Quality Network Consultants to increase their understanding of the purpose and practice of establishing developmental screening systems within early care and education, options for screening follow-up and differentiated early intervention approaches according to level of identified need, including the creation of child and classroom plans, and/or inclusive practices. At a deeper level, a Professional Learning Cohort will be established for the Family Child Care Homes and their Quality Network Consultants who are receiving all direct service levels previously described in this RFQ (Screening Consultation, Program/Parent Engagement, Coordinated Response, and Family Navigation) so that they can have the opportunity to observe the services in practice, gain deeper learning and insight, and hands-on experience guiding their Family Child Care providers through similar processes in the future. This component, including the related needs and topics that should be addressed through more broad-based training and professional development approaches for Family Child Care providers and Quality Network Consultants, will continue to be examined and refined over time.

Information Technology, Evaluation, and Reporting. The funded entity will be asked to maintain, oversee, and utilize, but not build, a developmental screening and referral data system. As part of

this work the funded entity will support others in utilizing the data system and will also partner with Joint Funders to explore data integration and system expansion efforts. This system will be the primary source of the data for the outcome measures regarding developmental risk levels and follow-up actions. The funded entity may be asked to track grant activities, service targets, and other data through additional data systems such as First 5 CMS and WELS. Data collection and reporting responsibilities will also include those requested or required by Help Me Grow oversight bodies at the state and national level.

Above and beyond the required information technology, tracking and reporting activities, the funded entity should also engage in regular analysis and application of data and information to enhance daily practice, identify areas for program improvement, and shape future program activities. This can and should include a review, in partnership with funders, of service targets and outcome metrics so they can be adjusted and refined over time in response to growth, changing community needs, changes in other leveraged systems such as the QRIS, and participant and provider input. Staff, partners, providers, parents/caregivers and other stakeholders should be meaningfully included in the evaluation, reflection, and program improvement cycle.

Expansion and Systems Improvement. The funded entity will work to refine and scale this initiative over time, with the primary expansion focus being to the pediatric/medical sector. Following the first year of the initiative, the funded entity will be asked to reflect upon successes and challenges within the early care and education sector and propose a plan for extending services out to the pediatric medical sector. In order to prepare for this plan, key staff of the funded entity should be working to enhance and expand relationships within the pediatric sector, potentially also supporting and/or coordinating with small pilots and related efforts initiated by the Joint Funders.

Activities in this area should include coordination, support and integration with the QRIS Professional Development system and other early intervention initiatives within the county, but may also include advocacy for policy and systems change, fund development, and larger system capacity building. A primary focus of systems integration work should be with the community resource and referral networks/phone lines and their funders to align practices, protocols and data collection specifically related to developmental screening, referral, and linkage.

Preferred Staffing Structure and Qualifications

The funded entity should be able to maintain a staffing structure that at minimum includes:

- Help Me Grow Director
- Developmental Inclusion Supervisor
- Developmental Inclusion Specialists
- Social Work (Master's Level) Case Managers
- Other relevant specialists and consultants, such as Developmental Screening Specialist, Speech and Language Therapists, and Occupational Therapists
- IT and Administrative/Data Entry Support

The agency, existing staff and/or staff to be hired should demonstrate capacity to meet the following qualifications:

1. Demonstrated experience with the Help Me Grow framework or other similar early intervention initiatives.
2. Knowledge of developmental screening and developmental processes for young children
3. Experience providing training, coaching and technical assistance to early childhood professionals and families with demonstrated positive outcomes.
4. Experience developing and writing family or individual service plans.
5. Knowledge of community resources and supports for young children and their families and the process for accessing them.
6. Awareness of and well-versed in the broad array of citywide resources available to support inclusive practice in Early Care and Education settings.
7. Experience working collaboratively with community organizations in the delivery of services to young children and their families.
8. Experience working independently and as a member of a multidisciplinary team.
9. Ability to work respectfully in culturally and linguistically diverse early care and education settings, including family child care homes. Familiarity with San Francisco Early Care and Education communities and experience working in San Francisco County is preferred.
10. Experience working in the field of special education, or related fields, and proven knowledge of inclusion practices.
11. Demonstrated ability to gather and respond to feedback, engage in reflective practice and utilize data-driven decision making to continuously improve practice and services.
12. Well-trained, highly qualified staff experienced and able to deliver the technical assistance and on-site supports as described in the services requested.

Request for Proposal Process and Requirements

Proposal Content and Instructions

To apply for funds, you must deliver one (1) original and three (3) copies of your proposal to First 5 San Francisco's office at 1390 Market Street, Ste. 318 San Francisco, CA by **Monday, April 16, 2018 at 4:00 p.m.** Any proposal that arrives later than the specified deadline, fails to meet the minimum eligibility requirements or fails to follow submission instructions **WILL NOT** be considered for funding.

Proposal Format

All proposals must:

- Be typed, utilizing provided forms;
- Be double spaced and have one inch margins;
- Use no less than 12-point font;
- Limit narrative response to prescribed page limits (excluding resumes)

Copying

Original proposals must be printed only on one side of the paper, while all three copies must be printed on **both** sides of the paper.

Review Process and Timeline

A proposal review panel(s), consisting of individuals appointed by the Joint Funders will review all completed applications that meet the minimum eligibility requirements. Members of the proposal review panel(s) will evaluate and score each proposal, and make a funding recommendation to the Joint Funders. Joint Funders will then make the final selection and conduct contract negotiations for needed direct service areas.

Scoring

All proposals will be scored on the following requirements:

Category	Points Possible
Agency Qualifications - Service Delivery	35
Agency Qualifications - Systems Building	30
Staffing Structure and Qualifications	15
Budget and Budget Narrative	20
Total	100

Other Terms and Conditions

The Joint Funders, in their sole discretion, have the right to approve or disapprove any staff members assigned to projects before and throughout the contract term. They reserve the right at any time to approve, disapprove, or modify proposed project plans, timelines and deliverables.

Pre-Proposal Conference

Agencies intending to submit a proposal are strongly encouraged to attend a pre-proposal conference on **Monday, March 19th, 2018, at 1390 Market St., Ste. 1125 San Francisco, CA at 10 AM**. The pre-proposal conference will be an opportunity for agencies to seek clarification on the contents of this RFQ.

Letter of Intent

Agencies intending to submit a proposal are requested to submit a mandatory Letter of Intent that must be received by First 5 San Francisco by **March 29, 2018 at 5:00pm**. The Letter of Intent should be on agency letterhead and indicate agency's intent to apply for funds. Letters of Intent are not binding and are used anticipate the number of proposal reviewers needed.

The letters of intent are to be mailed or hand delivered to:

*Theresa Zighera
First 5 San Francisco
1390 Market Street, Ste. 318
San Francisco, CA 94102*

Proposal Format

Proposal Components and Instructions:

All proposals must include the following components in this order:

- **Form A: Coversheet**
- **Form B: Checklist**
- **Form C: Narrative** - Provide all requested information in a narrative format. See each response section for page limits and point value.
- **Form D: Budget and Budget Narrative**
- **Proposal Attachments to All Proposal Copies:** The following listed attachments should accompany all copies of the proposal.
 - a. Agency organization chart for the proposal that shows placement of this project in the lead agency and diagrams relationships with any subcontractors.
 - b. Resumes of current staff and consultants and/or job announcements/descriptions for staff to be hired as part of this initiative
 - c. A minimum of two (2) references recently familiar with the quality and reliability of the respondent's work
- **Proposal Attachments to Original Only.** The following listed attachments should accompany the original proposal only.
 - a. IRS determination letter of 501(c)(3) status, if applicable
 - b. Most recent financial statement (audited, if available)
 - c. Current Agency Global Budget

Do not bind proposals with any type of cover, cover page, three ring binder or folder. A binder clip and/or staple(s) are acceptable.

Do not include anything that cannot be photocopied or is folded or oversized. Do not include videotape, audiotape or other multi-media.

Appeal Process

The decision of the Joint Funders is final and there is no appeal process. However, applicants can request to see copies of reviewers' comments. In order to make your request please stop by First 5 San Francisco offices at 1390 Market St., Suite 318.

Minimum Eligibility Requirements

Failure to meet the following requirements will eliminate the applicant from consideration:

- Applicant must be a community-based organization that is nonprofit and tax-exempt under Section 501(c)(3) of the Internal Revenue Code, a part of the San Francisco Unified School District, City College of San Francisco, San Francisco State University or other educational institution or a professional corporation or partnership or corporation. Experienced individual contractors may be considered.
- If selected for a contract, the applicant must be certified as a City-approved vendor and compliant with the City's insurance requirements within 45 days of award notice or First 5 San Francisco reserves the right to revoke the contract.
- Applicant must follow all guidelines (formatting, page limitations, required attachments, etc.) detailed in the **Proposal Content and Instructions section of this RFQ**.
- Agencies receiving funding must not be currently on 'red flag' or 'elevated concern status' with the Office of the Controller.
- Agencies receiving funding must not have any city contracts withdrawn or terminated due to fiscal or program compliance issues within the last 24 months.

Other Requirements

Below is a partial list of significant requirements that will be part of each funded contractor's contract.

1. Contractor must comply with the monitoring and evaluation requirements. These requirements will be detailed in the contracting process
2. Contractor must have current insurance coverage (workers compensation, general liability, fidelity bond and automobile, if applicable).
3. Contractor must comply with the criminal screening requirement set forth below.
4. Contractor must prepare monthly online invoices through the Contract Management System for reimbursement of actual expenses or alternative mutually agreed to method.
5. Appropriate contractor staff members must attend all mandatory meetings.

Applicants that are not yet City-approved vendors should begin the certification process as soon as possible, in order to ensure that they are able to meet this requirement if awarded a grant. The City's Office of Contract Administration offers all of the necessary forms on its website, which can be found at www.sfgov.org/oca/purchasing/forms.htm. Subcontractors are not required to be City-approved vendors; only the lead organization must be.

The City and County of San Francisco requires all agencies receiving grant funding to comply with a number of regulatory and legal requirements. Some of these requirements are described below.

Firms contracting with the city must agree to the most recent standard personal service contract or individual service contract agreements.

Criminal Screening Requirement

The City and County of San Francisco requires that all contractors and subcontractors comply with California Penal Code section 11105.3 and request from the Department of Justice records of all convictions or any arrest pending adjudication involving the offenses specified in Welfare and Institution Code section 15660(a) for any person who applies for a paid or volunteer position with the organization, or any subcontractor, in which the individual would have supervisory or disciplinary authority over a minor under his or her care.

If the contractor, or any subcontractor, is providing services at a City park, playground, recreational center or beach (separately and collectively known as "Recreational Site"), the organization shall not hire, and shall prevent its subcontractors from hiring, any person for employment or a volunteer position if that person has been convicted of any offense that was listed in former Penal Code section 11105.3 (h)(1) or 11105.3(h)(3).

If the organization, or any of its subcontractor, hires an employee or volunteer to provide services to minors at any location other than a Recreational Site, and that employee or volunteer has been convicted of an offense specified in Penal Code section 11105.3(c), then the contractor or its subcontractor must comply with that section and provide written notice to the parents or guardians of any minor who will be supervised or disciplined by the employee or volunteer not less than ten (10) days prior to the day the employee or volunteer begins his or her duties or tasks. The contractor shall provide, or make its subcontractors provide, First 5 San Francisco with a copy of any such notice at the same time that it provides notice to any parent or guardian.

The contractor must expressly require all of its subcontractors with supervisory or disciplinary authority over a minor to comply with this requirement as a condition of its contract with the subcontractor.

Other requirements of agencies receiving grant funds include:

- The contractor must comply with the Domestic Partners or Equal Benefits Ordinance. For further information regarding compliance, respondents are encouraged to consult the Human Rights Commission at (415) 252-2500.
- The contractor must comply with the first source hiring program including developing agreements with the City to consider hiring economically disadvantaged individuals for entry-level positions.
- The contractor must comply with the Sunshine Ordinance. In accordance with San Francisco Administrative Code section 67.24(e), contracts, contractors' bids, responses to requests for proposals and all other records of communications between City and persons or firms seeking contracts, shall be open to inspection immediately after a contract has been awarded. Nothing in this provision requires the disclosure of a private person's or organizations net worth or other proprietary financial data submitted for qualification for a contract or other benefit until and unless that person or organization is awarded the

contract or benefit. Information provided that is covered by this paragraph will be made available to the public upon request.

- The contractor must comply with a provision of the Sunshine Ordinance that affects non-profits with at least \$250,000 in City funding and at least one applicable contract. The ordinance requires the non-profit to hold at least 2 open board meetings, to allow public access to financial records, and to promote community representation on their Board of Directors or equivalent, and to describe in its RFQ response all complaints regarding compliance with the Sunshine Ordinance in the last two years, and the resolutions of these complaints.
- The contractor must comply with the San Francisco Children and Families Commission Tobacco-Free Policy – Form G.

Reservations of Rights by Joint Funders

- Issuance of this RFQ does not constitute a commitment by the Joint Funders to award a contract. The Joint Funders reserve the right to reject any or all proposals received in response to this RFQ, or to cancel this RFQ if it is in the best interest of the funding agencies to do so.
- The City expressly reserves the right at any time to:
 - Waive or correct any defect or informality in any response, proposal, or proposal procedure;
 - Reissue a Request for Proposals;
 - Prior to submission deadline for proposals, modify all or any portion of the selection procedures, including deadlines for accepting responses, the specifications or requirements for any materials, equipment or services to be provided under this RFQ, or the requirements for contents or format of the proposals;
 - Procure any materials, equipment or services specified in this RFQ by any other means; or
 - Determine that no project will be pursued.
- Actual award of funding is dependent on a successful grant negotiation. During the grant negotiation, the Joint Funders may seek modifications to the proposed activities and budget. If a grant agreement cannot be completed within a reasonable time frame, determined by the Joint Funders, the Joint Funders may terminate negotiations and pursue an agreement with a different applicant.
- Applicants submitting a proposal agree that by submitting a proposal they authorize the Joint Funders to verify any or all information contained in the proposal.
- The Joint Funders' decision to award a grant to an organization that proposes to use subcontractors to perform the work funded by the grant does not waive the Joint Funders' right to approve or disapprove the subcontractors selected.

- The Joint Funders reserve the right, after grant award, to amend the resulting contract as needed throughout the term of the contract to best meet the needs of all parties.
- The applicant will comply with all requirements of the City and County of San Francisco and the Funding Agencies.

Allowable Grant Costs

The Joint Funders' awards are cost reimbursement grants for expenditures described in pre-approved budgets. Except for advances of funds, agencies must incur expenses in pursuit of grant activities prior to reimbursement by the Joint Funders.

- Requested funding must be used to implement the types of activities described in the Scope of Work.
- This grant shall be used only to supplement, enhance, or augment existing levels of service or create new services. Funds may be used to continue other funded programming of Joint Funders.
- The funds shall only be used for services to children 0 -5 years old, their families or caregivers, or expecting parents.

Unallowable Grant Costs

- Indirect and Administrative costs may not exceed an amount equal to 15% of the total grant amount.
- No grant funds shall be used to supplant state or local general fund money for any purpose. In other words, this funding cannot replace other federal, state, or local funds currently used or already planned and committed for expansion activities, nor may grant funds be used to replace existing program revenues.
- Funds cannot be used for activities outside the negotiated Scope of Work.
- Funds cannot be used for capital expenditures.
- Accruals for staff vacation and sick time off

Terms and Conditions for Receipt of Proposals

Errors and Omissions in RFQ

Proposers are responsible for reviewing all portions of this RFQ. Proposers are to promptly notify the Department, in writing, if the proposer discovers any ambiguity, discrepancy, omission, or other error in the RFQ. Any such notification should be directed to the Department promptly after discovery, but in no event later than five working days prior to the date for receipt of proposals. Modifications and clarifications will be made by addenda as provided below.

Inquiries Regarding RFQ

Inquiries regarding the RFQ and all oral notifications of an intent to request written modification or clarification of the RFQ, must be directed to:

Theresa Zighera, Sr. Program Officer via email – Theresa.zighera@first5sf.org

Objections to RFQ Terms

Should a proposer object on any ground to any provision or legal requirement set forth in this RFQ, the proposer must, not more than ten calendar days after the RFQ is issued, provide written notice to the Department setting forth with specificity the grounds for the objection. The failure of a proposer to object in the manner set forth in this paragraph shall constitute a complete and irrevocable waiver of any such objection.

Change Notices

The Department may modify the RFQ, prior to the proposal due date, by issuing Change Notices, which will be posted on the website. The proposer shall be responsible for ensuring that its proposal reflects any and all Change Notices issued by the Department prior to the proposal due date regardless of when the proposal is submitted. Therefore, the City recommends that the proposer consult the website frequently, including shortly before the proposal due date, to determine if the proposer has downloaded all Change Notices.

Term of Proposal

Submission of a proposal signifies that the proposed services and prices are valid for 120 calendar days from the proposal due date and that the quoted prices are genuine and not the result of collusion or any other anti-competitive activity.

Revision of Proposal

A proposer may revise a proposal on the proposer's own initiative at any time before the deadline for submission of proposals. The proposer must submit the revised proposal in the same manner as the original. A revised proposal must be received on or before the proposal due date.

In no case will a statement of intent to submit a revised proposal, or commencement of a revision process, extend the proposal due date for any proposer.

At any time during the proposal evaluation process, the Department may require a proposer to provide oral or written clarification of its proposal. The Department reserves the right to make an award without further clarifications of proposals received.

Errors and Omissions in Proposal

Failure by the Department to object to an error, omission, or deviation in the proposal will in no way modify the RFQ or excuse the vendor from full compliance with the specifications of the RQP or any contract awarded pursuant to the RFQ.

Financial Responsibility

The City accepts no financial responsibility for any costs incurred by a firm in responding to this RFQ. Submissions of the RFQ will become the property of the City and may be used by the City in any way deemed appropriate.

Proposer's Obligations under the Campaign Reform Ordinance

Proposers must comply with Section 1.126 of the S.F. Campaign and Governmental Conduct Code, which states:

No person who contracts with the City and County of San Francisco for the rendition of personal services, for the furnishing of any material, supplies or equipment to the City, or for selling any land or building to the City, whenever such transaction would require approval by a City elective officer, or the board on which that City elective officer serves, shall make any contribution to such an officer, or candidates for such an office, or committee controlled by such officer or candidate at any time between commencement of negotiations and the later of either (1) the termination of negotiations for such contract, or (2) three months have elapsed from the date the contract is approved by the City elective officer or the board on which that City elective officer serves.

If a proposer is negotiating for a contract that must be approved by an elected local officer or the board on which that officer serves, during the negotiation period the proposer is prohibited from making contributions to:

- the officer's re-election campaign
- a candidate for that officer's office
- a committee controlled by the officer or candidate.

The negotiation period begins with the first point of contact, either by telephone, in person, or in writing, when a contractor approaches any city officer or employee about a particular contract, or a city officer or employee initiates communication with a potential contractor about a contract.

The negotiation period ends when a contract is awarded or not awarded to the contractor.

Examples of initial contacts include: (1) a vendor contacts a city officer or employee to promote himself or herself as a candidate for a contract; and (2) a city officer or employee contacts a contractor to propose that the contractor apply for a contract. Inquiries for information about a particular contract, requests for documents relating to a Request for Proposal, and requests to be placed on a mailing list do not constitute negotiations.

Violation of Section 1.126 may result in the following criminal, civil, or administrative penalties:

1. **Criminal.** Any person who knowingly or willfully violates section 1.126 is subject to a fine of up to \$5,000 and a jail term of not more than six months, or both.

2. **Civil.** Any person who intentionally or negligently violates section 1.126 may be held liable in a civil action brought by the civil prosecutor for an amount up to \$5,000.

3. **Administrative.** Any person who intentionally or negligently violates section 1.126 may be held liable in an administrative proceeding before the Ethics Commission held pursuant to the Charter for an amount up to \$5,000 for each violation.

For further information, proposers should contact the San Francisco Ethics Commission at (415) 581-2300.

No Waiver

No waiver by the City of any provision of this RFQ shall be implied from any failure by the City to recognize or take action on account of any failure by a proposer to observe any provision of this RFQ.