ATTACHMENT C

CITY OF FRESNO NOTICE OF FUNDING AVAILABILITY PUBLISHED FEBRUARY 5, 2016

NOTICE OF FUNDING AVAILABILITY

and

Application for
City of Fresno 2016
Homeless Outreach and Assessment



City of Fresno City Manager's Office 2600 Fresno Street, Room 3065 Fresno, CA 93721 (559) 621-8000

February 5, 2016

NOTICE OF FUNDING AVAILABILITY

Homeless Service Providers:

The City of Fresno announces the availability of funding to assist in ending veteran and chronic homelessness. This Notice of Funding Availability (NOFA) is for Homeless Outreach and Assessment funding. This is a one-time funding opportunity and the City will accept proposals for street outreach and assessment provided to unsheltered individuals. The City proposes to allocate \$420,000 for twelve (12) to twenty-four (24) months of service through this NOFA.

The proposal process will begin on February 5, 2016 and end on Monday, February 22, 2016. Interested, qualified agencies are invited to submit proposals for the time-period beginning March 1, 2016. The City's preference is for one coordinated proposal from relevant stakeholders.

A hard-copy of the Homeless Outreach and Assessment application is available at the City of Fresno, Housing Division Office located at 2600 Fresno Street, Room 3083. An electronic version is available on the City's website at www.fresno.gov/DARM/Housing. Please note, submission of an application does not guarantee funding for a project.

Applicants seeking technical assistance should contact Joe Trujillo, the City of Fresno's Housing Division Manager at (559) 621-8166 or Jose.Trujillo@Fresno.gov.

Thank You,

Joe Trujillo Housing Manager Development and Resource Management Department

Application Process

Program Description

The City of Fresno has identified funds in the amount of \$420,000 for the purpose of funding a homeless outreach and assessment effort to support ending veteran and chronic homelessness in the city of Fresno.

The City has identified funds for the purpose of case workers and/or outreach specialists to work alongside the Fresno Police Department's Homless Task Force and in coordination with agencies involved with the MAP Point at the Pov. Successful candidates will demonstrate an ability to provide outreach and case management expertise 1) alongside the Homeless Task Force during their morning hours surrounding the Poverello House 2) in coordination with the Homeless Task Force, as needed, during the course of their daily activities 3) in response to requests for street outreach and assessments generated from the City of Fresno and the MAP Point at the Pov, and 3) throughout the city of Fresno.

While outreach and assessment is the main focus of these funds, it is recognized that the successful applicant will demonstrate the ability to also assist with providing additional assistance and case management to individuals in need, including but not limited to assisting with document readiness, transportation, and housing searches.

Target Population

The funds under this NOFA are intended to target veteran and chronically homeless individuals and families who are on the street.

Administration

Up to 2.5% of the requested amount can be requested for administration..

Preferences

Preference will be given to applications that demonstrate the following:

- · One coordinated proposal from relevant stakeholders
- Availability to work alongside Fresno PD Homeless Task Force, both in general and specifically during the morning hours in the area surrounding Santa Clara and F Street
- Availlability during evening and weekend hours
- Thoroughness and clarity of the application
- Demonstrated ability to perform

Submission Requirements

Complete each section of the funding application (**Attachment A**). Ensure that sufficient information is provided and use the check list provided.

Selection Criteria

The selection will be based on the following:

Coordination:

- Use of the "Coordinated Entry System," a countywide system that engages and connects individuals experiencing homelessness to the optimal resource for their needs
- One coordinated proposal from relevant stakeholders Collaboration with other stakeholders, including the Homeless Task Force

Outreach and Assessment

- Availability to work alongside Fresno PD Homeless Task Force, both in general and specifically during the morning hours in the area surrounding Santa Clara and F Street
- Availability during evening and weekend hours
- Ability to provide timely outreach based on calls received from the City of Fresno and the MAP Point at the Pov
- Availability to be both proactive and responsive on outreach efforts
- Ability to provide transportation, as applicable
- Ability to provide a visible presence throughout the city of Fresno (bright shirts or vests)

Experience:

- History of successful completion of similar projects
- Ability and experience with the proposed project
- Ability to meet projected deadlines within budget
- Key personnel working experience with the type of project proposed
- Demonstrate thorough knowledge of homeless services for the target population

Participation

- Coordinated Entry System
- Fresno Madera Continuum of Care

Selection Process

City staff will review applications and make award recommendations to the City Council. The evaluation team may, at its discretion, interview applicant(s), contact references, investigate previous projects and current commitments, and conduct any further inquiry and investigation necessary to determine the most feasible project(s).

Submission Instructions

Two original hard copies of the application must be received no later than 4:00 p.m. on February 22, 2016. Applications received after the 4:00 p.m. deadline will not be accepted. Applications shall be sent via U.S. mail, Federal Express, or be hand-delivered to:

City of Fresno, Housing Division Attn: Joe Trujillo 2600 Fresno Street, Room 3083, Fresno, CA 93721

Technical Assistance

Joe Trujillo, Manager
Housing and Community Development Division

Telephone: (559) 621-8166

E-mail: Jose.Trujillo@Fresno.gov

Applicants and/or their consultants shall not contact any City official/representative regarding this NOFA other than the Housing and Community Development Division staff specified above, during this NOFA application process.

Terms and Conditions

The City of Fresno reserves the right to:

- Reject any and all applications, and to waive minor irregularities in any application submitted for funding consideration.
- Request clarification of the information submitted, and request additional information from any applicant responding to this NOFA.
- Award funds to the next most feasible project, if the successful applicant does not execute an Agreement within the applicable timeframe after selection and notification of a successful application.
- Reject any application that does not address the items listed in the application.
- Negotiate with applicants.
- Reject any and all applications submitted at its sole and absolute discretion.
- Accept application(s) that it considers to be in the interest of the City, with or without negotiation.
- Waive any informality or minor irregularity when in the best interest of City.
- Reject incomplete or irregular applications.
- Have no obligation to enter into an agreement with any party responding to this NOFA.

Selection Notification

Applicants will be notified of the City's selection on or about **March 3, 2016**. There is no appeal process.

City of Fresno Insurance Requirements

Selected applicants are required to comply with the City's insurance and indemnity obligations. If your organization cannot comply with the City's insurance requirements, your <u>application will not be considered.</u>

The following insurance language is included in the City's standard contracts. Coverage shall be at least as broad as:

- 1. The most current version of Insurance Services Office (ISO) Commercial General Liability Coverage Form CG 00 01, providing liability coverage arising out of your business operations. The Commercial General Liability policy shall be written on an occurrence form and shall provide coverage for "bodily injury," "property damage" and "personal and advertising injury" with coverage for premises and operations (including the use of owned and non-owned equipment), products and completed operations, and contractual liability (including, without limitation, indemnity obligations under the Agreement) with limits of liability not less than those set forth under "Minimum Limits of Insurance."
- 2. The most current version of ISO *Commercial Auto Coverage Form CA 00 01, providing liability coverage arising out of the ownership, maintenance or use of automobiles in the course of your business operations. The Automobile Policy shall be written on an occurrence form and shall provide coverage for all owned, hired, and non-owned automobiles or other licensed vehicles (Code 1- Any Auto). If personal automobile coverage is used, the CITY, its officers, officials, employees, agents and volunteers are to be listed as additional insured.
- 3. Workers' Compensation insurance as required by the State of California and Employer's Liability Insurance.
- 4. Professional Liability (Errors and Omissions) insurance appropriate to CONSULTANT'S profession. Architect's and engineer's coverage is to be endorsed to include contractual liability.

MINIMUM LIMITS OF INSURANCE

CONSULTANT, or any party the CONSULTANT subcontracts with, shall maintain limits of liability of not less than those set forth below. However, insurance limits available to CITY, its officers, officials, employees, agents and volunteers as additional insured, shall be the greater of the minimum limits specified herein or the full limit of any insurance proceeds available to the named insured:

1. COMMERCIAL GENERAL LIABILITY:

- (i) \$1,000,000 per occurrence for bodily injury and property damage;
- (ii) \$1,000,000 per occurrence for personal and advertising injury;
- (iii) \$2,000,000 aggregate for products and completed operations;
- (iv) \$2,000,000 general aggregate applying separately to the work performed under the Agreement.

2. **COMMERCIAL AUTOMOBILE LIABILITY:**

\$1,000,000 per accident for bodily injury and property damage. OR*

<u>PERSONAL AUTOMOBILE LIABILITY</u> insurance with limits of liability not less than:

- (i) \$100,000 per person;
- (ii) \$300,000 per accident for bodily injury; and,
- (iii) \$50,000 per accident for property damage.

WORKERS' COMPENSATION INSURANCE as required by the State of California with statutory limits.

4. EMPLOYER'S LIABILITY:

- (i) \$1,000,000 each accident for bodily injury;
- (ii) \$1,000,000 disease each employee; and,
- (iii) \$1,000,000 disease policy limit.

5. **PROFESSIONAL LIABILITY** (Errors and Omissions):

- (i) \$1,000,000 per claim/occurrence; and,
- (ii) \$2,000,000 policy aggregate.

UMBRELLA OR EXCESS INSURANCE

In the event CONSULTANT purchases an Umbrella or Excess insurance policy(ies) to meet the "Minimum Limits of Insurance," this insurance policy(ies) shall "follow form" and afford no less coverage than the primary insurance policy(ies). In addition, such Umbrella or Excess insurance policy(ies) shall also apply on a primary and non- contributory basis for the benefit of the CITY, its officers, officials, employees, agents and volunteers.

DEDUCTIBLES AND SELF-INSURED RETENTIONS

CONSULTANT shall be responsible for payment of any deductibles contained in any insurance policy(ies) required herein and CONSULTANT shall also be responsible for payment of any self-insured retentions. Any deductibles or self-insured retentions must be declared on the Certificate of Insurance, and approved by, the CITY'S Risk Manager or his/her designee. At the option of the CITY'S Risk Manager or his/her designee, either:

- (i) The insurer shall reduce or eliminate such deductibles or selfinsured retentions as respects CITY, its officers, officials, employees, agents and volunteers; or
- (ii) CONSULTANT shall provide a financial guarantee, satisfactory to CITY'S Risk Manager or his/her designee, guaranteeing payment of losses and related investigations, claim administration and defense expenses. At no time shall CITY be responsible for the payment of any deductibles or self-insured retentions.

OTHER INSURANCE PROVISIONS/ENDORSEMENTS

<u>The General Liability and Automobile Liability insurance policies</u> are to contain, or be endorsed to contain, the following provisions:

- CITY, its officers, officials, employees, agents and volunteers are to be covered as additional insured. CONSULTANT shall establish additional insured status for the City and for all ongoing and completed operations by use of ISO Form CG 20 10 11 85 or both CG 20 10 10 01 and CG 20 37 10 01 or by an executed manuscript insurance company endorsement providing additional insured status as broad as that contained in ISO Form CG 20 10 11 85.
- 2. The coverage shall contain no special limitations on the scope of protection afforded to CITY, its officers, officials, employees, agents and volunteers. Any available insurance proceeds in excess of the specified minimum limits and coverage shall be available to the Additional Insured.
- 3. For any claims related to this Agreement, CONSULTANT'S insurance coverage shall be primary insurance with respect to the CITY, its officers, officials, employees, agents and volunteers. Any insurance or self-

insurance maintained by the CITY, its officers, officials, employees, agents and volunteers shall be excess of CONSULTANT'S insurance and shall not contribute with it. CONSULTANT shall establish primary and non-contributory status by using ISO Form CG 20 01 04 13 or by an executed manuscript insurance company endorsement that provides primary and non-contributory status as broad as that contained in ISO Form CG 20 01 0413.

The Workers' Compensation insurance policy is to contain, or be endorsed to contain, the following provision: CONSULTANT and its insurer shall waive any right of subrogation against CITY, its officers, officials, employees, agents and volunteers.

If the *Professional Liability (Errors and Omissions) insurance policy* is written on a claims-made form:

- 1. The retroactive date must be shown, and must be before the effective date of the Agreement or the commencement of work by CONSULTANT.
- 2. Insurance must be maintained and evidence of insurance must be provided for at least five (5) years after completion of the Agreement work or termination of the Agreement, whichever occurs first, or, in the alternative, the policy shall be endorsed to provide not less than a five (5) year discovery period.
- 3. If coverage is canceled or non-renewed, and not replaced with another claims-made policy form with a retroactive date prior to the effective date of the Agreement or the commencement of work by CONSULTANT, CONSULTANT must purchase "extended reporting" coverage for a minimum of five (5) years after completion of the Agreement work or termination of the Agreement, whichever occurs first.
- 4. A copy of the claims reporting requirements must be submitted to CITY for review.
- 5. These requirements shall survive expiration or termination of the Agreement.

All policies of insurance required herein shall be endorsed to provide that the coverage shall not be cancelled, non-renewed, reduced in coverage or in limits except after thirty (30) calendar day's written notice by certified mail, return receipt requested, has been given to CITY. CONSULTANT is also responsible for providing written notice to the CITY under the same terms and conditions. Upon issuance by the insurer, broker, or agent of a notice of cancellation, non-renewal, or reduction in coverage or in limits, CONSULTANT shall furnish CITY with a new certificate and applicable endorsements for such policy(ies). In the event any policy is due to expire during the work to be performed for CITY, CONSULTANT shall provide a new certificate, and applicable endorsements, evidencing renewal of such policy not less than fifteen (15) calendar days prior to the expiration date of the expiring policy.

VERIFICATION OF COVERAGE

CONSULTANT shall furnish CITY with all certificate(s) and applicable endorsements effecting coverage required hereunder. All certificates and applicable endorsements are to be received and approved by the CITY'S Risk Manager or his/her designee prior to CITY'S execution of the Agreement and before work commences. All non-ISO endorsements amending policy coverage shall be executed by a licensed and authorized agent or broker. Upon request of CITY, CONSULTANT shall immediately furnish City with a complete copy of any insurance policy required under this Agreement, including all endorsements, with said copy certified by the underwriter to be a true and correct copy of the original policy. This requirement shall survive expiration or termination of this Agreement.

Attachment A

Outreach and Assessment Application Outline

| Section | Section Heading | Documents (not to exceed) |
|---------|--|---------------------------|
| * | Executive Summary (Do not include additional cover letter) | Narrative (one page) |
| * | Acknowledge review of insurance requirements | • n/a |
| 1 | Project Summary | Form (one page) |
| 2 | Project Description | Narrative (two pages) |
| 3 | Meeting Program Priorities & Schedule | Narrative (two pages) |
| 4 | Schedule and Reporting | Narrative (one page) |
| 5 | Experience of Applicant(s) | Narrative (two pages) |
| 6 | Project Budget | Narrative (two pages) |

SECTION 1 • PROJECT SUMMARY FORM

| Organization Name: | | |
|---|---|--|
| Address: | | |
| Federal Tax I.D. Number: | | |
| Organization Type (check all that a | pply): | |
| ☐ State certified non-profit entity☐ Public agency qualified to receit | ive funds under applicable federal rules | |
| Marine en Maria in el Marin III de | Record in the contract of the | |
| Executive Director Name: | | |
| Phone: E-mail: | | |
| Project Contact Name: | | |
| Contact Organization: | | |
| Address: | | |
| Phone: | E-mail: | |
| | en annan de Santon en 1900 en 1915 de 1900 en 1900 en En la companya de 1900 en 190 | |
| Application Contact Name (if differe | ent from Project Contact above): | |
| Contact Organization: | | |
| Address: | | |
| Phone: | | |
| | | |
| ☐ I acknowledge that I have revi | iewed the insurance requirements. | |
| Signature of Authorized Official | Printed Name | |
| Date | Title | |

SECTION 2-PROJECT DESCRIPTION (Limit narrative to two pages)

Please describe the project in detail including eligible activities, target populations, services to be provided, number of participants to be served, timelines and project schedule, and program outcomes.

SECTION 3 -MEETING PROGRAM POLICIES AND PRIORITIES (Limit narrative to two pages)

Describe how the project will meet the program policies and priorities. The primary target populations for services are veteran and chronic homeless.

SECTION 4-PROJECT SCHEDULE AND REPORTING (Limit narrative to one page)

Describe how the agency will perform the tasks described within the determined timeline. Show how the agency anticipates expending and requesting reimbursement and reporting progress monthly.

SECTION 5 - EXPERIENCE OF AGENCY (Limit narrative to two pages)

The applicant must demonstrate that the skills and experience of the agency are appropriate for the scope of the proposed project.

SECTION 6- PROJECT BUDGET (Limit to two pages)

Please prepare a proposed budget of program expenditures for the determined time period. Provide line item budget detail and provide a budget narrative to explain proposed budget items.