



The Older Adult Services 2024 RFP Workshop will begin shortly

Department of Planning and Community & Economic Development Community Development Division



Begin Recording











Older Adult Services 2024 RFP Workshop

Department of Planning and Community & Economic Development Community Development Division



Introductions

Please write your name and the organization you are representing in the chat!

Feel free to share your contact information as well





- 1. Welcome, Intro to Application Components, and Overview of Timeline
- 2. Older Adult Services Application Overview
 - a. Older Adult Services Policy Paper
 - b. RFP Guidelines
 - c. Application Instructions
 - d. Part 1 Organization Narrative
 - e. Part 2 Program Narrative
 - f. Part 3 Budget Workbook/Budget Narrative
- 3. Timelines and Committee Process
- 4. Certificate of Insurance (COI) and Affirmative Action Plan Requirements
- 5. Contracting Process
- 6. Workshop Evaluation
- 7. Q&A Session



Reminder

This funding is available for **Older Adult** Service Programming



- Not employment
- counseling







• Not Crisis, Intervention, and Prevention Not therapy/individualized



click here for future RFP schedules

Timeline and committee process



Finance Committee

Common Council Approval

Publish RFP

etter o

intent

Due

Older Adult Services RFP Workshop

Required Submission of Letter of Intent

DEADLINE FOR SUBMISSION OF PROPOSALS

Applicant Presentations

Committee on Aging Meeting - Finalize Funding Reco Resolution with Funding Recommendations Introduce

Finance Committee Action

Common Council Action

Applicants notified of Funding Allocations

Anticipated contract start date

	Date
	5/13/24
	5/21/24
	5/24/2024
	6/5/2024
	6/17/2024
S	7/1/2024
	8/28/2024
ommendations	9/25/2024
ed to Common Council	10/8/2024
	10/14/2024
	10/29/2024
	10/30/2024
	1/1/2025

Highest rates of social isolation

Digital Divide

Especially among low-income and marginalized groups

Growing demographic

268,516 - Madison pop. 46,653 - 17.4% 60+*

COVID

Higher infection rates, hospitalizations, and mortality compared to other age groups

Health Equity

Health disparities among older adults, particularly among marginalized and low-income pop., continue to widen

Housing Security

The lack of affordable housing options for older adults remains a critical issue, with many older adults facing housing instability and homelessness

Least amount of funding

Least amount of funds available when compared to similar service areas at the City

\$838,039

American Community Survey (ACS) 2018-2022 5 year Estaimates Pre-Tabulated tables









What are Older Adults saying about services?

EQT BY DESIGN RECOMMENDATIONS

EQT By Design highlights areas of growth to pursue within older adult services

RFP Guidelines - Purpose

Support programs and activities that benefit low and moderate income individuals/families, those who identify as Black, Indigenous, or People of Color (BIPOC), people who identify as LGBTQIA+, and/or Limited English Proficient (LPE) individuals.

Connect vulnerable and marginalized residents with resources designed to avoid homelessness or other crisis situations, promote household stability, and maintain personal independence.

Create the necessary conditions for older adults in Madison to successfully age in place.

Provide a structure for funding allocations based on type and level of program services.

Click here for <u>Application forms and Guidelines</u>





OLDER ADULT SERVICES RANGE OF PROGRAMMING



Case Management Services



Culturally Relevant Services



Information, Outreach, and **Referral Services**



Independent Living **Support Services**



RFP Guidelines MEASUREMENTS OF SUCCESS

Case Management Services

• At least 75% of clients receiving case management services will access two or more of the resources identified in their Individual Service Plan (ISP).

Independent Living **Support Services**

• At least 75% of program participants state that the Independent Living Support program enables them to stay living safely and independently in their homes.

Service Area <u>Outcome</u> All programs

75% of clients/participants report that the services/assistance/programming they receive contribute positively to their desired quality of life







Culturally Relevant Services

• At least 75% of older adults served access Older Adult Activities programs that improve 1) their physical and mental health, 2) their ability to engage with their community, and/or 3) their ability to avoid disease and disability.



Information, **Outreach and Referral Services**

• Measure the rise in the number of individuals and households accessing assistance, referrals, and navigation services

RFP Guidelines Priority Areas

The goal of the Equity Priority map is to identify Census block groups in Madison where targeted investment, resource and inclusion strategies, and service delivery can have the greatest impact on promoting equity and addressing systemic barriers.









RFP Guidelines Priority Areas Continued

- Incorporates race/ethnicity + Income levels + Age
 - Not used in isolation
 - Important to community members, also used elswhere as best practice
- Just because an area isnt listed does NOT mean everything is perfect • Everyone deserves access to resources for a fulfilling life. Economic status or background can create disparities in
 - accessing these resources.
- This is a tool, and NOT the whole picture. Data has limitations.







Neighborhood Level

• Far West	• Dov
• West	0
 Walnut Grove 	0
 Oakbridge Condominiums 	0
 Midvale Heights 	• Nea
Southwest	
 Allied 	• SI • El
 NewBerry Heights 	• Li • W
 HighPoint Estates 	• W • M
 Maple-Prairie 	• Nor
 Glacier Ridge 	• NOI • Ke
• Nearwest	• K • V
 Rocky Bluff 	• Nor
• South	
 Bridge-Lakepoint 	• W
 Brams Addition 	• N • R
 Burr Oaks 	
 Leopold 	• Far
 Indian Springs 	• Sou
 Moorland-Rimrock 	• Far





wntown **Capitol Neighborhoods** Monona Bay **Near Brittingham Apartments** ar East herman Terrace ken Park orthington larquette **th** ennedy Heights era Court rtheast estchester Gardens orman Acres eidgewood Northeast th East Southeast

RFP Guidelines Funds available



On average, City funding for older adult programs accounts for 20% of total program costs.

*Prior city funding of programs should not be considered a guarantee of future funding





RFP Guidelines Eligibility Criteria

- Eligibility is open to non-profit organizations and agencies that have obtained tax-exempt status under 26 USC 501(c)(3) • OR groups that can secure, as fiscal agents, organizations that have obtained such status. Please see the Fiscal Agent form available on the Funding Process website for more information.
- Organizations that are identified to serve as Fiscal Agents on behalf of applicants will be asked to indicate their understanding of the City's expectations and agreement to act on the applicant's behalf.



Collaborative Proposals

 Joint proposals that request funding for multiple agencies participating in a collaborative effort are encouraged. Community partners named in any collaboration must provide letters of support and/or MOU/MOA detailing roles and responsibilities.



Applicant Types Single Applicant

Part 1Part 2OrganizationProgram NarrativeNarrative

Organization Narrative

Program 2

Program 1





Part 3 Budget Workbook

Budget Workbook

Applicant Types Joint/Multi Agency Applicants

Part 1 Organization Narrative

Part 2 Program Narrative

Lead Agency

Organization Narrative

Partner Agency Organization Narrative

Lead Agency **Org Narrative** Partnership Section

The identified "Lead Agency" for a specific program will submit ALL required application materials on behalf of all partners.



Lead Agency

Program 1

Part 3 Budget Workbook

Lead Agency

Budget Workbook

Partner Agency

Budget Narrative

Application Instructions - Required Information and Content of Proposals

Required Information and Content of Proposals 2.3

Please include only the required submittals specified below. Additional materials will not be accepted.

- Part 1 Organization Narrative Form •
- Part 2 Program Narrative Form ۰.
- Part 3 Budget workbook
 - Budget Narrative Form Joint/Multi-Agency applications only
- Letters of Commitment
 - Agencies listing a primary partner/collaborator in addition to any joint/partner applicant (See Program Narrative – Question 4c) for their program should include a letter of commitment/support from the agency partner highlighting the ways in which the agency will support the program.
- Fiscal Agent Form Complete the form (if applicable). •

Submit all applications **BY PROGRAM** -If your agency is applying for 3 programs, we will expect to see 3 seperate emails including all the required information to cddapplications@cityofmadison.com



File Naming

Please follow the file naming format provided below.

[Program Name] [Your Agency's name] [Program Type] [Document Type] [Applicant Type]

Age Out Loud _OlderAdult Agency Inc._Culturally Relevant services_Organization Narrative_ JOINT/MULTI PARTNER

Please see Applicant Checklist for File Naming Assistance



Organization Narrative

Legal Name of Organization:	Older Adult Agency	Total Am Requeste
	Program Name: Program 1	
	Applicant Type: Joint Application - LEAD	Amount
	Program Type: Culturally Relevant Services List Program Partner(s) (if applicable): Partner X Joint Application item., , Choose an item.	on - PARTN
	Program Name: Program 2 Applicant Type: Single Agency Application	Amount
	Program Type: Case Management Services	_
	List Program Partner(s) (if applicable): , Choose an item.,	, Ch
All program(s)	Choose an item.	
connected to	Program Name: Program 3	Amount
your	Applicant Type: Joint Application - PARTNER	, ano and
organization:	Program Type: Independent Living Support Services	
	List Program Partner(s) (if applicable): Agency 1 Joint Applicatio	n - LEAD,
	Choose an item., Choose an item.	
	Program Name:	A
	Applicant Type: Choose an item.	Amount
	Program Type: Choose an item.	
	List Program Partner(s) (if applicable): Choose an item.,	Cho
	Choose an item.	
	If you are applying for more than four programs please cont gtusler@cityofmadison.com	tact Garre







Program Narrative

Program Name:	Program 1	Total Amount I Program:	Request
Legal Name of Organization:	Older Adult Agency	Total amount F Applicant	Request
Legal Name of	Partner X	Total Amount I	Request
Partner(s) (Joint/Multi-	Partner Y	Total Amount Reque	
Agency Applicants only):		Total Amount I	Request
Program Contact:	Garrett Tusler	Email:	gtusle yofma n.con
Program Type: Select ONE Program Type for this form.			

□ Case Management Services

⊠ Culturally Relevant Services

□ Independent Living Support Services

□ Outreach, Information, and Referral Services

<u>PLEASE NOTE</u>: Separate applications are required for each distinct/stand-alone program. Programs are considered distinct/stand-alone if the participants, staff and program schedule are separate from other programs, rather than an activity or pull-out group.

*Click or tap here to enter text.



ted for t	his	\$ 150000
ed for L	ead/Single	\$ 75000
ted for P	artner 1:	\$ 50000
ted for P	artner 2:	\$ 25000
ted for P	artner 3*:	\$
er@cit adiso n	Phone:	

Budget Workbook

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1 APPLICATION FOR 2024 OLDER AD	ULT SER	VICES PROGRAMS			3. SIGNATUR	RE PAGE					
2											
3 1. ORGANIZATION CONTACT INFOR	MATION				AFFIRMATIV			ale state of the second	- dia an Oadia a	20.00 and 61.	- 14
4 Legal Name of Organization 5 Mailing Address								n with the Depart		nce 39.02 and file	eitner
6 Telephone										m/civil-rights/contr	act-compliance
7 FAX									onnauson.com	incom rights/contra	act compliance.
8 Director						DISON CONT	RACTS				
9 Email Address					If funded, ap	plicant agree	s to comply with	all applicable lo	cal, State and F	ederal provisions	. A sample contract
10 Additional Contact											Division at 266-652
11 Email Address					If funded, the	City of Madis	son reserves the	e right to negotiat	e the final term	s of a contract with	the selected agen
12 Legal Status	Private:	: Non-Profit									
13 Federal EIN	l: f				INSURANCE						
14											t required by the Ci
15										Worker's Comper	sation, and Profes
16 2. PROPOSED PROGRAMS		2025	If currently City funded	Joint/Multi	The cost of t	nis coverage	can be conside	red in the reques	t for funding.		
17 Program Name:	Letter	Amount Requested	2024 Allocation	Application - SELECT Y/N							
18	A				4. SIGNATUR	RE					
19 Contact											
20	В				Enter name:						
21 Contact											
22	С				By entering y	our initials in	the box you are	electronically sig	oning your nam	e and agreeing to	the terms listed ab
23 Contact:	-							IN UTILITY O			
24 25 Contact	D				DATE			INITIALS:			
25 Contact 26	E										
27 Contact											
28 TOTAL F	EQUEST	\$0									
29											
30 DEFINITION OF ACCOUNT CATEGOR	RIES:										
31 <u>Personnel</u> : Amount reported should		salary, taxes and benefits	s. Salary includes all pe	ermanent, hourly	and seasonal sta	ff costs.					
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CoverPage Boa	ard & Sta	aff Demographics	App. I-Revenue A	pp. II-Expenses	App. III-I	+ : -	(]				



<u>Budget Workbook</u>

Ex. Older Adult Agency Inc. would submit information in the Budget Workbook for Program 1 (Lead) and Program 2 (Single Applicant)

Budget Narrative

Program Expenses	2025 Partner Request
PERSONNEL	
OTHER OPERATING	
SPACE	
SPECIAL COSTS	
TOTAL∗	
umber should equal the Total Amount Request	ed for your Agency on Page 2

*This number should equal the Total Amount Requested for your Agency on Page 2

Please answer the following questions as it pertains to the amount requested for your agency. If you do not plan to use funds for a certain category, simply state "N/A".

Personnel:

a. How many permanent staff members are involved in the program/project, and what are their respective roles?

b. What is the total annual salary budget for permanent staff, including salary, taxes, and benefits?

<u>Budget Narrative - Joint/Multi Agency</u> <u>Applicants - Partner Agencies Only</u>

Ex. Older Adult Agency Inc. would complete Budget Narrative for Program 3 (Partner) to be submitted by "AGENCY 1 Inc." (Lead)



Rubric - Organization Narrative

PLEASE NOTE: Funding recommendations will be based on both the quality of proposals and distribution of programs across the desired service continuum, demographic groups and geographically across the city (see factors above)

Proposal Quality Review Item

Organization History

Organization Experience with Type of Program

Significant Changes in Organization

Staff Experience, Education, Training and Support for Professional Development

Board and Staff Demographics

JOINT/MULTI AGENCY APPLICATIONS ONLY

Partnership History

Rationale for partnership

Division of labor

Anticipated Challenges

Experience with partnerships



Relevant Question/	
Document	Point
Part <u>1</u>	Value
Organizational	
Narrative	
1	
2	10
3	
4	15
Budget	1.5
5	5
6	5

7

8

9

5

5

5



Rubric - Program Narrative

Need for Program	
Program Goal Sta	ement
Program Summar	
Proposed Particip	nt Population
2022 Participant I	emographics
Language Access	nd Cultural Relevance
Recruitment, Eng	gement, Intake and Assessment
Activities	
Program Schedule	
Anticipated Frequ	ncy, Duration and Attendance
Family Engageme	ıt
Neighborhood/Co	nmunity Engagement
Collaboration and	Coordination
Resource Linkage	
Outputs – undupli	ated participants and program hours
Program Outcome	r
Data Tracking	
Program Location	
Equity Priority A	a Alignment
Program Staffing	
Budget – Excel W	vrkbook



Part 2 Program Narrative(s)	Point Value
1A	-
1B 1C	5
2A	
2B	10
2C	10
2D	
3A	
3B	15
3C	
4A	10
4B	
4C	10
4D	
5A 5B	10
5C	10
6A	
6B	15
7	
Budget	15

Found in <u>RFP</u> <u>Guidelines</u>

RFP Guidelines - Allocation Recommendations





• There exists no "one-size-fits-all" formula or equation when developing funding recommendations.

• Community Based Organizations (CBO) do not work in isolation, but in concert with other CBOs and within larger systems.

• No single or collection of variables listed are inherently more important than others.

Process Overview



community input. Provides outline for RFP

proposals based on **RFP** requirements and array of applications

Committee on Aging makes final recommendations on funding allocation. Sends for approval from Common Council



Finance + Common Council Approval

Finance Committee ensures funding is in line with current budget stipulations

Contract Begins

Contracts are established Jan 1st so agencies can begin billing city for services rendered

City budget is approved

Final approval

Certificate of Insurance & Affirmative Action Plan

If funded, the City of Madison reserves the right to negotiate the final terms of a contract with the selected organization. City purchases of service contracts include requirements regarding nondiscrimination, consideration of vulnerable populations, Affirmative Action, and mandatory insurance coverage.





Contracting Process

All allocated funds will be administered through the City of Madison, Community Development **Division. Funded agencies will be** required to submit program and expense reports.

Note: If allocation amount differs from original proposal, Contract Manager and agency will negotiate final contract requirements.









Attend Workshop

2

Review Timeline

4

Review RFP Guidelines

1

Submit Letter of Intent - by June 17th - 4:30pm

3

<u>Click Here to see timeline on our website</u>



Submit the **Application by** JULY 1st - 4:30pm

Fill Out the Application

5

Questions?

Yolanda Shelton-Morris, Community Resources Manager Email: yshelton-morris@cityofmadison.com Garrett Tusler, Community Development Specialist Email: gtusler@cityofmadison.com

FAQ will be posted on our website





Workshop Evaluation

Scan me to take the feedback survey!



Or click here





THANK YOU!

Older Adult Services 2024

Department of Planning and Community & Economic Development **Community Development Division**



RFP Workshop

Stop Recording











Q+A Session -FAQ will be posted on our Website