**Summary**

Family & Community Partnerships of Kent County, MD (The FCP is Kent County’s Local Management Board – LMB) is issuing a request for proposals to perform the following work:

**Project S.E.E.K. [Services to Empower and Enable Kids impacted by incarceration]**

Announcement Date: February 17, 2017

Proposal Due Date: Wednesday March 23rd, 1:00 p.m.

Funding Level: Base Funding $120,000; Competitive Funding $80,000

Eligibility: Organizations with relevant experience and capacity

Submission Instructions: All proposals must arrive by e-mail by the due date and hard copies must be postmarked by the due date, otherwise they will NOT be considered.

One signed original

Electronic copy mailed to point of contact, (see below)

Deliverables: See Section B. Scope of Work

Target Population: Children between 5-16 years old with an incarcerated parent

Point of Contact: Rosemary Ramsey Granillo

Family & Community Partnerships of Kent County

115 South Lynchburg St. Suite F

Chestertown, MD 21620

rramseygranillo@kentgov.org

Phone: 410.810.2673

Questions: Please direct questions to point of contact, above. Email preferred. All questions will be answered in writing and delivered to any party that may be submitting a proposal.

RECOMMENDATIONS: If you are considering submitting a response to the RFP, please advise our office so that we can send you updates and other information as necessary.

**Kent Local Management Board - Family & Community Partnerships of Kent County**

**Request for Proposals**

**Organization Name**:

**Office/Department/Unit (if applicable):**

**Project Name: Project S.E.E.K.**

**Address**:

**City**: **State**: **ZIP**:

**Federal Employee Identification Number (FEIN)**:

**Amount Requested:** **Matching Funds**: (If applicable)

|  |  |  |  |
| --- | --- | --- | --- |
| **Personnel** | **Name** | **Phone Number** | **Email** |
| Administrative Organization Director: |  |  |  |
| Project Manager: |  |  |  |
| Project Finance Manager: |  |  |  |

Complete each line under personnel, if one person is in multiple roles list them individually in each row. Do not leave information blank or write “same as”.

|  |  |
| --- | --- |
| **Authorizing Signatures** *In submitting this application, applicants agree to abide by all terms of the FCP General Grant Conditions as well as the terms of the Special Conditions for FY2017 set forth by this award.*  This grant application has been approved and is authorized for submission by: | |
| **Director/Administrative Authority:** | **Financial Authority:** |
|  |  |
| *Printed Name* | *Printed Name* |
|  |  |
| *Title* | *Title* |

*Signature Date Signature Date*

**Please scan your application into one PDF document and after signing, submit your application: one by email to: Rosemary Ramsey Granillo at** [**rramseygranillo@kentgov.org**](mailto:rramseygranillo@kentgov.org) **and one hard copy mailed to the address on the application post marked by the stated deadline.**

# A. Discussion of Priority Area and selected Evidence Based Practice

In 2016 Kent County’s Local Management Board completed a community needs assessment and a corresponding community plan that identifies strategies to address the 8 child well-being result areas in the State of Maryland. Under the result area: Families are Safe and Economically Stable, our board prioritized the strategy: “Plan and implement a comprehensive array of services for children and youth impacted by the incarceration of a parent or caregiver.” Data suggests that around 12% of Kent County youth have experienced or are experiencing the incarceration of a parent or caregiver – about 500 children. While many families receive different level of services, there are no services that target the population specifically.

This RFP seeks to maximize existing resources in support of these families by implementing Project S.E.E.K. – Services to Empower and Enable Kids. We would target children in Kent County ages 5 - 16 who have an incarcerated parent or care giver. Services would then be built around that family. Families can be recruited through the Circuit Court Probation Department through the pre-sentence investigation process or through the Kent County Detention Center. Participation is voluntary. For more information about Project S.E.E.K. please review here: <http://dept.camden.rutgers.edu/nrccfi/files/Project-SEEK-Executive-Summary.pdf>

Applications should demonstrate partnerships with relevant stakeholders such as the courts, Kent County Detention Center, behavioral health services, Kent County Public Schools, Parole and Probation, and other home visiting services such as Healthy Families and the Kent Family Center. We also encourage the incorporation of Two Generation tools to ensure improved outcomes among children and caregivers alike.

# B. Scope of Work

Base Level Funding – Minimum Program Components Required:

* 1. Home Visiting and Family Support – A project specialist is assigned to each family and meets with the caregiver and children in their home. Caseloads range from twenty to twenty-five families. The project specialist acts as an advocate for family members and makes referrals to other service systems on an as needed basis. The Project specialist can also take children to visit incarcerated parents when appropriate and facilitate other communication. They serve as a mentor to the children and spend one on one time with them to talk about family and school issues.
     1. Implementation plan (including training) and deliverables
  2. Support Groups – For children and for caregivers
     1. Age group (5-10) meets weekly with up to 15 children (selected based on greatest need); Age group (11-16) meets at least 32 times a year. Up to 15 participants.
     2. Caregivers – Annual stress management training provided by a professional and the support of the program specialist. Two hour weekly sessions for 10 weeks. Childcare and other supports offered to facilitate participation.
     3. Implementation plan and deliverables
  3. Counseling – Inmates do not have access to Medical Assistance, yet addiction therapy and other counseling is a necessary first step in recovery and stability. Kent County seeks to provide these supports to incarcerated parents as part of an effort to ensure robust systems of care and support.
     1. Implementation plan
     2. Deliverables

Competitive Funding\* – Project SEEK expansion

1. Home Visiting and Family Support expansion – to meet the needs of an additional 20-25 families, Project SEEK requires another Program Specialist.
2. Reunification Support – Kent County has an urgent need for Re-entry and Post-Release services. The Detention Center does not have a classification officer to support inmates as they prepare to rejoin the community. A planned and supported transition, especially in the first 24-48 hours of release, can be key for persons struggling with addiction or facing other barriers to housing or employment. Incarcerated parents or caregivers and their families would benefit greatly from these services. A non-clinical case manager could support re-entry and post release work and the coordination of ancillary services. They should be tied to the families participating in Project SEEK.
   * 1. Implementation plan and deliverables
     2. Partnerships with Kent County Detention Center, Parole and Probation, etc.

\* Based on the selected proposal from this RFP, Kent LMB will be applying for base funding and competitive funding. Base funding comes from our successful completion of our annual proposal, but competitive funding is awarded to Maryland LMB’s that demonstrate particular need, innovation, and dedication to strategic goals such as ‘families impacted by incarceration’.

# C. Evaluation

|  |
| --- |
| **Please complete the performance measure table below** (see http://raguide.org/index-of-questions/ for helpful information on developing performance measures using Results-Based Accountability – you may track other measures, but this chart is limited to one or two headline measures for each of the three areas.) |
| |  |  | | --- | --- | | **Proposed Performance Measures** | **FY18 Target** | | **What/How Much Did We Do:** (e.g.  # clients served, # activities performed)  ***(one or two headline measures)*** | | |  |  | |  |  | | **How Well We Do It:**(e.g. % timely actions, % complete actions) ***(one or two headline measures)*** | | |  |  | |  |  | | **Is Anyone Better Off:**(# and % of clients who show improvement in skills/ knowledge, attitude, behavior or circumstance) ***(one or two headline measures)*** | | |  |  | |  |  | |

|  |  |
| --- | --- |
| **Who will be responsible for gathering the evaluation data for your organization?** |  |
|  | |
| **Describe the process for gathering data for the project.** |  |

# D. Narrative Budget

Each budget item that is requested in the excel spreadsheet must be itemized in the narrative of this application. Describe what is needed under each category and for what purposes.

**Personnel**  This category is reserved for staff that would utilize salary and benefits (health account, taxes, social security).

**Consultants** This category is reserved for staff reimbursements that would not have access to benefits and be fee for service assignments.

**Equip/Software** This category is reserved for direct costs related to this project.

**Supplies** This category is reserved for administrative and project supplies. This category may include office supplies and food for project meetings and trainings.

**Travel/Training** This category is reserved for:

* Mileage
* Training Hours vs Project Hours (consultant fees)
* One time curriculum/materials fee

**Other Direct Cost** This category is reserved for expenses that do not meet the existing categories. Some examples of “other” may be:

* Administrative fees
* Liability Insurance – project/time frame specific
* Room rental fee for project training and activities

1. Personnel (describe cost of staff and time necessary)

|  |  |
| --- | --- |
| **Personnel** |  |
|  | $ |

2. Consultants/Contracts

|  |  |
| --- | --- |
| **Consultants/Contracts** |  |
|  | $ |

3. Supplies

|  |  |
| --- | --- |
| **Supplies** |  |
|  | $ |

4. Travel/Training

|  |  |
| --- | --- |
| **Travel/Training** |  |
|  | $ |

5. Direct Costs

|  |  |
| --- | --- |
| **Other Direct Costs** |  |
|  | $ |

**Attach Excel Budget**

# E. Grant Awards and Conditions

The submission of a proposal does not, in any way, guarantee an award. The grants available through this process will be funded as one-time only awards and will be disseminated according to the timeline outlined in this document. Family and Community Partnerships (FCP) will notify the applicant of the outcome of the review process. Applicants whose proposals are selected for an award will receive technical assistance from the FCP as necessary to finalize performance measures and budgets prior to the execution of a formal grant award.

Grant awards will be issued by FCP and must be fully-executed prior to the disbursement of funds.

The conditions below outline the basic terms and requirements for the use of funds provided for activities covered by this RFP. Failure to fulfill any of the following conditions may result in suspension or termination of the grant award.

1. Funds received by the Grantee under this award will be used solely for the purpose of implementing the activities outlined in the grant award, which are taken from applicants’ proposal;
2. Prior to execution of this contract, the successful bidder shall submit a “Certificate of Insurance” indicating it carries the specified insurances in the amount specified in this RFP. Coverage shall be maintained throughout the term of the contract. Coverage costs can and should be included in the proposal budget. Unless otherwise specified, coverage levels shall be required as follows:

A. Professional malpractice, negligence, and errors and omissions coverage in minimum amounts of $2,000.000 per event and $1,000.000 per person.

B. General Liability - Minimum - $2,000.000

C. Workers’ Compensation Insurance as required as law.

D. Comprehensive Liability Insurance with minimum limits of $1,000,000 per person, $2,000,000 per occurrence. Policy shall include the broad form of Comprehensive General Liability Endorsement or its equivalent

E. All required coverage shall include and specifically name the County as an additional insured and loss payee with respect to all operations under the contract. F. The successful bidder will furnish the County any up-to-date certificates of insurance stating the requirements listed above at contract implementation.

1. Kent County Ethics Ordinance: By submitting a proposal in response hereto, the bidder acknowledges that it is familiar with the County’s Code of Ethics, CPLL, Chapter 29, and certifies that it has no knowledge of any violation of that Chapter, that it has no knowledge of any conflict of interest which may exist or arise under Chapter 29 if the bidder is awarded a contract, and that it has not given any gift (as that term is defined in Chapter 29) to anyone who has or may participate in the awarding of this contract or the management of supervision thereof. Contact the County’s Attorney Office at 410-778-3805 if any additional information is required. Copies of Chapter 29 may be obtained by phoning the County at 410-778-4600, or by logging on to the County’s web page and linking to the on-line version of the CPLL.
2. No amendment or modification to the activities covered under the grant award is binding unless it is in writing and signed by all parties with written approval by the FCP;
3. The Grantee’s use of these funds is subject to monitoring by the FCP. The Grantee is required to submit program and financial reports to the FCP as specified in the notice of grant award, and to provide the FCP with any documents and access to other information necessary for the FCP to complete its monitoring activities, or to comply with any request made of the FCP in conformance with State or federal laws and regulations;
4. The grantee may not discriminate in the implementation of the program/project against any employee, applicant for employment, provider of services, or applicant for services because of race, color, religion, sex, age, national origin, disability, or any other characteristic forbidden as a basis for discrimination by applicable laws.
5. The Grantee assures that:
   1. It is qualified to do business with the State of Maryland and will take such action as, from time to time, may be necessary to remain so qualified;
   2. It is not in arrears with respect to the payment of any fees due and owing the State of Maryland, or any Department, or agency thereof, including but not limited to, the payment of taxes and employee benefits and that they shall not become so in arrears during the term of this grant; and
   3. It shall comply with all federal, state, and local laws applicable to its activities and obligations under this grant.
6. The Grantee shall indemnify and hold harmless the State of Maryland, GOC and FCP against liability for any suits, actions or claims of any character arising from or relating to the performance of the Grantee under this grant;
7. The Grantee shall immediately notify FCP of any claim or suit made or filed against the grantee regarding any matter resulting from or relating to the Grantee’s obligation under this grant, and will cooperate, assist, and consult with the State of Maryland, GOC, and the FCP in the defense or investigation of any claim, suit, or action made or filed against the State as a result of relating the Grantee’s performance under this grant.
8. The FCP may cease or reduce funding of this grant award if such reductions are necessary due to the reductions in federal or State appropriations or the FCP budget. In the event of such reductions, FCP shall pay the grantee fair and equitable compensation for costs reasonable incurred for activities consistent with this grant award before notice of any reduction in the award.
9. Any remaining balance (award less expenditures) shall be returned to FCP via check made payable to FCP at the time of submission of the grantee’s final report. Funds expended in excess of the grant award are the responsibility of the Grantee.

# F. Attach:

1. Excel Budget
2. GANTT Chart
3. Relevant resumes