



BOARD OF CONTRACT AND SUPPLY
CITY OF PROVIDENCE, RHODE ISLAND

REQUEST FOR PROPOSALS

Item Description: SOAR PLANNING AND BENEFIT SPECIALIST SERVICES

Date to be opened: NOVEMBER 9, 2020

Issuing Department: HEALTHY COMMUNITIES OFFICE

QUESTIONS

- Please direct questions relative to the bidding process, how to fill out forms, and how to submit a bid (Pages 1-8) to Purchasing Agent Patti Jordan.
 - Phone: (401) 680-5264
 - Email: pjordan@providenceri.gov
 - Please use the subject line “**RFP Question**”
- Please direct questions relative to the Minority and Women’s Business Enterprise Program and the corresponding forms (Pages 9-13) to the MBE/WBE Outreach Director for the City of Providence, Grace Diaz
 - Phone: (401) 680-5766
 - Email: gdiaz@providenceri.gov
 - Please use subject line “**MBE WBE Forms**”
- Please direct questions relative to the specifications outlined (beginning on page 14) to the issuing department’s subject matter expert:
 - **Ellen Cynar, Director, Healthy Communities Office**
 - **(401)680-5377**
 - **Ecynar@provienceri.gov**

Pre-bid Conference

No Pre-Bid



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INSTRUCTIONS FOR SUBMISSION

Bids may be submitted up to **2:15 P.M.** on the above meeting date at the **Department of the City Clerk, Room 311, City Hall, 25 Dorrance Street, Providence.** At 2:15 P.M. all bids will be publicly opened and read at the Board of Contract Meeting in the City Council Chambers, on the 3rd floor of City Hall.

- Bidders must submit **3 copies** of their bid in sealed envelopes or packages labeled with the captioned **Item Description** and the **City Department to which the RFP and bid are related and must include the company name and address on the envelope as well.** (On page 1).
- If required by the Department, please keep the original bid bond and check in only one of the envelopes.
- Communications to the Board of Contract and Supply that are not competitive sealed bids (i.e. product information/samples) should have **“NOT A BID”** written on the envelope or wrapper.
- Only use form versions and templates included in this RFP. If you have an old version of a form **do not recycle it for use in this bid.**
- The bid envelope and information relative to the bid must be addressed to:

**Board of Contract and Supply
Department of the City Clerk – City Hall, Room 311
25 Dorrance Street
Providence, RI 02903**

****PLEASE NOTE:** This bid may include details regarding information that you will need to provide (such as proof of licenses) to the issuing department before the formalization of an award.

*This information is **NOT** requested to be provided in your initial bid by design.*

All bids submitted to the City Clerk become public record. Failure to follow instructions could result in information considered private being posted to the city’s Open Meetings Portal and made available as a public record. The City has made a conscious effort to avoid the posting of sensitive information on the City’s Open Meetings Portal, by requesting that such sensitive information be submitted to the issuing department only at their request.



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BID PACKAGE CHECKLIST

Digital forms are available in the City of Providence Purchasing Department Office or online at <http://www.providenceri.gov/purchasing/how-to-submit-a-bid/>

The bid package **MUST** include the following, in this order:

- Bid Form 1: Bidder's Blank as the cover page/ 1st page (*see page 6 of this document*)
- Bid Form 2: Certification of Bidder as 2nd page (*see page 7 of this document*)
- Bid Form 3: Certificate Regarding Public Records (*see page 8 of this document*)
- Forms from the Minority and Women Business Enterprise Program: Based on Bidder Category. *See forms and instructions enclosed (pages 9-13) or on: <https://www.providenceri.gov/purchasing/minority-women-owned-business-mbewbe-procurement-program/>*

***Please note: MBE/WBE forms must be completed for EVERY bid submitted and must be inclusive of ALL required signatures. Forms without all required signatures will be considered incomplete.**

- Bidder's Proposal/Packet: Formal response to the specifications outlined in this RFP, including pricing information and details related to the good(s) or service(s) being provided. Please be mindful of formatting responses as requested to ensure clarity.
- Financial Assurance, *if requested* (as indicated on page 5 of this document under "Bid Terms")

All of the above listed documents are REQUIRED. (With the exception of financial assurances, which are only required if specified on page 5.)

*****Failure to meet specified deadlines, follow specific submission instructions, or enclose all required documents with all applicable signatures will result in disqualification, or in an inability to appropriately evaluate bids.**



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NOTICE TO VENDORS

1. The Board of Contract and Supply will make the award to the lowest qualified and responsible bidder.
2. In determining the lowest responsible bidder, cash discounts based on preferable payment terms will not be considered.
3. Where prices are the same, the Board of Contract and Supply reserves the right to award to one bidder, or to split the award.
4. No proposal will be accepted if the bid is made in collusion with any other bidder.
5. Bids may be submitted on an "equal in quality" basis. The City reserves the right to decide equality. Bidders must indicate brand or the make being offered and submit detailed specifications if other than brand requested.
6. A bidder who is an out-of-state corporation shall qualify or register to transact business in this State, in accordance with the Rhode Island Business Corporation Act, RIGL Sec. 7-1.2-1401, et seq.
7. The Board of Contract and Supply reserves the right to reject any and all bids.
8. Competing bids may be viewed in person at the Department of the City Clerk, City Hall, Providence, immediately upon the conclusion of the formal Board of Contract and Supply meeting during which the bids were unsealed/opened. Bids may also be accessed electronically on the internet via the City's [Open Meetings Portal](#).
9. As the City of Providence is exempt from the payment of Federal Excise Taxes and Rhode Island Sales Tax, prices quoted are not to include these taxes.
10. In case of error in the extension of prices quoted, the unit price will govern.
11. The contractor will **NOT** be permitted to: a) assign or underlet the contract, or b) assign either legally or equitably any monies or any claim thereto without the previous written consent of the City Purchasing Director.
12. Delivery dates must be shown in the bid. If no delivery date is specified, it will be assumed that an immediate delivery from stock will be made.
13. A certificate of insurance will normally be required of a successful vendor.
14. For many contracts involving construction, alteration and/or repair work, State law provisions concerning payment of prevailing wage rates apply ([RIGL Sec. 37-13-1 et seq.](#))
15. No goods should be delivered or work started without a Purchase Order.
16. **Submit 3 copies of the bid to the City Clerk, unless the specification section of this document indicates otherwise.**
17. Bidder must certify that it does not unlawfully discriminate on the basis of race, color, national origin, gender, gender identity or expression, sexual orientation and/or religion in its business and hiring practices and that all of its employees are lawfully employed under all applicable federal, state and local laws, rules and regulations. (See Bid Form 2.)



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BID TERMS

1. Financial assurances may be required in order to be a successful bidder for Commodity or Construction and Service contracts. If either of the first two checkboxes below is checked, the specified assurance must accompany a bid, or the bid will not be considered by the Board of Contract and Supply. The third checkbox indicates the lowest responsible bidder will be contacted and required to post a bond to be awarded the contract.
 - a) A certified check for \$_____ must be deposited with the City Clerk as a guarantee that the Contract will be signed and delivered by the bidder.
 - b) A bid bond in the amount of _____ per centum (%) of the proposed total price, must be deposited with the City Clerk as a guarantee that the contract will be signed and delivered by the bidder; and the amount of such bid bond shall be retained for the use of the City as liquidated damages in case of default.
 - c) A performance and payment bond with a satisfactory surety company will be posted by the bidder in a sum equal to one hundred per centum (100%) of the awarded contract.
 - d) No financial assurance is necessary for this item.
2. Awards will be made within **sixty (60) days of bid opening**. All bid prices will be considered firm, unless qualified otherwise. Requests for price increases will not be honored.
3. Failure to deliver within the time quoted or failure to meet specifications may result in default in accordance with the general specifications. It is agreed that deliveries and/or completion are subject to strikes, lockouts, accidents and Acts of God.

The following entry applies only for COMMODITY BID TERMS:

4. Payment for partial delivery will not be allowed except when provided for in blanket or term contracts.

The following entries apply only for CONSTRUCTION AND SERVICE BID TERMS:

5. Only one shipping charge will be applied in the event of partial deliveries for blanket or term contracts.
6. Prior to commencing performance under the contract, the successful bidder shall attest to compliance with the provisions of the Rhode Island Worker's Compensation Act, RIGL 28-29-1, et seq. If exempt from compliance, the successful bidder shall submit a sworn Affidavit by a corporate officer to that effect, which shall accompany the signed contract.
7. Prior to commencing performance under the contract, the successful bidder shall, submit a certificate of insurance, in a form and in an amount satisfactory to the City.



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BID FORM 1: Bidders Blank

1. Bids must meet the attached specifications. Any exceptions or modifications must be noted and fully explained.
2. Bidder's responses must be in ink or typewritten, and all blanks on the bid form should be completed.
3. The price or prices proposed should be stated both in **WRITING** and in **FIGURES**, and any proposal not so stated may be rejected. **Contracts exceeding twelve months must specify annual costs for each year.**
4. Bids **SHOULD BE TOTALED** so that the final cost is clearly stated (unless submitting a unit price bid), however **each item should be priced individually**. Do not group items. Awards may be made on the basis of *total* bid or by *individual items*.
5. All bids **MUST BE SIGNED IN INK.**

Name of Bidder (Firm or Individual): _____

Contact Name: _____

Business Address: _____

Business Phone #: _____

Contact Email Address: _____

Agrees to bid on (Write the "Item Description" here): _____

If the bidder's company is based in a state *other than Rhode Island*, list name and contact information for a local agent for service of process that *is located within Rhode Island* _____

Delivery Date (if applicable): _____

Name of Surety Company (if applicable): _____

Total Amount in Writing*: _____

Total Amount in Figures*: _____

**** If you are submitting a unit price bid, please insert "Unit Price Bid"***

Use additional pages if necessary for additional bidding details.

Signature of Representation

Title



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BID FORM 2: Certification of Bidder
(Non-Discrimination/Hiring)

Upon behalf of _____ (Firm or Individual Bidding),

I, _____ (Name of Person Making Certification),

being its _____ (Title or "Self"), hereby certify that:

1. Bidder does not unlawfully discriminate on the basis of race, color, national origin, gender, sexual orientation and/or religion in its business and hiring practices.
2. All of Bidder's employees have been hired in compliance with all applicable federal, state and local laws, rules and regulations.

I affirm by signing below that I am duly authorized on behalf of Bidder, on
this _____ day of _____ 20_____.

Signature of Representation

Printed Name



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BID FORM 3: Certificate Regarding Public Records

Upon behalf of _____ (Firm or Individual Bidding),

I, _____ (Name of Person Making Certification),

being its _____ (Title or "Self"), hereby certify an

understanding that:

1. All bids submitted in response to Requests for Proposals (RFP's) and Requests for Qualification (RFQ's), documents contained within, and the details outlined on those documents become public record upon receipt by the City Clerk's office and opening at the corresponding Board of Contract and Supply (BOCS) meeting.
2. The Purchasing Department and the issuing department for this RFP/RFQ have made a conscious effort to request that sensitive/personal information be submitted directly to the issuing department and only at request if verification of specific details is critical the evaluation of a vendor's bid.
3. The requested supplemental information may be crucial to evaluating bids. Failure to provide such details may result in disqualification, or an inability to appropriately evaluate bids.
4. If sensitive information that has not been requested is enclosed or if a bidder opts to enclose the defined supplemental information prior to the issuing department's request in the bidding packet submitted to the City Clerk, the City of Providence has no obligation to redact those details and bears no liability associated with the information becoming public record.
5. The City of Providence observes a public and transparent bidding process. Information required in the bidding packet may not be submitted directly to the issuing department at the discretion of the bidder in order to protect other information, such as pricing terms, from becoming public. Bidders who make such an attempt will be disqualified.

I affirm by signing below that I am duly authorized on behalf of Bidder, on

this _____ day of _____ 20 ____.

Signature of Representation

Printed Name



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WBE/MBE Form Instructions

The City of Providence actively seeks Minority and Women business enterprises to participate in bids to meet the City's procurement needs. Pursuant to the City of Providence Code of Ordinances, Chapter 21, Article II, Sec. 21-52 (Minority and Women's Business Enterprise) and Rhode Island General Laws (as amended), Chapter 31-14, et seq. (Minority Business Enterprise), Minority Business Enterprise (MBE) and Women's Business Enterprise (WBE) participation goals apply to contracts.

The goal for Minority Business Enterprise (MBE) participation is **10%** of the total bid value.

The goal for Women's Business Enterprise (WBE) participation is **10%** of the total bid value.

The goal for combined MBE/WBE participation is **20%** of the total bid value.

Only businesses certified with the State of Rhode Island as minority and/or women business enterprises are counted towards the City's goals. Eligible minority or women-owned businesses are encouraged to seek certification from the State of Rhode Island Minority Business Enterprise Compliance Office at: <http://odeo.ri.gov/offices/mbeco/>

Note: MBE certification with the State of Rhode Island on the basis of Portuguese heritage is not currently recognized by the City of Providence's MBE program.

Bid Requirements:

All Bidders: All bidders must complete and submit the **MBE/WBE Participation Affidavit** indicating whether or not they are a state-certified MBE/WBE and acknowledging the City's participation goals. Submission of this form is required with **every bid**. Your bid will not be accepted without an affidavit.

Bidders who will be subcontracting: Bidders who will be subcontracting must submit the **Subcontractor Disclosure Form** as part of their bid submission. All subcontractors, regardless of MBE/WBE status, must be listed on this form. Business NAICS codes can be found at <https://www.naics.com/search/>. Awarded bidders are required to submit **Subcontractor Utilization and Payment Reports** with each invoice.

Waiver Requests:

If the percentage of the total amount of the bid being awarded to MBE or WBE vendors is less than 20% (Box F on the Subcontractor Disclosure Form) and the prime contractor is not a Rhode Island State-certified MBE or WBE, the Bidder must complete the **MBE/WBE Waiver Request Form** for review. Waivers will be considered on a case by case basis.

No waiver will be granted unless the waiver request includes documentation that demonstrates that the Bidder has made good faith efforts to achieve the City's stated participation goals. Waivers must be reviewed and signed by the City of Providence's MBE/WBE Outreach Director, Grace Diaz, or her designee. Department Directors cannot recommend a bidder for award if this form is applicable and absent. If the bid does not meet the participation goals of the City of Providence and a waiver is not filed with the signature of the MBE/WBE Outreach Director or her designee, the bid will not be accepted.

Verifying MBE/WBE Certification

It is the responsibility of the bidder to confirm that every MBE/WBE named in a proposal and included in a contract is certified by the Rhode Island Minority Business Enterprise Compliance office. The current MBE/WBE directory is available at the State of RI MBE Office, One Capitol Hill, 2nd Floor, Providence, RI, or online at <http://odeo.ri.gov/offices/mbeco/mbe-wbe.php>. You can also call (401) 574-8670 to verify certification, expiration dates, and services that the MBE/WBE is certified to provide. Note: MBE certification with the State of Rhode Island on the basis of Portuguese heritage is not currently recognized by the City of Providence's MBE program.

Form Instructions:

Access all bid forms from <http://www.providenceri.gov/oeo/> or <http://www.providenceri.gov/purchasing/minority-women-owned-business-mbewbe-procurement-program/>. **Download** the forms as blank PDFs. Once saved on your computer, fill them out using the Adobe program. The fillable PDFs must be completed in Adobe in order to be saved property. Google Chrome and similar



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platforms do not allow for the forms to be saved as filled PDFs. Therefore, please download the blank forms to your computer, then fill them out and save.

Assistance with Form Requirements

Examples of completed forms can be found on the City of Providence website at <http://www.providenceri.gov/oeo/> or <http://www.providenceri.gov/purchasing/minority-women-owned-business-mbewbe-procurement-program/>.

Contract Requirements:

Prime contractors engaging subcontractors must submit the *Subcontractor Utilization and Payment Report* to the City Department's Fiscal Agent with every invoice and with request for final payment. This form is not submitted as a part of the initial bid package.

For contracts with duration of less than 3 months, this form must be submitted along with the contractor's request for final payment. The form must include all subcontractors utilized on the contract, both MBE/WBE and non- MBE/WBE, the total amount paid to each subcontractor for the given period and to date. During the term of the contract, any unjustified failure to comply with the MBE/WBE participation requirements is a material breach of contract.

Questions?

For more information or for assistance with MBE/WBE Forms, contact the City of Providence MBE/WBE Outreach Director, Grace Diaz, at mbe-wbe@providenceri.com or (401) 680-5766.



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MBE/WBE PARTICIPATION AFFIDAVIT

Item Discussion (as seen on RFP):

Prime Bidder: _____

Prime Bidder (Company) Phone Number: _____

Which one of the following describes your business' status in terms of Minority and/or Woman-Owned Business Enterprise certification with the State of Rhode Island? MBE WBE Neither MBE nor WBE

By initialing the following sections and signing the bottom of this document in my capacity as the contractor or an authorized representative of contractor, I make this Affidavit:

It is the policy of the City of Providence that minority business enterprises (MBEs) and women business enterprises (WBEs) should have the maximum opportunity to participate in procurements and projects as prime contractors and vendors. Pursuant to Sec. 21-52 of the Providence Code of Ordinances and Chapter 31-14 *et seq.* of the Rhode Island General Laws (as amended), MBE and WBE participation goals apply to contracts.

The goal for Minority Business Enterprise (MBE) participation is 10% of the total bid value.

The goal for Women's Business Enterprise (WBE) participation is 10% of the total bid value.

The goal for combined MBE/WBE participation is 20% of the total bid value.

I acknowledge the City of Providence's goals of supporting MBE/WBE certified businesses. Initial _____

If awarded the contract, I understand that my company must submit to the Minority and Women's Business Coordinator at the City of Providence (MBE/WBE Office), copies of all executed agreements with the subcontractor(s) being utilized to achieve the participation goals and other requirements of the RI General Laws. **I understand that these documents must be submitted prior to the issuance of a notice to proceed.** Initial _____

I understand that, if awarded the contract, my firm must submit to the MBE/WBE Office canceled checks and reports required by the MBE/WBE Office on a quarterly basis verifying payments to the subcontractors(s) utilized on the contract. Initial _____

If I am awarded this contract and find that I am unable to utilize the subcontractor(s) identified in my Statement of Intent, I understand that I must substitute another certified MBE and WBE firm(s) to meet the participation goals. **I understand that I may not make a substitution until I have obtained the written approval of the MBE/WBE Office.**

Initial _____

If awarded this contract, I understand that authorized representatives of the City of Providence may examine the books, records and files of my firm from time to time, to the extent that such material is relevant to a determination of whether my firm is complying with the City's MBE/WBE participation requirements.

Initial _____

I do solemnly declare and affirm under the penalty of perjury that the contents of the foregoing Affidavit are true and correct to the best of my knowledge, information and belief.

Signature of Bidder

Printed Name

Company Name

Date



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SUBCONTRACTOR DISCLOSURE FORM

Fill out this form only if you WILL SUBCONTRACT with other parties. If you will not subcontract any portion of the proposed bid, do not fill out this form.

Prime Bidder: _____ Primary NAICS _____

Code: _____

Item Description (as seen on RFP): _____

Please list all Subcontractors below. Include the total dollar value that you propose to share with each subcontractor and the dollar amount to be subcontracted. Please check off MBE and WBE where applicable. The directory of all state-certified MBE/WBE firms is located at www.mbe.ri.gov. Business NAICS codes can be found at <https://www.naics.com/search/>

Proposed Subcontractor	MBE	WBE	Primary NAICS Code	Date of Mobilization	\$ Value of Subcontract
					\$
					\$
					\$
					\$
					\$
					\$
A. MBE SUBCONTRACTED AMOUNT:					\$
B. WBE SUBCONTRACTED AMOUNT:					\$
C. NON MBE WBE SUBCONTRACTED AMOUNT:					\$
D. DOLLAR AMOUNT OF WORK DONE BY THE PRIME CONTRACTOR:					\$
E. TOTAL AMOUNT OF BID (SUM OF A, B, C, & D):					\$
F. PERCENTAGE OF BID SUBCONTRACTED TO MBEs AND WBEs. (Divide the sum of A and B by E and multiply result by 100).					%

Please read and initial the following statement acknowledging you understand. If the percentage of the total amount of the bid being awarded to MBE or WBE vendors is less than 20% (Box F) and the prime contractor is NOT a Rhode Island State-certified MBE or WBE, you must fill out the MBE/WBE WAIVER REQUEST FORM for consideration by City of Providence MBE/WBE Outreach Director. Initial _____

Signature of Bidder

Printed Name



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MBE/WBE Waiver Request Form

Fill out this form only if you are subcontracting and did not meet the 20% MBE/WBE participation goal. State-certified MBE or WBE Prime Bidders are NOT REQUIRED to fill out this form.

Submit this form to the City of Providence MBE/WBE Outreach Director, Grace Diaz, at mbe-wbe@providenceri.gov, for review **prior to bid submission**. This waiver applies only to the current bid which you are submitting to the City of Providence and does not apply to other bids your company may submit in the future.

Prime Bidder: _____

Company Trade: _____

Item Discussion (as seen on RFP):

To receive a waiver, you must list the certified MBE and/or WBE companies you contacted, the name of the primary individual with whom you interacted, and the reason the MBE/WBE company could not participate on this project.

MBE/WBE Company Name	Individual's Name	Company Trade	Why did you choose not to work with this company?

I acknowledge the City of Providence's goal of a combined MBE/WBE participation is 20% of the total bid value. I am requesting a waiver of _____ % MBE/WBE (20% minus the value of **Box F** on the Subcontractor Disclosure Form). If an opportunity is identified to subcontract any task associated with the fulfillment of this contract, a good faith effort will be made to select MBE/WBE certified businesses as partners.

Signature of Prime Contractor

Printed Name

Date Signed

Signature of City of Providence
MBE/WBE Outreach Director

Printed Name of City of Providence
MBE/WBE Outreach Director

Date Signed



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SUPPLEMENTAL INFORMATION

If the issuing department for this RFP determines that your firm's bid is best suited to accommodate their need, you will be asked to provide proof of the following prior to formalizing an award.

An inability to provide the outlined items at the request of the department may lead to the disqualification of your bid.

*This information is **NOT** requested to be provided in your initial bid that you will submit to the City Clerk's office by the "date to be opened" noted on page 1. This list only serves as a list of items that your firm should be ready to provide on request.*

All bids submitted to the City Clerk become public record. Failure to follow instructions could result in information considered private being posted to the city's Open Meetings Portal and made available as a public record.

You must be able to provide:

- Business Tax ID will be requested after an award is approved by the Board of Contract and Supply.



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BID PACKAGE SPECIFICATIONS

City of Providence - SOAR Planning and Benefit Specialist Services

The City of Providence's Healthy Communities Office seeks SSI/SSDI Outreach, Access, and Recovery (SOAR) planning and benefit specialist services between December 2020-June 30, 2022. Funding will be contingent upon passage of FY21 budget and available funding in FY22. Questions about this RFP should be directed to Healthy Communities Office Director Ellen Cynar, ecynar@providenceri.gov.

Background

The Healthy Communities Office (HCO) leads the City of Providence's health policy and promotion efforts with a mission to ensure that Providence residents have equitable access to the resources they need to lead healthy lives (www.providenceri.gov/healthy).

Providence is Rhode Island's largest municipality and has the greatest estimated number of people, statewide, experiencing or at risk of homelessness. Nationally, the link between homelessness and health is well established, with disabilities acting as both a driver and consequence of becoming and staying unhoused. While there are income benefit programs for people with severe qualifying disabilities, including Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI), the application process for SSI/SSDI is often complicated and difficult to navigate. This is even more true for people who are experiencing or at risk of homelessness. Though access to these benefits can provide a critical stable source of income to secure housing, food, and other basic necessities, approval of initial SSI/SSDI applications for those experiencing or at risk of homelessness with severe and persistent disabilities is between 10-15%. Efforts exist across Rhode Island to support individuals accessing SSI/SSDI benefits, but Providence lacks a coordinated and robust system dedicated specifically to supporting people experiencing chronic homelessness in Providence.

In response, the HCO seeks to increase housing stability for people in Providence experiencing or at risk of homelessness by increasing coordination and capacity to access disability income benefits through the SSI/SSDI Outreach, Access, and Recovery (SOAR) initiative, administered by the Substance Abuse and Mental Health Services Administration (SAMHSA). The SOAR model is utilized across the country and is a proven best practice for increasing SSI/SSDI approval ratings. Since 2005, the SOAR program has helped more than 45,000 people obtain SSI/SSDI benefits, often a critical first step in regaining housing stability. For more information about the SOAR program visit: <https://www.samhsa.gov/homelessness-programs-resources/grant-programs-services/soar>

Scope of Work

The Providence Healthy Communities Office is requesting proposals to support planning and benefit specialist services dedicated towards connecting people in Providence who are experiencing or at risk of homelessness and have a severe and persistent mental illness, medical impairment, and/or a co-occurring substance use disorder to SSI/SSDI benefits through the SSI/SSDI Outreach, Access and Recovery (SOAR) model.

In addition to offering direct services, the grantee will also serve as Providence's SOAR Local Lead and work closely with partners to develop a Providence SOAR Strategic Plan to expand and sustain a robust SOAR program in Providence beyond the terms of this funding. Applicants may include a dedicated full or part time position (staff or consultant) to focus on this systems level planning, or should show how this work will be built into Benefit Specialists' caseload.



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Required Activities

Part A: Strategic Planning and Program Design

The HCO seeks analysis and planning services to develop a Providence SOAR Strategic Plan. Required activities include:

- Designate at least one member of the SOAR team to participate in the SOAR Leadership Academy; and coordinate the development of the Plan.
- Engage stakeholders, including but not limited to, SAMHSA's SOAR Technical Assistance Center, the Rhode Island SOAR Lead, the RI Continuum of Care (RI-COC), the HCO, and the local Social Security Administration (SSA) and Disability Determination Services (DDS) offices.
- Develop partnerships with cross-sector organizations that will support an active referral system from primary/community-based case managers to SOAR Benefits Specialists; and allow for close coordination between the two in supporting people in Providence through the SSI/SSDI application process. Partnerships will include a minimum of three (3) of the following service sectors, in addition to homeless services:
 - Mental health and substance use services
 - Prison re-entry services
 - Health care services
 - Transitional-age youth services
 - Veteran Services
 - Immigration services
- Identify opportunities for sustainability of the Providence SOAR Strategic Plan and SOAR program in the Providence community beyond this funding opportunity.
- Develop and finalize a Strategic Plan by April 2021. Provide for two rounds of review and final Plan in Word and PDF format.
- Initiate recruitment of SOAR Benefit Specialists in preparation for Implementation, as needed.

Part B: Implementation

The HCO seeks services to implement the Providence SOAR Strategic Plan developed in Part A. Required services include:

1. *Administration:*

Administration of the Providence SOAR Program will require leading the implementation of the strategic plan and program design work done in Part A. This will include: supporting the continued development and maintenance of strong partnerships with outside organizations; hiring and training of new SOAR Benefit Specialists; providing opportunities for ongoing professional development for SOAR Benefits Specialists; and engaging in continuous refinement of the strategic plan and program design throughout Part B as challenges and opportunities for improvement are identified.

Additionally, administration will require ensuring that all program staff complete the SOAR online course before beginning to work with clients, keeping records of client interactions, and using the Homeless Management Information System (HMIS) and SOAR Online Application Tracker (OAT) to show outcomes and progress. Finally, administration will require tracking, analyzing, and reporting out on performance measures as outlined in the reporting section below.

2. *Outreach/Collaboration:*

The grantee is required to coordinate closely with the RI SAMHSA SOAR TA Center Liaison, the RI State SOAR Lead and, at the RI State SOAR Lead's discretion:

- Participate in any RI SOAR team meetings
- Submit completed SOAR cases to State Lead for approval before submission to SSA and DDS
- Participate in any RI SOAR quality review processes

The grantee is required to coordinate with the RI Continuum Of Care (RI-COC) to ensure eligible program participants with the highest needs are given the highest priority and are able to access the services.



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3. *SSI/SSDI Advocacy:*

The grantee and associated staff will draw on the program design work done in Part A to identify and connect SOAR-eligible clients with SOAR Benefits Specialists. The SOAR Benefits Specialists will collaborate with primary case managers working in cross-sector organizations to provide services in accordance with the SOAR model to enroll eligible clients in SSI/SSDI benefit programs. SOAR Benefits Specialists will provide supplementary services to clients to compliment their primary case management, not replace it.

Timeline

- Part A: Strategic Planning and Program Design - December 2020 - April 2021
- Part B: Implementation: May 2021 - June 30, 2022; contingent upon available funding in FY22

Qualifications

The HCO seeks applications from organizations or collaboratives that have demonstrated experience and capacity to provide effective, high-quality services to people experiencing homelessness in Providence, with a specific track record of supporting chronically homeless individuals.

Applicants must apply for both Part A: Strategic Planning and Part B: Implementation in order to ensure continuity of this work.

1. Organizational Capacity:

The awarded organization will have organizational capacity to carry out the above scope of work including:

- Demonstrates understanding of the challenges and barriers that people experiencing homelessness in Providence face and ability to navigate the local homeless resource landscape.
- Demonstrates ability to provide high quality, culturally competent services through an anti-racist, anti-stigma, and strengths-based lens to: racial and ethnic minorities, LGBTQIA+ people, undocumented individuals, refugees, people with justice involvement, and people with disabilities. *[list is not exhaustive]*
- Demonstrates familiarity with and proficiency in using the Homelessness Management Information System (HMIS) and RI-Coordinated Entry System.
- Experience providing high-quality services to individuals experiencing and at risk of chronic homelessness.
- Established relationships with other Providence-area service providers.
- Provides for ongoing staff professional development opportunities that will advance ability to do this work.
- Strong commitment to monitoring, evaluation, and ongoing project process improvement.
- Strong commitment to collaborative, systems-level work.
- Ability to hire and maintain consistent staffing to meet program goals.
- Experience with strategic plan development, conducting gap and opportunity analysis, and developing new program implementation plans.

2. Staffing:

The awarded organization will provide a staffing structure with the following qualifications:

- Ability to work in and travel to community settings (e.g. in homes, public spaces).
- Capacity to deliver services in languages other than English that are most spoken in Providence, including Spanish, Portuguese, and Mon-Khmer.
- Complete and maintain SOAR training(s) that meet the level of training needed for SOAR service supports.



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Funding Availability

The HCO anticipates awarding one (1) proposal for the period ending June 30, 2022. In order to ensure continuity of services, applicants will apply for both fiscal years of funding for a total maximum allowable bid of \$300,000, contingent upon funding approval.

FY21: Strategic Planning and Program Design + Implementation

December 2020- June 30, 2021

Maximum allowable bid: \$150,000

FY22: Implementation

July 1, 2021-June 30, 2022

Maximum allowable bid: \$150,000

Allowable Expenses

- Part A: Strategic Planning: funds are available to support Personnel, Fringe, Subcontracts, Consultants, Administrative Materials, and Overhead.
- Part B: Implementation: funds are available to support Personnel, Fringe, Transportation, Equipment, Subcontracts, Materials, Professional Development/Training, and Overhead.

No more than 10% of total budget can be for overhead/indirect costs for either Part A or Part B.

Reporting

The awarded organization will be required to:

1. Attend monthly meetings of the Mayor's Coalition on Behavioral Health to provide regular updates to the Coalition on progress and challenges in the work. This Coalition meets the first Wednesday of every month from 3-4:30pm, with some exceptions due to holidays.
2. Submit bi-monthly written reports on activities, progress, and metrics including:
 - a. The number of client referrals to SOAR per month
 - b. The number of SOAR applications submitted per month
 - c. The percentage of SOAR applications approved upon initial submission
 - d. The percentage of SOAR applications approved upon appeal
 - e. The average length of time between submission and decision
 - f. Recommendations to improve the Providence SOAR program
 - g. Progress toward goals as set out by the Strategic Plan
3. Attend bi-monthly project management meetings.
4. Submit milestone reports at the end of Part A (April 2021) and the end of Part B (June 2022) summarizing work done, challenges encountered, and future recommended/planned directions for growth.
 - a. Part A report should also include a copy of the full Strategic Plan.
 - b. Part B report should include final numbers, percentages, and averages for metrics identified above.

Proposal Materials

1. **Contact Information:** Individual or organization name, address, phone, and email.
2. **Proposal Narrative-** (*maximum 8 pages, single-spaced*)
 - a. Organizational Experience: Describe the organization's experience with, commitment, and approach to serving people experiencing homelessness and connecting them to resources. Please respond directly to the Qualifications - Organizational Capacity section.



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- b. Work Plan Proposal: Describe the proposed work plan to meet the RFP's goals and activities set out in the Scope of Services.
 - c. Community Partnerships: Describe how the proposed work plan compliments or builds upon your organization's existing connections to systems of care in Providence, Rhode Island, and regionally.
 - d. Staffing: Provide the following:
 - i. Roles and qualifications of all relevant organization staff
 - ii. Staffing plan to meet responsibilities outlined in scope of work and qualifications.
 - e. Evaluation Plan Proposal: Describe how you will measure and evaluate the outcomes of your proposal; and how they support the reporting requirements of this RFP. *Client identifying information should not be included in your evaluation plan.*
3. **Timeline** - On a separate sheet include the proposed timeline of work.
 4. **Resumes** - Provide resumes of all relevant lead organization staff. Include copies of any certifications, credentials, or documentation of experience, as appropriate. Please do not submit original documents.
 5. If applying with partners, provide **letters of commitment** from all partner organizations (other than lead) certifying their role and responsibilities in the proposed work plan.
 6. **Supporting documents** - (*maximum 5 pages*)
Optional: Provide documents, links, communications materials, etc. that provide any relevant background information about the organization and experience with similar projects.

Budget

Funding proposal: In Excel format, provide a spreadsheet that includes costs and descriptions outlined above in the Funding Availability - Allowable Expenses section. Additional budget lines or categories may be added or removed as appropriate.

Funding timeline: In Excel or Word format, please identify how your proposed budget will be spent within the available funding timeline (see Funding Availability section).



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Selection Criteria

The Healthy Communities Office anticipates making recommendations to the Providence Board of Contract and Supply by late November 2020; and all applicants will be notified of the selection outcomes by this time. Selections will be made based on the following criteria:

Categories	Total Points
<p>Project Proposal</p> <ul style="list-style-type: none"> ● Proposed work plan supports the project's goals and strategies; and activities set out in the Scope of Services. ● Project activities support increased access to SSI/SSDI benefits for individuals experiencing or at risk of chronic homelessness. ● Project activities support development of a robust and sustainable Providence-specific SOAR program. ● Applicant demonstrates understanding of the challenges and barriers that people experiencing homelessness in Providence face and ability to navigate the local homeless resource landscape. ● Project activities are clearly defined and described. ● Time commitment of staff is appropriate to the project. 	30
<p>Timeline & Budget Proposal</p> <ul style="list-style-type: none"> ● Timeline of work is feasible and the planning phase can be completed by April 2021. ● Budget is in alignment with the proposed activities. ● Funds can be expended by Funding Availability deadlines (FY 21: June 30, 2021; FY 22: June 30, 2022). 	20
<p>Organization Experience</p> <ul style="list-style-type: none"> ● Qualifications and relevant organization and staff experience. ● Demonstrated success on past projects of similar scope and complexity. ● Demonstrated commitment to serving people experiencing homelessness in Providence. ● Letters of commitment from partnering agencies that support work plan. 	30
<p>Cost Proposal</p> <p>The total maximum allowable bid for this project is \$300,000. The bidder with the lowest bid will be awarded 20 points, and the highest bid will be awarded 10 points. Any bids in between will receive points in proportion to their distance between the low and high bids. <i>For example, if the highest bidder bids \$290,000 and the lowest bids \$270,000, a bid of \$280,000 will receive a score of 15 points.</i></p>	20
<p>Total Eligible Points</p>	100