

REQUEST FOR PROPOSALS
For
Financial Empowerment Center Nonprofit Provider

APPLICANT INFORMATION

Contact Person: _____ Title: _____

Address: _____

Legal Name of Agency: _____

Address: _____

City _____ State _____ Zip Code _____

Telephone Number: _____ Fax Number: _____

Tax Identification year of 501c(3): _____ Tax I.D. Number: _____

*DUNS Number: _____ E-Mail Address: _____

Matching Funds Amount: \$ _____

Submitted by: _____ Title: _____

I. PROPOSAL SUMMARY

The City of Shreveport's Department of Community Development is seeking proposals from community organizations ("Nonprofit Providers") to manage and implement the City of Shreveport's Financial Empowerment Center (FEC). The Financial Empowerment Center model provides free, professional, one-on-one financial counseling and coaching to residents. With support from the Cities for Financial Empowerment (CFE) Fund, and various funders, the City of Shreveport will launch a Financial Empowerment Center as a key public service to support financially vulnerable residents.

As part of the Financial Empowerment Center model, the City of Shreveport will partner with a qualified community organization to develop and manage the FEC, including the responsibilities related to the delivery of financial counseling, supervising financial counselors, database operations, community partnerships and program deliverables.

The City of Shreveport will consider proposals from organizations with proven experience in the delivery of social services in the community and ability to implement high-volume, quality, one-on-one financial counseling services to residents in the City of Shreveport. The nonprofit provider(s) will be expected to develop referral systems with a range of other programs and organizations to drive traffic to the FEC, as well as be responsive to potential strategic partnerships initiated by the City of Shreveport to ensure that goals are being met.

Questions pertaining to the RFP can be directed to Bonnie Moore at bonnie.moore@shreveportla.gov. Phone inquiries are not permissible. Responses will be sent to all parties expressing an interest in the RFP.

KEY DATES

Notifications	Date
1. Request for Proposals Release Date	June 11, 2018
2. Proposal submission due date	June 29, 2018
3. Notification of selection	July 13, 2018
4. Anticipated contract date	August 1, 2018
5. Anticipated program start date	November 1, 2018

Proposal Guidelines:

II. PROJECT SCOPE

Please ensure that the submitted proposal covers the below questions in detail.

A. Organizational Capability

- Provide a description of the organization, including its mission.
- Provide a narrative of the overall organizational capacity including any recent growth or contractions, and changes in strategic directions in recent years.
- Explain how the applicant has the organizational capability (financial and operational) to perform the administrative and programmatic responsibilities related to the delivery of the proposed services; the increased level of supervision and management activity required to ensure that benchmarks and core service outcomes set forth in this RFP are achieved.
- Describe the role that senior managers will play in the development, implementation and oversight of the project.
- Explain how this contract would extend the capacity of your existing efforts in the arena of financial empowerment.
- Highlight any experience with data tracking and reporting to government agencies and/or private funders.
- Describe the applicant's approach to human resources management, including hiring, supervision and professional development. Provide the turnover rate, explain how it is calculated, and describe the approach to reducing turnover. Detail any experience managing financial or other counselors. Submit a copy of applicant's most recent IRS

letter indicating the applicant's tax exempt status. If the applicant does not have 501c3 status, submit the IRS letter for the tax exempt fiscal sponsor.

- Submit applicant's most recent annual report, if available.

B. Financial Capacity

- List all local, state and federal government contracts held by the applicant at any time during the past three years, including the applicant's project name, contract name and number, contract purpose, total contract amount (cumulative over five years), government contracting agency, and agency contact person.
- Provide financial statements, audited if available, showing statement of activities (revenue and expense) and financial position (balance sheet) for the most recent complete fiscal year and the two years prior.
- Provide the most recent IRS Form 990.
- If the FEC will be part of the applicant's larger anti-poverty strategy, describe that strategy's other components, how the FEC will relate to them operationally, and how they are funded. If the applicant intends to raise additional funds to expand the FEC beyond the level of city funding, list the other potential funders and explain how the expansion will operate. In particular, if any other funder requires different deliverables or tracks different outcomes, explain how the applicant will manage blended operations and reporting.
- If financial counseling is an entirely new undertaking for the applicant, describe start-up costs and how they are included in the budget. If the FEC is an expansion of related work already underway by the applicant, explain how resources will be shared by or reassigned to the FEC.
- If the applicant intends to subcontract any of the FEC operations, describe subcontracting plans in detail.

In addition:

- Attach a chart showing where, or an explanation of how, the proposed services will fit into the applicant's organization.

C. Proposed Approach

- *Program Manager:* Name of the Program Manager, including a resume and brief bio.
- *Delivery of Service:* Provide a detailed plan on the organization will meet the City of Shreveport's FEC Framework and the Scope of Work. Be as detailed as possible with regard to operational issues and specifically address the following:

- Explain the organization’s approach to counseling with a particular emphasis on describing the client experience. This may include a detailed description of a typical counseling session, relevant materials used during sessions, and any additional information that will fully explain the applicant’s plans for achieving client outcomes.
 - Describe Applicant’s staffing recruitment plan for a program manager and financial counselors.
 - Affirm that the Applicant will collect, manage and track data using the CFE Fund’s national FEC data system
 - Indicate the key tasks and key milestones associated with start-up and implementation, specifically activities leading up to the November 1, 2018 program start date.
- *Coordination with other services:* Identify the possible approaches to forge programmatic partnerships with City/County agency or community organizations referenced in Attachment X: FEC Model. In addition, please detail initial thoughts on ways to monitor and assess the viability of these partnerships.
 - *External Referrals:* Detail plans for referrals from the FEC to other supportive services (employment, housing, access to benefits, legal, etc.)
 - *Subcontractors:* If subcontractors are proposed, describe in detail on each one will be trained, how the quality of the service will be assessed and ways in which oversight will be conducted.
 - *Marketing and Outreach:* Detail existing organizational communications opportunities to promote the FEC and any other outreach opportunities.

D. Market Assessment

- Provide a brief description of any suggested community/communities or target population(s) to be served through the proposed Financial Empowerment Center. Articulate the justification for doing so, including the key financial challenges.
- List and provide a brief description of any suggested locations where the FEC counselor can be housed.

E. Proposed Pricing

- Provide a detailed budget for the program using the attached budget template. The City/County anticipates that awards will cover the full cost of program implementation, however, applicants should make proposals realistic based on the available funds outlined in Section V. If applicable, applicants should include a list of any additional anticipated sources of income toward the project, actual and prospective with amounts.

- Direct Personnel Expenses
- Personnel Fringe Expenses
- Other Than Personnel Services (OTPS)
- Expenses (credit report/scores, training, software, etc.) Administrative Expenses (supplies, equipment, rent, etc.)
- Indirect costs.
- Current expense budget anticipated for the project, or currently used on similar projects.
- List each staff line separately and include percent of time anticipated for this project or currently spent on a similar project.
- Organization budget for the current fiscal year.

F. Relevant Experience

- Experience with the delivery of financial counseling or coaching to adults with demonstrable outcomes (If the organization does not have experience in financial counseling or coaching, then it must provide a staff training plan and timeline to ensure adequate capacity.
- Experience working in one or more low-income communities in the City of Shreveport, with a preference for those with a high concentration of working poor adults; established community relationships and partnerships highly desirable.
- Capacity and flexibility to meet a continuum of financial needs of low-income, multilingual residents in a variety of stages of financial need and crisis.
- Experience conducting effective client outreach. Preference will be given to applicants with specific experience using multiple marketing and outreach tools to build a high-volume client base and leveraging partnerships with community leaders and activities to drive traffic.
- Listing of at least two relevant references, including the name of the reference entity, a brief statement describing the relationship between the applicant, and the reference entity, and the name, title and telephone number of a contact person at the reference entity, for the applicant and each proposed sub-contractor if any.
- Program staffing chart identifying for each position that will be working with or at the FEC, the job responsibilities, level of skills and expertise. For each key staff position please provide a brief bio (and attach a resume) and/or description of the qualifications that will be required for the positions to be hired. All key management positions, including Executive Director, Managing Director, Director of Operations, Director of Programs, Program Manager, or similar positions, should be identified with specific people assigned to key tasks.

III. MATCH REQUIREMENTS

The nonprofit organization must provide 25% of the required match for the budget. The match must be cash or a cash equivalent, (i.e. shared staff cost, use of a facility). The projected budget amount for the first year is \$400,000.00. The required match is \$250,000. The Non Profit Provider match would be \$62,500.00. Over the subsequent two years, the match obligation will increase.

IV. INSURANCE REQUIREMENTS

Applicants must provide proof of insurance available upon notification of funding. Coverage must be in full force and effect at all times. Such insurance at a minimum must include the following coverage and limits of liability:

A. Commercial General Liability	
Annual Aggregate	\$2,000,000
Per Occurrence	\$1,000,000
B. Commercial Auto Liability Insurance	\$ 300,000
C. Worker's Compensation Insurance	\$1,000,000
D. Fidelity Bonding (25% of Contract Amount)	

Subrogation Clause, the Subrecipient and all of its insurers shall, waive all rights of recovery or subrogation against the City, its officers, agents or employees and its insurance companies.

Additional Insured Clause; the policy must be endorsed to name the City as an additional insured.

NOTE: These insurance limits are subject to change.

V. CORE SELECTION CRITERIA

<u>Category:</u>	<u>Maximum Points:</u>
Organizational Capacity	15
Financial Capacity	10
Proposed Approach	15
Market Assessment	10
Proposed Pricing	15

Relevant Experience	15
Matching Resources	<u>20</u>
TOTAL	100

Additional Selection Criteria

Agencies who have received prior funding from the Department of Community Development (DCD) will also be evaluated on past performance in carrying out programmatic activities and contractual compliance. Factors such as agency ability to meet service delivery goals, timely expenditure of funds, timely reporting, accuracy of reporting, ability to meet audit requirements, and other programmatic and fiscal contractual requirements will be considered. All unresolved monitoring findings must be cleared prior to applying. These other factors will be considered in conjunction with the proposal score in developing an overall recommendation for agency funding.

All applications must be completed using the forms supplied with this Notice of Funding Availability. Any application not following the prescribed format will not be considered for funding.

***All applications must be in 12-point font, Times New Roman. Three (3) copies must be mailed or delivered to the following address by 4:30 p.m. on June 29, 2018:**

**Attention: Mrs. Bonnie Moore, Director
 Department of Community Development
 401 Texas Street
 Shreveport, LA 71101**

VI. APPLICATION CHECKLIST

1. _____ Completed Application
2. _____ Attachment 1: Articles of Incorporation
3. _____ Attachment 2: Current Certificate of Good Standing from the Secretary of State
4. _____ Attachment 3: Letter Demonstrating non-profit 501©(3) Status of the Federal Tax Code
5. _____ Attachment 4: List of the Agency's Board of Directors
6. _____ Attachment 5: Resolution from the Board of Directors
7. _____ Attachment 6: Proof of Matching Funds

I CERTIFY THAT ALL OF THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT.

SIGNATURE OF AUTHORIZED REPRESENTATIVE

DATE _____

** Duns & Bradstreet Data Universal Numbering System (DUNS): All applicants must obtain a DUNS number. Failure to provide a DUNS number will prevent you from obtaining an award. Applicants may obtain a DUNS number by calling the toll-free request line at 1-866-705-5711 between 8:00 a.m. and 6:00 p.m.*

For Internal Use: Approved or denied _____ Awarded funds _____ Contract award date _____
