2023 Congregate Meals for Older Adults Request for Qualifications (RFQ) Guidelines and Application
(Amended 3/17/2023)

GUIDELINES

*Timeline subject to change

Funding Process Coordinator:
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Guidelines

INTRODUCTION

The Aging and Disability Services Division of the City of Seattle Human Services Department (HSD) seeks applications from a diverse group of agencies interested in helping older adults maintain their quality of life and age in place by addressing their nutritional needs. The Request for Qualification (RFQ) is competitive and open to any legally constituted entities that meet the standard HSD Agency Minimum Eligibility Requirements and any additional requirements outlined in Section G of the Guidelines.

The **Congregate Meals for Older Adults RFQ** invests in agencies that offer a place where older adults receive a culturally relevant, nutritionally balanced meal and have the opportunity to socialize with their peers.

Approximately **$3,295,179** is available through this Request for Proposal from the following sources:

Fund Sources	Request for Qualification Amount
Older Americans Act	$1,967,373
HSD General Fund	$976,319
Nutrition Services Incentive Program	$351,487
Total	**$3,295,179**

All materials and updates to the RFQ are available on HSD's Funding Opportunities webpage. HSD will not provide individual notice of changes, and applicants are responsible for regularly checking this webpage for any changes. HSD will not pay for any expense applicants may incur while they are preparing their application, providing information requested by HSD, or participating in the selection process.

If you have any questions about the Congregate Meals for Older Adults RFQ or would like to request an accommodation, please contact Funding Process Coordinator: Angela Miyamoto – Angela.Miyamoto@seattle.gov

~~Number of awards~~ **Funding Information**
~~HSD intends to fund a maximum of 15 Congregate Meals for Older Adults proposals. Initial A~~awards will be made for the period of January 1, 2024 - December 31, 2024. While it is the City's intention to renew agreements resulting from this funding opportunity on an annual basis through the 2027 program year, future funding will be contingent upon performance and funding availability.

TIMELINE*

Date	Time	Activity
March 1, 2023		Funding Opportunity Released
March 7, 2023	2:00 p.m.-3:30 p.m. PST	Information Session #1 – In person only Aging and Disability Services Division South King County Office Times Square Complex 600 SW 39th Street, Suite 155 Renton, WA 98057 (Mount St Helens Room)
March 9, 2023	9:30 a.m.-11:00 a.m. PST	Information Session #2 – Virtual Join meeting here via Webex, access code: 2484 600 2095 Meeting Password: RMs3JxGEk38 Call: 1-206-207-1700, 24846002095## Contact Lori Mina at lori.mina@seattle.gov if you encounter technical issues.
April 3, 2023	4:00 p.m. PDT	Last Day to Submit Questions (via email only) Angela.Miyamoto@Seattle.Gov
April 12, 2023	12:00 p.m. (noon) PDT	Applications Deadline (electronic submissions only) 1. HSD Online Submission System: http://web6.seattle.gov/hsd/rfi/index.aspx 2. Email: HSD_RFP_RFQ_Email_Submissions@seattle.gov
June 27, 2023		Planned Award Notification
January 1, 2024		New Contracts Start

*HSD reserves the right to change dates in the Congregate Meals RFQ timeline.

<u>Information Sessions</u>

HSD will offer two information sessions, one virtual and one in-person. Presentation content will be recorded and made available on HSD's Funding Opportunities webpage. Any agency interested in learning more about this RFQ is encouraged to attend the session and ask questions. Attendance is not required.

INVESTMENT AREA BACKGROUND & PROPOSAL REQUIREMENTS

A. *Overview of Investment Area*

The Seattle Human Services Department's Aging and Disability Services Division serves as the Area Agency on Aging (AAA) for Seattle-King County and administers federal Older Americans Act (OAA) funds in partnership with local community organizations. The Congregate Meal Program is one of the aging network services funded by OAA. The purpose of Older American's Act funded nutrition programs is to reduce hunger and food insecurity, encourage socialization of older individuals, promote health and well-being, and delay adverse health conditions.[1]

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[1]Administration for Community Living. Nutrition Services. https://acl.gov/programs/health-wellness/nutrition-services accessed October 27. Accessed October 27, 2022.

Congregate Meals for Older Adults provide a place where older adults receive a nutritionally balanced meal, socialize with their peers, receive information, and participate in activities to promote overall health and wellbeing.[2] Those who participate in Congregate Meals for Older Adults have improved food and nutrient intake, increased consumption of fruits and vegetables, or bettered nutritional status.[3]

B. Model

Congregate Meals for Older Adults help meet the dietary needs of adults aged 60 and older by providing culturally relevant, nutritious meals in a group or community setting. Congregate Meals for Older Adults sites are located throughout King County in places convenient for older adults to access. HSD will contract with a minimum of two sites or a combination of sites that offer meals Monday – Friday in each major region of King County – North, Seattle, East and South (see Attachment 8).[4]

Participants attend by driving themselves, sharing a ride with friends, family, or unpaid caregivers, or using public transportation, neighborhood shuttles, or site-provided transportation. HSD also supports transportation for select Congregate Meals for Older Adults sites. See Attachment 10 for more information. In addition to the meal, sites provide nutrition education, opportunities to socialize, and offer activities and access to other services for participants.

Eligible RFQ applicants must provide a minimum of 25% of the total program cost (in-kind, volunteer support, or other non-federal fund sources) as match to the amount requested in the RFQ proposal.

Meal Preparation
- Meals must be prepared on-site in an approved kitchen and follow safe food handling practices per Public Health – Seattle & King County requirements. See Attachment 7 for meal site requirements.
- If the site does not have an approved kitchen, food may be prepared at an approved off-site kitchen by the applicant, or partner agency serving the meal.
- Meals shall not be prepared by a restaurant, caterer, or other food service vendor.
- Sites must have access to a Certified Food Protection Manager (CFPM) to ensure persons in charge are properly trained, procedures are developed, and food safety requirements are understood and followed.
- Sites must ensure that staff and volunteers receive adequate training and that food handler permits are up to date.

High Quality Nutritious Meals
- Each meal must meet one-third (1/3) of the Dietary Reference Intake (DRI). See Senior Nutrition Program Standards.[5]

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[2] IBID

[3] Position of the Academy of Nutrition and Dietetics: Food and Nutrition for Older Adults: Promoting Health and Wellness. J Acad Nutr Diet. 2012;112:1255-1277.

[4] For an example, Sites A-D operate in the same region of King County - Site A operates Monday/Wednesday/Friday, Site B operates Tuesday/Thursday, Site C operates Monday-Thursday and Site D operates on Friday only. Combined, these 4 sites meet HSD's expectation of having at least 2 sites that participants can choose to receive congregate meals, Monday-Friday.

[5] Senior Nutrition Program Standards: https://www.dshs.wa.gov/sites/default/files/ALTSA/hcs/documents/SNPStandards.pdf. Standards are subject to change and programs are required to comply with updated standards.

- Meals should be culturally relevant to the intended community and honor food preferences and choice.
- Meals should include high quality ingredients, including fresh local produce from regional farms and producers to the maximum extent possible.

Setting

- Sites provide a welcoming and culturally inclusive social environment where meals and activities are respectfully presented in participants' preferred language.
- Sites should offer services to participants, which may include transportation, exercise, health screening, health promotion activities, social engagement activities, events, and educational opportunities.
- Sites must offer nutrition education activities at least bi-annually with various methods and respond to participant needs and preferences.
- Sites should have flexible scheduling to meet the needs of program participants.
- Sites should provide referrals to Community Living Connections and coordinate with agencies and the Department of Social and Health Services Community Service Offices as appropriate.

Facilities

- Dining facilities must meet Senior Nutrition Program Standards. See Attachment 7 for meal site requirements.
- Food preparation facilities must be equipped and eligible for a permanent food permit issued by Public Health–Seattle & King County or meet Donated Food Distributing Organization (DFDO) requirements and have an annual kitchen inspection.[6]

Enrollment and Donations

- Sites must collect basic enrollment information for participants and update regularly (annually or as new information becomes available) and must attempt to complete missing demographic information.
- Sites must provide the opportunity for participants to make voluntary and confidential donations toward meal costs; donation requests should be culturally considerate and not deter participation in the meal program.

C. *Participant Eligibility Criteria*

- King County resident age 60+; or
- City of Seattle resident under age 60 that is an unpaid caregiver to an eligible participant.

D. *Priority Population and Focus Population*

Priority populations and *focus populations* for this funding are based on HSD's results-based accountability framework and ensures that the department's investments are dedicated to addressing disparities in the population.

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[6] See: WAC 246-215-09400 – WAC 246-215-09435

A. **Priority Populations**

Priority populations for Congregate Meals for Older Adults are identified through the Older Americans Act (OAA). The OAA requires outreach focused on individuals: [7]

- Residing in rural areas
- With greatest economic need (with particular attention to low-income, Black, Indigenous, People of Color (BIPOC) individuals and older individuals residing in rural areas)
- With greatest social need (with particular attention to low-income, BIPOC individuals and older individuals residing in rural areas)
- With severe disabilities
- With limited English proficiency
- With Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals)
- At risk for institutional placement, specifically including survivors of the Holocaust

B. **Focus Populations**

Focus populations are identified as specific racial or ethnic groups within the priority population and with data showing the highest disparities in the investment area. Focus population(s) for Congregate Meals for Older Adults are:

- **BIPOC older adults including:**
  o American Indian/Alaska Native
  o Asian
  o Black/African American/African Descent
  o Hispanic/Latinx
  o Native Hawaiian/Pacific Islander

Applicants may specialize in subgroups within the focus populations. Proposals that clearly describe a plan to address significant needs among other populations will also be considered. For more information regarding the data used to determine the priority and focus populations, please see HSD's Results Based Accountability and Theory of Change document on the HSD Funding Opportunity webpage.

E. *Expected Performance Commitments*

Quantity, quality, and impact measures for Congregate Meals for Older Adults may include, but are not limited to:

A. **Quantity:**
- # of unduplicated ~~clients~~ older adults
- # of meals

B. **Quality:**
- Older adults receive nutritious meals
- Older adults receive meals that are culturally relevant
- % of older adults who engage in activities provided with meals

C. **Impact:**
- % of ~~participants~~ older adults with increased food security as a result of Congregate Meals for Older Adults

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[7] 42 USC 3026: Area plans. Preparation and development by area agency on aging; requirements. Accessed 8/25/2022: https://uscode.house.gov/view.xhtml?req=(title:42%20section:3026%20edition:prelim)

F. Description of Key Staff and Staffing Level

- Congregate Meals for Older Adults site must have adequate number of qualified personnel to assure satisfactory program performance including nutrition program director and other personnel. See Nutrition Program Standards.
- A Registered Dietitian Nutritionist (RDN), or Individual of Comparable Expertise (ICE) must provide monitoring and oversight to ensure that meals meet nutrition guidelines and send monthly reports to HSD. See Nutrition Program Standards for RDN and ICE definition.
- Have access to a Certified Food Protection Manager (CFPM) to comply with WAC 246-215-02107.

HSD-contracted RDN services may be available to Congregate Meals for Older Adults sites. See the Multicultural Registered Dietitian Nutritionist Services RFP for the RDN services scope of work. Congregate Meals for Older Adults sites that receive HSD-contracted RDN services will be selected based on the following criteria:

- Language and cultural barriers to mainstream nutrition services and standards.
- Program/site operated by volunteer organization or association.
- Site does not have direct ownership or oversight of facility.
- Site is located and serves a rural community.

Applicants without these criteria are expected to provide oversight to their partner agencies that do not meet the criteria for HSD-contracted RDN services. HSD will determine which Congregate Meals for Older Adults site receive HSD-contracted RDN service once both processes conclude. Indicate in your proposal if you would like to be considered for HSD-contracted RDN services.

G. RFQ Specific Eligibility, Data, and Contracting Requirements

In addition to the standard HSD requirements found on the HSD Funding Opportunities Webpage, applicant agencies must demonstrate their capacity to adhere to the following requirements:

A. **Data Collection and Evaluation:**
- All data must be entered into GetCare, a state data system used by all AAA's in Washington to track and report services funded by OAA and other sources.
- Applicants must be able to collect and report participant-level data (meals by client) as required under the Older Americans Act Performance System (OAAPS).
- Nutrition Risk Screening must be offered to all participants (Attachment 11). Nutritional Risk status is a OAAPS required data element.

B. **Fiscal Sponsor:**
If you have a fiscal sponsor, provide a signed letter of agreement from the sponsor. The letter will not count toward the 12-page limit. The HSD Fiscal Sponsor requirements can be found here: https://www.seattle.gov/Documents/Departments/HumanServices/Funding/HSD-Fiscal-Sponsor-Requirements_v6_2021.pdf

2023 Congregate Meals for Older Adults
Application

HOW TO COMPLETE THE APPLICATION

Applications will be rated only on the information requested in this RFQ, including any clarifying information requested by HSD. Answer each question completely. Do not include any materials not requested with your application. Applications that do not follow the required format may lose points. *Late or incomplete proposals or proposals that do not meet the minimum eligibility requirements outlined in this funding opportunity will not be accepted or reviewed for funding consideration.*

Required format for written application:

- Typed and formatted to letter-size (8 ½ x 11-inch) paper.
- One-inch margins, single spacing, and size 11-point font.
- Be no longer than 12 pages (requested attachments will not count towards the page limit). Up to two additional pages of narrative is permitted if you plan to subcontract with another agency, with a maximum of 14 pages.

When submitting documents, name them as following:

Document Type	Document Name
Narrative Response	Narrative
Attachment 2: Application Cover Sheet	Cover Sheet
Attachment 3: Proposal Budget	*Proposal Budget
Attachment 4: Proposal Personnel Detail Budget	*Personnel Detail Budget
Attachment 5: Meal Cost Calculator Worksheet	Meal Cost Calculator Worksheet
Attachment 6: Summary of Proposal Deliverables	Summary of Proposal Deliverables
10 consecutive meals	Meal site menus
Memorandum of Agreement from subcontracted agency	Memorandum of Agreement
Letter of agreement from fiscal sponsor	Letter of Agreement
Letter of collaboration from partner	Letter of Collaboration
Start-up timeline for Congregate Meals for Older Adults site(s)	Start-up timeline

*Submit the Proposal Budget and Personnel Detail Budget in excel.

The RFQ Guidelines is a separate document that provides background on HSD's guiding principles and results-based accountability framework, and an overview of the RFQ requirements. HSD's Funding Opportunities webpage provides additional information on proprietary and confidential information; applicant eligibility, data collection and reporting, contracting; appeals, expectations for culturally responsive services, and the process for selecting successful applications.

PROPOSAL NARRATIVE & RATING CRITERIA

Please complete sections A through D with narrative responses that fully answer each question. Do not exceed a total of 12 pages for sections A – D combined. Up to two additional pages of narrative is allowed if you plan to subcontract with another agency, for a maximum of 14 pages. Proposals will be evaluated against the rating criteria listed next to each section of questions. Highly rated proposals will describe how the applicant will meet **all** rating criteria.

A. PROPOSAL DESCRIPTION Points: 55	RATING CRITERIA
1. Describe your Congregate Meals for Older Adults site and outline key components, including: a. <u>Meal site(s):</u> Describe where and when services will take place (locations, times, days of week, etc.). You may reference Attachment 6. Explain who owns and operates the site(s), and if not the applicant, briefly describe the agreed upon terms of use. b. <u>Meal preparation</u>: Explain how you will prepare meals including: where the meals will be prepared (in an approved kitchen), who will prepare them, and how/where food will be purchased. Describe how you will ensure and monitor safety and hygiene regarding food preparation and service. c. <u>High quality nutritious meals</u>: Describe how menus will be developed, ensuring that they meet dietary standards; are culturally relevant to the community; and include high quality ingredients including fresh local produce. Attach menus for 10 consecutive meals for your proposal. If you have multiple sites with different menus, include and clearly label, 10 consecutive menus from each meal site. Menus will not count toward maximum page limit. d. <u>Setting</u>: Describe the social, physical, and educational activities you will provide to enhance participants' health and well-being including nutrition education. How you're your scheduling accommodate the needs of your participants? How will you assist participants to access other needed services and supports? Indicate if these services are provided directly by you or through a partner. If the service is through a partner, describe the terms of the partnership agreement. e. <u>Facilities</u>: Describe how your meal site meets requirements listed in Attachment 7. f. <u>Enrollment and Donations</u>: Describe your intake and enrollment process. Describe how you record demographics and track service provision. Describe your process for participants to make voluntary and confidential donations. g. <u>Transportation</u>: Complete Attachment 10 if you would like your application to be considered for funding transportation services for your Congregate Meals for Older Adults site(s). Complete a separate document for each site you want	• Applicant clearly describes the meal site. • Applicant describes how they meet requirements as outlined in Section B, Model, including: meal preparation, high quality nutritious meals, setting, facilities, enrollment and donations. Menus are appropriate for intended community. • Applicant completed Summary of Proposal Deliverables (Attachment 6). • Applicant clearly describes communities with whom they will work within the priority and focus populations. • Applicant clearly describes their plan for marketing and outreach to older adults including the priority and focus populations. • Applicant clearly describes how they will encourage cross cultural participation. • Applicant has a plan to seek and use input from participants. • Applicant clearly describes how they will ensure the meal site is culturally inclusive so all eligible participants feel welcomed and included.

considered for transportation. This will not be scored and will not count towards the maximum page limit.

2. Complete the Summary of Proposed Deliverables, Attachment 6 of this document. This worksheet will not count towards the 12-page maximum narrative limit.

3. Describe the community(ies) with whom you will work, including the focus population(s) and priority population(s). If you have multiple sites, please describe the focus and priority populations for each site.
    a. Describe your plan for marketing and outreach to older adults including the priority and focus populations.

    b. How will you encourage cross cultural participation, bringing together people from different cultures, languages, and backgrounds in one setting?

    c. How will you seek and use input from participants in delivering Congregate Meals for Older Adults and other activities?

4. How will you ensure your site(s) is(are) culturally inclusive so all eligible participants feel welcomed and included?

B. CAPACITY, EXPERIENCE AND COMMITMENT TO COMMUNITY Points: 20	RATING CRITERIA
1. Describe your experience with Congregate Meals for Older Adults or working with the community(ies) identified in your proposal. If you have no experience with Congregate Meals for Older Adults, describe your experience working with the community(ies) identified in your proposal, a plan for rapid capacity development, and attach a start-up timeline for your Congregate Meals for Older Adults site. The timeline will not be counted toward the maximum page limit. Sites need to be fully operational by March 1, 2024. You must have at least two years of successful experience in providing food or nutrition related work or working with the community identified in your proposal. 2. Provide a list of and a brief job description for all key personnel who will have a significant role with the Congregate Meals for Older Adults program including staff listed in Section F, Description of Key Staff and Staffing Level. a. Complete the Proposal Personnel Detail Budget (Attachment 4). This worksheet will not count towards the 12-page maximum narrative limit.	• Applicant demonstrates at least two years' experience with Congregate Meals for Older Adults. Or, for applicants offering Congregate Meals for Older Adults for the first time, the applicant presents a clear and realistic description and timeline for launching a new Congregate Meals for Older Adults site. • Applicant has adequate staff to support meal sites including staff listed in Section F, Description of Key Staff and Staffing Level. • Applicant completed the Proposal Personnel Detail Budget (Attachment 4).

b. Describe your plan for staff recruitment, training, supervision, and retention.

3. Describe your leadership and/or board and their connections and commitment to the community(ies) identified in your proposal.

4. Funded applicants are required to use GetCare, a state data system used by all AAA's in Washington to track and report services. What is your experience with GetCare? If you do not have experience with GetCare, what is your experience learning new data systems? Describe your data management experience: collecting, storing, and analyzing participant information and agency work. How do you track participant information and produce reports?

- Applicant clearly describes plan for staff recruitment, training, supervision, and retention.

- Applicant clearly describes their leadership and/or board and their connections and commitment to the community(ies) identified in their proposal.

- Applicant clearly describes experience with GetCare or learning new data systems; and data management experience for collecting, storing, analyzing, tracking, and reporting purposes.

C. COLLABORATIONS AND SUBCONTRACTING Points: 15	RATING CRITERIA

Part A of this section refers to general proposal collaborations that support the applicant's ability to meet intended outcomes. **Part B** refers to subcontracting agreements that are jointly designed to achieve results and racial equity. Complete both sections _if you plan to subcontract with another agency._

Part A

1. Describe how you will collaborate with other agencies.

   a. What are the benefits of this collaboration for participants? Please identify any areas that will consolidate work across agencies. If the proposal includes collaborations and/or partnerships, name them in this arrangement.

2. Explain the roles and responsibilities of the various partners. Provide signed letters of intent from any partner providing key proposal elements. Letters of intent will not be counted toward the maximum page limit.

Part B

Complete this section if you will enter a subcontracting relationship with another agency.

1. Describe the proposed agreement including the agencies involved, the roles of each partner agency, and how the agreement was jointly designed. Include expectations from

Part A:

- Applicant describes collaborations that benefit participants and consolidate work across agencies.
- Applicant explains the roles and responsibilities of various partners and provided letters of intent from partners providing key proposal elements.

Part B:

- Applicant clearly describes subcontracting relationship with roles of each partner and how the agreement is jointly designed. Description includes elements from Attachment 9. Description shows how partnership will support the community(ies) identified in proposal and proposed deliverables from Attachment 6.
- Applicant describes how they will work with the subcontracting agency and how their work will

Attachment 9. Describe how this partnership will support the community(ies) identified in your proposal and proposed deliverables from Attachment 6.

2. Describe how you and the subcontracting agency will work together. How will this support leverage the capacity of each agency?

3. How will you and the partner agency ensure equitable distribution of financial resources and ensure partner agencies receive adequate funding? Reference Meal Cost Worksheet in your description.

4. Provide signed Memorandum of Agreement(s) (MOA) describing responsibilities of both parties. MOA's will not count toward maximum page limit.

leverage the capacity of each agency.
- Applicant and partner agency will equitably distribute financial resources.
- Applicant provided signed MOA describing responsibilities of both parties.

D. BUDGET AND LEVERAGING Points: 10	RATING CRITERIA
1. Describe your ability to address changes in funding, staffing, community needs, and supporting agency leadership.	• Applicant demonstrates ability to address change and support organizational development.
2. Describe your financial management system. How do you establish and maintain generally accepted accounting principles to ensure adequate administrative and accounting procedures and internal controls necessary to safeguard all funds that may be awarded under the terms of this RFQ? Entities without such capabilities may wish to have an established agency act as fiscal agent.	• Applicant describes their financial management system and how they establish and maintain generally accepted accounting principles to ensure adequate administrative and accounting procedures and controls necessary to safeguard all funds that may be awarded under the terms of this RFQ.
3. Complete the Proposal Budget (Attachment 3). The costs reflected in this budget should be for the proposal only, not your total agency budget.	• Applicant completed the Proposal Budget (Attachment 3).
4. Complete the Meal Cost Calculator worksheet (Attachment 5) and describe other resources that support the Congregate Meals for Older Adults site(s). Complete a separate Meal Cost Calculator worksheet if you intend to have more than one site. This funding process requires an applicant match of at least 25%. If you intend to have multiple meal sites, will the match come from the applicant, meal site, or both? Please explain. Worksheets will not count toward the 12-page narrative limit.	• Applicant completed the Meal Cost Calculator (Attachment 5) for the Congregate Meals for Older Adults site(s). Applicants clearly indicates at least a 25% funding match and its source(s).
Total: 100	

FUNDING RECOMMENDATION

The funding recommendation will be a two-step process. All applicants with a minimum score of 75 points for their written proposal will be considered qualified to provide congregate meals for older adults and will be considered for funding. Being qualified does not guarantee that you will receive funding. The rating panel will then base allocation recommendations on the following by criteria by meal site:

1) Participant population
   o Focus population, specify BIPOC communities.
   o OAA priority population.
   o Intersection of attributes defined in the focus and priority populations.
      o For an example, A Black/African American/African Descent population may intersect with income and language; Black/African American/African Descent (focus population), low income (priority population), communicates in Tigrinya (priority population).
2) Geographic region
   o HSD will contract with providers to ensure Congregate Meals for Older Adults sites are located throughout King County.
   o At least 2 meal sites will operate Monday-Friday in each major region of King County (North, Seattle, East and South).
3) Capacity to leverage other resources
   o Volunteers
   o Monetary donations
   o Food donations
   o In-kind support
   o Other

COMPLETED APPLICATION REQUIREMENTS

A. *Application Submittal*

The proposal **must** include:

- ☐ A completed and signed Application Cover Sheet (Attachment 2).
- ☐ A completed Narrative Response that is a maximum of twelve (12) pages, not counting the budget and other documents. An additional page of narrative is permitted for each additional meal site proposed, up to a maximum of 14 pages.
- ☐ A completed Proposal Budget (Attachment 3), in Excel.
- ☐ A completed Proposal Personnel Detail Budget (Attachment 4), in Excel.
- ☐ A completed Meal Cost worksheet for each Congregate Meals for Older Adults site (Attachment 5), in Excel.
- ☐ Menus for 10 consecutive meals for each Congregate Meals for Older Adults site.
- ☐ A completed Summary of Proposal Deliverables (Attachment 6)
- ☐ If Congregate Meals for Older Adults is a new body of work for you, attach a start-up timeline.
- ☐ Completed applications are due by **April 12, 2023, 12:00 P.M.** (noon) Pacific Daylight Time.
- ☐ Proposals must be submitted through the HSD Online Submission System or via email. No faxed or mailed proposals will be accepted. Allow ample time for uploading and confirmation receipt.

Subcontracting:

- ☐ If you are proposing a subcontract with another agency, attach a signed Memorandum of Agreement (MOA) from that agency's director or other authorized representative.

Partnerships:

- ☐ If you are proposing a substantial partnership with another agency or individual, attached a signed letter of collaboration.

Fiscal Sponsorship:

- ☐ If you have a fiscal sponsor, attach a signed letter of agreement from that agency's director or other authorized representative.

Nutrition Transportation:

- ☐ If you would like to be considered for nutrition transportation services, complete a Nutrition Transportation Services document (attachment 10) for each site.

Submission:

1. **Via HSD Online Submission System** at http://web6.seattle.gov/hsd/rfi/index.aspx) HSD advises uploading proposal documents several hours prior to the deadline in case you encounter an issue with your Internet connectivity. HSD is not responsible for ensuring that applications are received by the deadline. If you encounter issues with the online submission system, please email Sola Plumacher at sola.plumacher@seattle.gov.

2. **Via Email at** HSD_RFP_RFQ_Email_Submissions@seattle.gov. Email attachments are limited to 30 MB. **The subject heading must be titled: 2023 Congregate Meals RFQ.** Any risks associated with submitting a proposal by email are borne by the applicant. Applicants will receive an email acknowledging receipt of their application.

   Only one submission method is necessary – choose either online or email, not both.

   If for any reason a proposal is submitted twice, the last submission received will be the one accepted for review by the rating panel.

HSD Proprietary and Confidential Information

The State of Washington's Public Records Act (Release/Disclosure of Public Records) Under Washington State Law (reference RCW Chapter 42.56, the Public Records Act) states that all materials received or created by the City of Seattle are considered public records. These records include but are not limited to: RFP/Q narrative responses, budget worksheets, board rosters, other RFP/Q materials, including written/or electronic correspondence. In addition, HSD RFP/Q application materials are released to rating committee members and all rating committee members must sign and adhere to the Confidentiality and Conflict of Interest Statement. **Personal identifiable information entered on these materials is subject to the Washington Public Records Act and may be subject to disclosure to a third-party requestor.**

If funding is awarded, HSD will request copies of the following documents if they are not already on file. Applicants will have four (4) business days from the date of written request to provide the requested documents via the HSD Online Submission System (http://web6.seattle.gov/hsd/rfi/index.aspx) or email (HSD_RFP_RFQ_Email_Submissions@seattle.gov).

1. The current fiscal year's financial statements, consisting of the Balance Sheet, Income Statement and Statement of Cash Flows, certified by the applicant's Chief Finance Officer or Board Treasurer.
2. The most recent audit report.
3. The most recent fiscal year-end Form 990 report.
4. A current certificate of commercial liability insurance (if awarded, the applicant's insurance must conform to General Terms and Conditions Agreement requirements at the start of the contract).
5. Current verification of nonprofit status or evidence of incorporation or status as a legal entity. You must have a federal tax identification number or employer identification number.
6. Proof of federally approved indirect rate, if applicable.

I.   List of Attachments & Related Materials

Attachment 1:   Application Checklist
Attachment 2:   Application Cover Sheet
Attachment 3:   Proposal Budget
Attachment 4:   Proposal Personnel Detail Budget
Attachment 5:   Meal Cost Worksheet
Attachment 6:   Summary of Proposal Deliverables
Attachment 7:   Meal Site Checklist
Attachment 8:   Cities and Regions of King County
Attachment 9:   Partnership Expectations
Attachment 10:   Nutrition Transportation Services
Attachment 11:   Nutrition Risk Screening

2023 Congregate Meals for Older Adults
Request for Qualifications
Application Checklist

This checklist is to help you ensure your application is complete prior to submission. Please do not submit this form with your application.

HAVE YOU….

☐ **Read and understood the following additional documents found on the** Funding Opportunities Webpage**?**

- ☐ HSD Agency Minimum Eligibility Requirements
- ☐ HSD Client Data and Program Reporting Requirements
- ☐ HSD Contracting Requirements
- ☐ HSD Fiscal Sponsor Requirements
- ☐ HSD Funding Opportunity Selection Process
- ☐ HSD Appeal Process
- ☐ HSD Commitment to Funding Culturally Responsive Services
- ☐ HSD Guiding Principles
- ☐ HSD Master Agency Services Agreement Sample
- ☐ HSD 2023 Congregate Nutrition RFQ Theory of Change

☐ **Completed and signed the Application Cover Sheet (Attachment 2)?***
  - ☐ If your application names specific partner agencies, representatives from these agencies must also sign the application cover sheet.
  - ☐ If your application names a fiscal sponsor, authorized representatives from this agency must have read and understood the HSD Fiscal Sponsor Requirements document and sign the application cover sheet.

☐ **Completed each section of the Application Questions?**
  - Must not exceed 12 pages (8 ½ x 11), single spaced, size 11 font, with 1-inch margins. An additional page of narrative is permitted for each additional meal site proposed, up to a maximum of 14 pages.
  - Page count does not include the required forms and supporting documents requested.

☐ **Completed the full Proposal Budget (Attachment 3)?***

☐ **Completed the full Proposal Personnel Detail Budget (Attachment 4)?***

☐ **Completed Meal Cost Worksheet for each Congregate Meals for Older Adults site (Attachment 5)***

☐ **Menus for 10 consecutive meals for each Congregate Meals for Older Adults site***

☐ **Completed Summary of Proposal Deliverables (Attachment 6)***

☐ **If Congregate Meals for Older Adults is new work for you, have you attached a start-up timeline with site start date of March 1, 2024?***

☐ **If you are proposing a subcontract with another agency, attach a signed Memorandum of Agreement (MOA) from that agency's director or other authorized representative.***

☐ **If you are proposing a significant collaboration with another agency, have you attached a signed letter of intent from that agency's director or other authorized representative?***

☐ **If you would like to be considered for nutrition transportation services, complete a Nutrition Transportation Services document (attachment 10) for each site.***

***These documents do not count against the 12-page limit for the proposal narrative section.*
All applications are due to HSD by 12 P.M. (noon) April 12, 2023. Application packets received after this deadline will not be considered. See Completed Application Requirements section for submission instructions.

City of Seattle
Human Services Department

2023 Congregate Meals for Older Adults
Request for Qualifications
Application Cover Sheet

1. Applicant:	
2. Executive Director:	
3. Executive Director Email and Phone #	Email Phone #

The Executive Director will be notified by HSD regarding the final funding decision, and if the application does not meet minimum requirements.

HSD will communicate with the Applicant Primary Contact for all other matters including but not limited to requesting financial documents (including documents from the fiscal sponsor if there is one), scheduling interviews and clarifying details of the application as needed.

4. Applicant Primary Contact:

   Name: Title:

   Address:

   Email:

   Phone #:

5. Organization Type

   ☐ Non-Profit   ☐ For Profit   ☐ Public Agency   ☐ Other (Specify):

6. Federal Tax ID or EIN:		7. DUNS Number:	

8. WA Business License Number:

9. Proposal Name:

10. Focus Population(s) for Congregate Meals for Older Adults site(s) (check all that apply; those checked should match who you describe serving in your application):

    BIPOC older adults
    ☐ American Indian/Alaska Native/Indigenous
    ☐ Asian
    ☐ Black/African American/African Descent
    ☐ Hispanic/Latinx/Indigenous
    ☐ Native Hawaiian/Pacific Islander

11. Funding Amount Requested:	
12. # of unduplicated participants and meals each year:	Unduplicated Participants # of Meals

13. Where is your meal site located? If you have multiple meal sites, indicate the # of meal sites in each region. See attachment 8.	North _____ Seattle _____ East Urban _____	East Rural _____ South Urban _____ South Rural _____

14. In which City Council District is your Congregate Meals for Older Adults site(s) located? (N/A if not in Seattle) Council district search page	

15. Partner Agency (if applicable):

Contact Name: Title:

Address:

Email: Phone Number:

Description of partner agency proposed activities:

Signature of partner agency representative: _____ Date: _____

16. Partner Agency (if applicable):

Contact Name: Title:

Address:

Email: Phone Number:

Description of partner agency proposed activities:

Signature of partner agency representative: _____ Date: _____

Add additional sections if more than two partner agencies are applying.

16. Fiscal Sponsor (if applicable):

Contact Name: Title:

Address:

Email: Phone Number:

I have read and understood the Fiscal Sponsor Requirements document and will comply with all obligations if the applicant is awarded funding.

Signature of fiscal sponsor representative: _____ Date: _____

17. Provide a high-level summary (about 200 words or less) of your proposal here:

Authorized physical signature of applicant/lead organization

To the best of my knowledge and belief, all information in this application is true and correct. The document has been duly authorized by the governing body of the applicant who will comply with all contractual obligations if the applicant is awarded funding.

Name and Title of Authorized Representative:

Signature of Authorized Representative: Date:

2023 Congregate Meals for Older Adults RFQ
Proposal Budget
January 1, 2024 – December 31, 2024

Submit this form in excel. Excel versions of the budget templates can be found on the application page of the HSD Funding Opportunity Webpage.

Applicant:	
Proposal Name:	

Item	Amount by Fund Source				Total Program
	Requested HSD Funding	**Other[1]**	**Other[1]**	**Other[1]**	**Total Program**
PERSONNEL SERVICES					
Salaries (Full- & Part-Time)	$	$	$	$	$
Fringe Benefits	$	$	$	$	$
SUBTOTAL - PERSONNEL SERVICES	$	$	$	$	$
SUPPLIES, OTHER SERVICES & CHARGES Office Supplies (includes printing, postage, and general supplies. Does not include computer or technology expenses)	$	$	$	$	$
Operating Supplies[2] (includes computers, other technology expenses (not internet) and other expenses related to providing services)	$	$	$	$	$
Rent	$	$	$	$	$
Contractual Employment/Other Professional Services[3]	$	$	$	$	$
Travel (includes mileage, parking)	$	$	$	$	$
Insurance	$	$	$	$	$
Utilities (includes electric, internet, phone)	$	$	$	$	$
Other Miscellaneous Expenses[4]	$	$	$	$	$
Indirect Facilities and Administration (F &A) Costs[5]	$	$	$	$	$
SUBTOTAL - SUPPLIES, OTHER SERVICES & CHARGES	$	$	$	$	$
TOTAL EXPENDITURES	$	$	$	$	$

Identify specific funding sources included under the"Other" column(s) above:	
	$
	$
	$
	$
Total	**$**

Operating Expenses- Itemize below (Do not include Office Supplies):	
	$
	$
	$
	$
Total	**$**

Contractual Employment/Other Professional Services	
	$
	$
	$
	$
Total	**$**

Other Miscellaneous Expenses- Itemize below:	
	$
	$
	$
	$
Total	**$**

Indirect Facilities and Administration (F & A) Costs*- Itemize below:	
	$
	$
	$
	$
Total	**$**

*Indirect Facilities and Administration (F&A) Costs: Those costs referred to as overhead costs, or administrative costs. These are actual costs incurred to conduct the normal business activities of an agency and are not readily identified with or directly charged to a program, making it difficult to precisely assess each user's share. Those indirect F&A expenses include:

- General Administration
- Departmental Administration
- Operation and Maintenance
- Building and Equipment Depreciation
- Non-Capitalized Interest

2023 Congregate Meals for Older Adults RFQ
Proposal Personnel Detail Budget
January 1, 2024 – December 31, 2024

Excel versions of the budget templates can be found on the application page of the HSD Funding Opportunity Webpage

Applicant:	
Proposal Name:	

Applicant's Full-Time Equivalent (FTE) =		hours/week			Amount by Fund Source(s)				
Position Title	**Staff Name**	**FTE**	**# of Hours Employed**	**Hourly Rate**	**Requested HSD Funding**	**Other Fund Source**	**Other Fund Source**	**Other Fund Source**	**Total Program**
Subtotal – Salaries & Wages									
Personnel Benefits:									
FICA									
Pensions/Retirement									
Industrial Insurance									
Health/Dental									
Unemployment Compensation									
Other Employee Benefits									
Subtotal – Personnel Benefits:									
TOTAL PERSONNEL COSTS (SALARIES & BENEFITS):									

	2023 Congregate Meals for Older Adults RFQ	
	Meal Cost Worksheet	

Provide a brief description of costs associated with each category and the estimated amount for the year. Total cost (sum of base and unit costs) should align with Total Proposal Cost/Total Expenditures on Proposed Line Item Budget, Attachment 3. Complete a separate worksheet if you have multiple meal sites.

Category	Description	Amount
Base Costs		
Labor, paid staff		$ -
Fringe Benefits		$ -
Office Supplies (Includes printing, postage and general supplies. Does not included computer or technology expenses.)		$ -
Rent		$ -
Contractual Employment/Other Professional Services		$ -
Travel (includes mileage, parking)		$ -
Insurance		$ -
Utilities (Includes electric, internet, phone)		$ -
*Other Miscellaneous Expenses		$ -
Indirect Facilities and Administrative (F&A) Costs		$ -
Sum of Base Costs		$ -
Monthly Base Costs		$ -
Unit Costs		
Operating supplies *includes food costs		$ -
Sum of Unit Costs		$ -
Total number of Meals proposed		$ -
Cost per Meal (sum of unit costs divided by number of meals)		#DIV/0!
Total Costs (Sum of Base & Unit Costs)		$ -
Total Cost per Meal (sum of total costs divided by number of meals)		#DIV/0!
Match (Volunteer Hours)		$ -
Match ("Other")		$ -
Total Match Contribution		$ -

*Food is included in operating supplies (Item #2200) on the line item budget (Attachment 3).

In the text box below, describe other resources that support the meal program such as staff paid for by other funds, volunteers, monetary donations, food and supply donations, etc. Describe your meal sites' ability to leverage other funding and resources to support the meal program.

2023 Congregate Meals for Older Adults RFQ
Summary of Proposal Deliverables*

Site Name	Address	Days of week/Hours	Average Daily Attendance	# of meals/year	# of older adults/year	Priority and Focus Population *(Include any populations specified on pages 4-5 of RFQ; and added detail around language or specific ethnicities served at specific site only)*	Region	**Unit Rate/Monthly Base
Example: ADS Congregate Meal Site	*123 5th Avenue Seattle, WA 98103*	*M, W, F 11:00 a.m. to 1:00 p.m.*	*40*	*6,240*	*125*	*Low Income* *Asian: Filipino, Speaks Tagalog*	*Seattle*	*$7.00/Meal $3,000/Month*
Example: ADS Congregate Meal Site 2	*987 6th Street*	*M-Th 12:00 p.m. to 2:00 p.m.*	*20*	*7,000*	*50*	*Rural, socially isolated* *Black/African American/African Descent* *Speaks Tigrinya*	*East Rural*	*$3.50/Meal $5,000/Month*

*Site data should align with application question responses.
**This should align with the Meal Cost worksheet(s).

1. Total Unduplicated Number of Participants per year (12 months):
2. Total Number of Eligible Meals per year (12 months):

2023 Congregate Meals for Older Adults RFQ
Meal Site Checklist

Purpose: Determine if facility is appropriate for the work described in the proposal.

Applicant: _____ Name of Site: _____

Site Address: _____

		Facility Overview	

Y	N	1.	Facility Access
			• Is the entrance and site easy to manage for seniors who may use assistance w/ walking such as a cane, walker, etc.?
			  • Reasonable access for van like a senior shuttle or Access van), close to public transportation not too far from car/van entrance? Are stairs required at the entrance or to participate?
			  • Are restrooms accessible?

Y	N	2.	Size and configuration: The space appears to be of sufficient size and configuration to complete the work described in the proposal. (Building Permit states occupancy)
Y	N	3.	Safety: The facility/site space has been inspected by the Fire Department for safety. Applicant has records to show successful inspection in the past year. If not current, it will be a requirement for funding. Applicant can point out emergency exits and fire extinguishers. Space seems safe for an elder and their belongings.
Y	N	4.	Comfortable & Welcoming: well-lit space, clean, tables and chairs sturdy for elders. Clear, inviting, and culturally appropriate exterior and interior signage.
		Kitchen Permit or Donated Food Distributing Organization (DFDO) status	
Y	N	5.	Up to date kitchen permit posted and most recent inspection available. Kitchen is clean
Y	N	6.	If Donated Food Distributing Organization (DFDO): current or will this be new? Three compartment sink or two sink basins and a dishwasher with sanitizing cycle of 155° Fahrenheit or hotter.
Y	N	7.	Sanitary Facilities: Provide a permanent separation between dining area and food preparation area when food is prepared and served in the same facility. Do they have the space to store food appropriate to the work they propose? Clean cupboards or storage for food and materials that keeps food enclosed, off the ground and away from toxins such as cleaning agents. Refrigerators and freezers have visible temperature controls (inside or out) and are clean. Place to wash hands with soap with paper towels.
Comments:			

Cities and Regions of King County

Region	Cities
North	- Bothell - Kenmore - Lake Forest Park - Shoreline - Woodinville
Seattle	Seattle neighborhoods
East Urban	- Bellevue - Issaquah - Kirkland - Medina - Mercer Island - Newcastle - Beaux Arts - Redmond - Sammamish
East Rural	- Baring - Carnation - Duvall - Fall City - Gold Bar - North Bend - Preston - Skykomish - Snoqualmie
South Urban	- Auburn - Burien - Covington - Des Moines - Federal Way - Kent - Normandy Park - Redondo - Renton - Sea Tac - Tukwila - Vashon
South Rural	- Black Diamond - Enumclaw - Hobart - Maple Valley - Ravensdale

Complete list of Sub Region by Zip Code and City Name can be found here:
http://www.agingkingcounty.org/about-us/contracted-providers/
Under "Sub-Region by Zip Code"

Partnership Expectations

Applicant responsibility to include, but not limited to:

- Compliance with contract and RFQ standards.
- Technical assistance including data collection, generating reports, establishing a system to meet data and reporting requirements.
- Record keeping and invoicing.

Memorandum of agreement signed and dated by each party. To include, but not limited to:

- Site outreach.
- Volunteer support including stipends or recruiting volunteers.
- Staffing - responsibilities and obligations of each party.
- Costs or payments, if any, to be paid or incurred by either party.

Nutrition Transportation Services

Nutrition Transportation program helps older adults access meal sites across King County through shuttle services to meet their dietary needs, participate in other activities, and improve the quality of their lives. The sites receiving this service must be in King County and will be identified and/or approved by the ADS Nutrition Program Specialist. Sites will be selected based on service availability and ability to meet agency's needs.

Complete the information below for each site you would like considered for this service. Address the following attributes as well as your participants need for congregate meal service. Limit your response to no more than this page (one-side).

Applicant Agency:		Meal Program:
Site Location (Name and Address):		Hours and Days of the week:
Unduplicated number of participants (total):	Expected number of participants utilizing transportation service (total):	Expected number of participants utilizing transportation service per day, on average:

Please explain how your site is serving the focus population:

Please explain how your site is serving a high percentage of clients facing mobility/transportation challenges:

Please explain if your site is in an area with limited transportation options (King County Metro, neighborhood shuttles) and/or if your site or agency's own transportation service:

Nutrition Risk Screening

Senior Nutrition Program Standards:

"Nutrition screening is a first step in identifying individuals at nutritional risk or with malnutrition. The OAA requires nutrition programs to provide nutrition risk screening. At a minimum, nutrition program service providers must administer the DETERMINE your Nutritional Risk checklist published by the Nutrition Screening Initiative (NSI) to participants and determine their nutrition risk scores."

Determine Your Nutritional Health

The warning signs of poor nutritional health are often overlooked. Use this checklist to find out if you or someone you know is at nutritional risk. Read the statements below. Circle the number in the yes column for those that apply to you or someone you know. For each yes answer, score the number in the box. Total your nutritional score.

	YES
I have an illness or condition that made me change the kind and /or amount of food I eat.	2
I eat fewer than two meals per day.	3
I eat few fruits or vegetables, or milk products.	2
I have three or more drinks of beer, liquor or wine almost every day.	2
I have tooth or mouth problems that make it hard for me to eat.	2
I don't always have enough money to buy the food I need.	4
I eat alone most of the time.	1
I take three or more different prescribed or over-the-counter drugs a day.	1
Without wanting to, I have lost or gained 10 pounds in the last six months.	2
I am not always physically able to shop, cook and/or feed myself.	2

TOTAL———

Total your nutritional score. If it's--

0-2	Good! Recheck your nutritional score in six months.
3-5	You are at moderate nutritional risk. See what can be done to improve your eating habits and lifestyle. Your office on aging, senior nutrition program, senior citizens center or health department can help. Recheck your nutritional score in three months.
6 or more	You are at high nutritional risk. Bring this checklist the next time you see your doctor, dietitian or other qualified health or social service professional. Talk with them about any problems you may have. Ask for help to improve your nutritional health.