



**REQUEST FOR PROPOSALS FOR  
NEW STRATEGICALLY ALIGNED PROGRAMS:**

- EARLY CHILDHOOD DEVELOPMENT
- PREVENTION OF CHILD ABUSE AND NEGLECT
- STRENGTHENING COMMUNITY

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# **PRE-PROPOSAL CONFERENCE**

# AGENDA

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- Welcome and Introductions
- Scope of Work
- RFP Timeline
- Proposal Submission, Proposal Format, and Forms
- Evaluation, and Award and Agreement
- TSL/Methodology Completion Instruction
- Questions and Answers
- Collaborations and Partnerships

# OBJECTIVE

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- To address unmet needs of Pinellas County children and families, increase efficiencies, and promote inclusion.
- Provide new programming that is aligned with JWB's FY21-25 Strategic Plan, and specifically, that is aligned with one of JWB's FY21-25 Strategic Goals:
  - Early Childhood Development (ECD)
  - Prevention of Child Abuse and Neglect (PCAN)
  - Strengthening Community

# OBJECTIVE

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## Address Unmet Need

- There are **gaps in services** for children and unmet needs of families, which may have been magnified since the pandemic.
- JWB's **current investments do not address all approaches or interventions** that could be utilized to achieve its Strategic Goals.
- This is an opportunity for JWB to **consider innovative ideas, close the gaps and maximize results for children.**

# OBJECTIVE

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## Increase Efficiencies

- Brief LOI process narrowed down the number of respondents invited to submit proposals for their submitted program.
- Procuring three goals at once allows JWB to award multiple new programs with one procurement.

# OBJECTIVE

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## Promote Inclusion

- JWB is providing this opportunity to hear directly from the “voice” of the community on the best ways to intervene to serve children and families.
- JWB seeks to invest in underserved communities beyond JWB’s current portfolio, by bringing to the table innovative ideas and resources from those embedded and invested in their communities.

# FUNDING PRINCIPLES

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- **We value every child.** JWB's investments are designed to give children equitable opportunity to fulfill their potential and achieve meaningful and purposeful lives.
- **We embrace collaboration.** JWB considers itself a partner in its funding relationships, and encourages and embraces collaborations and partnerships among those it funds.
- **We are accountable and results-driven.** JWB fully expects accountability and measurable results from its funded programs and services.

# FUNDING PRINCIPLES

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- **We pursue innovation.** JWB's Board policy is to fund programs that are evidence-based and evidence-informed, which includes emerging or promising practices.
- **We value equity, diversity, and inclusion.** JWB seeks to advance and sustain diversity, equity, and inclusion in its investments and encourages the agencies and programs it funds to be culturally competent.

**Also see *5 Essential Elements* of an agency's cultural competence in the solicitation.**



# ELIGIBLE REQUESTS

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- Proposers may submit Proposals only for their selected new programs from Phase 1 – LOIs.
- Requests must not closely resemble a planned competitive procurement or are already available via another source.

# ELIGIBLE REQUESTS

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Each program must:

- be performed within Pinellas County for the benefit of children below the age of 18 and/or their families;
- align with JWB's FY21-25 Strategic Goals of Early Childhood Development, Prevention of Child Abuse and Neglect, or Strengthening Community;
- be for a new program that the Entity does not already receive funding for from JWB;
- be a minimum of \$100,000;
- NOT be for something that is under the exclusive jurisdiction of the public school system.

# MINIMUM QUALIFICATIONS

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Each Proposer must:

- Be in business for five years or more;
- have an annual operating budget over \$500,000 or will operate under an Administrative Services Organization (ASO) or collaborative, unless it demonstrates to JWB's satisfaction that it has the resources to properly administer the JWB funding in accordance with all requirements;

# MINIMUM QUALIFICATIONS

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Each Proposer must:

- have three years of audited financial statement summaries and the notes to the financial statements, or an individual tax return and personal financial statement of net worth for the most recent year if Proposer is an individual proprietor, or privately-held companies wishing to maintain confidential financial information must have a Dunn & Bradstreet Report (D&B);
- have last three audited financial statements that are free of any material weaknesses or significant deficiencies. If there are, a letter must be attached.

# PERFORMANCE MEASURES

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- JWB funds programs that are evidence-based and evidence-informed, which includes emerging or promising practices.
- Proposers must propose outcome measures, aligned with one or more of JWB's Strategic Goals, and specific to the type of program being implemented.
- Evidence-based interventions usually include validated measures that are required or highly recommended.

# PERFORMANCE MEASURES

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- **If awarded:**
  - the resulting agreements will include the negotiated performance measurements that determine if a program is meeting its intended goals.
  - JWB reserves the right to require additional process or outcome measures to make standardized comparisons of results across program types and models to assist in making decisions of those most worthy of ongoing investments.

# PERFORMANCE MEASURES

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The following are **examples of tools** that are **commonly used by JWB** within each of the **following stated strategic result area**.

- **Early Childhood Development and School Readiness** commonly measured using:
  - Teaching Strategies GOLD® (TSG),
  - Ages and Stages Questionnaire (ASQ) and
  - Ages and Stages Questionnaire (ASQ-SE) and/or
  - Florida Kindergarten Readiness Screener (FLKRS) measure such as Star Early Literacy assessment.

# PERFORMANCE MEASURES

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- **Prevention of Abuse and Neglect commonly measured using:**
  - the Arizona Self-Sufficiency Matrix,
  - the Children's Goal Attainment Scale (CGAS),
  - the Goal Attainment Scale (GAS),
  - the Adult Adolescent Parenting Inventory (AAPI), and/or
  - on child welfare related measure such as Florida Safe Families Network Data (FSFN).

**These measures, for each strategic area, may be applied based on proposed services, in addition to other negotiated measures, as applicable.**



# TARGET SERVICE LEVELS

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- Proposers must provide a **projection of the number of participants** they are proposing to serve during each fiscal year in Form 2-TSL/Methodology.
- This number should be as close to a **unique number of participants served** as possible and would include both adult and child participants, as applicable, as so defined by JWB's Data Quality Manual and the identified program structure.

# DATA COLLECTION

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- **Financial Data Submission.** Funding recipients must utilize JWB's Grants Management System, a web-based reporting system, to submit their program budgets and submit reimbursement requests.
  - The policies, procedures, and guidelines for these submissions are available at <https://www.jwbpinellas.org/wp-content/uploads/2022/07/JWB-Financial-Policies-and-Procedures-for-Funded-Programs-effective-10.01.22.pdf>

# DATA COLLECTION

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- Program and Participant Data Submission: JWB program and participant data must **either** be entered into JWB's designated database or directly uploaded to JWB.
  - Both methods require adherence to JWB's Data Quality Manual available at <https://www.jwbpinellas.org/wp-content/uploads/2021/10/Data-Quality-Manual-Effective-11-14-21.pdf>
  - The Procedures for Implementing Direct Data Uploads is available at <https://www.jwbpinellas.org/wp-content/uploads/2021/12/Procedures-for-Implementing-Direct-Data-Uploads.pdf>

# DATA COLLECTION

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- Data may be directly uploaded to JWB, via direct data uploads, if the agency:
  - has the data stored in their own systems and
  - they collect similar categories of information (demographics, episodes, services, measures) at the participant or group level and
  - have the ability to export the data into a specified format.

# DATA QUALITY

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- If the resulting agreement requires the collection of data, (including, but not limited to participant information, services, surveys, assessments), JWB will require a written Data Management Plan and staff assigned to review data quality on a regular basis as detailed by this plan.
- The Data Management Plan outlines all procedures related to data collection, entry, security, and quality.

# CONTRACT TERMS AND CONDITIONS

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- The minimum contractual terms and conditions provided in Attachment 1-Sample Agreement and the special terms contained in Attachment 1 – Attachment 1, Special Conditions of the Agreement may be included in any contract with the Proposer selected by JWB.
- Proposer is advised that exceptions to any of the minimum or special terms must be identified in its response to the RFP.

# CONTRACT TERMS AND CONDITIONS

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- Absence of Proposer's exceptions to the minimum or special contractual terms or any portion thereof shall be deemed an acceptance of all JWB's contractual terms and Proposer shall not object to including any such terms in a resulting contract.
- Exceptions may be considered during the selection process, and may be included in the final contract between JWB and the Proposer.
- Exceptions raised after the submission of the response to the RFP will not be considered by JWB. JWB reserves the right to add additional terms in its sole discretion.

# INSURANCE

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- Must provide a certificate of insurance in accordance with the minimum insurance requirements listed in **Attachment 1-Sample Agreement** prior to entering into a formal contract.
- In some instances, depending on the type of services being delivered (as identified in the **Matrix of Required Limits** of Insurance on JWB's website at <https://www.jwbpinellas.org/wp-content/uploads/2022/07/MATRIX-OF-REQUIRED-LIMITS-OF-INSURANCE.pdf>, some required limits may be higher than the minimum. JWB Insurance Requirements are currently under review and may be updated.
- **Exceptions to any of the insurance requirements must be identified in its response to the RFP** via Form 5 - Minimum Contract Terms and Conditions Compliance Checklist.



# INSURANCE

**MATRIX OF REQUIRED LIMITS OF INSURANCE**

Type of Contractor	Workers' Compensation [A][O]	General Liability [B]	Automobile Liability [C][N]	Abuse and Molestation [D][I]	Professional Liability [E][I][R][X]	D&O/EPLI [F][I][V]	CRIME [G][J][K]	CYBER [H][I][P][U]	Pollution Liability	Watercraft Liability
Domestic violence advocacy	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	[BB]	\$500,000	\$1,000,000	[L]	[W]
Substance abuse services and treatment	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	[BB]	\$500,000	\$1,000,000	[L]	[W]
Medication management	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	[BB]	\$300,000	\$1,000,000	[L]	[W]
Case management	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	[BB]	\$500,000	\$1,000,000	[L]	[W]
Psychological services	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	\$1,000,000	\$500,000	\$1,000,000	[L]	[W]
Crisis intervention	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	\$1,000,000	\$500,000	\$1,000,000	[L]	[W]
Victim advocacy services	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	\$1,000,000	\$500,000	\$1,000,000	[L]	[W]
Group Therapy	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	\$1,000,000	\$500,000	\$1,000,000	[L]	[W]
<b>Subcontracted Services</b>										
Birth Hospitals	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	n/a	n/a	\$1,000,000	[L]	[W]
Therapy/Counseling	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	n/a	n/a	n/a	[L]	[W]
Specialized Child Care	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000/ \$3,000,000	n/a	n/a	\$500,000	[L]	[W]
Training Consultants (Special Services)	\$500,000	\$1,000,000	\$500,000	n/a	\$1,000,000/ \$3,000,000	n/a	n/a	n/a	[L]	[W]
Psychoeducational and Informational presentations	\$500,000	\$1,000,000	\$500,000	n/a	\$1,000,000/ \$3,000,000	n/a	n/a	\$500,000	[L]	[W]
Overlay Providers/Tutors	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000	n/a	n/a	\$500,000	[L]	[W]
Temporary Personnel	\$500,000	\$1,000,000	\$500,000	\$1,000,000	\$1,000,000	n/a	n/a	n/a	[L]	[W]
<b>Access to goods/services on behalf of client</b>										
Food Preparation/Food Distribution	\$500,000	\$1,000,000	\$500,000	n/a	n/a	n/a	n/a	n/a	[L]	[W]
Utilization Management	\$500,000	\$1,000,000	n/a	n/a	n/a	n/a	n/a	n/a	[L]	[W]

# CONTRACT TERMS AND CONDITIONS

## FORM 5 - CONTRACT TERMS & CONDITIONS COMPLIANCE CHECKLIST

Proposers are to mark the Comply, Exception, or Not Comply column for each Minimal Contract Term and Condition in Attachment I. *Comply* indicates the Proposer understands and agrees to comply fully. *Exceptions* must be fully explained below.

#	Title	Comply	Exception	Not Comply
I	Purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
II	Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
III	Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IV	Funds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
V	Method of Payment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VI	Termination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VII	Commencement of Payment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VIII	General Conditions			
1	Agreement Revisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Fiscal Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Audit and Management Letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Other Financial Support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Program Monitoring and Data Quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Board Members and Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Nondiscrimination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Publicizing of JWB Support-Endorsements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Not Used			
10	Assignments and Subcontracts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Confidential Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Public Records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Return of Funds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14	Special Situations and Incidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Provider Staff Membership on Board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	Waiver	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	Provider & Program Data Maintained in 2-1-1 Database	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	Provider Staff Background Checks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	Not Used			
20	Link to JWB's Websites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	Drug-Free Workplace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	Public Entity Crimes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23	JWB Policies and Procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24	Conflict of Interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25	Insurance Requirements-Basic Provisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26	Insurance Requirements-Additional Coverages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27	Indemnification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28	Certification that Provider is legally able to contract with JWB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	E-Verify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For all items marked as "Exception", Proposer must list the Exception by number and title and fully explain the exception below:

# SPECIAL CONTRACT TERMS AND CONDITIONS

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- For **all programs** the following special condition applies:
  1. Providers offering newly funded or expanded programs shall be required to report quarterly updates to JWB on initial year or two of implementation.
- For programs within the Strategic Result Areas of **Early Childhood Development** and **School Readiness**, the following special condition applies:
  1. The Provider and all facilities legally required to be licensed must maintain valid licensure. Facilities not required to be licensed must maintain a Certificate of Substantial Compliance issued by the Pinellas County License Board (PCLB).

# SPECIAL CONTRACT TERMS AND CONDITIONS

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- For programs within the Strategic Result Area of **School Success**, the following special conditions apply:
  1. The **Provider** and all facilities legally required to be licensed must maintain valid licensure. Facilities not required to be licensed must maintain a **Certificate of Substantial Compliance** issued by the Pinellas County License Board (PCLB).
  2. Providers proposing **Community Out of School Services**, may be required to implement the **Florida Afterschool Network Quality Self-Assessment**.
  3. Providers proposing **literacy services** may be required to align with the **Pinellas Grade-Level Reading Campaign, Early Readers Future Leaders**, including regular attendance and active engagement as members of the Work Group, furthering the Campaign awareness efforts, and participation with the Lectio Institute work and other collaborative and systems-level improvement opportunities.

# SPECIAL CONTRACT TERMS AND CONDITIONS

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- For programs within the Strategic Result Areas of **Prevention of Child Abuse and Neglect**, the following special condition applies:
  1. Providers with **child welfare related measures** (e.g. FSFN) shall be **required to collect social security numbers for participants served**.

# SPECIAL CONTRACT TERMS AND CONDITIONS

## FORM 6 - SPECIAL TERMS & CONDITIONS COMPLIANCE CHECKLIST

Proposers are to mark the Comply, Exception, Not Comply, or Not Applicable column for each Special Contract Term and Condition found in Attachment 1 of the Sample Contract (Attachment 1 of this RFP). *Comply* indicates the Proposer understands and agrees to comply fully. *Exceptions* must be fully explained below.

Title	Comply	Exception	Not Comply	Not Applicable
<b>All programs, the follow special condition applies:</b>				
Special Condition 1				
<b>Strategic Result Areas of Early Childhood Development and School Readiness, the following special conditions apply:</b>				
Special Condition 1				
<b>Strategic Result Area of School Success, the following special conditions apply:</b>				
Special Condition 1				
Special Condition 2				
Special Condition 3				
<b>Strategic Result Areas of Prevention of Child Abuse and Neglect, the following special condition applies:</b>				
Special Condition 1				

For all items marked as “Exception”, Proposer must list the Exception by number and title and fully explain the exception below:



# RFP TIMELINE

- 08/01/22: RFP Released
- 08/12/22: Optional Pre-Proposal Conference
- 08/17/22: Deadline for Receipt of Questions by Noon
- 08/23/22: Written Responses to Questions Released
- 09/26/22: Technical Assistance, by appointment
- 10/03/22: **Proposal Submission Due Date by Noon**
- 11/14/22: Evaluation Committee Meeting for Strengthening Community
- 11/15/22: Evaluation Committee Meeting for ECD
- 11/16/22: Evaluation Committee Meeting for PCAN
- 11/18/22: JWB Executive Team Evaluation Meeting to Select Respondents for Award
- 12/08/22: **Board Action to Award**
- 12/09/22: Announce Intent to Award
- On or before
- 03/01/23: **Execute Agreements**

# PROPOSAL SUBMISSION

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## Proposals Must:

- Be signed by the authorized company officer;
- Use the required format;
- Be **sent by email to [rfp@jwbpinellas.org](mailto:rfp@jwbpinellas.org)** which must include “New Strategically-Aligned Programs RFP - [Proposer’s Name]” in the subject line, where [Proposer’s Name] represents the Proposer’s organization’s name;
- Received on or before Noon on October 3, 2022. **Late submissions will not be considered.**



# PROPOSAL SUBMISSION

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## Other Important Submission Information:

- The maximum email size JWB can receive is 10MB.
- If the submission email, including any attachments, is greater than 10MB, please send multiple separate emails which are less than the 10MB maximum.
- It is the responsibility of the Proposer to ensure that the Proposal is received by JWB on time at the right location. JWB will reply to confirm receipt of all Proposals.
- JWB is not responsible if technical difficulties are encountered during the submission process.

# PROPOSAL FORMAT

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The following documents must be emailed to JWB as attachments with the naming and electronic file formats shown below:

1. New Strategically-Aligned Proposal - [Proposer's Name].pdf
2. New Strategically-Aligned Programs RFP - Form 3 - FY23 Proposed Start-Up Budget [Proposer's Name].xlsx
3. New Strategically-Aligned Programs RFP - Form 3 - FY24 Proposed Annual Budget [Proposer's Name].xlsx

# PROPOSAL FORMAT

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The Proposal (pdf document referenced in prior slide) must be assembled in the following order. Make sure to number each page, including attachments. All Proposals must be typed single-spaced using 12 point font.

## Format

Signed Addenda, if issued

Form 1 - Proposal Signature Form (signed)

Table of Contents

Narrative Response (one for each Program, if applicable)

Attachments (Stacking order provided on the next slide)

Form 4 - Non-Collusion Affidavit (signed)

Form 5 - Contract Terms & Conditions Compliance

Checklist

Form 6 - Special Terms & Conditions Compliance Checklist

# PROPOSAL FORMAT

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## Attachments: (one for each Program, if applicable)

- a) Form 2- TSL/Methodology
- b) Organizational Chart
- c) Job Descriptions
- d) Data Quality Manual
- e) Training Information
- f) Proposed Implementation Plan and Timeline
- g) Letters of Support
- h) Proposed Subcontracts and corresponding Subcontract Assessment, if applicable
- i) Current Year Adopted Budget
- j) Three most recent years of audited financial statement summaries and the notes to the financial statements, or individual tax returns and personal financial statement of net worth for the most recent year if Proposer is an individual proprietor, or privately-held companies wishing to maintain confidential financial information must have Dunn & Bradstreet Reports (D & B). If any of these statements include a material weakness or significant deficiency, include a letter describing them.

# PROPOSAL FORMAT

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Attachment 3-Proposal Checklist provided in RFP to assist Proposers. The Attachment is not to be submitted with the Proposal.

# PROPOSED PROGRAM BUDGET

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Proposer is to complete and submit two Excel Proposed Program Budgets for each program, if applicable: Start-Up (03/01/23-09/30/23), and Annualized (10/01-09/30), which must contain the following:

1. Start-Up Budget must include any start-up costs
2. Annualized Budget must reflect a complete fiscal year of programming.
3. Ensure that all tabs are completed within the workbooks.
4. Both budgets must include all expenses for the project, regardless of the funding source.

# PROPOSED PROGRAM BUDGET

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5. All Budgets must be developed in accordance with JWB's Financial Policies and Procedures for Funded Programs at <https://www.jwbpinellas.org/wp-content/uploads/2022/07/JWB-Financial-Policies-and-Procedures-for-Funded-Programs-effective-10.01.22.pdf>
6. Additional instructions for the Proposed Program Budget can be found on the first tab of the Excel document labeled Instructions.

# MINIMUM CRITERIA

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- The Proposal is received by the due date and time of NOON on 10/03/2022;
- The Proposal Signature Form is signed by an authorized officer;
- Respondent and request must meet the requirements found in sections 2.3 (Eligible Requests) and 2.4 (Minimum Qualifications).
- Respondents must not be on Florida's convicted vendor list for public entity crimes or Florida's scrutinized companies list (See section 1.17 and 1.18)



# ROUND 1 EVALUATION

<u>Evaluation Criteria</u>	<u>Points</u>
Overall merits of the Proposed Program	25%
Organizational Capacity and Financial Stability	25%
Need Justification & Contribution to JWB's Strategic Goals	20%
Evaluation and Outcomes	20%
Reasonableness of Cost	10%
<b>Total Potential Points</b>	<b>100%</b>

Proposal must have an **average score of 65 or above** to be considered for further evaluation.

# ROUND 1 EVALUATION FORM

## ATTACHMENT 4- ROUND 1 EVALUATION FORM

ENTITY NAME: \_\_\_\_\_

PROGRAM NAME: \_\_\_\_\_

RFP TITLE: Request for Proposals for New Strategically Aligned Programs for Early Childhood Development, Prevention of Child Abuse and Neglect (PCAN), and Strengthening Community

JWB STRATEGIC GOAL: \_\_\_\_\_

CRITERIA	(A) POTENTIAL POINTS	(B) WEIGHT	(C) INDIVIDUAL SCORE	(B) X (C)	TOTAL SCORE
Overall Merits of the Proposed Program	1 - 5	25%		5 x _____	
Organizational Capacity and Financial Stability	1 - 5	25%		5 x _____	
Need Justification & Contribution to JWB's Strategic Goals	1 - 5	20%		4 x _____	
Evaluation & Outcomes	1 - 5	20%		4 x _____	
Reasonableness of Cost	1 - 5	10%		2 x _____	
<b>TOTAL</b>	25	100%			

Percentages are awarded according to the quality of the response with respect to each criterion.

### POINT RANGE

#### **1: Unacceptable**

- No response provided or contains major error(s), omission(s), or deficiency(ies). None of these conditions can be corrected without a major rewrite.

#### **2: Partially meets (significant gaps, compromise required)**

- Minimally fulfills the described need.
- Shows only minimal understanding of the requirements. There exists an overall moderate or high degree of risk of the proposer not meeting the requirements.

#### **3: Meets, with moderate gaps**

- Generally fulfills the need with a few exceptions; some nuances or outlying aspects of the issue are unaddressed.

## ROUND 2 EVALUATION

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- The Round 1 scores for the proposals with a score of 65 or above will be **presented to the JWB Executive Team** for their consideration in determining which Respondents will be who will be recommended for award to the Board.
- A high evaluation score does not guarantee that a Proposal will be funded. The **geographic distribution of funding across north-, mid-, and south-county will be considered** during the ranking. Proposers must self-identify whether their program serves north, mid, south county or is countywide.

# AWARD AND AGREEMENT

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- JWB's intent is to award up to **\$5 million**.
- It is anticipated that **multiple awards** may be made. **Award amounts may differ from what was requested** based upon the dollars available and the type of service being proposed.
- The Notice of Award will be posted on JWB's website and emailed to all Proposers.

# AWARD AND AGREEMENT

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- It is anticipated that the agreement will remain valid for a period of **19 months (03/01/23-9/30/24)**.
- Agreements after the initial period are not guaranteed but are anticipated to be granted, assuming funds continue to be available and are approved by the Board, and the agency and the program remain in compliance.



Information can be found on  
our website

[www.jwbpinellas.org](http://www.jwbpinellas.org)

Any changes in meeting  
date/time and written  
responses to questions will be  
posted on the website

Please direct all  
communication concerning  
this solicitation to:

Lorrayne Hayes

[lhayes@jwbpinellas.org](mailto:lhayes@jwbpinellas.org)

727-453-5654

# TSL/ METHODOLOGY COMPLETION INSTRUCTION

FY N/A - FY N/A TSL/Methodology

Agency: Effective: N/A

Program Name: Strategic Result Area(s):

Program Subtype: N/A

**PROGRAM SHORT DESCRIPTION:**

*In 500 words or less, please include the short description that is included in your contract and list all program goals if applicable.*

**OUTREACH AND RECRUITMENT OF PROGRAM PARTICIPANTS:**

*In 500 words or less, briefly describe the outreach and recruitment process for program participants.*



FY N/A - FY N/A TSL/Methodology | Program Name

**ELIGIBILITY CRITERIA:**

*Please indicate whether or not your program has eligibility criteria for each designated area, check all that apply. Provide specifics when applicable.*

**Age Criteria:** ☐ N/A

*Check all that apply:*

☐ 0-3

☐ 4-5

☐ Elementary School

☐ Middle School

☐ High School

☐ Adult

**Gender Criteria:** ☐ N/A

*If applicable, please specify.*

**Geographic Area Served** ☐ County-wide

*If other, please specify.*

**Income Criteria:** ☐ N/A

*If applicable, please specify.*

**Special Population:** ☐ N/A

*If applicable, please specify.*

**ACCEPTANCE AND INTAKE:**

*In 750 words or less, please describe the intake process for program participants, including if participants are required to prove eligibility at intake. If applicable to your program, please describe the eligibility criteria for re-entry into your program and the process for re-entry.*

**TRANSPORTATION:**

*If applicable, in 500 words or less, please describe all forms of transportation provided by your program (i.e. school pick up, field trips). If sites pick-up for certain schools, please list.*

☐ N/A

FY<sup>N/A</sup> - FY<sup>N/A</sup> TSL/Methodology | Program Name

**Unduplicated Annual Targeted Service Levels**

Number of unduplicated <b>Adults</b> (including Teen Parents)	_____	Does not apply <input type="checkbox"/>
Number of unduplicated <b>Youth</b> (Birth to High School)	_____	Does not apply <input type="checkbox"/>
Number of unduplicated <b>Groups/Events</b>	_____	Does not apply <input type="checkbox"/>

**Service Component (i.e. Academic Support):** This area should name the service component that is expanded upon below

Outputs (What)	Program Activities & Duration (How)	Responsible Parties (Who)	Expected Outcomes (Why/ Performance Measures)	Indicator Measurements (Evidence)	Data Source (Where)	Time of Measurements (When)
This column should list the targeted number of people in this service area, and a general description of services. Ex: Participants served with youth development services.	This column should list the activities completed in the program, the frequency and duration of the activities and the service modality (i.e. individual vs group). Ex: Tutoring services one hour twice per week in a group of five participants.	This column should indicate the responsible parties providing the services listed in the previous column. Ex: Youth Development Staff	This column should include the performance measures listed in your contract that are relevant to this service area. Ex: 50% of participants will achieve a learning gain on the FSA ELA exam as indicated by Pinellas County Schools.	This column should line up with the performance measures, and indicate how the data for the performance measure is gathered. Any qualifications should be included (i.e. only grades 3-10). Ex: A participant has achieved an increase in the FSA ELA raw score.	This column should list where the data comes from. Ex: Pinellas County School Data.	This column should indicate frequency of measurement within the program and as reported to JWB. If analyzed by JWB, please specify. Ex: FSA ELA testing is once per year, in April & May dependent on grade level. Data is reported after close of fiscal year. Analyzed by JWB.

**Equation:**

How did you arrive at the number served above? Typical variables include staff size, length of stay, staff participant ratios, licensing guidelines, historic service levels, etc.

**Comments:** Please include any other comments to help clarify the above.



FY N/A - FY N/A TSL/Methodology | Program Name

**AVERAGE LENGTH OF STAY, SERVICE COMPLETION, AND CLOSURE**

*In 750 words or less, please include information regarding average length of stay in the program, criteria for service completion, and process for closure.*

*Please check this box if participants receive follow up services: If applicable, please provide details on follow-up services below.* ☐

**SERVICE AVAILABILITY:**

☐ Site information changes regularly ☐ Attached program close days

*Please list all sites associated with this program. If your sites change regularly, please submit an attachment with the additional site information. If applicable, please submit an attachment of program closed days. Site type definitions:*

**Administration** - A site that houses agency administrative staff.

**Program Site** - A site where program administration staff are housed and service delivery may occur. This would include the office where home visiting or community staff are based.

**Service Delivery Site** - A site where participants are served on-site at the location.

Site Name	Site Type	Service Component(s)	Contact Information	Days of the Week	Hours of Operation
	Please Select	Name(s) from Service Component chart(s) here.	Address and Phone Number here	Please use initials (i.e. M, Tu, W, Th, F, Sa, Su).	
	Please Select				
	Please Select				
	Please Select				
	Please Select				

FY N/A - FY N/A TSL/Methodology | Program Name

**REQUIRED ATTACHMENTS**

*Please check each box indicating that the required attachments are included as addenda.*

☐

Organization Chart

☐

Job Descriptions

☐

Data Quality Manual



# Questions and Answers