

## Solicitation of Interest # 1005 Settlement House Program

**Title:** Solicitation of Interest # 1005 Settlement House Program

**Agency:** Children & Family Services, NYS Office of Bureau of Contract Management

**Contract Number:** TBD

**Contract Term:** 9/1/2021 – 8/31/2026

**Date of Issue:** 3/8/2021

**Amended:** 3/18/2021 (all amendments to this document are made with red text)

**Due Date/Time:** 4/9/2021 by 4:00 PM Eastern Time

**Location:** Statewide

**Counties:** All NYS Counties

### **Background**

New York State Office of Children & Family Services (OCFS) announces a Solicitation of Interest (SOI) for qualified organizations that meet the criteria of a Settlement House, as defined herein. A Settlement House is an independent, voluntary, not-for-profit organization engaged in community work and social services delivery in a defined neighborhood, in a municipality of the State of New York.

The Settlement House Statewide Funding opportunity will award grants for the purpose of enhancing and coordinating activities and programs, expanding programs to serve more individuals and families, and/or promoting inter-agency coordination with other neighborhood organizations offering complementary services.

Eligible organizations must provide comprehensive, coordinated, family-focused, multi-generational human services such as childcare if for family employment, employment training, housing assistance counseling, youth development, educational services, counseling, senior services and arts and cultural activities, based on the needs of the neighborhood. Please see the **Eligibility Criteria** section for the definition of a Settlement House and mandatory application requirements.

The grants provided under the terms of this Solicitation of Interest will provide support to children, youth, adults and families, across generations, in a manner that supports the overall wellbeing of the community served by the Settlement House. The Settlement House Program provides OCFS and localities an opportunity to provide services and supports to vulnerable children and families, and to implement activities to address the needs of communities being served in an equitable manner. Please see the **Activities/Work to be Performed** section for additional information.

The purpose of this SOI is to invite all eligible and interested entities who believe that their organization can satisfy the requirements of this program, to so inform OCFS by a Letter of Interest (LOI). To be considered responsive, your organization's LOI must be received no later than the deadline specified on the first page of this announcement. Please see the **Eligibility Criteria** and **How to Apply** sections for additional information and submission requirements.

## **Activities/Work to be Performed**

Funded applicants must provide the following service delivery required elements through the Settlement House Program.

As part of this procurement, OCFS encourages all agencies that are currently not members of the United Neighborhood Houses to consider applying for membership, where practicable, during the course of this project.

### **A. Program Descriptions**

A comprehensive range of services to residents of neighborhoods served by Settlement Houses. Funding may be used to provide or enhance existing services which include, but are not limited to: outreach, providing or directing individuals and family members to appropriate community-based resources, monitoring the progress of these individuals, and coordinating intra-agency and community services so that community residents have easy access to a range of services. OCFS requires applications to include linkages and collaborations with other neighborhood service providers. These collaborations must be signed, formal written agreements.

Program services may include, but are not limited to, the following services:

- (a) early childhood services that serve the emotional, social, cognitive and physical development needs of children,
- (b) youth services that focus on attendance improvement, drop-out prevention, college and career development, homelessness prevention, substance abuse prevention including teen centers and school-age programs, which provide recreational activities, preparation for employment, counseling and meals,
- (c) education programs including remedial education, tutoring, homework assistance and English language training,
- (d) family programs, including home management, homemaker services, parenting skills training, and teen parent services; programs that address the needs of two generations simultaneously (2-generation programs),
- (e) employment programs, including youth employment apprentice programs, job training programs, and displaced homemaker programs,
- (f) housing assistance,
- (g) child welfare services including preventive services,
- (h) non-medical mental health services and counseling, and/or
- (i) programs for seniors.

### **B. Racial Equity and Cultural Competence**

OCFS has invested significantly in Racial Equity and Cultural Competence (RECC) work. Efforts to address RECC include examination of the issues related to the overrepresentation of black, Latino and Native American children and their families in the state's child welfare and juvenile justice systems.

Current OCFS statewide data indicates that black and Latino children and families comprise 72 percent of the state's children in foster care and about 73 percent of the juvenile justice placements. OCFS views this SOI as an opportunity to heighten public awareness of the issue of disproportionality, and to promote policies and practices to reduce it. Specific areas to consider in the program design and scope of services identified in the Letter of Interest include, but are not limited to:

## Solicitation of Interest # 1005 Settlement House Program

- Providing service strategies, approaches, and linguistic capacities that promote the delivery of services that are culturally competent and reflective of the population and community to be served;
- Collecting and analyzing data relevant to disproportionality and service provision where relevant to services provided;
- Strategically locating services within communities, to promote better access to service delivery in high-need areas; and
- Promoting cross-agency dialogue and partnerships regarding service planning to address disproportionality including but not limited to: social services, mental health, health, education, housing, substance abuse, probation agencies, and community-based providers.

### **C. Project Objectives**

Project Objectives are the measurable improvements in the condition or behavior of the target population that the program activities intend to achieve by the end of the contract term and will result in the Project Outcome. For this Solicitation of interest, the Project Outcome is the effective delivery of comprehensive, culturally competent, neighborhood-based services, which meet the needs of the served community. Project Objectives are quantifiable and verifiable indicators of program performance. Attainment of several project objectives may be needed to indicate the achievement of a single outcome. Project Objectives can be either an increase in positive behavior or condition, or a reduction in a negative or destructive behavior or condition. A program's success is measured by how well it achieves its Project Objectives. Project Objectives should be ambitious, but realistic.

Project Objectives must:

- address identified needs of the target population(s);
- address the linguistic and cultural needs of the community;
- be clearly defined and measurable; and
- be achievable with the resources available to the program.

### **D. TANF Eligibility**

#### **Federal Funds-TANF (Temporary Assistance to Needy Families)**

By responding to this SOI, the applicant understands that OCFS may utilize federal funds or seek federal reimbursement for State costs OCFS paid out under the Contracts resulting from this SOI, therefore the federal assurances found in Attachment A-2 may apply to any resulting Contract. The federal funds directly charged or reimbursed to OCFS for the Contract are from the Catalog of Federal Domestic Assistance (CFDA) Number(s) found on the face page of any resulting Contract. The Contractor will be required to agree to follow all requirements under the CFDA number(s) listed on the face page of the Contract; and all applicable requirements included in the Attachment A-2 of the Contract.

### **Eligibility Criteria**

Applicants who meet the following mandatory requirements are eligible to apply:

- (a) Organizations must provide comprehensive, coordinated, family-focused, multi-generational human services such as: childcare if for family employment, employment training, housing assistance counseling, youth development, educational services, counseling, senior services and arts and cultural activities, based on the needs of the neighborhood;

## Solicitation of Interest # 1005 Settlement House Program

- (b) Organizations must be a **Settlement House** as defined herein. For this funding opportunity a Settlement House is defined as an independent, voluntary, not-for-profit organization engaged in community work and social services delivery in a defined neighborhood, in a municipality of the State of New York State that:
- i. Demonstrates current affiliation with downstate membership organization of United Neighborhood Houses at <https://www.unhny.org/our-members>; **OR**
  - ii. Demonstrates the current provision of community work and social services delivery in a defined neighborhood and its **certificate of incorporation, IRS 990, or other form of corporate papers** include being a settlement house **(i.e. corporate mission statement or public facing documents indicate compliance with all SOI eligibility requirements of a settlement house); AND**
- In addition to the above, an eligible applicant is one that:**
- iii. has been incorporated for at least three (3) years and provide written documentation of such incorporation;
  - iv. qualifies as a tax-exempt organization pursuant to section 501(c)(3) of the Internal Revenue Code and provides a copy of the 2019 IRS Form 990;
  - v. provides services to all those who live in the neighborhood(s) served without regard to race, creed, religious practice, color, sex, age, national origin, economic status, disability, or affectional preference;
  - vi. has an independent, autonomous Board of Directors, which meets at regular intervals, has full authority over the policies and operations of the organization, and the membership of which includes community residents;
  - vii. employs appropriate staff including a position of chief executive officer;
  - viii. has a budget which is adopted on an annual basis by the Board of Directors, utilizes an accepted accounting system, and has an annual fiscal audit prepared by a Certified Public Accountant not connected with the organization; and
  - ix. demonstrates that one of its primary purposes is the improvement of the relationship among groups of different cultural, economic, religious, and social groups in the community through a variety of individual, group, and inter-group activities.
- (c) Agree to provide the required services in the neighborhoods, counties, or regions aligned with the definition of a Settlement House and the Solicitation of Interest and document their intention by providing a completed **Attachment 1 – Submission Checklist** and **Attachment 2 – Letter of Interest**;
- (d) Provide proof of linkages and collaborations with other neighborhood service providers. These collaborations must be documented by providing a completed and signed **Attachment 5 – Collaboration Commitment Agreement**;
- (e) Complete and provide an **Attachment 4 – Project Description and Objectives** (provide at least 2 objectives), that supports the Project Outcome. (See Project Objectives Section for additional information);

## Solicitation of Interest # 1005 Settlement House Program

- (f) Provide a **Certificate of Incorporation** (or other equivalent document) that demonstrates the applicant has been incorporated for at least three (3) years;
- (g) Provide a current **Organization Chart** that depicts the entire organization's structure, including a position of chief executive officer;
- (h) Provide a copy of their **2019 IRS 990 filing** (or other suitable documentation). OCFS will consider the substitution of a 2019 Certified Financial Statement in lieu of the 2019 Form 990 or a prior year Form 990 if the applicant can demonstrate extenuating circumstances and has applied for a 2019 federal filing extension;
- (i) If the Organization is eligible via (b)ii. above and that is not demonstrated through the certificate of incorporation or IRS 990 filing submitted as required above, applicant must provide the necessary versions of the certificate of incorporation, IRS 990 or other form of corporate papers (i.e. corporate mission statement **or public facing documents that indicate compliance with all SOI eligibility requirements of a settlement house**) to document that the organization meets (b)ii. above; and
- (j) Be eligible to do business with New York State.

### **Funding Details**

Funding for this project is contingent upon the availability of funds in the state and/or federal budget and the number of eligible applicants that respond to this SOI.

Funding will be based on an appropriation which may be included in the 2021-22 enacted budget, and any such appropriation may or may not be the same funding level included in the 2020-21 enacted budget. Federal Funding Requirements, as detailed in this SOI, may apply to all awardees of funding under this SOI. OCFS desires to invest in services that are responsive to the considerations for race equity and cultural competency as described in Activities/Work to be Performed Section. The award amounts available for each successful applicant will be determined by the expense information for the federal reporting year 2019 as reported on line 18 of the Department of the Treasury Internal Revenue Service Form 990. Applicants must submit a copy of the 2019 Form 990 with their application, ~~the number of eligible grantees and the total appropriation.~~

Settlement House providers may receive only one award under this funding source.

The exact amount of each award will be determined based on the available funding, the number of successful applicants and their related 2019 expense category. OCFS reserves the right to negotiate the final award amount and contract with each successful applicant.

Please Note: OCFS will consider the substitution of a 2019 Certified Financial Statement in lieu of the 2019 Form 990 or a prior year Form 990 if the applicant can demonstrate extenuating circumstances and has applied for a 2019 federal filing extension.

These funds are designed to support low-income families and improve their long-term outcomes as they move towards self-sufficiency. All contracts are required to adhere to the TANF (Temporary Assistance to Needy Families) requirements, as advised by OCFS. Additional information on TANF requirements are located in:

- Activities/Work to be Performed Section;

## Solicitation of Interest # 1005 Settlement House Program

- Exhibit A and Exhibit B provided as an attachment to this SOI.

Funding cannot be used to support medical services, general education services or on-going assistance. Funds may not be used for anything that is designed to meet a family's ongoing basic needs including cash assistance, vouchers or similar benefits.

In addition to services described herein, non-recurrent, short-term benefits that are designed to address a specific crisis situation or episode of need are allowable. Short-term benefits, which might otherwise be considered "assistance," are considered "non-assistance" if they are not intended to meet recurring needs and do not extend beyond (4) four months; e.g. respite services for up to four (4) months, if necessitated by a specific crisis situation, that is not expected to be repeated.

Federal regulations consider transportation and childcare as forms of assistance if the head of household is not employed. These expenses are not allowable and may not be charged to the grant unless they meet the criteria for "non-assistance". If the costs are not allowable TANF costs, they cannot be included in the Settlement House Program funding request. The cost of such services must be funded by an alternative funding source and shown on the budget request as a Local Share cost. Administrative/Indirect Costs are allowable up to a maximum amount of 15% of the award amount. See Exhibit A, which provides a listing of allowable and non-allowable costs under TANF funding and can be found at the end of this SOI.

Funds received through this application process are not intended as a substitute for any funds currently available from federal, State or local sources for the provision of neighborhood-based service delivery programs provided by vendors that meet the definition of Settlement Houses. Funds awarded to settlement houses shall be used to supplement and not to supplant other federal, state or local funds.

Each awardee will be required to report outcomes in a manner prescribed by OCFS and will be required to make any financial records relevant to this award available to OCFS.

### **Term of Contract**

Contract(s) awarded in response to this SOI will be for **five (5) years**. The anticipated start date is **9/1/2021**, and the anticipated end date is **8/31/2026**. Funding is anticipated to be available for the first year of the contract. The award of a contract does not guarantee that funding will be available for subsequent years. Contractors may not begin providing services before the contract start date; OCFS has no obligation to pay for services rendered before the New York State Office of the State Comptroller and the Office of the Attorney General approve the contract.

### **How to Apply**

To be considered eligible, interested parties must complete and submit all required documents to this SOI conforming with the format and content requirements as explained. A response that does not provide all the information requested may be subject to rejection. The response should contain sufficient information to assure OCFS of its accuracy. The information provided should, wherever possible, verify that your organization meets the requirements in the **Eligibility Criteria** section of this SOI.

## Solicitation of Interest # 1005 Settlement House Program

Each applicant is **required** to complete and provide the following documents:

- Attachment 1 – Submission Checklist
- Attachment 2 – Letter of Interest
- Attachment 4 – Project Description and Objectives (provide at least two (2) objectives)
- Attachment 5 – Collaboration Commitment (for each collaboration with other neighborhood service providers)
- Certificate of Incorporation (or other equivalent document, demonstrating the organization has been incorporated for at least three (3) years)
- Organizational Chart (that depicts the entire organization's structure, inclusive of a chief executive officer)
- Copy of their 2019 IRS Form 990 filing (or other suitable documentation - See **Eligibility Criteria** for details).
- If applicable, an additional certificate of incorporation, IRS 990 filing or other form of corporate papers (i.e. corporate mission statement) to verify the entity meets eligibility criteria (b)ii.

Additionally, to expedite contracting process, the following documents should be provided at the time of application:

- [OCFS-2647, EO 177 Certification](#)
- [OCFS-4821, CMS User Authorization](#)

Applicants must submit these documents via email to [RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov) no later than the deadline specified on the first page of this announcement.

Please enter "**SOI # 1005 Settlement House**" in the subject line of the email submission of your application and identify the name of the applicant in the body of the email and in the filenames of attached documents to ensure your submission is processed efficiently. **Early submissions are encouraged as late responses may be subject to rejection.**

Please limit your Letter of Interest to a maximum of **five (5)** page(s), Arial 12-point font, single line spacing and one-inch margins. Please see the **Attachment 2 – Sample Letter of Interest** provided for your reference. If applicable, Letters of Interest should attempt to conform to the guidance outlined in **Attachment 3 – Guidelines for Preparing Letters of Interest.**

### **Questions**

Questions must be submitted via e-mail to [RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov) before the due date and time of this SOI. Please submit your question with adequate time for response. OCFS recommends allowing at least five (5) business days. Be sure to put "**SOI # 1005 Settlement House**" in the subject line. **Late questions may not be addressed.**

### **Evaluation Process**

An internal review by OCFS will confirm eligibility. This SOI is not a guarantee or promise of funding. Available funding to support this initiative will be limited to the amount(s) appropriated in the enacted budget for this purpose and will be awarded among those interested organizations who are deemed to meet the eligibility requirements.

OCFS may require additional information from an organization before deciding whether the interested organization is eligible and can supply the requested commodities or services. If OCFS requests additional information, it must be provided within five business days from request.

## Solicitation of Interest # 1005 Settlement House Program

Upon determination of eligibility, OCFS will notify eligible organizations of their status and the proposed award amount (if any).

### **OCFS Reserved Rights**

OCFS reserves the right to withdraw, amend or postpone this SOI, without notice, and without liability, to any applicant, or other party, and may exercise these rights at any time. In addition, OCFS reserves the right to

1. place a monetary cap on the funding amount made in each contract award;
2. change any of the schedule date stated in the SOI;
3. make an award under the SOI in whole or in part;
4. disqualify any applicant whose conduct and/or LOI fails to conform to the requirements of the SOI;
5. reject any LOI if, in the sole discretion of OCFS, it determines the applicant is not a responsible vendor;
6. request all applicants who submitted LOI to present supplemental information clarifying their proposals either in writing or by formal presentation;
7. direct all organizations who submitted LOIs to prepare modifications addressing SOI amendments;
8. make funding decisions that maximize compliance with and address the outcomes identified in this SOI;
9. fund only one portion, or selected activities, of the selected applicant's LOI and/or adopt all or part of the selected applicant's LOI based on federal and state requirements;
10. eliminate any SOI requirements unmet by all applicants, upon notice to all parties that submitted LOIs;
11. waive procedural technicalities, or modify minor irregularities, in LOI received, after notification to the applicant involved;
12. correct any arithmetic errors in any proposal, or make typographical corrections to LOIs, with the concurrence of the applicant;
13. negotiate with the eligible applicant(s) prior to contract award;
14. require that all LOIs be held valid for a minimum of 180 days from the closing date for receipt of applications, unless otherwise expressly provided for in writing;
15. fund any or all of the LOI received in response to this SOI. However, issuance of this SOI does not commit OCFS to fund any proposals. OCFS can reject any proposals submitted;
16. use the LOI submitted in response to this SOI as part of an approved contract. At the time of contract development, awardees may be asked to provide additional budget and program information for the final contract;
17. utilize any and all ideas submitted in the LOI received where an award is ultimately made;
18. make inquiries of third parties, including but not limited to applicant's references, regarding the applicant's experience or other matters deemed relevant by OCFS. By submitting an LOI in response to this SOI, the applicant gives its consent to any inquiry made by OCFS;
19. where applicable, require contractors to participate in a formal evaluation of the program to be developed by OCFS. Contractors may be required to collect data for these purposes. The evaluation design will maintain participants' confidentiality and recognize practical constraints of collecting this kind of information;
20. when applicable, consider statewide distribution and regional distribution within New York City, including borough distribution methodology, in evaluating proposals; and
21. reject any extraneous terms, alternate activities/work to be performed, added conditions, or exceptions stated by applicants within their LOI. This includes, but is not limited to, proposed changes to the standard terms and conditions of the resulting contract(s).

## Solicitation of Interest # 1005 Settlement House Program

### **Contract Documents**

The applicant must review the contract terms and conditions of the contract template provided below.

The contract documents consist of the following:

1. Face Page
2. Signatory Page
3. NYS Standard Terms and Conditions (State of New York Master Contract for Grants)
4. Master Contract Attachment A-1 (Agency-Specific Terms and Conditions)
5. Master Contract Attachment A-2 (Federally Funded Grants)
6. Master Contract Attachment B: Budget and Instructions
7. Master Contract Attachment C: Work Plan
8. Master Contract Attachment D: Payment and Reporting Schedule
9. Attachment MWBE: Minority and Women-Owned Business Enterprises

A copy of the NYS Standard Terms and Conditions (State of New York Master Contract for Grants) can be found on the Grants Management website at the following link: <https://grantsmanagement.ny.gov/system/files/documents/2019/09/sample-complete-nys-mcq.pdf>

In addition, the following documents will be required prior to contracting:

- [Vendor Responsibility Questionnaire](#) (if applicable)
- [Proof of Workers Compensation Insurance](#) (if applicable)
- [Proof of Disability Benefits Coverage](#) (if applicable)
- [Attachment A-2, Federal Assurance and Certifications](#) (if applicable)
- [OCFS-4631, MWBE Utilization Plan Form](#) (if applicable)
- [OCFS-4629, Project Staffing Plan Form](#)
- [OCFS-3460, Equal Employment Opportunity \(EEO\) Policy Statement](#)

### **State Finance Law §139-I; Statement on Sexual Harassment in Bids**

New York State Finance Law §139-I, effective January 1, 2019, requires, in relevant part, that “[e]very bid . . . made to the state or any public department or agency thereof, where competitive bidding is required by statute, rule or regulation, for work or services performed or to be performed or goods sold or to be sold, shall contain [a] statement subscribed by the bidder and affirmed by such bidder as true under the penalty of perjury. . . [that] ‘[b]y submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that the bidder has and has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees. Such policy shall, at a minimum, meet the requirements of section two hundred one-g of the labor law.’” The contractor must provide the foregoing certification before any award being made by OCFS. For additional guidance on drafting an appropriate sexual harassment policy and developing appropriate training, please refer to State Finance Law §139-I and <https://www.ny.gov/combating-sexual-harassment-workplace/employers#top>

### **Other Contracting Requirements**

1. Not-for-profit organizations must be registered in the NYS Grants Gateway and complete the Vendor Prequalification process before contract execution per [New York State Division of Budget Bulletin H-1032 Revised](#) dated July 16, 2014.

## Solicitation of Interest # 1005 Settlement House Program

2. Executive Order 177, signed on February 3, 2019, by Governor Andrew M. Cuomo, directs New York State agencies and authorities not to enter into any contracts with entities that have institutional policies or practices that fail to address the harassment and discrimination of individuals on the basis of their age, race, creed, color, national origin, sex, sexual orientation, gender identity, disability, marital status, military status, or other protected basis. The contractor must provide the [EO 177 certification statement](#) before any award being made by OCFS.
3. Sections 57 and 220 of the Workers' Compensation Law (WCL) and section 142 of the State Finance Law require that businesses contracting with New York State have and maintain and [provide evidence of appropriate workers' compensation and disability benefits insurance coverage](#). If an award is made from this SOI, updated proof of coverage must be provided during contract development. Failure to submit the proof will delay the contract development process and may result in the award being rescinded. Municipalities are not required to show proof of coverage.
4. Section 163(9)(f) of the NY State Finance Law requires that a state agency determine that a bidder is responsible before awarding that bidder a state contract. Vendor responsibility will be determined based on the information provided by the bidder, on-line, through the [New York State VendRep System Questionnaire](#) or through a paper copy of the [Vendor Responsibility Questionnaire](#). OCFS will review the information provided before making an award.
5. By submitting an LOI in response to this solicitation or by assuming the responsibility of a contract awarded hereunder, bidder/contractor (or any assignee) certifies that it is not on the "Prohibited Entities List," as defined by the *Entities Determined To Be Non-Responsive Bidders/Offerers Pursuant to The New York State Iran Divestment Act of 2012* (the Act), which is posted on the OGS website at <http://www.ogs.ny.gov/about/regs/docs/ListofEntities.pdf> and further certifies that it will not utilize on such contract any subcontractor that is identified on the "Prohibited Entities List." Bidder/contractor is advised that should it seek to renew or extend a contract awarded in response to the solicitation, it must provide the same certification at the time the contract is renewed or extended.
6. All offerers and their employees must be aware of and comply with the requirements of the New York State Public Officers Law, and all other appropriate provisions of New York State law and all resultant codes, rules and regulations from state laws establishing the standards for business and professional activities of state employees and governing the conduct of employees of firms, associations and corporations in business with the state. In signing the proposal, each offerer guarantees knowledge and full compliance with those provisions for any dealings, transactions, sales, contracts, services, offers, relationships, etc. involving the state and/or state employees. Failure to comply with those provisions may result in disqualification from the bidding process and in other civil or criminal proceedings as required by law: <https://www.nysenate.gov/legislation/laws/PBO>
7. Pursuant to New York State Executive Law Article 15-A and Parts 140-145 of Title 5 of the New York Codes, Rules and Regulations, OCFS is required to promote opportunities for the maximum feasible participation of New York State-certified Minority- and Women-owned Business Enterprises (MWBE) and the employment of minority group members and women in the performance of OCFS contracts. If applicable, a contractor on any contract resulting from this procurement must document its good faith efforts to provide meaningful participation by MWBE as subcontractors and suppliers in the performance of the contract. To that end, by submitting a response to this opportunity, the respondent agrees that OCFS may withhold payment pursuant to any contract awarded as a result of this announcement pending receipt

## Solicitation of Interest # 1005 Settlement House Program

of the required MWBE documentation. The directory of MWBE can be viewed at: <https://ny.newnycontracts.com>. OCFS will request any necessary completed MWBE documents from the contractor during the contract development process.

8. Not-for-profit vendors must be registered with the New York State Office of the Attorney General as a charitable organization, and the registration must be up-to-date at the time of contracting. Vendors must be sure all their documents are up-to-date and comply with the vendor responsibility requirements as outlined below. To determine the status of your charity's registration information, contact:  
[https://www.charitiesnys.com/RegistrySearch/search\\_charities.jsp](https://www.charitiesnys.com/RegistrySearch/search_charities.jsp)

### **Contact Information**

#### **Primary contact:**

Director of Contracts  
Office of Children & Family Services  
52 Washington Street  
Room 202S – Procurement Unit  
Rensselaer, NY 12144  
[RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov)

#### **Submit to contact:**

Director of Contracts  
Office of Children & Family Services  
52 Washington Street  
Room 202S – Procurement Unit  
Rensselaer, NY 12144  
[RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov)

### **Attachments**

Please see the following attachments to this announcement, which are available on both the NYS Contract Reporter website at <https://www.nyscr.ny.gov> and the OCFS funding opportunities website at <https://ocfs.ny.gov/main/contracts/funding/>.

#### **Attachment 1 – Submission Checklist\***

#### **Attachment 2 – Sample Letter of Interest\***

Attachment 3 – Guidelines for Preparing Letters of Interest (reference only)

#### **Attachment 4 – Project Description and Objectives\***

#### **Attachment 5 – Collaboration Commitment Template\***

Exhibit A – Specific Terms & Conditions Authorization to Use TANF Funding (reference only)

Exhibit B – Description of Cost Allocation Methodology (reference only)

**\* Attachments marked with an asterisk must be completed and provided with your proposal.**

**ATTACHMENT 1**  
SUBMISSION CHECKLIST

**Solicitation of Interest (SOI) # 1005**  
**Settlement House Program Solicitation of Interest**

Applicant: \_\_\_\_\_ FEIN/TIN: \_\_\_\_\_

Please indicate whether the following statements described in the solicitation apply to your organization:

Yes <input type="checkbox"/>	No* <input type="checkbox"/>	(a) The applicant provides comprehensive, coordinated, family-focused, multi-generational human services such as: childcare if for family employment, employment training, housing assistance counseling, youth development, educational services, counseling, senior services and arts and cultural activities, based on the needs of the neighborhood.
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	(b) The applicant is a Settlement House as defined herein. For this funding opportunity a Settlement House is defined as an independent, voluntary, not-for-profit organization engaged in community work and social services delivery in a defined neighborhood, in a municipality of New York State that:
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	i. Demonstrates current affiliation with downstate membership organization of United Neighborhood Houses at <a href="https://www.unhny.org/our-members">https://www.unhny.org/our-members</a> ; <b>OR</b> ii. Demonstrates the current provision of community work and social services delivery in a defined neighborhood and its corporate papers include being a settlement house; AND
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	iii. has been incorporated for at least three (3) years and provide written documentation of such incorporation;
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	iv. qualifies as a tax-exempt organization pursuant to section 501(c)(3) of the Internal Revenue Code and provides a copy of the 2019 IRS Form 990;
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	v. provides services to all those who live in the neighborhood(s) served without regard to race, creed, religious practice, color, sex, age, national origin, economic status, disability, or affectional preference;
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	vi. has an independent, autonomous Board of Directors, which meets at regular intervals, has full authority over the policies and operations of the organization, and the membership of which includes community residents;
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	vii. Employs appropriate staff including a position of chief executive officer;
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	viii. has a budget which is adopted on an annual basis by the Board of Directors, utilizes an accepted accounting system, and has an annual fiscal audit prepared by a Certified Public Accountant not connected with the organization; and
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	ix. demonstrates that one of its primary purposes is the improvement of the relationship among groups of different cultural, economic, religious, and social groups in the community through a variety of individual, group, and inter-group activities.
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	(c) The applicant agrees to provide the required services in the neighborhoods, counties, or regions aligned with the definition of a Settlement House and Solicitation of Interest and has documented their intention <u>by providing a completed</u> <b>Attachment 1 – Submission Checklist</b> and <b>Attachment 2 – Letter of Interest</b> .

# ATTACHMENT 1

## SUBMISSION CHECKLIST

Yes <input type="checkbox"/>	No* <input type="checkbox"/>	(d) The applicant has provided proof of linkages and collaborations with other neighborhood service providers by <u>providing a completed and signed <b>Attachment 5 – Collaboration Commitment Agreement</b></u> .
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	(e) The applicant has <u>provided a completed <b>Attachment 4 – Project Description and Objectives</b></u> (provide at least 2 objectives) that supports the project Outcome, as defined in the <b>Project Objectives</b> section of the SOI.
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	(f) The applicant <u>has provided a <b>Certificate of Incorporation (or other equivalent document)</b></u> that demonstrates the applicant has been incorporated for at least three (3) years.
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	(g) The applicant <u>has provided a current <b>Organization Chart</b></u> that depicts the entire organization’s structure, including a position of chief executive officer.
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	(h) The applicant <u>has provided a copy of their <b>2019 IRS 990 filing (or other suitable documentation)</b></u> . OCFS will consider the substitution of a 2019 Certified Financial Statement in lieu of the 2019 Form 990 or a prior year Form 990 if the applicant can demonstrate extenuating circumstances and has applied for a 2019 federal filing extension.
Yes or N/A <input type="checkbox"/>	No* <input type="checkbox"/>	(i) If the applicant is deemed eligible via (b)ii. of the SOI and this is not demonstrated through the certificate of incorporation or IRS 990 filing submitted as required above, <u>applicant has provided the necessary versions of the <b>certificate of incorporation, IRS 990 or other form of corporate papers (i.e. corporate mission statement)</b></u> to document that the organization meets (b)ii of the SOI.
Yes <input type="checkbox"/>	No* <input type="checkbox"/>	(j) The applicant is eligible to do business with New York State.
Yes <input type="checkbox"/>	No <input type="checkbox"/>	The applicant certifies under penalty of perjury that, by submission of this proposal, each proposer and each person signing on behalf of any proposer, and in the case of a joint proposal each party thereto as to its own organization, has and has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees, and that such policy does, at a minimum, meet the requirements of section two hundred one-g of the labor law? Please note that a proposal will not be considered for award nor will any award be made to a proposer who is not able to make this certification in compliance with State Finance Law section 139-l; provided, however, that if the proposer cannot make the foregoing certification, such proposer shall so state and shall furnish with the proposal a signed statement which sets forth in detail the reasons therein.

**\* A response of “no” to any question marked with an asterisk will disqualify the applicant.**

Submit the following completed documents prior to the deadline via email to [RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov):

- Attachment 1 – Submission Checklist**
- Attachment 2 – Letter of Interest**
- Attachment 4 – Project Description and Objectives** (provide at least 2 objectives)
- Attachment 5 – Collaboration Commitment Template** (signed linkage agreements)
- Certificate of Incorporation** (or other equivalent document)
- Organizational Chart** (that depicts the entire organization’s structure)
- Copy of the 2019 IRS Form 990 filing** (or other suitable documentation)
- If applicable, an additional certificate of incorporation, IRS 990 filing or other form of corporate papers (i.e. corporate mission statement) to verify the entity meets eligibility criteria (b)ii.
- [OCFS-2647, EO 177 Certification](#)
- [OCFS-4821, CMS User Authorization](#)

**ATTACHMENT 1**  
SUBMISSION CHECKLIST

By signing below, I attest that I have express authority to sign these statements on behalf of the applicant and am authorized by law to bind the applicant contractually.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_

**ATTACHMENT 2**  
SAMPLE APPLICATION

**Solicitation of Interest (SOI) # 1005**  
**Settlement House Program**

Date: \_\_\_\_\_

Director of Contracts  
Office of Children & Family Services  
52 Washington Street  
Room 202S – Procurement Unit  
Rensselaer, NY 12144  
[RFP@ocfs.ny.gov](mailto:RFP@ocfs.ny.gov)

To whom it may concern:

On behalf of my organization, I hereby inform you of our eligibility and interest in the above referenced Solicitation of Interest (SOI).

Please include the following in your Letter of Interest:

1. Explain how your organization meets the definition of a Settlement House, as defined in Eligibility Criteria (b).
2. A narrative that describes the comprehensive, coordinated, family-focused multi-generational human services provided by your organization as defined in Eligibility Criteria (a) of this SOI.
3. A narrative that describes services to be provided by the Settlement House program under this solicitation and to what population(s).
4. Discuss the Attachment 1 – Submission Checklist which should be completed, signed, and provided by your organization with your response to this solicitation (please note that a “no” response to any question marked with an asterisk will disqualify your organization, it is highly recommended that you thoroughly read and provide an appropriate response to each item on the submission checklist) in addition to confirming the inclusion of all other documents required by this SOI. (please refer to the **How to Apply** section of the SOI for additional information)

I hereby certify the information contained in our Letter of Interest is correct and in compliance with all applicable State and Federal laws, rules and regulations, and that I am the authorized representative to submit this Letter of Interest.

Sincerely,

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

**ATTACHMENT 2**  
**SAMPLE APPLICATION**

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

FEIN/TIN: \_\_\_\_\_

Date: \_\_\_\_\_

Please indicate the name and email address of an additional contact person below:

\_\_\_\_\_

## Guidelines for Preparing Letters of Interest

---

Presented below are general guidelines for you/your firm to prepare a letter of interest (LOI) for submission to the NYS Office of Children and Family Services (OCFS). These guidelines will assist you with the content of your letter. Format and/or organization of your letter is up to you.

**We ask that you carefully review the New York State Contract Reporter advertisement prior to submitting the LOI.**

### General Instructions

---

1. Please limit your letter of interest(s) to the number of pages, font size, line spacing and margins as stated in the Contract Reporter notice. Please insure that you are submitting the requested number of copies.
2. Please include all pertinent information in your letter of interest. information.
3. All firms listed in the LOI must be registered (and the registration must be current) with the NYS Department of State ([www.dos.ny.gov](http://www.dos.ny.gov)) and must be able to conduct business in New York State under the names stated in the LOI. If any of the firms listed in the LOI are not registered in New York State, the LOI will not be reviewed and the firm will not be considered for selection.
4. If your team is going to submit a LOI as a joint venture, please insure that the joint venture itself is registered to practice and do business in New York State. If the joint venture is not registered in advance of the LOI submission, the LOI will not be reviewed and the team will not be considered for selection.
5. When submitting your letter of interest, please do not use binders, covers, etc. A staple in the upper left corner is sufficient.
6. Please refer to the Solicitation/Letter of Interest announcement reference number in your letter of interest.
7. Please submit your letter of interest to the individual indicated in the "Submit to" section of the Contract Reporter notice. Do not submit them to the person listed under the "Contact" section of the notice.

### Instructions on Specific Elements

---

Please note that these instructions provide general guidance. If you/your firm feel as though additional information is needed based upon the Contract Reporter notice (Notice), you will not be penalized as long as the letter is no longer than what is stated in the notice. Further, the order of the sections presented below does not infer how you should organize your letter of interest. As stated earlier, format and organization of your letter is up to you.

#### 1. Firm's Understanding of the Services Required

Each firm's letter will be evaluated to determine if they have any understanding of the Services Required, including any special/unique needs of the Services Described. Please ensure that your firm addresses any special needs stated in the Notice and state why your firm is uniquely qualified to provide services for this program.

#### 2. Firm's Experience

Please provide information on recent and relevant experience providing the same of similar services as described in the Notice completed within the last five years. For each service/program provide the following:

- Brief description.
- Firm's role (prime, sub) and what specific services were provided.
- Completion date.
- Dollar value.
- Client's name.
- If sub-consultants are proposed, clearly indicate assignments the sub-consultant completed.

In addition, please address the following:

- If a sub-consultant(s) is proposed, please clearly state their role and what they will be doing. Also state the percentage of the work they will complete.
- Address any special services as stated in the Notice.
- Please address any necessary certifications, software requirements, and other technical requirements.
- Location from which office the service(s)/program(s) will be managed. Also, indicate which office will complete a majority of the service.
- If there are M/W/DBE or SDVOB goals, please name the firms and indicate what they will be doing for the program. Also indicate the percentage of work they will complete. Please note that if the firm submitting the letter of interest is a M/W/DBE, they are still required to meet the M/W/DBE goals stated in the Notice.

### 3. Proposed Key Personnel

Provide the following information for each key staff member:

- Proposed role (title) for this program
- Brief description of their recent (within the last five years) and relevant experience.
- Individual's role on each of the previous program(s).
- Completion date of the previous program(s).
- Value of program of the previous programs.
- Client's name of the programs.
- Certifications and licenses of the key staff members, if applicable.

Because some of the programs listed under individual's experience could also be listed under the firm's experience, we understand some of the detail on each program may not be restated. It is recommended that a cross reference be provided.

### 4. Staff Availability

For each of the proposed key staff members, please list the individuals' current programs that require twenty (20) percent or more of their time. If a staff member is working on fewer than two programs that meet the 20 percent threshold, the firm shall list at least two of that person's largest programs. For each of the programs, please provide the program's description, the person's role, percentage of the person's time, and completion date of the person's work on that program.

If you have any questions concerning the Contract Reporter Notice, please refer to NYS Contract Reporter Notice for a contact person.

## **Attachment 4 - Project Description and Objectives**

### **INSTRUCTIONS**

#### **Refer to Activities/Work Required to be Performed Section of the SOI**

The Project Description is where the organization provides detailed information on the services/project that it will be providing with this grant. When completing this section ensure that the following points have been addressed.

#### **Project Outcomes:**

For this Solicitation of Interest, the Project Outcome is the effective delivery of comprehensive, culturally competent, neighborhood-based services, which meet the needs of the served community. The project description must detail the service and objectives that are the focus of this proposal and will result in the project outcome.

#### **Organizational Description**

Describe the agency mission, past accomplishments highlighting experience with the target population or a similar program with another population, special characteristics and resources of your organization that are predictive of your success in achieving the stated Project Objectives.

**Note: The applicant agency must include the type and extent of services rendered by the Settlement House in the past three (3) years relevant to the proposed project.**

#### **Program Location**

Where will the project operate? Describe the physical location(s) of the project.

#### **Days and Hours of Operation**

When will the project operate? Enter the hours and days of operation.

#### **Target Population**

The target population is the specific group of people (individuals, families, community members) who will directly interact with the program staff. They are the targeted beneficiaries of the program activities, the people whose well-being, health and development is being promoted or whose condition, behavior or status will change in some way as a result of your programs services. Generally, they have a need to be met or a condition or behavior that the program is intended to improve.

Describe your target population including their characteristics, strengths, problems and specific needs. The description does not need to be long or complex. However, it must be clear and evidence an understanding of the particular needs or problems of the target population that your program activities seek to address; demonstrate the particular community need. Include:

- **General Characteristics** - This should include the number of caregivers and/or children to be served, their age, geographic location, gender, ethnicity, economic status, and other special attributes or relevant information.
- **Strengths, Needs, Conditions and Behaviors of Target Population** - Explain the particular problems and needs of the target population your program activities will address

and the strengths you will build upon. ***A description of needs/conditions/behaviors only is required here; NOT how you will address these needs. Identify eligibility criteria for participation in your program activities.***

- **Target Community** - Describe the community the program activities will target including the neighborhood(s) the Settlement House serves. Describe the need for your program activities to target services for this community which is the area in which your Settlement House serves. This must include the cultural and linguistic needs of the community. Identify other currently available community programs and services addressing this need. Explain why the proposed program activities, if funded, would attract the expected number of participants. Describe the degree to which targeted participants, providers or others in the community were involved in planning the program activities to be delivered.

### **Services and Activities to be Provided:**

Each program offers a particular services model or approach consisting of the constellation of services offered and how these are delivered to program participants (frequency, duration of services, core principles, delivery strategy, collaborating agency roles, locations, and other relevant features). This is what the provider uses to achieve the identified project objectives.

The services and activities to be provided must demonstrate that the program activities are likely to attain the identified project objectives and be consistent with all TANF requirements, as required by OCFS.

- Describe the core features or essential elements of your program activities, including the kinds of services provided, how often and for how long they will be provided, and how they will be delivered. Include plans for outreach.
- Provide information about the community to be served and how the proposed project relates to the overall needs of the community.
- Describe how your target population's characteristics, strengths, problems and specific needs discussed in the prior section will be addressed through this program, and how the outcomes will be measured. Include a description of how the program will address any racial/ethnic/gender disparities identified in the community or target population.
- Discuss how you will coordinate or collaborate with other community services. Indicate if steps will be taken to coordinate efforts with programs that have similar target populations or services. Attach completed and signed Collaboration Commitments (Attachment 5) with other neighborhood service providers as part of the service delivery collaboration.
- Discuss how and where TANF eligibility and certification will be conducted, if required by OCFS.
- Discuss how information regarding outcome-based measures that demonstrate quality of services provided and program effectiveness will be articulated to OCFS.
- Describe what accounting and fiscal control procedures will be used to assure that funds are expended in accordance with this article, including the filing of an annual financial statement.
- Discuss what appropriate written records regarding the number of individuals and families served and the type and extent of services rendered will entail.

**Staff Responsibilities/Duties:**

- Describe the staffing plan, staff resources, lines of supervision, qualifications and competencies as they relate to the proposed program.
- Explain how staff reflects the language and culture of the community to be served.

**Project Objectives**

Project objectives are the measurable improvements in the condition or behavior of the target population the program activities intend to achieve by the end of the contract period. Objectives are quantifiable and verifiable indicators of program performance. A program's success is measured by how well it achieves its project objectives. Project objectives should be ambitious, but realistic.

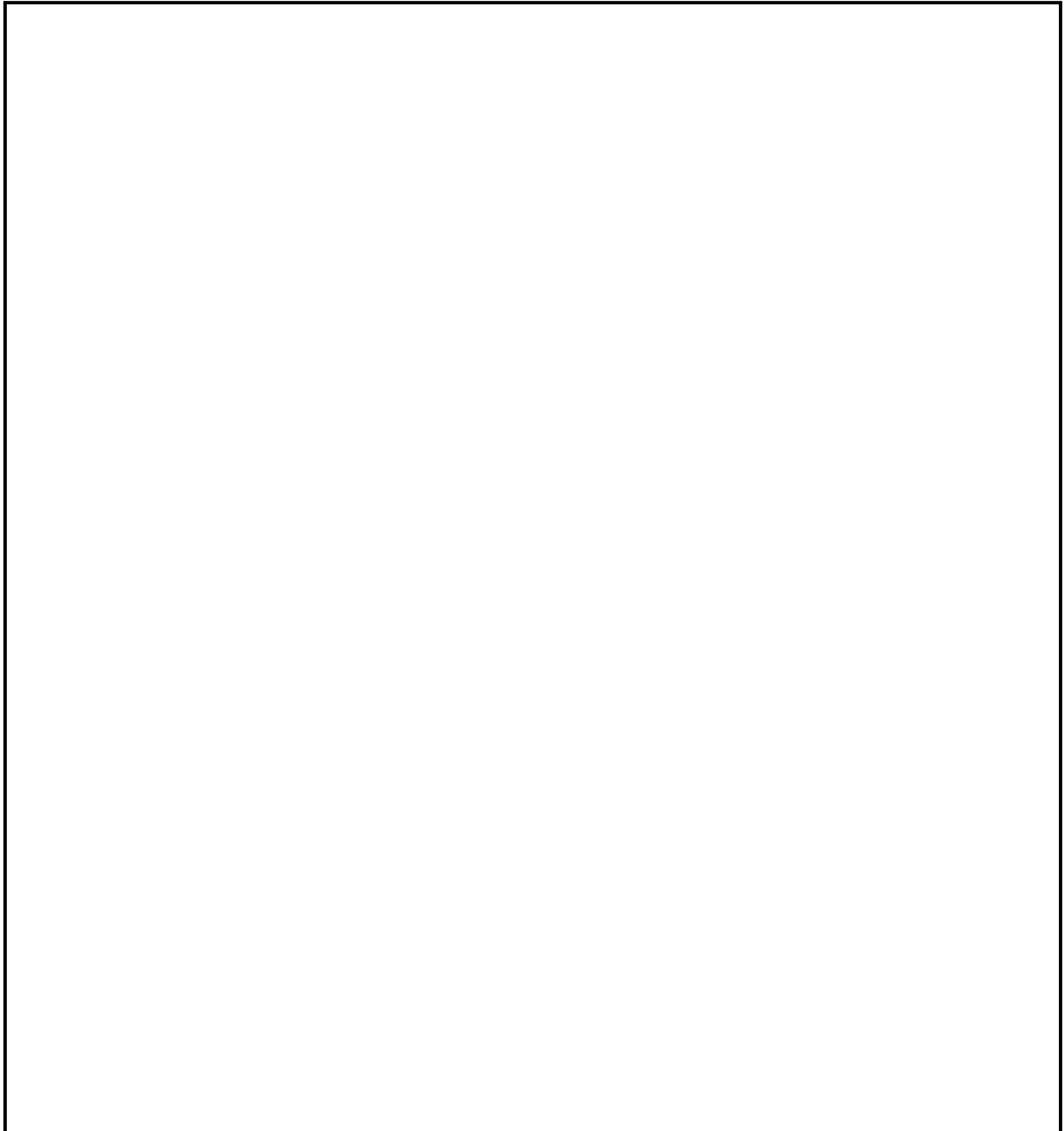
Project objectives must:

- address identified needs of the target population(s);
- address the linguistic and cultural needs of the community;
- be clearly defined and measurable;
- be achievable with the resources available to the program;

**Project Description (Attach additional sheets as needed)**

Briefly describe your organization, its background and purpose. Next, describe how you will implement your project by addressing each of the following areas:

- Achieving the Project Outcome
- Program Location
- Days and Hours of Operation
- Impact on disparities
- Services and Activities to be Provided
- Staff Responsibilities & Duties
- Collaborations
- Impact Measurement Approach

A large, empty rectangular box with a black border, intended for the applicant to provide a detailed description of their organization, project background, and implementation plan. The box occupies the majority of the lower half of the page.

**Project Objectives (provide at least two (2) objectives)**

Objectives must be measurable, specific, relate to budget items and the project description, and be consistent with the contract term. They must be stated in terms of the services provided and will be used to help measure the success of the project. Please provide at least two (2) objectives. For each objective, please provide:

- how many people will be served
- proposed measures which relate to the overall project outcome

You will be required to report on these objectives.

<p><b>Objective 1:</b></p> <p><i>Number of people served by this objective:</i> _____</p> <p><b>Measure(s):</b></p>
<p><b>Objective 2:</b></p> <p><i>Number of people served by this objective:</i> _____</p> <p><b>Measure(s):</b></p>
<p><b>Objective 3:</b></p> <p><i>Number of people served by this objective:</i> _____</p> <p><b>Measure(s)</b></p>
<p><b>Objective 4:</b></p> <p><i>Number of people served by this objective:</i> _____</p> <p><b>Measure(s):</b></p>



## Exhibit A

### Specific Terms & Conditions Authorization to Use TANF Funding

The State Office of Children and Family Services (OCFS) and its Contractors are authorized by the NYS Legislature in accordance with the TANF State Plan to use TANF funds for “non-assistance” services.

Contractor agrees that all federal TANF funds shall be expended on “non-assistance” services as defined below in this section of the AGREEMENT to TANF eligible individuals and their families, as applicable, with the intent to achieve one or more of the following:

- provide services to needy families so that children may be cared for in their own homes or in the homes of relatives;
- end the dependence of needy parents on government benefits by promoting job preparation and work;
- prevent and reduce the incidence of out-of-wedlock pregnancies; or
- encourage the formation and maintenance of two parent families.

### TANF Definitions

The Contractor and the Office agree to the definitions of the following terms in the administration of TANF programs:

1. **Family Members:** All of the following persons **who live with** the applicant are family members and must be incorporated in determining and reporting the number of families served with TANF funding (and in determining income eligibility, if participant eligibility is required to be determined with regard to income):
  - the applicant’s husband or wife;
  - the applicant’s minor children and the siblings who are also minor children (including half and step-siblings);
  - if the applicant is a minor, the applicant’s parents and the applicant’s siblings who are minor children; and
  - the father or mother of any minor children listed above, even if the parent is not married.
2. **Custodial Parent:** Parent with legal and primary custody as granted by valid agreement between the parties or by court order or decree and with whom the child lives.
3. **Non-Custodial Parent:** The Parent who does not live with or have physical custody of the child, but is legally responsible for providing financial and medical support. The number of non-custodial parents served with TANF funds must be reported as part of the TANF monthly

data reporting requirement for programs where participant eligibility is required to be determined with regard to income.

4. **Income Eligible Persons (criteria used by programs classified as “With Regard to Income”):** Certain TANF-funded programs require that TANF funds be used solely “for eligible persons with income not exceeding 200 percent of the Federal poverty level.” Such persons are income eligible for TANF as defined by the New York State TANF State Plan. Income eligibility requirements apply only to programs classified as “with regard to income” under TANF regulations. Contractors who operate such “with regard” programs may use TANF funds solely to serve persons at or below 200% of poverty provided that participants meet all other TANF eligibility requirements and are not an alien or a fugitive felon. Such persons do not have to be in receipt of public assistance benefits.
5. **(Family) Gross Income:** For the purposes of determining participant income eligibility for TANF-funded programs as applicable, i.e., for use as eligibility criteria for “with regard to income” TANF programs, Gross Income is defined as income of family members before taxes and other deductions that include, but are not limited to:
  - Wages, salary and tips from work
  - Self-employment income (after business expenses)
  - Social Security benefits
  - Public assistance (Family Assistance, Safety Net Assistance)
  - Unemployment compensation
  - Workers’ compensation
  - Supplemental Security Income (SSI)
  - Child support payments received
  - Alimony received
  - Interest payments
  - Other recurring income that is not excluded below

**Income not included in definition of Gross Income**

- Earned income of a minor child
- Adoption/foster care payments
- One-time loans, gifts, lump sum payments or other non-recurring income
- Child care subsidy payments

6. **Current Income:** Current income is income that has been or is expected to be received in the calendar month of the participant's application for TANF Services, and is expected to continue beyond this month.
7. **Assistance:** (Contractor shall **not** provide "assistance" as defined below to participants). Assistance for federal purposes consists of any payment or benefit designed to meet ongoing basic needs – food, clothing, shelter, utilities, household goods, personal care items, general incidental, and expenses. Assistance also includes supportive services such as **transportation** or **child care** provided to unemployed recipients. Assistance paid to a TANF recipient is counted toward the 60-month TANF time limit. Assistance counts toward the support offset. Payment types defined as assistance, when paid to a trackable person in a trackable case type (Family Assistance, Cash Safety Net Assistance (SNA), Non-Cash Safety Net Assistance/FP) will trigger time limit counts, be reported to DHHS as assistance, and be counted.
8. **Non-Assistance:** (Contract may provide certain "non-assistance" as defined below to participants). Non-assistance for federal purposes are benefits that are short-term, designated to meet a specific crisis of episode of need, not meeting recurrent or ongoing needs, and not extending beyond four months. In addition, non-assistance includes work subsidies and supportive services (transportation, child care) to employed recipients. Non-assistance paid to a TANF recipient does not count toward the TANF 60-month time limit. Non-assistance does not count toward the support offset. Payments made through EAF (including SNA/EAF) are not considered.

**NOTE:** Contractor is advised to consult the program specific requirements cited in this Appendix A for description of allowable and unallowable costs and specific guidance on the types of "non-assistance" services allowed to be offered using TANF funds under this AGREEMENT.

9. **Poverty Level:** The Federal Health and Human Services poverty guidelines that are published yearly.

***9. a - Poverty Level Guidelines** – The poverty level guidelines are a simplified version of the Federal Government's statistical poverty threshold used by the Bureau of the Census to prepare its statistical estimates of the number of persons and families in poverty. The poverty guidelines are used for administrative purposes such as in determining whether a person or family is financially eligible for assistance under a particular federal program. The poverty level guideline is calculated annually and released between February and March. OCFS provides this information to TANF-funded Contractors prior to June 1, the effective date the revised guidelines must be used by Contractors replace the prior year Poverty Level guidelines.*

10. **Public Assistance (PA):** Public Assistance is the "cash" assistance component of welfare. In New York State, public assistance includes Family Assistance, Safety New Assistance, and Emergency Assistance for Families, Emergency Safety Net Assistance and Emergency Assistance for Adults. PA is often referred to as "temporary assistance." A separate Medicaid eligibility determination must be made to receive Medicaid coverage.
11. **Minor Child:** A "minor child" is a child who is under 18 years of age or is under 19 years of age and attending secondary school (high school) or an equivalent level of vocational or technical training (for example, a BOCES program). In order for the minor child to be eligible

for TANF Services, the minor child must be living with a parent or other relative who is the primary caretaker of the child, or be in foster care with a plan to return home.

12. **Primary Caretaker:** The primary caretaker is the adult relative with whom a minor child lives, if the child does not live with his or her parent. The primary caretaker makes the majority of the decisions about the child's well-being.

13. **Qualified Alien:** Defined as an alien who:

has been lawfully admitted for permanent residence under the Immigration and Nationality Act (INA);

has been granted asylum under Section 208 of the INA;

has been admitted to the United States as a refugee under Section 207 of the INA (including Ameri-Asian immigrants admitted under the provision of Public Law 100-202);

has been paroled into the United States under Section 212(d) (5) of the INA for a period of at least one year;

has had deportation withheld under section 243 (h) or 241(b) (3) of the INA;

is a Cuban or Haitian entrant (as defined in Section 501(e) of the Refugee Education Assistance Act of 1980);

has been granted conditional entry pursuant to section 203(a)(7) of the INA; or has been determined by the social services district to be in need of Medicaid as a result of being battered or subject to extreme cruelty in the United States by a spouse or a parent, or by a member of the spouse or parent's family residing in the same household as the alien.

### **General Provisions for Administration of TANF-Funded Programs**

1. Prior to receiving funds related to this AGREEMENT, Contractor and any and all subcontractors must meet all applicable State and Federal laws and regulations.
2. At the discretion of the Office, independent evaluation(s) may be conducted over the course of implementation of the AGREEMENT to determine the impact of programs as they relate to the above referenced desired outcomes.
3. The Cost Allocation Plan (Appendix B) must be completed according to instructions provided in Appendix B and submitted to OCFS as part of this AGREEMENT.
4. If an Indirect Cost Rate is used by the Contractor, the Contractor must provide documentation to OCFS of Federal funding source approval of the Indirect Cost Rate that provides sufficient detail of how the cost of administrative services is calculated and how such costs are distributed among Contractor sponsored programs and activities.
5. Contractor and any and all subcontractors are required to implement contractual services in compliance with applicable State and Federal law.

6. Contractor and any and all subcontractors are required to determine eligibility of all potential participants to be served in compliance with applicable State and Federal law. Potential participants of TANF programs will be required to complete a TANF Services Application Certification (TSAC). Contractor and any and all sub-contractors are required to certify participant eligibility, as required by OCFS. Applicants for said services and members of their respective families are not required to provide documentation of citizenship, resources, income or other eligibility items as part of the application process. Contractor and any and all subcontractor(s) will determine participant eligibility solely on the basis of information provided and self-attested by the applicant on the prescribed TSAC form, if applicable. All eligibility determinations will be subject to State and Federal audits. Services to be provided to eligible clients under this program are considered “non-assistance” services with short-term benefits not intended to meet recurring needs and not expected to extend beyond four months. TANF “non-assistance” services provided under the TANF program are not included in the calculation of the 60-month limit for TANF “assistance” recipients.
7. The Contractor and any and all subcontractors are required to use the appropriate Federal Poverty Standard in determining eligibility and must use the revised Poverty Standard when it becomes effective on June 1 of each year this AGREEMENT is in effect.
8. The Contractor and any and all subcontractors agrees that they will not use TANF funds to provide TANF services that constitute “cash assistance” or “assistance” to TANF eligible families.
9. The contractor and any and all subcontractors agree that they will not use TANF funding for any purpose identified as “unallowable” or “ineligible costs” in this Appendix A and in any other part of this AGREEMENT.
10. The Contractor and any and all subcontractors must accurately track, on a monthly basis and in compliance with reporting requirements of this AGREEMENT, TANF reporting information regarding the number of families and non-custodial parents served by the Contractor or subcontractor(s), as required by OCFS. On a quarterly basis, this data must be reported with monthly breakdowns of numbers served in compliance with reporting requirements of this AGREEMENT. TANF reporting information must be reported as prescribed by OCFS.
11. Said TANF reporting information must be reported using prescribed forms issued by OCFS. Failure to provide said information within the established reporting schedule may result in rejection of related claims for reimbursement and/or termination of this AGREEMENT at the discretion of OCFS.
12. The contractor and any subcontractors must accurately report on a quarterly basis and in compliance with the reporting requirements on the amount of TANF funds expended, using prescribed claim and expenditure forms issued by OCFS.
13. The Contractor and any and all subcontractors must complete all work as described in the Solicitation of Interest no later than the end of the initial contract period. Final claims must be submitted in accordance with OCFS requirements.
14. The Contractor and any and all subcontractors must maintain and preserve adequate files and records sufficient to meet applicable State and Federal law. Contractor and any and all subcontractors shall make all program and financial records available for inspection, review

and copying upon request by officials, employed or retained by the State, their authorized representatives, and appropriate officials from the Federal government for a period of six (6) years after the final use of funds provided under this AGREEMENT or until the conclusion of any litigation involving such records.

15. Payments and future funding are contingent on the availability of federal and/or State funding for projects to be conducted in accordance with this AGREEMENT.
16. Special TANF requirements:
  - a. Contractor and any and all subcontractors assures that services provided using TANF funds are primarily program in nature, and;
  - b. Contractor and any and all subcontractors shall develop and implement a methodology to attribute an appropriate share not to exceed 15% of the contract award for OCFS to administrative costs for contracts which include a mix of administrative and programmatic activities, and;
  - c. Contractor and subcontractor agree to take all reasonable steps to hold related administrative costs to a minimum.

### **Authorization to Use TANF Funding**

#### **1. The Contractor & Subcontractor Responsibilities in Determining TANF Eligibility**

Prior to providing services, Contractors and any and all subcontractors shall individually certify all families served with TANF funds as having incomes under 200% of the federal poverty level. Specific information on the 200% of the federal poverty level criteria will be provided to the Contractor by the Office and will be effective June 1 of each contract year. Contractor shall notify any and all subcontractors of the poverty level criteria and the requirements for identifying eligible families under TANF rules and law.

**Legally Responsible Relative:** Only natural or adoptive parents and stepparents are legally responsible relatives. When the child is the recipient of services and the child does not live with a legally responsible relative (LRR), only the income of the child and his or her siblings and half-siblings must be counted. The income of the non-legally responsible relative does not count in determining TANF eligibility.

#### **2. Verifying Family Categorical TANF Eligibility**

The Contractor and any and all subcontractors shall assure that all families served using TANF funds must also meet the categorical requirements for TANF, as required by OCFS. This means that the family must include at least one child under the age of eighteen, or a pregnant woman. In addition, the child must live with an eligible caretaker relative. An eligible caretaker relative is a caretaker related to the child by blood, adoption or marriage.

- 1. Require all applicants for services (or legally responsible relative of applicant) to complete the Application for TANF Services form prescribed by the Office. Substitute forms will not be acceptable by the Office;**
- 2. Clearly identify all families as eligible prior to providing program services;**
- 3. Verify the family's categorical and income eligibility; and**
- 4. Maintain eligibility documentation for adult purposes.**

### 3. Procedure for Maintaining TANF Eligibility Records

The Contractor and any and all subcontractors shall maintain documentation of all participant TANF eligibility verification for audit purposes. Documentation that must be maintained includes all Applications for TANF Services forms, notations of caseworkers, records listing the documentation that was shown, logs with the date and time of telephone calls made to other agencies such as the local social services department, along with the person spoken to and the date.

### 4. TANF Reporting Requirements

The Contractor and any and all subcontractors shall provide quarterly, or if a waiver has been granted monthly, reports on the amount of TANF funds expended and the number of TANF eligible families and number of non-custodial parents served using TANF funds on prescribed claim and expenditure forms issued by the Office and within timeframes prescribed by OCFS.

### Non-Allowable and Allowable Costs Applicable to TANF

The Contractor and any and all subcontractors are authorized to use TANF funds under this AGREEMENT only to provide TANF services that constitute “non-assistance” to TANF eligible families and is precluded from using TANF funds to provide “cash assistance” or “assistance” as defined in federal law or regulation, or any “unallowable” or “ineligible” costs as set forth in Federal or State law or regulations or in this Appendix or in any other part of this AGREEMENT.

### Distinguishing “Assistance” vs. “Non-Assistance” and “Allowable” vs. “Unallowable” Costs for TANF Programs

“**Assistance**” consists of benefits that are designed to meet a family’s on-going basic needs (food, clothing, shelter, utilities, personal care items, household goods and general incidentals) and such supportive services as transportation and child care for families who are not employed. The funds provided under the AGREEMENT may not be used for any benefits or services that meet the definition of “assistance.” General education services and medical services also may not be provided under this grant; provided, however, TANF funds may be used for pre-pregnancy Family Planning Services if efforts to access such services by using other funding sources are not viable.

The funds provided under this AGREEMENT may only be used for services that meet the definition of “non-assistance.” “**Non-Assistance**” includes long-term, recurrent family preservation services such as case management, counseling, mediation services, and school-based support services. It also includes transportation and childcare services for employed families. In addition, some services that might otherwise be regarded as assistance, such as child care and transportation for unemployed families, may nevertheless be provided if they are non-recurring, short-term benefits that address a specific crisis situation and will not extend beyond four months. Non-recurring does not mean that the benefits cannot be provided more than once. However, the expectation at the time the benefits are granted is that the situation will not be repeated and the benefits will not be provided on a regular basis. For example, respite care might be given under the AGREEMENT for up to four months if necessitated by a specific crisis situation that is not expected to be repeated. Furthermore, childcare and transportation may be provided to unemployed families only if the services are incidental to the program and are not available from the social services district.

For TANF purposes, a medical service is a service that either can be provided only by or under the direct supervision of a medical professional or is claimed or claimable under the medical

assistance program. TANF funds may not be used for medical services. Conversely, TANF funds may be expended for an activity that meets ALL of the following conditions:

1. The activity serves a TANF purpose;
2. The activity is of a type that is generally provided by personnel who are not medical professionals and are not acting under direct supervision of medical professionals; and
3. The activity is not claimed under the medical assistance program and may not be so claimed.

A service is not medical service solely by a medical professional does directly supervise it (although the costs of the professional him or herself may be a medical service). Nor is a service a medical service just because a medical professional provides it, if the service is of a type that may be and generally is delivered by non-medical personnel. For example, if a counseling program is generally staffed by social workers, the fact that a nurse is a counselor does not render it a medical service.

### **The Following Provisions Apply to Contractors and Subcontractors Regarding Non-Allowable and Allowable Costs:**

#### **Non-Allowable Costs for TANF-Funded Projects**

*The Contractor and any and all subcontractor(s) agree that the following items constitute costs that are NOT eligible for reimbursement with TANF funds:*

- Benefits defined as “assistance” under TANF regulations that are designed to meet a family’s on-going basic needs (food, clothing, shelter, utilities, personal care items; household goods and general incidentals);
- Capital expenditures such as acquisition, construction or structural renovation of facilities or purchase of real property;
- Advertising costs except for recruitment of project personnel, program outreach and recruitment of participants, or the procurement of scarce items;
- Entertainment costs including social activities (unless determined to be educational or curriculum related or otherwise TANF-eligible subject to pre-approval by OCFS);
- Interest costs, including costs incurred to borrow funds;
- Costs of organized fund raising (including lobbying of any type);
- Costs for dues, attendance at conferences or meetings of professional organizations, unless attendance is necessary in connection with the project and pre-approved by the Office. Costs approved by the Office for in-state and out-of-state travel to such conferences and meetings are subject to the reimbursement limits as issued by the Office of the State Comptroller;
- Costs for preparation of continuation agreements and other proposal development costs;
- Recurrent child care or transportation for unemployed families;
- Stipends to unemployed participants;
- Any commodity, service, training cost or participant testing currently reimbursed by the State or federal government;
- GED services or other educational instruction or services that are supported by other federal or state funds and available to the general public at no cost; and
- Medical services provided by or under the supervision of medical provider or claimable under Medicaid and insurance; provided, however, TANF funds may be used for:

Pre-pregnancy Family Planning Services if efforts to access such services by using other funding sources are not viable. Services for routine OB/GYN care or for other general health care services are not fundable.

### **Allowable Costs for TANF-Funded Projects**

The Contractor agrees that TANF funds may be used, subject to the discretion of the Office, only for the following purposes:

- a. Long term, recurrent family preservation services including:
  - Counseling;
  - Home visits;
  - Crisis intervention services;
  - Support groups;
  - Parent or caretaker relative training;
  - Case management;
  - Mental health or drug assessments for caretakers that do not fit the criteria for medical services; and
  - Child care and transportation costs for employed families that are incidental to the program
  - And are not available through the social services district.
  
- b. Commodities and/or benefits to meet immediate family needs pertaining to prevention of placements, retention of children with their families and communities, and family self-sufficiency, that are short-term (having a duration of less than four (4) months **AND** that are non-recurrent in nature. Such benefits may be provided more than once to eligible participants if there is an expectation by the Contractor or subcontractor, at the time the commodities or services are provided, that the situation will not be repeated and that the particular benefits will not be provided on a regular basis thereafter such as:
  - Housing security deposits;
  - Car repairs;
  - Telephone installation costs;
  - Field trips; and
  - Child care and transportation costs for unemployed families that are incidental to the program and are not available through the social services district.
  
- c. Program support costs including:
  - Supplies needed for support groups or participant events;
  - Purchase of toys, books and other curriculum and educational materials directly related to achieving program goals;
  - Justifiable staff training and staff transportation costs; and
  - Minor renovations to the program site necessary for operation of the TANF-funded program to meet basic health and safety requirements or needs. Minor renovations must be pre-approved by the Office as reasonable and necessary and must comply with all applicable local, State and Federal building, fire and safety codes, standards and laws.
  
- d. Administrative costs that provide necessary support to the TANF-funded program if deemed to be reasonable by the Office provided the total administrative costs do not exceed any limit

on such costs set forth in the Solicitation of Interest. Administrative costs are defined as costs for the general administration and coordination of the program, including costs for administrative functions and all indirect (or overhead) costs. Examples of allowable administrative costs include:

- The salaries and benefits of staff performing administrative and coordination functions;
- Costs associated with the preparation of program plans, budgets and schedules;
- Costs involved in monitoring;
- Public relations (may not be related to fund-raising or lobbying);
- Services relating to accounting, litigation, audits, management of property, payroll and personnel; and
- Costs for the goods and services required for the delivery of the administrative functions listed above, such as the costs for supplies, equipment, travel, postage, utilities, rental and maintenance of office space.

## Exhibit B

### Description of Cost Allocation Methodology

1. A Cost Allocation Plan distributes the overhead costs associated with centrally provided Contractor services (i.e., purchasing, personnel, administration) to the Contractor's organizational sub-units that utilize such services.
2. The Contractor shall adhere to applicable Temporary Assistance to Needy Families (TANF) cost allocation principles and shall complete the attached *Description of Cost Allocation Methodology* form, including any mutually agreeable amendments to such form or instructions that may be prescribed by the Office from time to time.
3. Unless the Contractor submits a narrative description as described below, the *Description of Cost Allocation Methodology* form requires the signature of an independent accounting firm or another qualified auditor confirming that Management of the organization receiving TANF funds (Contractor) has informed the firm or auditor of the methods it intends to use to allocate administrative and programmatic costs to Federal Temporary Assistance for Needy Families (TANF) funds during the contract period. If implemented in the manner described by the organization to the independent public accountant, the cost allocation methodology will not violate Generally Accepted Accounting Principles and will satisfy the requirements of U. S. Office of Management and Budget Circulars A-122 for nonprofit organizations, A-21 for educational institutions, or A-87 for state and local governments.  
*NOTE: The requirement for signature of an independent firm or another qualified auditor is not applicable if the requirements for providing a narrative description as described below and in the attached are fulfilled by the Contractor.*
4. If for any reason the Contractor does not obtain sign-off on the *Description of Cost Allocation Methodology* form by an accounting firm or qualified auditor, the Contractor must provide a narrative description of the cost allocation methodology to be used in administering the program. This narrative description must be submitted to the Office and may need to be approved by the New York State Division of the Budget, at its discretion, before the contract is finalized, program approval is granted and related reimbursement(s) is paid to the Contractor.
5. The allocation plan may not include allocation of any costs designated as ineligible or not allowed as cited in any part of this AGREEMENT.

## STATEMENT ON COST ALLOCATION METHODOLOGY

**NAME OF TANF-FUNDED PROGRAM:** Settlement House Program

(NOTE: A separate form must be completed for each TANF-funded program.)

Management of ( ) has advised ( ), as indicated below, of the methods it intends to use to allocate administrative and programmatic costs to Federal Temporary Assistance for Needy Families (TANF) funds during the contract period. If implemented in the manner described by the organization to the independent public accountant, the cost allocation methodology will not violate Generally Accepted Accounting Principles and will satisfy the requirements of U. S. Office of Management and Budget Circulars A-122 for nonprofit organizations, A-21 for educational institutions, or A-87 for state and local governments.

### Administrative

- Conventional time distribution
- Random sampling
- Client counts
- Transaction counts
- Random time sampling
- Systematic work sampling
- Stratified work sampling
- Worker self-recorded work sampling
  
- Work measurement-time log systems
- Space/square footage
- Standardized equipment
- Other\*\*

### Programmatic

- Conventional time distribution
- Random sampling
- Client counts
- Transaction counts
- Random time sampling
- Systematic work sampling
- Stratified work sampling
- Worker self-recorded work sampling
- Work measurement-time log systems
- Space/square footage
- Standardized equipment
- Staff assigned to this program are working exclusively on this program and TANF is the only funding stream for this program\*
- Other\*\*

Please ensure that you have also checked an Administrative methodology for allocating common administrative (e.g., overhead and indirect) cost to the TANF program.

Please provide a description below of the methodology to be used if it does not fit one of the categories above

---

**NOTE: At least one box should be checked under each column. Please see the attached for descriptions of the different methodologies. If more than one cost-allocation methodology is to be used in either category (administrative and/or programmatic), please provide an explanation below.**

---

**Signed: X \_\_\_\_\_ (original signature required)**

**Signature of independent public accounting firm or other qualified auditor who meets the criteria for independence as outlined in the U.S. General Accounting Office's Government Auditing Standards.**

Printed Name:

Title:

Name of Firm:

Phone Number:

Date:

.....

**Signed: X \_\_\_\_\_ (original signature required)**

**Signature of service provider's Executive Director/Chief Executive Officer or person responsible for representing the service provider in fiscal matters (e.g., Chief Financial Officer).**

Printed Name:

Title:

Name of Service Provider:

Phone Number:

Date:

**NARRATIVE OPTION:** Certain procurements/applications allow your organization to submit a letter describing the cost-allocation methodology to be used in lieu of this form. Please consult the specific procurement/application or the State agency administering this program to determine if a narrative option is available for this program.