



**Invitation to Submit a Request for Investment in  
Hunger Relief Program Services  
to be Delivered in the City of Portland**

**Publication Date: September 25, 2019**

**Summary of RFI**

<b>Available Funding:</b>	Approximately \$x will be available for a 36-month period through the Portland Children's Levy. See instructions, pgs x - y, for grant requirements.
<b>Due Date, Time &amp; Place:</b>	November 20, 2019 by 5 PM See instructions, pgs x - y for how to submit applications.
<b>Pre-Application Conference:</b>	October 9 <sup>th</sup> , 1pm – 2pm; and October 10 <sup>th</sup> , 10am -11am Location TBD PCL strongly encourages all interested applicants to attend.
<b>Period of Award:</b>	36 months (7/1/20 – 6/30/23)
<b>Eligible Applicants:</b>	Not for Profit Corporations – 501(c)(3), Local Education Agencies, Community Colleges and Universities. These groups may also apply as a consortium of organizations through an identified lead agency/fiscal agent.
<b>Requested Services:</b>	Hunger relief services for children and youth ages 0-18 and their parents or guardians. See instructions for grant requirements.
<b>Goal of Services:</b>	Expand access to healthy, nutritious food for hungry children.
<b>Questions or Comments:</b>	Questions or comments about this RFI may be addressed to <a href="mailto:questions@portlandchildrenslevy.org">questions@portlandchildrenslevy.org</a>
<b>Submit Applications to:</b>	Lisa Pellegrino via email: <a href="mailto:Lisa.Pellegrino@portlandoregon.gov">Lisa.Pellegrino@portlandoregon.gov</a>

# Request for Investment in Hunger Relief Programs for Children and Youth

This Request for Investment (RFI) is divided into 2 components: RFI Instructions and RFI Questions.

## **RFI Instructions, pgs x - y**

The instructions have 4 parts. Please read all parts before you apply for PCL funding.

Part 1. Portland Children’s Levy and Program Area Strategies	Page x -y
Part 2. Funding Requirements	Page x -y
Part 3. Application Components and Submission	Page x -y
Part 4. Funding Process	Page x -y
Definitions/Guidance for Tables I and II	Page x- y

## **RFI Questions, pgs x - y**

Applicants must respond to questions in the 3 sections of the RFI.

Applicants need 3 additional documents as Exhibits to this RFI. These documents contain forms required as part of the application. The Exhibits are:

- Exhibit A: Application Coversheet and Application Form (Word file)
- Exhibit B: **Table I**. Demographics of Organization’s Clients, Staff, Board Members (Excel file)
- Exhibit C: Program Budget Form (Excel file)

# **RFI Instructions**

## **Part 1. Portland Children’s Levy and Program Area Strategies**

### **Introduction to the Portland Children’s Levy (PCL)**

The Levy is a City of Portland initiative that generates \$xx million annually through a property tax of \$0.4026 per \$1,000 assessed valuation. Portland voters created the Levy in 2002 and overwhelmingly renewed it for the third time in Spring 2018. The current Levy runs July 2019 through June 2024.

PCL goals are:

- Prepare children for school.
- Support children’s success inside and outside of school.
- Reduce racial and ethnic disparities in children’s well-being and school success.

Portland Children’s Levy operates a competitive grant process at least once during each 5-year levy. 95 cents of every dollar go directly to proven children's programs throughout the city. Funded programs address one or more PCL’s 6 program areas: early childhood, child abuse prevention & intervention, foster care, after school, mentoring, and hunger relief.

PCL’s 5-member Allocation Committee makes all grant funding decisions during public meetings. Committee members include one City of Portland Commissioner, one Multnomah County Commissioner, one representative of the business community and two citizens with expertise in children’s issues.

### **Background Data on 2014 Funding in Hunger Relief**

In the 2014 competitive funding round, PCL allocated \$2,630,486 over 3 years to hunger relief programming. Twelve applicants requested \$7,911,887 for hunger relief programs (\$3.01 requested for every \$1 available). All applicants met minimum score requirements. Of the 12 applications considered for funding, 2 received grants between 88% - 100% of funding level requested. On average, the 2 successful applicants received 93% of their grant requests.

### **Development of Program Area Strategies 2018-19**

PCL hired Empress Rules Equity Consulting to design and conduct the community engagement process to inform the 2019-20 funding round. Consultants focused on engaging a diverse range of community members. PCL relied on these results in drafting program area strategies.

Documents that summarize all Program Area Strategies, PCL’s Community Engagement process, and local data on children’s needs can be found on PCL’s website:

<http://www.portlandchildrenslevy.org/grants/2019-20-funding-round>

## Hunger Relief Strategies

Applications for PCL Hunger Relief funding **must** address one or more of the Program Area strategies shown in the table on the following page. Scoring criteria for this program area favor applications that demonstrate addressing at least one of the strategies and reflecting the program features outlined in the table. Applicants can find the scoring criteria on **pages x -y**.

<b>PCL's Program Area Goal:</b> Expand access to healthy, nutritious food for hungry children.		
<b>Program Area Strategies</b>		
<b>1. Provide food for pickup by families at a variety of community locations including schools.</b>	<b>2. Provide mobile food banks or pantries and/or home delivery of food to children and families experiencing food insecurity.</b>	<b>3. Provide training and education on nutrition, cooking, food budgeting, smart shopping, accessing local food resources, gardening for food production and community gardening resources to children and their caregivers.</b>
Possible service approaches: <ul style="list-style-type: none"> <li>• Food distribution at community-based locations such as churches, schools, parks and organizations serving children/families</li> <li>• Distribution methods such as food pantries and fresh food "markets" that allow people to select needed foods, pre-prepared food boxes, and backpacks filled with non-perishable foods for weekends.</li> </ul>	Strategies include possible service approaches.	Strategies include possible service approaches.
<p><b>PCL seeks hunger relief programs with the following features:</b></p> <ul style="list-style-type: none"> <li>• Conducts significant outreach to improve awareness of resources</li> <li>• Employs strategies to reduce stigmatization for people accessing services</li> <li>• Is demonstrably responsive to community needs and preferences on location for access, hours of operation and culturally appropriate foods</li> <li>• Has and uses nutrition and/or quality standards to screen food distributed to children and their families.</li> <li>• Provides fresh, perishable foods including fruits, vegetables, dairy, eggs and meats.</li> </ul> <p><b>Features are PCL priorities, not requirements, for proposed programs.</b></p>		

## **PART 2. Funding Requirements**

The applicant's response to the RFI Questions and the required additional materials described below will be used to determine whether the applicant meets these funding requirements.

### **A. Applications must address Program Area and one or more program area strategies**

- Organizations may submit multiple applications in one or more program areas.
- An application must address only one PCL program area and at least one strategy in that program area.
- Applicants may not request that a single application be considered for funding in more than one program area. PCL staff may recommend to the Committee that the application be considered in a different program area than the program area selected by the applicant, and the Committee has discretion to do so.

### **B. Available Funding and Size of Grants**

- Approximately \$x will be available for a 36-month period.
- Maximum grant allowable is up to \$675,000 per year, per application.
- All applicants must request a minimum grant of at least \$65,000 per year.
- Applicants must demonstrate that total PCL funding requests, in all program areas, would comprise **no more than** 30% of the applicant organization's revenues for its last closed fiscal year.
- To meet the minimum annual grant request and the requirement to not request more than 30% of organizational revenues in the last closed fiscal year, applicant organizations must have had at least \$217,000 in total organizational revenues in their last closed fiscal year to apply for PCL funds.

### **C. Eligible Service Population**

Proposed programs must directly serve children and/or youth aged 0-18 and their parents or guardians.

### **D. City of Portland Residency**

All children and families to be served with PCL funding must be residents of the City of Portland.

### **E. Duration of Investment**

PCL funding is available for 36 months of service beginning July 1, 2020 and ending June 30, 2023.

### **F. Eligible Applicants**

Non-profit corporations (501(c)(3)), local education agencies, community colleges and universities are eligible to apply for PCL funding.

Partnerships or collaborations of multiple entities must designate a lead entity to apply for funding, and if funded, take responsibility for reporting and billing. The lead entity may subcontract with partners to deliver portions of the proposed program.

***G. City of Portland Rules and Guidelines***

Funded organizations will be required to follow City of Portland EEO hiring guidelines and contracting rules, provide proof of liability, automobile and workers compensation insurance and provide additional assurances as required by PCL staff. For more information, see PCL's sample grant agreement template: [\[insert website address\]](#).

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## Part 3. Application Components and Submission

### **A. Application Form (Cover Sheet and Narrative Response)**

Applicants must complete the Application Form attached in [Exhibit A](#). The first page of the Form contains an Application Coversheet. The subsequent pages contain pre-formatted space for an applicant to complete the narrative portion of the application.

The narrative in the Application Form must have complete responses to the three sections of the Request for Investment. Respond to all parts of the question. Applicants who fail to address a portion of the question will receive fewer points.

The Application Form will assure that applicants' narrative responses meet the following formatting requirements:

- Separate page(s) for responses to each of the 3 sections; label response to each section and use the lettered and numbered subparts and headings. Do not include the text of the questions in the RFI.
- One-inch margins on each page (except where table formats exceed right-hand margins).
- No less than 11-point Arial font type.
- Page number and program name listed at the bottom of each page
- Comply with page limits for each section; pages that exceed the limit will not be scored

### **B. Required Additional Materials**

All applicants must submit the following additional materials with their application. Use the checklist below for assistance:

- Detailed FY20-21 proposed program budget using the attached budget form in [Exhibit C](#)
- Table I. Demographics of Organization's Clients, Staff and Board Members ([Exhibit B](#))
- Annual organization-wide budgets for the current operating fiscal year, and the most recent closed fiscal year that include sources and uses of all funds. Please clearly state the starting and ending months of the organization's fiscal year.
- If the applicant has revenues of at least \$1 million for the last closed fiscal year, applicant must submit its most recent audited financial statement.
- If the applicant has annual revenues of less than \$1 million for the last closed fiscal year, the applicant is not required to submit an audited financial statement with the application. If the applicant is awarded PCL funding, they must obtain an audit in the first year of program delivery. Applicants in these circumstances may include projected audit costs in their PCL grant request under this RFI. Funding for a second grant year will be conditioned on satisfactory audit results.

### **C. Application Submission**

1. Submit applications by 5pm on Wednesday, November 20<sup>th</sup>. PCL will reject late applications. Email the application and all required additional materials to Lisa Pellegrino at the following email address: [Lisa.Pellegrino@portlandoregon.gov](mailto:Lisa.Pellegrino@portlandoregon.gov).

2. Be sure the submission uses the following file formats for each part of the application:
- Application Form (Coversheet and Narrative Response using Exhibit A), Word file
  - Proposed Program Budget (using form in Exhibit B), Excel file
  - Table I. Demographics of Organization's Clients, Staff, Board Members, Excel file
  - Annual organization-wide budgets for current operation year and most recent closed fiscal year, PDF or Excel file
  - Recent Audited Financial Statement, PDF file

Please do **not** submit a PDF of the entire application. Failure to submit all required materials may disqualify the application from consideration.

PCL Staff will acknowledge receipt of all applications via email within 2 working days of receipt. If you do not receive email confirmation from PCL, please call PCL's office at (503) 823-2936.

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## Part 4. Funding Process

### A. Pre-Application Conference

PCL will hold two Pre-Application Conferences on October 9<sup>th</sup>, 1pm-2pm and October 10<sup>th</sup>, 10am – 11am. The Conference is not mandatory, but PCL staff highly encourage all potential applicants to attend one of them. During the Conference PCL staff will review the requirements and necessary forms for the RFI and answer any questions from potential applicants. Questions and answers from the Conferences will be available at [www.portlandchildrenslevy.org](http://www.portlandchildrenslevy.org) within 3 business days of each conference.

### B. Questions and Answers about the Application and Funding Process

PCL welcomes all potential applicants to submit questions via email, to [questions@](mailto:questions@). PCL will issue individual written responses to all questions submitted by applicants within 3 business days. PCL will post a weekly digest of questions asked and answers provided to individual applicants on its website at: [\[web address\]](#). The digest will not include the name of people who emailed the question or the applicant organization. PCL staff will post questions verbatim as received via email. If the question itself names the organization or program, PCL staff will not remove that reference before posting the question on the digest. Applicants may sign up to receive weekly email updates during the RFI process that will include a digest of the questions/answers. Applicants may submit questions until close of business on Monday, November 18<sup>th</sup>. Individuals will receive final responses and PCL will post all final questions and responses to the digest by close of business on Tuesday, November 19<sup>th</sup>.

### B. Review and Scoring by Volunteers

Volunteers will review and score each proposal during December 2019- January 2020. PCL staff recruit reviewers through extensive outreach. Volunteers have experience in PCL program areas, organizational and program management, racial equity, diversity and inclusion, program evaluation and research. These individuals will score each proposal based on the criteria defined in the [Scoring Form, pages x-y](#), that corresponds to the RFI Questions. Each section of the application is scored for a total of 100 points per application.

2019 RFI: Scored Sections of the Application	Point Value
I. Organizational Capacity and Commitment to Racial Equity, Diversity, and Inclusion	36 points
II. Proven Program Design & Effectiveness	54 points
III. Program Budget and Budget Narrative	10 points
<b>TOTAL</b>	<b>100</b>

A team of up to 5 reviewers will score a single application. PCL staff will average the section scores of all reviewers and will add these averaged section scores to get a total score for the application.

For organizations that submit multiple applications, PCL staff will average Section I scores from all reviewers who scored an application from that organization. For example, this means an

organization that submits 4 applications will have a final score on Section I that is the average of up to 20 reviewers' scores.

**Applications must achieve an average score of 23 or higher in Section I and 38 or higher in Section II to be considered for funding. Staff will notify applicants that do not achieve the required average scores on these application sections.**

PCL staff will email each applicant a copy of completed score sheets for their application no later than March 1.

### ***C. Staff Funding Recommendations***

After reviewers have scored applications, staff will develop a list of applications recommended for funding in each program area. Allocation Committee and applicants will receive staff's recommendations and rationale by March 1, 2020. Applicants may provide written and video testimony to the Allocation Committee in response to staff funding recommendations as described in Section E below. Staff will use the rationale outlined below for their recommendations. Recommendations will consider the strength of individual applications while also balancing investment in a grant portfolio of desired services for priority populations in Portland. Due to limited resources, only some applications are recommended for funding.

Staff will prioritize the following in developing a list of applications recommended for funding:

- Highest scoring applications in program area
- A portfolio of investments that ideally addresses all program area service strategies and priority populations

Recommendations may vary from applications' score order for the following reasons:

- Does not meet one or more funding requirements listed in Part 2
- Balancing funding among program area service strategies
- Balancing funding among priority populations
- Proposed program scale inconsistent with organizational experience
- Rapid and large-scale expansion proposed
- Unclear, minimal or no experience operating the proposed program/model and/or serving the proposed populations
- Substantially higher cost per participant than other proposed programs
- If applicable, programmatic or organizational performance as a past PCL grantee

Staff will not recommend funding for an application that fails to address at least one strategy in the program area or that attempts to address multiple program areas in one application.

Recommended funding amounts will be based on: total grant request; whether staff recommends all proposed service activities be funded; scale of proposed service expansion if applicable; and assuring funding for a range of desired services for priority populations.

#### ***D. Testimony in Support of Application***

##### ***Written Testimony***

PCL staff will provide each applicant with a written funding recommendation document that includes space for the applicant to submit a written response for Allocation Committee consideration. Applicants must return the written testimony to PCL staff by March 18. PCL staff will send all written testimony submissions to the Allocation Committee by March 20.

##### ***Video Testimony***

Applicants have the option to submit video testimony to the Allocation Committee. PCL staff will record video testimony from applicants and provide the videos to the Allocation Committee members by April 8. Applicants that want to submit video testimony must do so through PCL's recording options. Videos produced by applicants will not be accepted. PCL staff will notify applicants during February of the video testimony schedule and locations, and applicants may sign up for a time-slot.

#### ***E. Advocacy Limits***

Applicants may not advocate to Allocation Committee members with the intent of influencing the outcome of the funding process during the entire funding period from publication of this RFI on September 25, 2019 through April 2020 when final funding decisions are made.

#### ***F. Allocation Committee Funding Decisions***

The Allocation Committee plans to make funding decisions in 2 public meetings during April 2020. Applicants will receive notification of those meeting dates and times by March 1, 2020.

The Allocation Committee will not hear public testimony at these meetings. They will make funding decisions based on application scores, staff recommendations, written and video testimony of applicants and policy considerations including location of services, adequacy of services to priority populations, feasibility of activities and cost to foster a balanced and integrated citywide system of services.

#### ***G. City Council Approval***

The Allocation Committee's funding decisions will then be submitted for final approval by the Portland City Council. Final funding decisions shall be made at the sole discretion of the Portland City Council. The offering of this RFI does not constitute a commitment to fund by the City of Portland or PCL.

#### ***H. Public Meetings Law and Requirements***

The PCL Allocation Committee and Portland City Council are subject to Oregon public meeting law (ORS Sections 192.610-690) which applies to any meeting of a quorum of a governing body of a public body. Public meetings must be publicly noticed and take place in a location that accommodates public attendance. The law does not require that the public be allowed to

testify at a public meeting; the law is a public attendance law, not a public participation law. The presiding officer is authorized to keep order at a meeting and, where there will be public participation, may determine the length of time people may speak and in what order the testimony will be taken.

***I. Notification***

PCL intends to notify all applicants of the results of the selection process promptly upon the decision of the City Council. It is anticipated that notification will occur by May 31, 2020, with contracts to begin on July 1, 2020.

Applicants selected for funding will receive written confirmation of selection. Funds will be available for use by selected projects after grant agreements with the City of Portland have been executed.

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## Definitions and Additional Guidance for Completing Tables I and II

PCL assumes that applicants have their own methods for collecting and analyzing demographic data on the clients, staff and board members of their organizations.

For the purposes of this RFI, PCL uses the following definitions for the demographic categories in Tables I and II. Applicants should do their best to use their data in response to PCL's definitions.

### **For Table I and II**

**Unduplicated:** Each unique client served in an organization during an annual period, regardless of the number of services they access. For staff and board in Table I: unduplicated is individual people. For proposed program, each unique child/caregiver to be served in the program during July 1, 2020- June 30, 2021.

**Not Given:** This option is provided for every demographic category in both tables. Applicants can use this category when the demographic information is not available for the individual (either the applicant did not ask a client/staff/board, or the individual did not provide it.)

### **For Table I**

**For the following demographic data categories, PCL encourages applicants to count people as they self-identify. These definitions are to assist applicants in completing Table I.**

Please do not enter data in any of the shaded cells in Table I. Those cells contain formulas specifically programmed for PCL data analysis purposes.

**Gender:** The options are based on the Oregon Equality Act of 2007, which defines gender identity as how a person experiences one's own gender, and includes how the person expresses one's own gender, whether or not it corresponds to the individual's sex assigned at birth.

**Race/Ethnicity:** The list of race/ethnicity options is informed by Oregon Health Authority's REAL D framework for gathering demographic data<sup>1</sup>. Provide a single identity per unduplicated person. If the applicant collects data from individuals that allows them to indicate all their racial/ethnic identities, record the person as multiracial/multiethnic. PCL recognizes its

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<sup>1</sup> For more information about REALD, see Oregon Health Authority's Race, Ethnicity, Language, Disability (REAL D) tool kit: <https://www.oregon.gov/oha/PH/DISEASES/CONDITIONS/COMMUNICABLEDISEASE/REPORTINGCOMMUNICABLEDISEASE/Pages/REAL-D-Collection-Toolkit.aspx>

approach here is significantly limited in reflecting the complexity of people’s racial/ethnic identities.

<b>American Indian or Alaska Native</b>	American Indian; Alaska Native; Canadian Inuit, Metis, or First Nation; Indigenous Mexican, Central American, or South American
<b>Hispanic or Latino/a</b>	Hispanic or Latino/a Central American; Hispanic or Latino/a Mexican; Hispanic or Latino/a South American; Other Hispanic or Latino/a
<b>Asian</b>	Asian Indian; Chinese; Filipino/a; Hmong; Japanese; Korean; Laotian; South Asian; Vietnamese; Other Asian
<b>Native Hawaiian or Pacific Islander</b>	Guamanian or Chamorro; Micronesian; Native Hawaiian; Samoan; Tongan; Other Pacific Islander
<b>Black or African American</b>	African American; African (Black); Caribbean (Black); Other Black
<b>Middle Eastern/Northern African</b>	Northern African; Middle Eastern
<b>White</b>	Eastern European; Slavic; Western European; Other White

**Primary Language in the Home:** Options in this category are based on the primary language spoken in the home regardless of whether the child/caregiver is multi-lingual. Applicants may insert additional rows to specify other languages spoken. Foster care programs use the primary language in the birth home. For staff only, applicants may count the number of languages spoken such that languages spoken may exceed number of staff.

**Person with Disability:** Options in this category are based on how people self-identify, assuming the applicant collects these data. For “disability”, PCL uses the definition from the federal Americans with Disabilities Act definition; a person who has a physical or mental impairment that substantially limits one or more of the major life activities of such individual, has a record of impairment, and is regarded as having such an impairment.

**Immigrant/Refugee:** Options in this category are based on how people self-identify, assuming the applicant collects these data.

**Additional Guidance for Table I**

You may add additional rows to indicate populations that are served by the applicant organization or proposed program, and that are not specifically called out in the table, such as sexual orientation, criminal justice-involved, and any other special population that PCL has not provided on the table and that is highly relevant to the proposed program.

**For Table II**

**Geographic Area:** Use client’s residence address and zip code; however, school-based programs may use the school address if the program does not collect family residence information. The following link provides a complete listing of all Portland zip codes: <http://www.portlandoregon.gov/revenue/article/373203?> The options listed in Table II are defined as:

- East Portland: in zip codes 97216, 97220, 97230, 97233, 97236, 97266
- North Portland: in zip codes 97203, 97217, 97227
- Other Areas of Portland: city of Portland zip codes other than those specified East or North.
- Homeless: Use definition in the Federal McKinney-Vento Homeless Assistance Act: **(a)** means individuals who lack a fixed, regular, and adequate nighttime residence; and **(b)** includes- (i) children sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; living in emergency or transitional shelters; are abandoned in hospitals; (ii) children who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings; (iii) children living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.

*For foster care programs*, indicate the geographic area of the birth home, if located within the City of Portland. If the birth home is not located in the City of Portland, indicate the geographic area of the foster care home.

**Age:** Use likely age during 2020-21 of the proposed program.

**Socioeconomic Status:** Options in Table II are based on the Federal Poverty Level definitions for 2019 and corresponds to USDA Free & Reduced Price Meals guidelines for 2019-20. *For foster care programs*, use the socioeconomic status of the birth family, if the data are available.

*Income breakdown based on the 2019 Federal Poverty Level (FPL):*

Persons in Family Unit	100 % of FPL	101% - 185% of FPL		186% - 200% of FPL		Over 200% of FPL
1	\$12,490	\$12,615	\$23,107	\$23,231	\$24,980	\$25,105
2	\$16,910	\$17,079	\$31,284	\$31,453	\$33,820	\$33,989
3	\$21,330	\$21,543	\$39,461	\$39,674	\$42,660	\$42,873
4	\$25,750	\$26,008	\$47,638	\$47,895	\$51,500	\$51,758
5	\$30,170	\$30,472	\$55,815	\$56,116	\$60,340	\$60,642
6	\$34,590	\$34,936	\$63,992	\$64,337	\$69,180	\$69,526
7	\$39,010	\$39,400	\$72,169	\$72,559	\$78,020	\$78,410
8	\$43,430	\$43,864	\$80,346	\$80,780	\$86,860	\$87,294

# RFI Questions

## I. Organizational Capacity and Commitment to Racial Equity, Diversity, and Inclusion (36 points)

The City of Portland has adopted 3 goals focused on advancing racial equity:

- We will end racial disparities within city government, so there is fairness in hiring and promotions, greater opportunities in contracting, and equitable services to all residents.
- We will strengthen outreach, public engagement, and access to City services for communities of color and immigrant and refugee communities, and support or change existing services using racial equity best practices.
- We will collaborate with communities and institutions to eliminate racial inequity in all areas of government, including education, criminal justice, environmental justice, health, housing, transportation, and economic success.

PCL uses the city's definitions of Equity, Racial Equity, and Diversity.

- Equity is achieved when one's identity cannot predict the outcome. Racial Equity is when race does not determine or predict the distribution of resources, opportunities, and burdens for group members in society.
- Diversity includes all the ways in which people are different, and it encompasses all the different characteristics that make one individual or group different from one another.

Inclusion, as defined by Race Matters Institute: "...is a feature of a setting when voice is valued from the diverse people present and they have organizational power. Inclusion is a core feature of a respectful organizational culture; it is manifested in the setting itself and the dynamics of that setting."

PCL values racial equity, diversity and inclusion of children and families in Portland. One of PCL's goals is to reduce racial disparities in children's outcomes and advance racial equity in children's well-being and success. PCL recognizes that organizations founded with the purpose of racial equity and social justice, with extensive experience and deep commitment to racial equity, are best positioned to help the City and PCL meet its goals.

PCL will fund organizations with demonstrated success and experience, grounded in racial equity, diversity, and inclusion, serving children and families most affected by racial inequities and injustice. PCL understands that organizations are on a continuum of development in their work on racial equity, diversity, and inclusion. Organizations with greater evidence of their commitment and experience with racial equity, diversity, and inclusion, including highly culturally responsive service delivery, will earn more points in this section of the application.



**Use the Application Form, Exhibit A to this RFI, to answer all parts, A – H. Do not include the text of the RFI questions. 7-page maximum narrative. Exhibit B, Table I separate from narrative and page limit. Applications must score at least 23 of 36 points in this section to be considered for funding.**

**A. Organization History and Purpose**

Provide a brief summary of the organization’s purpose based on its vision, mission, values and history. Describe how those features of the organization reflect its commitment to racial equity, diversity, and inclusion.

**B. Leadership and Strategic Direction**

Briefly summarize the organization’s current strategic plan and its relationship to serving children and families, including the time-period of the strategic plan. Explain how the organization’s strategic plan advances the organization’s commitment to racial equity, diversity, and inclusion. Describe the roles and responsibilities of organizational leadership in advancing racial equity, diversity and inclusion.

**C. Staff Recruitment, Retention, Promotion and Training; Board Training**

- Describe the organization’s efforts to recruit, train, retain and promote staff to work successfully within the organization.
- Describe how the organization attracts and retains staff who reflect the population served by the organization. Explain how the organization builds its workforce from the populations that it serves.
- Describe how the organization trains staff around issues of racial equity, diversity, and inclusion, including how staff are trained to deliver culturally responsive services to the cultural groups it serves. Describe the impact of that training on service delivery.
- Describe any cultural responsiveness and racial equity, diversity, and inclusion training the organization provides for the board of directors. Describe the impact of the training on the organization.

You may reference Table I in your narrative explanation as needed.

**D. Language Accessibility**

Describe the organization’s approach to language accessibility with the populations it serves, including translation, interpretation, accommodations or assistive technology practices. Describe how the organization evaluates the quality and effectiveness of the language accessibility it offers to clients. You may reference Table I in your narrative explanation as needed.

**E. Service User Voice and Influence**

Describe how the organization includes service users in identifying the services they want to meet their needs. Describe how service user voice informs the organization’s understanding of racial equity, diversity, and inclusion. Describe the organization’s greatest accomplishment in the past two years integrating service user voice into its work.

## F. Community Engagement and Collaboration

Describe how the organization engages authentically and collaborates with community leaders and community-based organizations that represent the interests of the population(s) it serves. Describe how these relationships advance the organization's commitment to racial equity, diversity, and inclusion.

## G. Achievements and Accountability

Describe how the organization holds itself accountable for racial equity, diversity, and inclusion with the populations it serves. Describe the organization's most significant achievement in advancing racial equity, diversity, and inclusion within the organization, and for children and families in Portland.

## H. Demographics Characteristics of Organization's Clients, Staff and Board Members

Complete Table I, Exhibit B per the instructions below. Please refer to the definitions on pages x-y prior to completing the table.

- **Clients served by the Organization:** enter the actual number for an annual period of ALL unduplicated clients served (i.e. children, adults, or both) served by the organization and their corresponding demographic data. Please use an annual period ending on or as close to June 30, 2019 as possible.
- **Direct Service Staff:** enter the actual number of direct service staff (those that work directly with clients) in the organization and their corresponding demographic data as of June 30, 2019.
- **Management Staff:** enter the actual number of management staff (those that supervise direct service staff and all other executive management) in the organization and their corresponding demographic data as of June 30, 2019.
- **Board of Directors:** enter the actual number of board members and their corresponding demographic data as of June 30, 2019.
- **Note:** You may add additional demographic variables as additional rows if you choose, but please do not add additional columns. Additional demographic variables may include any other uniquely identifiable population.

Describe methods the organization used to arrive at the numbers provided in Table I.

## **II. Proven Program Design and Effectiveness (54 points)**

PCL will invest in programs that use best practices and achieve positive outcomes with children and/or families. Merriam-Webster defines best practices as those shown by research and experience to produce optimal results and are established or proposed as a standard suitable for widespread adoption. Penn State’s Evidence-based Prevention & Intervention Support Center defines “evidence-based programs” as those that have demonstrated effectiveness through: rigorous scientific evaluation, large studies with either diverse populations or multiple replications, sustained and significant effects over time. PCL recognizes that not all programs have been studied and deemed “evidence-based”, and that some “evidence-based” programs may not achieve positive results for all populations. PCL expects applicants will use best practice but does not require applicants use only “evidence-based” models.

PCL seeks to fund effective programs that demonstrate:

- Clear focus on whom they serve, how the program is designed, and why the program is best suited to serve the needs of the focus population. Service users and/or their families have a strong voice in how the program serves their needs.
- Based on best practices, including cultural responsiveness, racial equity, diversity, and inclusion.
- Assess and monitor participants attendance in program activities and achieve intended child or caregiver outcomes.
- Reviews results and works to improve quality using regular feedback from service users. They reflect on how their program is working compared to best practices and program goals, and they make program improvements, including in cultural responsiveness, racial equity, diversity, and inclusion.

**Use the Application Form, Exhibit A to this RFI, to answer all parts A – F. Do not include the text of the RFI questions. 12-page maximum narrative. Applications must score at least 38 of 54 to be considered for funding.**

### **A. Program Summary and Connection to Application Organization**

Provide a brief paragraph summary of the program service that you want PCL to fund. Indicate and explain which the PCL service strategy your program addresses. Provide a second brief paragraph describing how the program fits into the organization’s current mission, its strategic plan, and its other services. Provide a third brief paragraph explaining how the program advances the organization’s commitment to racial equity, diversity, and inclusion.

### **B. Population to be Served**

Be sure you have completed Table I in Section I of your application, indicating demographics of the population to be served by the program in FY2020-21.

In addition, complete the next table for the first year of this grant (July 1, 2020- June 30, 2021). The number of total children (or parents or caregivers) to be served in the next table should match the total number to be served shown in Table I from Section I of the application.

Use the numbered questions after the table to describe the population to be served.

<b>Table II. Estimates of Population to be Served</b>		<b>Year 1, 2020-21</b>
<b>CHILDREN:</b> Number of Total Unduplicated Children to Be Served		
<b>PARENTS:</b> Number of Total parents/caregivers to be served (if applicable)		
<b>Estimated Population to be Served by Program, Year 1, 2020-21</b>		<b>% of Children or Parents/caregivers</b>
<b>Geographic Area</b>		
East Portland (live or go to school in zip codes: 97216, 97220, 97230, 97233, 97236, 97266)		
North Portland (live or go to school in zip codes: 97703, 97217, 97227)		
Other areas of Portland		
Homeless		
Not given		
<b>Age</b>		
prenatal - 2		
3 - 5		
6 - 11 (Elementary School)		
12-14 (Middle School)		
15-18 (High School)		
Age 19 and older		
Not given		
<b>Socioeconomic Status</b>		
185% of Federal Poverty Level or less		
186% of FPL or more		
Not given		

**1. Explanation of Number of Children/Youth, or Caregivers Projected to be Served**

How have you calculated the total number of children/youth or caregivers to be served by the program in 2020-21? You may refer to factors such as group size, case load, adult: child ratio, program model standards or similar factors. Do you plan to serve the same number of children/caregivers in the second and third grant years? If not, discuss whether you plan to increase or decrease and why.

**2. Estimated Demographics of Population to be Served**

How did you estimate the demographics of the population to be served in both Table I and Table II? PCL wants families residing or attending school in East Portland to have access to PCL-funded services. In addition, PCL priority populations in the program area are: low income families, children and caregivers of color, families experiencing homelessness, immigrant and refugee families.

**C. Outreach and Recruitment of Population to be Served**

What outreach methods will you use to assure broad-based awareness of the program and to recruit children or caregivers for the program? How are these methods culturally responsive and likely to be effective with the population? What barriers to recruitment do you anticipate encountering, and what will you do to address them (to the extent possible)?

## D. Program Design

### 1. Main Program Activities

Complete the table to show the main activities of the program. Specify up to four service activities most fundamental to the program. Amount of service offered refers to how much service will be offered to the child or caregiver. You may reference hours per day, days per week, weeks per year and/or total numbers of visits, classes, groups or other service activities that will be offered.

<b>Table: Program Activities in Year 1, 2020-21 (Complete only applicable columns for each activity)</b>			
<b>Program Activity</b>	<b>Number of Clients to be served (specify if children, or primary caregivers) in Year 1, 2020-21</b>	<b>Amount of food to be served (e.g. number of meals, backpacks, pounds of food) in Year 1, 2020-21</b>	<b>Amount of Service to be Offered in Year 1, 2020-21</b>
<b>Other Program Design Details</b>			
<b>Sites:</b> List the name(s) and address(es) of all sites at which services will be offered:			
<b>Curricula (if applicable):</b> If the program uses curricula, or program model standards (other than nutrition standards) and practices to guide its activities, please list those here and provide a 1-2 sentence explanation of each one.			

### 2. Staffing for Program

List direct service and supervisory staff positions for the program. Direct service positions are defined as staff that works face-to-face with children/caregivers. Do not list names of staff. Insert rows as needed.

<b>Table: Staffing for Program</b>		
<b>Staff Position or Job Title</b>	<b>Key Job Responsibilities</b>	<b>Key Minimum Qualifications</b>
<b>Caseload or Adult: Child Ratio:</b> Indicate the child/adult ratio or “caseload” for 1 FTE in the proposed program.		
<b>Supervisor to Staff Ratio:</b> Indicate the amount or ratio of supervision FTE designated for each direct service staff 1 FTE in the proposed program.		

## E. Explanation of the Program Design

In responding to the questions below, please include any racial equity, diversity, and inclusion considerations in your explanations.

1. How is this program appropriate for and relevant to the needs of the population(s) you intend to serve? How will the demographics of program direct service staff, including language spoken, reflect the demographics of the population to be served? You may refer to Table I in your response.
2. How do you know that the population to be served wants this program and their preferences for service location(s), hours of operation and types of food offered?
3. Discuss any strategies you employ to reduce stigmatization of people accessing the program.
4. Does the program use nutrition and/or quality standards to screen food distributed to people? If so, describe the standards and screening methods. What percentage of pounds of food distributed in the program is composed of fresh, perishable foods including fruits, vegetables, dairy, eggs and meats?

## **F. Program Results, Quality, and Improvement**

### **1. Program Usage and/or Attendance**

Describe how the program staff will track and monitor child or caregiver usage and/or attendance of the program. How will the program monitor racial equity, diversity, and inclusion in program attendance and/or usage?

### **2. Program Quality**

Describe and provide examples of how the program reviews and improves the quality and effectiveness of outreach, program activities and food resources provided.

### **3. Staff Development and Supervision**

Describe the types of training that direct service staff and supervisors complete to deliver the program activities.

Describe how you will identify and respond to the ongoing training and professional development needs for both supervisory and direct service staff in the program.

Describe the frequency, length, and nature of supervision for direct service staff and for the program supervisor. Please reference the ratio of direct service staff FTE to supervisor FTE in your response.

Describe how direct service staff and supervisors are trained and supported in advancing racial equity, diversity, and inclusion in the proposed program.

### **III. Program Budget and Budget Justification (10 points)**

PCL seeks to fund cost effective programs that demonstrate:

- All costs are justified, reasonable and appropriate for the proposed program.
- They are operated by organizations with experience managing and accounting for government funding in accordance with Generally Accepted Accounting Principles (GAAP).

The budget you prepare should clearly link to the proposed program and account for true program costs and quality aspects of your services.

Your application will include 2 parts in response to this section:

1. **Program Budget:** a detailed line item budget using the budget form in Exhibit X
2. **Narrative Budget Justification:** a narrative explanation of the purpose and cost calculations for each line item in your budget.

This section of the RFI provides instructions for completing these parts of your application.

#### **Program Budget**

Use the budget form in Exhibit X to provide a detailed FY2020-21 line-item budget for the proposed program. The budget must be an appropriate and accurate estimate of all program expenses for the period July 1, 2020- June 30, 2021. Show line items according to the form's four budget categories described below. PCL has listed typical allowable line items per category.

**1) Program Personnel.** All staff providing direct service and program supervision as well as other staff that work directly on the proposed program. Examples may include: Teachers, home visitors, family advocates, mentors, coaches, program assistants, parent educators, supervisors, managers, program directors, bus drivers, kitchen staff, program-related clerical and other support staff, and program evaluation-related staff.

**2) Contracted Program Services.** Subcontractors are organizations or individuals that provide specialized services directly to program participants or enhance program quality. Examples may include: screening and assessment services, mental health consultation, reflective supervision for direct service staff, transportation of youth/families to the program, interpretation and translation, and program evaluation consultants/contractors.

**3) Other Program Expenses.** Expenses that directly benefit and support the operation of the proposed program. Examples may include: occupancy/rent, utilities, facility maintenance, janitorial services (contracted or direct employees), program staff training and development, client assistance funds, food for program events, phones for staff, staff mileage for local program travel, program supplies, office supplies for program, participant incentives, professional liability insurance and other program-related insurance costs, IT support/internet connectivity for program, data and program evaluation management costs.

**4) Administrative Rate and Expense.** Expenses incurred in the general operation and management of the agency, typically defined on the IRS Form 990 as "Management and General Expenses."

Administrative costs can include, but are not limited to, the following: salaries and expense of the chief officer of the organization and that officer's staff; general legal services; accounting; general liability insurance; office management; auditing; bookkeeping, accounting services, payroll, prorated administrative postage, janitorial services.

The budget form has three columns. Complete the form according to the instructions outlined here, and use the instructions embedded in the form (see red triangles shown in form's cells).

- Column A: Enter each budget line-item for the program, including job titles for personnel.
- Column B (complete for personnel only): For each budgeted position, enter total FTE, total hourly wage & annual salary, and taxes & benefits cost at the organization, regardless of funding source or program assignment.
- Column C: Enter the PCL funding request per line item.

**The following items are prohibited and cannot be paid for with PCL funds:**

- Travel, lodging and meal expenses related to trainings or conferences outside of Oregon/Washington (unless required program training).
- Capital expenditures: acquisition of fixed assets such as land, buildings, and equipment.
- Fundraising expenses
- Fees or dues to a statewide, national or international organization (unless required for usage of a curriculum for the program)
- Expenses categorized as "other", "misc." or otherwise not delineated

### **Narrative Budget Justification**

**Use the Application Form, Exhibit A to this RFI, to answer all parts A – C. Do not include the text of the RFI questions. 4-page maximum narrative. Exhibit C separate from narrative and page limit.**

#### **A. Total Program Costs, PCL Request and Other Funding Sources**

What is the total cost of the proposed program from July 1, 2020- June 30, 2021? What percentage of the total cost do you request from PCL? If other funding sources will contribute toward total cost of the program, briefly describe the sources of those funds and what they help support in the program. Matching funds are not required, but PCL wants to understand the relationship between your funding request and the total costs for the proposed program.

#### **B. Budget Justification and Cost Calculations**

For each of the 4 budget categories, provide a complete narrative justification for each line-item and show the cost calculations for each line item. The budget justification and calculations should:

- Explain why the line item is necessary for the proposed program, and
- Show how you calculated the cost per line item, including the methods you used to allocate each line item cost to your PCL requested budget.



### **1. Program Personnel**

The Program Section of your application includes key job responsibilities for the staff positions shown in your budget and the budget shows the FTE, hourly wage/total annual salary for each position. You do not need to repeat that information. Instead, show the following information in your justification for each budgeted position:

- Total FTE of the position and how you allocated FTE of the position to your PCL request. For direct service positions, include justification for the level of FTE as it relates to the level of service proposed (e.g. hours needed for preparation time, direct service activities, other program-specific tasks) and any other relevant factors including adult to child ratios, caseload, and/or group size. For supervisor positions, justification should include the amount of FTE to be supervised, amount/frequency of supervision, and other supervisory responsibilities related to the program. For any other positions, explain why the position is needed to support service delivery or other program functions, and provide justification for the level of FTE requested.
- Tax/benefits costs per position, and calculations for amount of tax/benefits costs shown in PCL request per position. Briefly describe the taxes and benefits included.

### **2. Contracted Program Services**

List the names of any organizations or individuals that will be contracted to provide specialized program services directly for children and families or program quality supports under this proposal. Briefly describe the services they will provide, why services are necessary, and show how total cost for each subcontractor is calculated (e.g. hours, rate of pay, taxes/benefits).

### **3. Other Program Expenses**

List each budgeted line item in this category and explain its purpose in the program. Show the calculations for estimating the total cost per line item, including methods you used to allocate costs to your PCL request. Typical methods for allocating costs, depending on the type of cost, may include: amount of FTE in the program, amount of square footage used in the program, number of children or families to be served in the program. In all cases, PCL expects clear methods and explanations for allocation of costs shown in the program budget.

### **4. Administrative Expenses**

List the types of expenses included in the administrative rate. No more than 15% of program expenses may be allocated to administrative expense.

### **C. Organizational Financial Experience.**

Describe your organization's financial experience and capabilities. Include experience in managing and accounting for federal, state or local funding sources in accordance with Generally Accepted Accounting Principles (GAAP).

## Review and Scoring Form

### I. Organizational Capacity and Commitment to Racial Equity, Diversity, and Inclusion

Possible Points: 36

For Maximum Points for each subsection, responses include the following elements:	POINTS
<b>A. Organization History and Purpose: up to 4 points</b>	
Organization history, mission, vision, and values show dedication and experience serving children and families, and indicate the organization working toward racial equity, diversity, and inclusion.	___ of 2
Organization history, mission, vision and values all show strong commitment to racial equity, diversity, and inclusion for children and families.	___ of 2
<b>Reviewer Notes:</b>	
<b>B. Leadership and Strategic Direction: up to 3 points</b>	
Organization has a current strategic plan that includes its services for children and families.	___ of 1
Organization's current strategic plan has clear objectives that advance the organization's commitment to racial equity, diversity and inclusion.	___ of 1
Organizational leadership, including Board of Directors, have clear roles and responsibilities for the racial equity, diversity, and inclusion objectives in the plan.	___ of 1
<b>Reviewer Notes:</b>	
<b>C. Staff Recruitment, Retention, Promotion and Training; Board Training: up to 8 points</b>	
Has clear practices for recruiting, preparing/training, retaining, and promoting staff to work successfully in the organization.	___ of 2
Has successful strategies to recruit, retain and promote staff that reflects the diversity of clients served by the organization. Has developed and sustained efforts to build its workforce from the populations it serves.	___ of 2
Staff, including Management, receive ongoing training on cultural responsiveness, racial equity, diversity and inclusion; organization describes how the training has clearly had a meaningful impact the cultural responsiveness of service delivery.	___ of 2
Organization provides training on cultural responsiveness, racial equity, diversity and inclusion to Board of Directors; describes how training has had a meaningful impact on the organization and its work.	___ of 2
<b>Reviewer Notes:</b>	
<b>D. Language Accessibility: up to 4 points</b>	
<ul style="list-style-type: none"> <li>• Describes multiple practices to make communication accessible to service users. Examples may include offering services in the population's native language(s), translation of written materials, interpretation during service delivery, or other tools such as assistive technology and materials compatible with assistive technology, and accessible or plain language approach in materials.</li> <li>• Evaluates the quality and effectiveness of the interpretation, translation, or accessible communication services provided and demonstrates effective interpretation services or high-quality language accessibility.</li> </ul>	___ of 2
Has strategies for hiring and retaining staff that speak the language(s) of clients served by the organization. Direct service staff speak many of the languages spoken by clients served.	___ of 2
<b>Reviewer Notes:</b>	

<b>E. Service User Voice and Influence: up to 4 points</b>	
Uses multiple methods on a regular basis across the organization to solicit service user feedback, such as focus groups, surveys, interviews, and/or community advisory groups.	___ of 1
Demonstrates how the organization has shaped its service offerings and priorities based on clients' stated needs and solutions to meeting their needs.	___ of 1
Greatest accomplishment clearly demonstrates deep, ongoing involvement of service user voice in the organization's work, and advancing racial equity, diversity and inclusion.	___ of 2
<b>Reviewer Notes:</b>	
<b>F. Community Engagement and Collaboration: up to 4 points</b>	
<ul style="list-style-type: none"> <li>Has established, ongoing collaborations or partnerships with community leaders and/or community-based organizations that represent or serve the interests of the population served.</li> <li>Evidence provided includes partnerships that have been in place for at least 2 years or longer, and may include responsibility for shared outcomes between partners, shared budget and funding for service delivery, mutually beneficial advisory or advocacy roles.</li> </ul>	___ of 2
Collaborations and partnerships with community leaders and community-based organizations clearly advance the organization's commitment to racial equity, diversity, and inclusion.	___ of 2
<b>Reviewer Notes:</b>	
<b>G. Achievements and Accountability: up to 3 points</b>	
<ul style="list-style-type: none"> <li>Describes robust approaches for holding itself accountable for racial equity, diversity, and inclusion such as annual reporting and analysis of demographic data of clients served and staff/board composition, annual reporting and analysis of program outcome data, maintaining ongoing community advisory committees, and organizational leadership acting in response to these sources.</li> <li>Demonstrates significant achievement in meeting its own organizational goals for racial equity, diversity, and inclusion, and meaningfully advancing racial equity, diversity, and inclusion.</li> <li>Most significant achievement in advancing racial equity, diversity, and inclusion in Portland has made a substantial difference in the lives of children and families.</li> </ul>	___ of 3
<b>Reviewer Notes:</b>	
<b>H. Demographics of Organization's Clients, Staff and Board Members: up to 6 points</b>	
The demographics of the clients served by the organization indicate the organization prioritizes racial equity, diversity and inclusion.	___ of 1
51% or more of clients served by the organization last year identify as a person of color.	___ of 1
51% or more of direct service staff identify as a person of color.	___ of 1
51% or more of management service staff identify as a person of color.	___ of 1
51% or more of board of directors identify as a person of color.	___ of 1
Organization's methods for collecting the demographic data in Table I indicate the data are gathered directly from clients, staff, and board members, rather than estimated by organization staff.	___ of 1
<b>Reviewer Notes:</b>	
<b>Section I. Organizational Capacity and Commitment to Diversity, Equity, and Inclusion</b>	
<b>TOTAL Score: ___ out of 36 Points Possible</b>	

## II. Proven Program Design and Effectiveness

Possible Points: 54

For Maximum Points for each subsection, responses include the following elements:	POINTS
<b>A. Program Summary and Connection to Applicant Organization: up to 3 points</b>	
<ul style="list-style-type: none"> <li>Summary paragraph clearly outlines the program and explains how program addresses PCL service strategy.</li> <li>Program clearly fits organization’s mission, strategic plan, and its other services.</li> </ul>	___ of 2
Program clearly advances organization’s commitment to racial equity, diversity, and inclusion.	___ of 1
<b>Reviewer Notes:</b>	
<b>B. Population to be Served: up to 8 points</b>	
<b>Number Served and Demographics of Population in Tables I and II</b>	
<ul style="list-style-type: none"> <li>Numbers of children or caregivers to serve are shown in both tables and match each other.</li> <li>Demographics of population to be served are complete in both tables.</li> </ul>	___ of 1
<b>B1. Explanation of Projected Number to be Served</b>	
<ul style="list-style-type: none"> <li>Calculation for numbers to serve is clear and refers to factors such as caseloads, group sizes, adult to child ratio, or other factors affecting number of children or caregivers to serve.</li> <li>Indicates whether program will serve more, fewer, or same number of children or caregivers in second and third year of grant, and explanation is clear.</li> </ul>	___ of 2
<b>B2. Estimated Demographics of Population to be Served (5 points)</b>	
Explains methods for demographic estimates in Tables I and II such as program experience, organization experience, or other data sources related to recruitment of population to be served.	___ of 2
Indicates 51% or more of population to be served, shown in Table I, will identify as a child of color.	___ of 1
Indicates significant portion of the population to be served will identify as one or more of the following additional priority populations: <i>[Table I: youth who identify as immigrants/refugees, or Table II: children experiencing homelessness, low-income children/families]</i>	___ of 1
Indicates 51% or more of population to be served, shown in Table II, lives in or attends school in East Portland.	___ of 1
<b>Reviewer Notes:</b>	
<b>C. Outreach and Recruitment of Population to be served: up to 6 points</b>	
<ul style="list-style-type: none"> <li>Demonstrates commitment to broad outreach to improve awareness of and access to program.</li> <li>Uses multiple outreach strategies to improve awareness of and access to program.</li> <li>Identifies and addresses likely access barriers for population served.</li> </ul>	___ of 4
Explains racial equity, diversity, and inclusion considerations in its outreach methods and strategies to help address barriers. Addresses how its outreach methods and engagement efforts are culturally responsive to the population to be served by the program.	___ of 2
<b>Reviewer Notes:</b>	
<b>D. Program Design: up to 6 points</b>	
<b>D1. Main Program Activities</b>	
The program activity table is complete and are understandable.	___ of 3
<b>D2. Staffing for Program</b>	
The staffing table is complete and understandable.	___ of 3
<b>Reviewer Notes:</b>	

<b>E. Explanation of Program Design: up to 17 points</b>	
<ul style="list-style-type: none"> <li>• Demonstrates evidence that proposed program design is intentional, based on experience, and has success working with the population to be served.</li> <li>• Evidence includes examples of success and experience working with the population to be served.</li> <li>• Organization’s demographics in Table I further supports these explanations.</li> </ul>	___ of 4
Explains how demographics of direct service staff will reflect population to be served. Explains whether direct services staff will speak home language of population to be served. Overall, evidence in the organizational section of the application, including Table I, supports these explanations.	___ of 1
Describes how population to be served has had a leading voice in deciding that it wants this program and that preferences for service location, hours of operation and types of food are considered.	___ of 3
Employs strategies to reduce stigmatization of people accessing the program.	___ of 1
Has and uses high standards for nutrition and quality of food distributed. Food distributed includes high percentage of fresh, perishable foods.	___ of 3
Demonstrates how proposed program activities reflect best practices for the program model. Describes how program activities will lead to proposed outcomes.	___ of 3
Convincingly demonstrates racial equity, diversity, inclusion considerations in its explanations for the population to be served, program activities, and specified outcome goals.	___ of 2
<b>Reviewer Notes:</b>	
<b>F. Program Results, Quality, and Improvement: up to 14 points</b>	
<b>F1. Program Usage and/or Attendance (4 points)</b>	
Explains method for collecting and reporting data on child/caregiver usage and/or attendance of the program. Demonstrates experience in using methods described.	___ of 2
Demonstrates how program monitors racial equity, diversity, and inclusion in program usage and/or attendance by offering examples such as: analyzing usage/attendance data disaggregated by race/ethnicity or home language; accommodations made to assure program accessibility; culturally responsive approaches to re-engage children or caregivers with low usage/attendance or other relevant examples.	___ of 2
<b>F2. Program Quality (4 points)</b>	
Demonstrates process for quality review and improvement of outreach methods and results, program activities and food distributed.	___ of 2
Provides meaningful examples of how process has been used to improve quality of outreach, program activities and/or food distributed.	___ of 2
<b>F3. Staff Development and Supervision (6 points)</b>	
<ul style="list-style-type: none"> <li>• Explains clear process for assuring direct service staff and supervisors are trained in relevant content, topics, and best practices to deliver the program.</li> <li>• Demonstrates clear methods to identify and support direct service and supervisory staff’s ongoing training and professional development needs.</li> </ul>	___ of 2
Explains the frequency, length, and nature of supervision of direct service staff and program supervisory staff. References the ratio of direct service FTE to supervisor FTE to explain the supervision structure and approach with direct services staff.	___ of 2
Demonstrates how direct service staff and supervisors are trained and receive ongoing development and support in racial equity, diversity, inclusion and cultural responsiveness specific to the program.	___ of 2
<b>Reviewer Notes:</b>	
<b>Section II. Proven Program Design and Effectiveness</b> <b>TOTAL Score: ___ out of 54 Points Possible</b>	

**III. Program Budget and Budget Justification**  
Possible Points: 10

<b>For Maximum Points for each subsection, responses include the following elements:</b>		<b>POINTS</b>
<b>A. Total Program Costs, PCL Request and Other Funding Sources</b>		
<ul style="list-style-type: none"> <li>Provides total cost for the proposed program from July 1, 2020 – June 30, 2021 and includes the percentage of total program costs requested of PCL.</li> <li>If applicable, indicates any other sources of funding that will contribute toward program costs and how those funds will be used to support the program.</li> </ul>	___ of 1	
<b>Reviewer Notes:</b>		
<b>B. Budget Justification and Cost Calculations: up to 6 points</b>		
<b>1. Program Personnel</b> <ul style="list-style-type: none"> <li>Provides FTE justification for each budgeted position to be paid in whole or in part by PCL.</li> <li>Clearly explains how taxes and benefits were calculated.</li> </ul>	___ of 3	
<b>2. Contracted Program Services</b> <ul style="list-style-type: none"> <li>If applicant proposes to use contracted services, describes the specialized program services to be provided by sub-contractors, justifies need for service and provides breakdown of costs.</li> </ul>	___ of 2	
<b>3. Other Program Expenses</b> <ul style="list-style-type: none"> <li>Demonstrates that each budgeted line item directly benefits and supports the proposed program.</li> <li>Shows calculations used for each line-item budgeted to PCL.</li> </ul>		
<b>4. Administrative Expenses</b> <ul style="list-style-type: none"> <li>The calculation of the administrative rate is clearly explained, and the rate requested of PCL is 15% or less of subtotal of program costs.</li> </ul>		
Overall, the budget justification and cost calculations indicate the PCL budget request for the proposed program is reasonable and appropriate.	___ of 1	
<b>Reviewer Notes:</b>		
<b>C. Organizational Financial Experience: up to 3 points</b>		
Demonstrates evidence of the organization’s financial experience by describing the organization’s fiscal policies, procedures and monitoring systems.	___ of 2	
Indicates at least 3 years of experience managing and accounting for federal, state and/or local funding sources in accordance with Generally Accepted Accounting Principles (GAAP).	___ of 1	
<b>Reviewer Notes:</b>		
<b>Section III. Program Budget, Budget Narrative, and Cost Effectiveness</b> <b>TOTAL Score: ___ out of 10 Points Possible</b>		



Complete all fields on this page; do not reference other parts of application.  
Use subsequent pages for your narrative responses to the RFI.

**1. Applicant Organization** Fed. Tax ID# \_\_\_\_\_ -

Business Address: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) - \_\_\_\_\_ Ext \_\_\_\_\_

Chief Executive Officer \_\_\_\_\_

Phone ( ) - \_\_\_\_\_ Ext \_\_\_\_\_ Email \_\_\_\_\_

Organization Type:  
[501(c)(3), local education agency, community college, university] \_\_\_\_\_

**2. Program Details**

Program Name \_\_\_\_\_

Program Contact \_\_\_\_\_ Title \_\_\_\_\_

Phone ( ) - \_\_\_\_\_ Ext \_\_\_\_\_ Email \_\_\_\_\_

Total PCL grant Funds Requested in this application (for 3 years) \$ \_\_\_\_\_

**Program Area Category for which Application seeks funding (check only one)**

<input type="checkbox"/> Early Childhood	<input type="checkbox"/> Mentoring	<input type="checkbox"/> After School
<input type="checkbox"/> Child Abuse Prevention & Intervention	<input type="checkbox"/> Foster Care	<input type="checkbox"/> Child Hunger Relief

**3. Required Signature**

*The undersigned certifies that the information provided herein, to the best of their knowledge, is true, complete, and accurately describes the proposal.*

Signature of Chief Executive Officer \_\_\_\_\_ Date \_\_\_\_\_

**I. Organizational Capacity and Commitment to Racial Equity, Diversity, and Inclusion**

**A. Organization History and Purpose**

**B. Leadership and Strategic Direction**

**C. Staff Recruitment, Retention, Promotion and Training; Board Training**

**D. Language Accessibility**

**E. Service User Voice and Influence**

**F. Community Engagement and Collaboration**

**G. Achievements and Accountability**

**H. Demographics Characteristics of Organization's Clients, Staff and Board Members**



**II. Proven Program Design and Effectiveness**

**A. Program Summary and Connection to Application Organization**

**B. Population to be Served**

<b>Estimates of Population to be Served</b>	<b>Year 1, 2020-21</b>
<b>CHILDREN:</b> Number of Total Unduplicated Children to Be Served	
<b>PARENTS:</b> Number of Total parents/caregivers to be served	
<b>Estimated Population to be Served by Program, Year 1, 2020-21</b>	<b>% of Children or Parents/caregivers</b>
<b>Geographic Area</b>	
East Portland (live or go to school in zip codes: 97216, 97220, 97230, 97233, 97236, 97266)	
North Portland (live or go to school in zip codes: 97203, 97217, 97227)	
Other areas of Portland	
Homeless	
Not given	
<b>Age</b>	
prenatal - 2	
3 - 5	
6 - 11 (Elementary School)	
12-14 (Middle School)	
15-18 (High School)	
Age 19 and older	
Not given	
<b>Socioeconomic Status</b>	
185% of Federal Poverty Level or less	
186% of FPL or more	
Not given	

**1. Explanation of Number of Children/Youth, or Caregivers Projected to be Served**

**2. Estimated Demographics of Population to be Served**

**C. Outreach and Recruitment of Population to be Served**

**D. Program Design**

**1. Main Program Activities**

<b>Table: Program Activities in Year 1, 2020-21 (Complete only applicable columns for each activity)</b>			
<b>Program Activity</b>	<b>Number of Clients to be served (specify if children, or primary caregivers) in Year 1, 2020-21</b>	<b>Amount of food to be served (e.g. number of meals, backpacks, pounds of food) in Year 1, 2020-21</b>	<b>Amount of Service to be Offered in Year 1, 2020-21</b>
<b>Other Program Design Details</b>			
<b>Sites:</b> List the name(s) and address(es) of all sites at which services will be offered:			
<b>Curricula (if applicable):</b> If the program uses curricula, or program model standards (other than nutrition standards) and practices to guide its activities, please list those here and provide a 1-2 sentence explanation of each one.			

## 2. Staffing for Program

<b>Table: Staffing for Program</b>		
<b>Staff Position or Job Title</b>	<b>Key Job Responsibilities</b>	<b>Key Minimum Qualifications</b>
<b>Caseload or Adult: Child Ratio:</b>		
<b>Supervisor to Staff Ratio:</b>		

### E. Explanation of the Program Design

- 1.
- 2.
- 3.
- 4.

### F. Program Results, Quality, and Improvement

1. Program Usage and/or Attendance
2. Program Quality
3. Staff Development and Supervision

### **III. Program Budget and Budget Justification**

#### **A. Total Program Costs, PCL Request and Other Funding Sources**

#### **B. Budget Justification and Cost Calculations**

##### **1. Program Personnel**

##### **2. Contracted Program Services**

##### **3. Other Program Expenses**

##### **4. Administrative Expenses**

#### **C. Organizational Financial Experience**

**Table I: Demographics of Organization's Clients, Staff and Board Members**

Name of Applicant Organization:						Name of Program:					
	# of Total Clients served by Organization	% of Total Clients served by Organization	# of Organization Direct Service Staff	% of Direct Service Staff	# Organization Managem't Staff	% Managem't Staff	# of Organization Board of Directors	% of Board of Directors	PROPOSED PROGRAM: Total Number of Children to serve	Total Number of Parents or Caregivers to serve	
<b>Total Unduplicated Numbers</b>											
<b>Section I, Item H criteria</b>		<b>0%</b>		<b>0%</b>		<b>0%</b>		<b>0%</b>	<b>Percent of Total</b>	<b>Percent of Total</b>	
<b>1. Gender</b>	0	0%	0	0%	0	0%	0	0%	0%	0%	
Male											
Female											
Transgender											
Genderqueer											
Not Given											
<b>2. Race/ Ethnicity</b>	0	0%	0	0%	0	0%	0	0%	0%	0%	
American Indian or Alaska Native											
Hispanic or Latino/a											
Asian											
Native Hawaiian/Pacific Islander											
Black or African American											
Middle Eastern/Northern African											
Multiracial/Multiethnic											
White											
Not Given											
<b>3. Primary Language in Home</b>	0	0%					0	0%	0%	0%	
English											
Spanish											
Vietnamese											
Russian											
Chinese (Mandarin, Cantonese, etc)											
Other (specify)											
Other languages											
Not Given											
<b>4. Disability</b>	0	0%	0	0%	0	0%	0	0%	0%	0%	
Has Disability											
Does not have disability											
Not Given											
<b>5. Immigrant/Refugee</b>		0%		0%	0	0%		0%	0%	0%	
Identifies as Immigrant/Refugee											
Does not identify as Immig./Refugee											
Not Given											

**Instructions:** Use this form to create the proposed program's line item budget for July 1, 2020-June 30, 2021. Use instructions in RFI and red triangles below instructions to complete the form. Your application should provide narrative justification and explain cost calculations for each line item in this program budget.

**Add additional rows as needed; do not add columns.**

<b>Organization Name and Program Name:</b>		<b>Budget Year:</b> <b>07/01/20 - 06/30/21</b>
<b>PROGRAM BUDGET LINE ITEMS</b>		<b>PCL Request</b>
<b>1) Program Personnel</b>		
1. (enter Job Title)		
Percent FTE	(enter position's total FTE at organization)	enter amount FTE budgeted to PCL for proposed program
Salary	(enter position's hourly rate and annual salary at organization)	enter amount budgeted to PCL
Taxes & Benefits	(enter position's total tax/benefit cost at org)	enter amount budgeted to PCL
<i>employee 1 subtotal</i>		
2. (insert Job Title)		
Percent FTE	(enter position's total FTE at organization)	enter amount FTE budgeted to PCL for proposed program
Salary	(enter position's hourly rate and annual salary at organization)	enter amount budgeted to PCL
Taxes & Benefits	(enter position's total tax/benefit cost at org)	enter amount budgeted to PCL
<i>employee 2 subtotal</i>		
<b>Program Personnel Subtotal</b>		
<b>2) Contracted Program Services</b>		
<i>(name of contractor/type of service)</i>		
<b>Contracted Program Services Subtotal</b>		
<b>3) Other Program Expenses</b>		
<i>(name of line-item)</i>		
<b>Other Program Expenses Subtotal</b>		
<b>SUBTOTAL: Program Budget</b>		0
<b>4) Administrative Rate and Expenses</b>		
<i>(no line items here)</i>		
<b>Administrative Subtotal</b>		0
<b>GRAND TOTAL: Program Budget</b>		