REQUEST FOR PROPOSAL
NOTICE TO APPLICANTS

Volunteer Florida is pleased to invite funding proposals for the provision of Disaster Case Management services to support recovery from the 2018 Hurricane Michael (DR-4399-FL). Total funding available for this Request for Proposal (RFP) is approximately $5,641,655.00

APPLICANT REQUIREMENTS
All applicants will be required to complete applicant information included in the RFP. This information will be used to evaluate applicant qualifications.

CONTRACTUAL REQUIREMENTS
A copy of the (sample) contract is available upon request.

Volunteer Florida will accept proposals until noon, 12:00 p.m., Eastern Time, October 11, 2019 to establish a contract with a qualified service provider to provide Disaster Case Management services to support recovery from the 2018 Hurricane Michael (DR-4399-FL). Late proposals will not be considered.

For information regarding this notice, and throughout this competitive acquisition process, interested service providers should contact:

Terrance McCaffrey
Emergency Management Director
Volunteer Florida
1545 Raymond Diehl Rd, Suite 250
Tallahassee FL, 32308
Phone: 850-414-7400 x119
E-mail: terry@volunteerflorida.org

Katie Troncoso
Grants and Contracts Manager
Volunteer Florida
1545 Raymond Diehl Rd, Suite 250
Tallahassee FL, 32308
Phone: 850-414-7400 x 120
E-mail: katie@volunteerflorida.org
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BACKGROUND

The Disaster Case Management Program (DCMP) funds have been awarded to Volunteer Florida by the Federal Emergency Management Agency (FEMA) to provide Disaster Case Management Program services to survivors of DR-4399-FL. The current period of performance (POP) funding period is October 11, 2018 – October 11, 2020. The projected number of approved registrants will be determined using the FEMA Interim Disaster Case Management Program Guidance released September 2017.

For Hurricane Michael assistance in the State of Florida, closed registrations for disaster assistance was 103,285 in the declared counties. In working with our partners, the decision was made to utilize the more accurate data point. Temporary Shelter Assistance (TSA) and FEMA Direct Housing Mission Data was used to project staffing and determine possible number of clients with long term unmet needs that may need case management assistance. As of March 15, 2019, the cumulative eligibility number for TSA was 7,988 households. As of April 23, 2019, the cumulative eligibility number for FEMA Direct Housing was 3,873 households.

Using the TSA number to calculate staffing resulted in the need for approximately 35 Disaster Case Managers plus 5 case management supervisors.


The last shelter closed on November 30, 2018.

Counts are divided into 3 Provider Groups listed below. The projected number of approved registrants is determined using the FEMA DCM Program Guidance released on September of 2017. The Provider Groups are determined by FEMA registrations by declared county.

<table>
<thead>
<tr>
<th>Counties</th>
<th>Group 1</th>
<th>Group 2</th>
<th>Group 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bay</td>
<td>Washington Holmes Jackson Calhoun</td>
<td>Gulf Liberty Franklin Gadsden Leon Wakulla Taylor</td>
<td></td>
</tr>
<tr>
<td>Registrations based on Individual Assistance Applications as of April 23, 2019</td>
<td>58,805</td>
<td>20,204</td>
<td>24,276</td>
</tr>
<tr>
<td>Allocation</td>
<td>$3,212,059</td>
<td>$1,103,587</td>
<td>$1,326,009</td>
</tr>
</tbody>
</table>
DCMP Groups as of 02/28/2019
Hurricane Michael - DR-4399-FL

Data Layer / Map Description:
This map displays the Disaster Case Management Program (DCMP) groups by county.

Group 1 Group 2 Group 3
Bay Holmes Gulf
Jackson Liberty
Calhoun Franklin
Washington Gadsden

Leon
Wakulla
Taylor

Data Sources:
FEMA, ESRI
PURPOSE OF RFP
The purpose of the RFP is to solicit proposals from qualified service providers wishing to contract with Volunteer Florida to provide Disaster Case Management services in response to Hurricane Michael (DR-4399-FL). The RFP process is intended to provide Volunteer Florida with information to assist in the selection process. Total funding currently available for the RFP is approximately is $5,641,655.00. The current period of performance (POP) funding period is October 11, 2018 – October 11, 2020. The DR-4399-FL DCMP Budget Period is September 6, 2019 – October 11, 2020.

PURPOSE OF DISASTER CASE MANAGEMENT PROGRAM
Disaster Case Management (DCM) as defined in the FEMA 2017 Program Guidance is a time-limited process that involves a partnership between a case manager and a disaster survivor (also known as a “client”) to develop and carry out a Disaster Recovery Plan. This partnership provides the client with a single point of contact to facilitate access to a broad range of resources. The process involves an assessment of the client’s verified disaster-caused unmet needs, development of a goal-oriented plan that outlines the steps necessary to achieve recovery, organization and coordination of information on available resources that match the disaster-caused unmet needs, the monitoring of progress toward reaching the recovery plan goals, and when necessary, client advocacy.

DCM SERVICE PROVIDERS
The non-Federal entity may sub-grant/contract with local providers directly or sub-grant/contract with a management entity to be responsible for managing local providers. Regardless of how the non-Federal entity chooses to manage the program, DCM Service Providers must adhere to the basic requirements listed below:

- Have experience managing Federal grant programs;
- Have experience providing disaster case management in an impacted area;
- Have no adverse or ongoing legal actions regarding the alleged or proven negative performance of their services, be neither suspended or barred from contracting with the Federal Government, and shall not be in a probation status with other Federal grant programs;
- Comply with all applicable requirements of the Privacy Act of 1974 and individual confidentiality provisions;
- Comply with Federal and non-Federal entity disability and civil rights laws, requirements and provisions (including providing equal access and reasonable accommodations);
- Follow the grant management requirements of 2 CFR Parts 215, 220, 225, or 230 as appropriate; and
- Maintain grant project records for five (5) years after the end of the fiscal year that the grant agreement is finalized or until no longer needed and indicated in writing by FEMA or the State of Florida, whichever comes sooner.
- Be in good standing with the FEMA, State of Florida, and Volunteer Florida.
ADDITIONAL REQUIREMENTS INCLUDE:

- Capacity to hire and manage requisite staff
- Demonstrated experience with fiscal accountability and records management
- Utilize the Coordinated Assistance Network (CAN) for information sharing, avoiding duplication of services, and required reporting
- Adhere to Disaster Case Management Program Guidance as described in the 2017 FEMA DCM Program Guidance and the Florida Disaster Case Management Plan. An excerpt from FL Plan and FEMA Guidance is included in the Appendix as Attachment G.
- Provide Disaster Case Management training approved by Volunteer Florida for all staff within two (2) weeks of their hiring.
- Have a system in place for the utilization and support of volunteers.


PROPOSAL SCORING CRITERIA
Proposals will be reviewed and scored by an Evaluation Committee selected by Volunteer Florida staff. Scoring will be on a 150-point scale based on the components outlined in the Proposal Submission section. Volunteer Florida may conduct clarifying interviews in person or through conference calls prior to final approval. A copy of the Proposal Review Form and scoring elements is included in the Appendix as Attachment A.

ALLOWABLE EXPENDITURES
DCMP resources may only be used to support Disaster Case Management services. Funds may be used for salaries, benefits, supplies, equipment over $5,000, travel, contractual services and certain other program operating costs. Additional information on allowable vs. unallowable costs can be found in Budget Preparation beginning on page 64 of the 2017 FEMA DCM Program Guidance. Volunteer Florida urges all applicants to become familiar with compliance policies detailed in the guidance. The guidance has been included in the Appendix as attachment B.

FUNDING PERIOD AND PROCESS
Upon proposal approval, the term of this award shall commence with receipt of a signed original contract by Volunteer Florida and shall expire Twenty-Four months from the date of DR-4399FL Disaster Declaration unless granted an extension of the original grant term with FEMA. If approved, an addendum to the original contract shall be drawn with new terms superseding only the funding period and no other terms or requirements set forth in the Request for Proposal or Contract.
REQUEST FOR ADVANCE
A request for an advance payment may be submitted to Volunteer Florida. The request cannot exceed the amount of projected expenditures for the first 90 days. If an advance on the awarded amount is needed, applicant must submit the Request for Advance Payment form with the proposal. Payments thereafter will be made on a cost reimbursement basis and in accordance to provider contract terms and conditions. Applicant must complete the 60-day Certification of Operating Funds Agency Certification. Copies of these forms are included in the Appendix as Attachment C.

REPORTING PROCESS
Monthly financial reports with an invoice and accompanying receipts must be submitted to Volunteer Florida by the 15th of each month for the prior month. Copies of the Monthly Invoice Worksheet and Monthly Federal Finance Report SF-425 have been included in the Appendix as Attachments D and E respectively.

Weekly, monthly, and quarterly status updates will be submitted to Volunteer Florida beginning the first Friday after notice of award. Copies of reporting templates have been provided in Attachment F of this document.

APPLICANT REQUIREMENTS
All applicants will be required to complete all applicant information included in the RFP. A detailed budget and narrative must be included in the applicant submittal. This information will be used to evaluate applicant qualification.

CONTRACTUAL REQUIREMENTS
A copy of the (sample) contract is available upon request.

PROPOSAL DEADLINE
All proposals must be uploaded by noon (12:00 p.m.) Eastern Standard Time, October 11, 2019.

Submit the proposal via Blackbaud.

Send questions to:

Katie Troncoso
Grants and Contracts Manager
Volunteer Florida
Katie@volunteerflorida.org or 850-414-7400 x120
VOLUNTEER FLORIDA DISASTER CASE MANAGEMENT PROGRAM PROPOSAL SUBMISSION

- Proposals conforming to the project requirements must be submitted via Volunteer Florida’s online system [Blackbaud], no paper applications. Proposals must include all items listed below. Incomplete proposals may not be considered.
- Letter of Transmittal – Signed by an officer with authority to bind the Applicant’s proposal.
- Narrative
  - Executive Summary (500 words or less) – The Executive Summary should provide a brief overview of applicant’s project.
  - Project Description (4500 words or less) – Explain:
    - The service area(s), DCM positions required, staff recruitment, and plan for allocation of staff throughout the group(s)
    - The mobilization and outreach strategy
    - The full scope of service provision to include intake process, client prioritization, client data sharing, standardization of forms, case management activities, client progress/monitoring and case closure
    - The demobilization strategy
    - Please describe any systems to be used for client data sharing to avoid duplication of benefits, its compatibility with the Coordinated Assistance Network (CAN) program. CAN is a mandatory component of the DR-4399FL DCMP unless amended in writing by Volunteer Florida at time of contract.
    - The process for managing clients with access and functional needs
    - The standardization and use of the following documents: intake form, release of information, case plan development, outcomes and indicators monitoring, program monitoring reports, repair estimation, case presentation, volunteer tracking, case closure
    - The system or process used for tracking volunteer hours dedicated to assisting survivors or the DCMP sub-provider with unmet needs.
  - Organizational Capacity and Community Collaboration (Limit the space for each item to 500 words or less) – Use this section to provide:
    - Description of pursuit of additional funding to secure services/resources for clients
    - Description of coordination with community stakeholders and long-term recovery organizations for service and resource support
    - Description of DCMP document maintenance and retention procedures
    - Description of experience managing federal grants and system of fiscal accountability
- Budget (send as an attachment) – As you prepare your budget: Itemize each cost and prepare a detailed narrative.
  - All the amounts you request must be defined for a particular purpose. Do not include miscellaneous, contingency, or other undefined budget amounts.
  - Do not include unallowable expenses, e.g., entertainment costs (which include food and beverage costs) unless they are justified as an essential component of an activity, as defined by 2 CFR § 200.432.
  - Do not include fractional amounts (cents).

Budgets may include costs for:
- Personnel: Include expense for employees whose activities directly relate to the project. List each staff position separately and provide position description, salary, and percentage
of effort devoted to this project. Each staff person’s role listed in the budget must be described in the narrative.

- **Fringe Benefits**: Identify the types of fringe benefits to be covered and the costs of benefit(s) for each staff position. Unless exempt by the IRS with accompanying documentation (note in the narrative and provide documentation with application), all projects must pay FICA for all personnel, even when the organization does not supply the personnel expense. Other allowable fringe benefits typically include Worker’s Compensation, Retirement, State Unemployment Tax (SUTA), Health and Life Insurance. List each benefit as a separate item. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item. Fringe Benefits may not exceed 29% of salary line item.

- **Travel**: Describe the purpose for which staff member(s) will travel. Provide a calculation to include itemized costs for transportation, lodging, per diem, and other travel-related expenses multiplied by the number of trips/staff. Applicants must adhere to the State of Florida mileage and per diem (Florida Statute 112.061). State mileage reimbursement rate is $0.445 per mile.

- **Supplies**: Itemize all supplies not normally stocked in a typical business office. Include a justification for each item. Maximum allowed cost per item is $5,000. Single items over $100 should be listed individually in the budget narrative. Examples include but are not limited to: office supplies, computers, cell phone.

- **Equipment**: Itemize equipment and provide justification for equipment costs, and expenses less than $5,000 must be included in the supplies category. This line item is reserved for individual equipment purchases exceeding $5,000.

- **Contract Services**: Itemize all costs by identifying person, role, daily rate, and number of days. Identify the types of services being provided. Ensure all compensation complies with FEMA policy and established rates of pay.

- **Other Operating Costs**: Allowable costs in this budget category include but are not limited to background checks, staff identification and office space. (If space is budgeted and it is shared with other projects or activities, the costs must be equitably pro-rated and allocated between the activities or projects). Examples include but are not limited to: rent, utilities, background checks.

- **Budget Narrative** – Use this section to describe the adequacy of your budget to support your project design and activities. After each item description, present the basis for each calculation in the form of an equation. e.g., Calculation is $31,980 annual salary with benefits, $2,665 per month, 18 months = $47,970.

- **Proposed DCMP Organizational Chart**
- **A copy of the Applicant’s 501(c)(3) determination letter**
- **Most recent audit** or board approved financial statement
Florida Disaster Case Management Program
Proposal Cover Page

Complete and submit via Blackbaud by 12:00 PM (noon) ET, October 11, 2019. (Note: Incomplete proposals or proposals submitted after the deadline may NOT be accepted or reviewed.)

<table>
<thead>
<tr>
<th>Name of Organization:</th>
<th>Address</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City, State, Zip</th>
<th>Phone</th>
<th>State of Incorporation</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Description of Business: business type (corporation, partnership, etc.), organizational history, years in business, size</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Description of Specialized Services: (type of service and years of experience in specialized area)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Application for Group:</th>
<th>□ Group 1</th>
<th>□ Group 2</th>
<th>□ Group 3</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Executive Director / CEO Name:</th>
<th>Executive Director/CEO Phone:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>RFP Contact Name</th>
<th>RFP Contact Title:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>RFP Contact Phone:</th>
<th>RFP Contact Fax:</th>
<th>RFP Contact Email:</th>
</tr>
</thead>
</table>

Please describe at least one project similar in size and scope of work to this RFP to include project name, client name, address, phone and brief summary of results:

<table>
<thead>
<tr>
<th>TOTAL AMOUNT REQUESTED:</th>
<th>FEIN NUMBER:</th>
</tr>
</thead>
</table>

All applicants are required to provide information on the last five years of service history.

To the best of my knowledge, the data in this proposal is true and correct and the governing body of the applicant has duly authorized the enclosed documents. I understand that incomplete proposals or proposals submitted after the deadline may not be accepted or reviewed.

By authorizing below, the undersigned acknowledges having read and understood the disaster program guidelines and will be able to fully comply with the provisions of these guidelines as well as any and all additional applicable federal, state and local requirements, including procurement and financial management. Applicant also acknowledges that if a funding recommendation is made for less than the full amount applied for, additional documentation to include but not limited to a revised budget, scope of work and proposed accomplishments may be requested prior to final funding determinations.

Authorized Signature: ______  Authorized signature in Blackbaud _____________  Date: __________

Printed Name: __________________________  Title: __________________________
Please limit your response to the following 3 questions to the space on this page.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>During the last five years, has Applicant had a contract terminated for default? If yes, please provide a detailed explanation.</td>
<td></td>
</tr>
<tr>
<td>During the last five years, has Applicant been assessed any penalties under existing or past contracts? If yes, please explain.</td>
<td></td>
</tr>
<tr>
<td>During the last five years has Applicant, subsidiary or intermediary company, parent company or holding company been the subject of any order, judgment or decree of any federal or state authority barring, suspending or otherwise limiting the right of the Applicant to engage in any business, practice or activity or if trading in the stock of the companies has ever been suspended? If yes, please explain.</td>
<td></td>
</tr>
</tbody>
</table>
Disaster Case Management Program Proposal

Narrative

Executive Summary (500 words or less) The Executive Summary should provide a brief overview of applicant’s project.

Project Description (Limit the space for each item to 500 words or less)

1. Please describe the service area(s), jobs required and staff recruitment and allocation plan for staff throughout the region

2. Please describe the mobilization and outreach strategy

3. Please describe the full scope of service provision to include intake process, client prioritization, client data sharing, standardization of forms, case management activities, client progress/monitoring and case closure

4. Please describe the demobilization strategy

5. Please describe the DCMP training plan

6. Please describe the system to be used for client data sharing to avoid duplication of benefits, its compatibility with the Coordinated Assistance Network (CAN)

7. Please describe the process for managing clients with functional needs

8. Please describe the standardization and use of the following documents: intake form, release of information, case plan development, outcomes and indicators monitoring, program monitoring reports, repair estimation, case presentation, volunteer tracking, case closure

9. Please describe the system or process used for tracking volunteer hours
Organizational Capacity and Community Collaboration
(Limit the space for each item to 500 words or less)

1. Please describe the of pursuit of additional funding to secure services/resources for clients with unmet needs
2. Please describe the coordination with community stakeholders and long-term recovery organizations for service and resource support
3. Please describe the DCMP document maintenance and retention procedures
4. Please describe organization’s experience managing federal grants and system of fiscal accountability
Budget Narrative (expand the space below to 1500 words or less)
Use this section and expand as necessary to describe the adequacy of your budget to support your project design and activities. After each item description, present the basis for each calculation in the form of an equation. e.g., Calculation is $31,980 annual salary with benefits, $2,665 per month x 18 months = $47,970.

Complete and submit via Blackbaud by 12:00 PM (noon) ET, October 11, 2019.

Katie Troncoso
Grants and Contracts Manager
Volunteer Florida
Katie@volunteerflorida.org or 850-414-7400

Please be sure to include all documents requested on the attached checklist and submit them by 12:00 PM (noon) EST, October 11, 2019.

For your reference and guidance, a copy of the Proposal Review Form is included in the Appendix as Attachment A
• Designate Group
• Narrative (Applicant Information, Executive Summary, Project Description, Organizational Capacity, and Community Collaboration)
• Budget
• Budget Narrative
• Letter of Transmittal
• Proposed DCMP Staffing/Organizational DCMP Chart
• A copy of the applicant’s 501(c) (3) certification
• A copy of the applicant’s tax exempt-certificate
• Most recent audit or board approved financial statements
• Certificate of Drug-Free Workplace Requirements (Attachment G)
• Certificate Regarding Lobbying (Attachment H)
• Certificate Regarding Israel Boycott (Attachment I)
## Disaster Case Management Program Timeline DR-4399-FL

<table>
<thead>
<tr>
<th>Deliverables</th>
<th>Actions</th>
<th>Date of</th>
<th>Responsible Party</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training Schedule Submitted</td>
<td>Schedule and curriculum for trainings sent for review.</td>
<td>Submitted with application</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Kick Off Meeting, Finance Training</td>
<td>All State Management staff and DCM Program Managers oriented to DCMP</td>
<td>Within 30-days of sub-provider selection</td>
<td>State Program Director</td>
</tr>
<tr>
<td>DRC/CRC and Direct Housing Staff Coordination Plans Submitted to FEMA</td>
<td>Staffing Plans for FEMA Direct Housing Recertification Teams sent to FEMA for review</td>
<td>15-days from award</td>
<td>Provider Agencies, Program Managers</td>
</tr>
<tr>
<td>Staffing Benchmark</td>
<td>50% of Case Managers Hired and Trained</td>
<td>30-days from award</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Case Load Benchmark</td>
<td>50% of survivors utilizing Direct Housing contacted</td>
<td>30-days from receiving FIDA Report</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Case Load Benchmark</td>
<td>100% of survivors utilizing Direct Housing contacted</td>
<td>60-days from receiving FIDA Report</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Staffing Benchmark</td>
<td>100% of Case Managers Hired and Trained</td>
<td>60-days from award</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Case Load Benchmark</td>
<td>25% of non-Direct Housing survivors contacted</td>
<td>120-days from receiving FIDA Report</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Case Load Benchmark</td>
<td>50% of non-Direct Housing survivors contacted</td>
<td>135-days from receiving FIDA Report</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Case Load Benchmark</td>
<td>75% of non-Direct Housing survivors contacted</td>
<td>150-days from receiving FIDA Report</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Case Load Benchmark</td>
<td>100% of non-Direct Housing survivors contacted</td>
<td>165-days from receiving FIDA Report</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Case Load Benchmark</td>
<td>10% of caseload closed</td>
<td>9 months from receiving FIDA Report</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Case Load Benchmark</td>
<td>25% of caseload closed</td>
<td>12 months from receiving FIDA Report</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Case Load Benchmark</td>
<td>50% of caseload closed</td>
<td>18 months from receiving FIDA Report</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Demobilization, begin staffing reduction</td>
<td>Staff reduce 25% every 30 days, cases closed or transferred</td>
<td>120-days prior to performance period expiration</td>
<td>Provider Agencies</td>
</tr>
<tr>
<td>Grant Closeout Project Performance Completed</td>
<td>Staff reduction to 0% NLT</td>
<td>End of performance period</td>
<td>DCMP Staff, Management</td>
</tr>
<tr>
<td>Grant Closeout</td>
<td>Final Closeout Documents to FEMA</td>
<td>NLT 90 days after performance period expiration</td>
<td>Program Director, Finance Director</td>
</tr>
<tr>
<td>TASK</td>
<td>DATE</td>
<td>TIME</td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------</td>
<td>------------</td>
<td>----------</td>
<td></td>
</tr>
<tr>
<td>Advertise and Release RFP</td>
<td>Sept. 13, 2019</td>
<td>COB</td>
<td></td>
</tr>
<tr>
<td>Deadline to Submit Technical Questions</td>
<td>Sept. 20, 2019</td>
<td>12:00 PM</td>
<td></td>
</tr>
<tr>
<td><a href="mailto:HurricaneMichael@volunteerflorida.org">HurricaneMichael@volunteerflorida.org</a></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applicant Technical Assistance Call</td>
<td>Sept. 24, 2019</td>
<td>2:00 PM</td>
<td></td>
</tr>
<tr>
<td>1-888-585-9008 Passcode: 721-648-837</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Volunteer Florida Response to Questions</td>
<td>Sept. 26, 2019</td>
<td>COB</td>
<td></td>
</tr>
<tr>
<td>Proposal Due Date Via Blackbaud</td>
<td>Oct. 11, 2019</td>
<td>12:00 PM</td>
<td></td>
</tr>
<tr>
<td>Evaluation Committee Review Completed</td>
<td>Oct 18, 2019</td>
<td>COB</td>
<td></td>
</tr>
<tr>
<td>Award Notifications</td>
<td>Oct. 23, 2019</td>
<td>COB</td>
<td></td>
</tr>
<tr>
<td>Via email to applicant ED/CEO and posting at <a href="http://www.volunteerflorida.org">www.volunteerflorida.org</a></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Appendix

<table>
<thead>
<tr>
<th>Attachment A:</th>
<th>Disaster Case Management Proposal Review Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attachment B:</td>
<td>Allowable Costs Vs. Unallowable Costs</td>
</tr>
<tr>
<td>Attachment C:</td>
<td>Request for Advance Payment</td>
</tr>
<tr>
<td>Attachment D:</td>
<td>Disaster Case Management Monthly Financial Report/Invoice (Sample)</td>
</tr>
<tr>
<td>Attachment E:</td>
<td>Sample Weekly, Monthly, and Quarterly Update Template</td>
</tr>
<tr>
<td>Attachment F:</td>
<td>Disaster Case Management Program Requirements</td>
</tr>
<tr>
<td>Attachment G:</td>
<td>Certification Regarding Drug-Free Workplace Requirements</td>
</tr>
<tr>
<td>Attachment H:</td>
<td>Certification Regarding Lobbying</td>
</tr>
<tr>
<td>Attachment I:</td>
<td>Certification Regarding Israel Boycott</td>
</tr>
<tr>
<td>Attachment J:</td>
<td>Disaster Case Management Program Position Descriptions (Samples)</td>
</tr>
</tbody>
</table>
### REQUIREMENTS: **ALL** necessary documentation must be submitted with proposal AND proposals meet **ALL** requirements listed in order to be reviewed

- The proposal was complete and included cover page with all required documents listed in the RFP

### AGENCY AND PROGRAM INFORMATION

- The extent to which applicant’s Executive Summary provided an overview of applicant’s project

- The extent to which applicant described expected service area(s), jobs required and staff recruitment and allocation plan for staff throughout the region.

- The extent to which applicant described mobilization and outreach strategy.

- The extent to which applicant described scope of service provision:
  - Intake process
  - Client prioritization
  - Client data sharing
  - Standardization of forms*
  - Case management activities
  - Client progress/monitoring
  - Case closure process

- The extent to which applicant described demobilization strategy

- The extent to which applicant described Disaster Case Management Program training plan.

- The extent to which applicant described technical system to be used for client data sharing to avoid duplication of benefits or resources and the compatibility with CAN (the Coordinated Assistance Network).

- The extent to which applicant described process for accommodating clients with access and functional needs.

- The standardization and use of the following documents: Intake form, Release of Information, Case Plan Development, Outcomes and Indicators Monitoring, Program Monitoring Reports, Repair Estimation, Case Presentation, Volunteer Tracking, and Case Closure.

- The extent to which applicant described system for tracking volunteer hours.

### ORGANIZATIONAL CAPACITY AND COMMUNITY COLLABORATION

- The extent to which applicant described pursuit of additional funding to secure services/resources for clients.
• The extent to which applicant described coordination with community stakeholders and long-term recovery organizations for service and resource support.  

• The extent to which applicant described plan for DCMP document maintenance and retention procedures.  

• The extent to which applicant described experience managing federal grants and system of fiscal accountability.  

**BUDGET AND BUDGET NARRATIVE**

• The extent to which each budget item is an allowable expense and is well defined for a specific purpose.  

• The extent to which each budget item is reasonable and appropriate to the program, appears to be sufficient to meet program needs and includes the calculation in the narrative.  

**SCORING:**

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
<th>Max Points</th>
<th>TOTAL POINTS:</th>
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<td>5</td>
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**Signature of Reviewer**

**Date**
## ALLOWABLE COSTS VS. UNALLOWABLE COSTS

<table>
<thead>
<tr>
<th>Budget Category</th>
<th>Allowable Expenses</th>
<th>Unallowable Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>Salaries and wages for typical DCM Positions: Provider Level: Program Manager Finance Manager Data Entry Specialist Disaster Case Management Supervisor Disaster Case Manager Administrative Assistant Construction Cost Analyst</td>
<td>Fringe benefit costs above the customary fringe benefit rate for temporary State and local provider staff.</td>
</tr>
<tr>
<td>Fringe Benefits</td>
<td>Fringe benefits are allowable at the rate allowable by State of Florida law. Fringe benefits are for the personnel listed in the budget and only for the percentage of time devoted to the project.</td>
<td></td>
</tr>
</tbody>
</table>
| Travel          | • Mileage reimbursement for Case Managers for travel to and from location of disaster survivors  
                  • Attend on-going case management trainings  
                  • All travel costs must be in accordance with State of Florida travel policy guidelines | • Providing transportation for survivors  
                  • Rental or leasing of vehicles |
| Supplies        | • Supplies include any materials that are expendable or consumed during the course of the project  
                  • Supply items must be less than $5000  
                  • Justification is required for each item | • Refreshments and food for meetings and trainings  
                  • Video and recording devices, televisions and other types of video production equipment |
| Equipment       | • Equipment means an article of nonexpendable, tangible personal property having a useful life of more than one year and an acquisition cost which equals or exceeds the lesser of the capitalization level established by the governmental until for financial statement purposes, or $5,000 | |
### ALLOWABLE COSTS VS. UNALLOWABLE COSTS – cont.

<table>
<thead>
<tr>
<th>Contractual Services</th>
<th>For contracted consultants, the maximum FEMA reimbursement rate is $750 per day, which includes equipment, supplies, lodging and travel costs.</th>
<th>All consultant costs must be included as part of the daily rate of $750.</th>
</tr>
</thead>
</table>
| Other Operating Costs: | The budget may identify costs that are unique to the declared disaster area but do not fall into one of the budget sub-categories. Note: Costs must not be identified as miscellaneous (i.e., they must be described in detail). | • Transportation for survivors  
• Direct financial assistance for survivors |
Attachment C
Request for Advance Payment

This form should be submitted only if an advance on the approved award is needed to accomplish program goals in the first 30 days. 30 days of projected expenses or 20% of the total sub-provider award is available whichever is less, and must be submitted with applicant’s proposal. Funds will be made available within 15 days of contract execution and approval of applicant’s justification for the advance.

Applicant must provide a detailed justification of the need for the cash advance. Attach supporting documentation, including quotes for purchases, delivery timelines, salary and expense projections, etc., which clearly demonstrates the need to expend funds in the first 30 days.

All receipts and other documentation of expenditures of the amount advanced must be submitted to the Volunteer Florida within 60 days of contract execution. No additional reimbursements will be made until all advance funds have been accounted for or returned. Unused advance funds may be retained and applied to subsequent requests for reimbursement, with appropriate documentation for all expenses. All unused funds must be returned within 15 days after the end of the grant period.

Amount of Advance Requested: $______________

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<tr>
<th>Budget Category/Line Item</th>
<th>Explanation</th>
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<tr>
<td>(Example) Volunteer Support</td>
<td>(EXAMPLE: Need to purchase personal protective equipment for volunteers working in mold environments.)</td>
<td></td>
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<tr>
<td>Total Advance Requested</td>
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## SECTION I: Program Operating Costs

### Personnel Expenses

*list each employee by last name, first name, initial, and position title*

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<thead>
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<tbody>
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**Subtotal Personnel Expenses**

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### Personnel Fringe Benefits

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<tr>
<td>Other</td>
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**Subtotal Personnel Fringe Benefits**

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### Travel

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**Subtotal Travel**

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### Supplies (be very specific and itemize; please add rows or change the items below as needed)

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<tbody>
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**Subtotal Supplies**

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<tbody>
<tr>
<td>$0.00</td>
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### Contractual and Consultant Services (list each consultant separately)

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</thead>
<tbody>
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</tr>
<tr>
<td>Subtotal Contractual and Consultant Services</td>
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<tr>
<td>---------------------------------------------</td>
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<td>Equipment</td>
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<td>Subtotal Equipment</td>
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<tr>
<td>Other Program Operating Costs (list each cost individually; add rows as needed)</td>
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<td>Subtotal Other Program Operating Costs</td>
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<tr>
<td>TOTAL PER AMOUNTS:</td>
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APPROVED BY (must be typed or signed by program):

Date PER sent to Volunteer Florida:
## Attachment E

### Sample Weekly Reporting Template

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Period of Performance:</td>
<td>Group #</td>
<td>Week</td>
</tr>
<tr>
<td>Week Starting:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week Ending:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Critical Needs Client Contacts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total TSA Client Contacts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Vulnerable Population/Functional Needs Contacts</td>
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<td></td>
</tr>
<tr>
<td>Total Other Critical Needs Client Contacts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Number of Cases</td>
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<td></td>
</tr>
<tr>
<td>Number of Cases Closed with Recovery Plan Achieved</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Cases Closed without Recovery Plan Achieved*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Cases Closed due to Un-Met Needs/Resources</td>
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<td></td>
</tr>
<tr>
<td>Number of TSA Cases Closed</td>
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<td></td>
</tr>
<tr>
<td>Total Critical Needs Client Cases Closed</td>
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</tr>
<tr>
<td>Attach Case Closure Log with Rationale &amp; Unmet Needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Cases Reopened</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Clients in Temporary Housing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Top 3 Unmet Needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Case Managers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Case Management Supervisors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Case Management Supervisors / Case Managers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Case Managers / Clients</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Cases Opened During Reporting Period</td>
<td></td>
<td></td>
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</tbody>
</table>
Sample Monthly Reporting Template

<table>
<thead>
<tr>
<th>Performance Period:</th>
<th>Monthly Quality Report</th>
<th>Grantee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start:</td>
<td>Group #</td>
<td>Month</td>
</tr>
<tr>
<td>End:</td>
<td></td>
<td>Cumulative</td>
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</table>

- **Total Client Contacts**
- **Total Open Cases**
- **Total Closed Cases**
- **Total Number of "Referral Only" Cases**
- **Total Number of Cases**
- **Number of Case Managers**
- **Number of Case Management Supervisors**
- **Case Management Supervisors / Case Managers**
- **Case Managers / Clients**
- **Number of Cases Opened During Reporting Period**
- **Number of Cases Closed with Recovery Plan Achieved**
- **Number of Cases Closed without Recovery Plan Achieved**
- **Number of Cases Reopened**
- **Clients in Temporary Housing**
- **Approx. Dollar Value of Services Provided**

<table>
<thead>
<tr>
<th>Performance Metric</th>
<th>Monthly Quality Report</th>
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<tbody>
<tr>
<td>Top 3 Client needs</td>
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<tr>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>3</td>
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</tbody>
</table>

**Client's Identified Tier (T) / CAN Priority Level**

- T1
- T2
- T3
- T4
- None

None
Sample Quarterly Reporting Template

DR-4399-FL

Period of Performance:

Name and Contact Preparer(s): 

Reporting Period: 

Date of Submission: 

Executive Summary: In three paragraphs or less, provide a summary of the quarterly report, highlighting the key facts, issues and events for this quarter.

Example: During this quarter, xxxx and Affiliate agencies worked together...

Program Objectives

List the program goals and objectives as stated in the proposal submitted to FEMA.

The goal is to serve xxxx families and connect them to long-term sustainable housing resources...

Status of Planned Activities from Previous Reporting Period(s) – Follow Up

Describe the progress and resolution undertaken for the stated challenges from the last reporting period. Leave blank if this is the first reporting period for the program.

Last quarter we planned the following: ...

Section 1 – Primary Activities

Describe the primary activities for this quarter. Topics addressed in this section are successes, staffing issues, challenges, communication, coordination, or collaboration events or issues.

Section 2 – Have any changes been made to the Work Plan

If yes, did you request and receive approval from FEMA prior to these changes?

Section 3 – Budget Narrative

Were budget expenditures in line with planned activities? What was the total spent in period?

Section 4 – Data Summary
Provide quantitative data from the IT tracking platform. Refer to monthly update form. Do not exceed one page.

Section 5 – Challenges

Were there any challenges which prevented the program from achieving its planned activities? How were they solved?

Section 6 – Planned Activities for Next Quarter

Provide a plan of activities within the next quarter for the cases and disaster survivors within the program.

Section 7 – Other

Have any significant changes, accomplishments, opportunities, and shortfalls happened during this reporting period not mentioned above? They may include program activities such as: staffing, training, outreach, conferences.
This document consists of excerpts from the FEMA Disaster Case Management Program Guidance and Florida’s Disaster Case Management Plan that provide guidance for the applicant developing a case management program for the 2019 Hurricane Michael DR-4399-FL.

PROGRAM PARAMETERS

A. Service Area: Florida’s goal is to serve all eligible survivors in declared communities through the provision of Disaster Case Management services. The focus of Disaster Case Management work will be in the twelve declared counties for DR-4399-FL.

B. Disaster-caused Unmet Need Definition: A disaster-caused unmet need is an un-resourced item, support, or assistance that has been assessed and verified by representatives from State, Tribal, local, and Federal governments and/or voluntary and faith-based organizations as necessary for the survivor to recover from the disaster. Disaster survivor resources may include insurance payments, Federal disaster assistance (i.e. FEMA Individual and Households Program (IHP) grants, and Small Business Administration (SBA) Disaster Loans), State assistance, voluntary agency/faith based assistance and personal resources. Unmet needs may also include basic immediate emergency needs such as food, clothing, shelter or first aid and long-term needs such as financial, physical, emotional or spiritual well-being.

C. Disaster Case Management Strategy: The Disaster Case Management Committee of the FLVOAD drafted a plan for the state that was formally adopted by FLVOAD in 2012. The plan provides detailed information regarding all facets of the DCM program. The basic concept of operations is to assist disaster survivors in identifying unmet and long-term needs, locating and advocating for services and resources to meet the needs and coordinating among multiple service organizations to include local long-term recovery groups.

The Florida DCM Program will operate in three phases: Mobilization and Outreach, DCM Service Provision and Demobilization.

C.1 Mobilization and Outreach: Upon award, resources will be mobilized to support DCM services, such as staff, supplies, and facilities. Staff will undergo training in the nationally recognized United Methodist Committee on Relief (UMCOR) Disaster Case Management curriculum, Coordinated Assistance Network or alternative data system, DCM Supervisory training and the consistent use of DCM standards.

Two types of outreach will be conducted. FLVOAD partners and other voluntary organizations will conduct outreach to recruit voluntary staff to augment paid staff and establish additional resources. Community outreach will be conducted to inform residents of service availability information. A multi-disciplinary approach will be necessary for successful community outreach. While not all the following methods may be utilized, the
The most feasible and effective combination will be implemented: community canvassing; local nongovernmental, community organizations (NGO) with which vulnerable populations have existing relationships; social and traditional media; public information messaging; Community Emergency Response Teams; public meetings and LTRG meetings; flyers and signs; mass call out; reverse dialogic; and mass mailings. A detailed outreach and message development section is included in the Florida DCM Plan.

**C.2 Service Provision:** Once the DCM program is operational, DCM will begin the service provision phase. All clients will receive an intake to verify disaster-caused needs, resources received to date and the priority of client needs based on the scale identified in the Florida DCM Plan:

Priority 1—Urgent basic disaster-related needs for shelter, food, safety AND compromised health and well-being (1 or more pre-identified priority triggers as defined in the Intake Form Risk Assessment).

Priority 2—Urgent basic needs for shelter, food, safety OR compromised health and well-being (1 or more pre-identified priority triggers as defined in the risk assessment).

Priority 3—No urgent basic needs; no health and well-being triggers; meets criteria for program’s specialized services for Disaster Case Management.

Priority 4—No urgent basic needs; no health and well-being triggers

These priority levels determine which cases to assign first, but each case will be evaluated for complexity and urgency of basic needs. If clients are found to be ineligible for DCM, advocacy and referral services may still be provided when:

- The applicant does not meet service criteria
- The applicant cannot be served within a time period acceptable to them
- The applicant’s needs fall outside an agency’s capacity to serve the client

Client data will be entered into the Coordinated Assistance Network (CAN), a shared confidential system. This coordinated approach reduces applicant fatigue and provides an accurate history of client recovery and resources provided, allowing stakeholders to collaborate more effectively.

DCM provider organizations will utilize standardized forms for intake, release of information, tracking and reporting that meet FEMA guidelines. The DCM and client will develop a case plan with time-limited tasks for each to complete. The complexity of the plan and client needs will determine the number of meetings required to meet plan goals. Recovery goals determine the timing of case closures. Progress will be monitored.
Once a case has been opened, services will be provided according to the following standard tiers:

Tier 1 - Stable, housed, emergency needs met, resources not available; case will be closed.

Tier 2 - Guidance, referrals and/or few critical resources needed to achieve recovery goals; monthly contact.

Tier 3 - Limited ability to address disaster-caused needs due to a vulnerability such as the elderly, individuals with disabilities, children, those with literacy challenges, those with limited English proficiency; biweekly contact.

Tier 4 - Severe mental trauma, physical limitation, or a member of the functional needs community who requires intensive support to achieve their recovery plan; weekly contact.

Specific activities that Disaster Case Management personnel will be doing:

- Provide intake on clients seeking disaster assistance, interview clients to make determination that needs are disaster related. For those with non-disaster related needs, community service referrals will be made. Those with disaster-related needs; case advocates will provide an overview of process and collect necessary information from the client related to their disaster needs which includes Federal and State assistance received. A duplication of benefits check will be completed on each client. Case managers will prioritize the cases and work from highest to lowest priority, based on client availability.

- All clients with disaster-related needs will be assigned a case manager to work with. This manager will help develop individualized recovery plans. These recovery plans will be the foundation of the work done to help disaster victims recover. These plans will be monitor throughout the duration of the client’s recovery and altered as needed based on assistance provided.

- A review will be conducted to determine if the recovery plan has been successfully achieved and the individual’s needs have been met. The case will then be closed pending no further assistance is needed.

- Provide assistance to review, analyze, make recommendations, and/or negotiate with contractors regarding cost estimates for construction repairs/rebuilds resulting from flood damage. Coordinate activities of volunteers/workers completing repair and reconstruction projects.

- Collect and input client data into CAN (Coordinated Assistance Network). Through CAN case managers will match community resources and client
needs to make referrals to access community resources. This collaboration creates a single point of case management data that provides Long Term Recovery Committees with the information needed to effectively delegate resources and best serve those in need.

- Provide facilitation at community meetings to discuss disaster recovery case management services, seek and collect resources at the local and state level to maintain CAN database of resources available to help individuals with recovery, collaborate with other community agencies to share and gather information, and attend training to receive most up-to-date information on disaster case management skills and tools.

- Provide reports to Volunteer Florida on case management services being provided. Collect and report monthly on the number of people being served, number of resource referrals made, number of recovery plan completed, and the status of those still in recovery.

Case closure should occur when client goals have been met to bring about stability and sustainable recovery. While it is the intent and purpose of DCM services to close cases only when needs have been successfully met, there are other reasons identified in the Florida DCM Plan for case closure:
- Timeline needs of client
- Transition of case to social service providers
- By client request
- Non-compliance by client

When a case is closed, written notice will be provided to the client detailing the rationale for termination and closure. Instructions for client appeal will be included. All appeals will be reviewed by the Program Manager. Case closures will be monitored and included in required reports to FEMA.

C.3 Demobilization: Demobilization planning shall commence at the onset of the DCM program. Typically, demobilization begins as cases are closed and needs are met and requests for assistance taper off or cease. The plan will include a “rightsizing” model and will review each location separately during the process. Volunteer Florida will coordinate with local service providers and volunteers to maintain awareness of community needs and closure trends that would indicate a demobilization threshold has been met. Should services no longer be warranted prior to the term of the grant, Volunteer Florida may make the decision to discontinue DCM program operations. All demobilization determinations will be made in partnership with FEMA, LTRGs, local governments and the DCM Provider.

D. Training: The DCMP training plan will be the responsibility of the sub-provider. Volunteer Florida, FLVOAD and its partner agencies will support training efforts as possible. Core elements of DCM program training will include DCMP training, UMCOR DCM training; CAN training, and Export Wizard training, if needed. Training on new best
practices, new resources or programs, eligibility changes in existing programs and how to best utilize the tools and technology available, will be ongoing. Additional training will be conducted as needed for program success.

E. Staffing: Funds awarded to Service Provider Organization may only be used for staffing the Disaster Case Management Program. A DCMP Staffing Plan must be submitted with the RFP and a final copy with any required amendments submitted with the signed contract. DCMP staff may be supplemented through volunteers or additional staff hired at the sole expense of the Service Provider Organization. Benefits may not exceed 29% of salary.

F. Monitoring and Quality Control: Program monitoring will be the responsibility of Volunteer Florida with assistance from the Program Manager and local DCM staff. Monitoring will include reviews of reports, financial statements and records, case summary and closure reports and site visits. Volunteer Florida will develop policies, procedures, and reporting templates to ensure consistent program monitoring and evaluation throughout the grant period. Sub-contract agreements will include requirements for adherence to these monitoring guidelines.

Compliance reviews will focus on the following areas:

- Client intake, recovery plan, referrals, case notes and closure
- Resource coordination between DCM staff and resource providers
- Coordination among DCM, agencies providing resources, government, nongovernment and private sector stakeholders
- Compliance with privacy laws

Volunteer Florida staff will coordinate closely with the FEMA DCM program liaison throughout the program, and will arrange for up to three site visits for FEMA, as requested, throughout the twelve (12) to eighteen (18) month grant term. Volunteer Florida will arrange for any additional requested meetings. Program evaluations will be included in regular reports to FEMA. These reviews will provide the means to identify needed course corrections to ensure program success and to track client progress for reporting outcomes to FEMA.

G. Reporting: Monthly Invoice Worksheets and Weekly, Monthly, and Quarterly Program Service Reports shall be submitted to Volunteer Florida no later than the first day of each month utilizing the reporting formats provided.

H. Technology Platform Description:
The identified tool for tracking cases is the Coordinated Assistance Network (CAN). Service provider organizations may utilize other existing data platforms from which data can be exported to CAN for data sharing purposes. All DCM Service Provider Organizations shall receive approval, access and training in CAN. CAN has been activated for this event and the state will be working with CAN to ensure that the portal meets the DCMP reporting requirements.
Following training, Disaster Case Managers and Administrative / Data Entry specialists will be responsible for entering all client data into CAN and keeping the system up to date. Approved users will provide summary information within the dictates of the data sharing agreements on case and program progress for use in DCMP grant reporting requirements and demobilization planning.

DCMP staff may utilize the Google Drive platform, Dropbox, or other similar tools for transmitting reports. No personally protected information will be uploaded into these platforms. Policy regarding the use of these tools will be included in training curriculums.

I. Access and Functional Needs: Based on the percentage of people with disabilities and the population numbers for survivors over the age of 60, it is anticipated that some DCM clients will have access and functional needs, including the possibility of language barriers. DCM offices will be located in ADA compliant facilities; unique services and other needs may be secured in collaboration with local Coalition for Independent Living Organizations and Centers for Independent Living. Providers are responsible for providing translation and communication services as needed.
Attachment G

CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988, 2 CFR Part 3001. The regulations require certification by grantees, prior to award, that they will maintain a drug-free workplace. The certification set out below is a material representation of act upon which reliance will be placed when the agency determines to award the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment.

A. The Grantee certifies that it will or will continue to provide a drug-free workplace by:
   a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
   b. Establishing an on-going drug-free awareness program to inform employees about
      1) The dangers of drug abuse in the workplace;
      2) The Grantee's policy of maintaining a drug-free workplace;
      3) Any available drug counseling, rehabilitation, and employee assistance programs
      4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace
   c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
   d. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will-
      1) Abide by the terms of the statement; and
      2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five days after such conviction;
   e. Notifying the agency in writing within ten calendar days after receiving notice under subparagraph (d) (2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position and title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
   f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is convicted-
1) Taking appropriate personnel actions against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, 29 U.S.C., 701 et seq.; or
2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

A. The Grantee may insert in the space provided below the sites (s) for the performance of work done in connection with this grant.

Place(s) of Performance:

Volunteer Florida
1545 Raymond Diehl Rd, Suite 250
Tallahassee, FL, 32308

____________________________________

Name

____________________________________

Date
Attachment H

CERTIFICATION REGARDING LOBBYING
Certification for Contracts, Grants, Loans, and Cooperative Agreements

This certification is required by the regulations implementing the New Restrictions on Lobbying, 44 CFR Part 18. The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer of employee of Congress, or an employee of a member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence and officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

3. The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31 U.S.C., 1353. Any person who fails to file the required certification shall be subject to civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

______________________________
Name

______________________________
Date
"In submitting a response, each respondent understands, represents, and acknowledges that it: (1) is not on the Scrutinized Companies that Boycott Israel List, created pursuant to section 215.4725, Florida Statutes, and is not engaged in a boycott of Israel; (2) is not on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, created pursuant to section 215.473, Florida Statutes; and (3) is not engaged in business operations in Cuba or Syria. A respondent failing to satisfy each of these criteria will be ineligible for an award under this solicitation."

__________________________________
Name

__________________________________
Date
Position: Administrative/ Data Entry Assistant  
Location: TBD  
Salary: TBD  

The Administrative/Data Assistant provides support to the Program & Finance Manager and liaison with the Disaster Case Manager. The DCMP is a comprehensive program for the provision of Disaster Case Management services to hurricane survivors. The Administrative/Data Entry Assistant will report to the Program & Finance Manager.  

Summary:  
This position will serve as the Assistant to the Program & Finance Manager and provide clerical support and data entry. This position requires good organizational, computer and telephone skills.  

Responsibilities:  
• Provides clerical support to the Program & Finance Manager  
• General Office Duties, including responding to email and telephone calls, coordinating meetings and conference calls  
• Enters alphabetic, numeric, or symbolic data from source documents into computer following format displayed on screen, and enters necessary codes  
• Compares data entered with source documents, or re-enters data in verification format on screen to detect errors  
• Collects and records contributions  
• Sends newsletters, promotional materials, and other publications to persons on mailing list.  
• Enters client data from original needs assessments and case manager notes into CAN  
• Liaison to the Program & Finance Manager for purchasing, time sheets and other clerical duties  

Education:  
Minimum High School degree or GED required  

Experience:  
Proficiency in Microsoft WORD, EXCEL and Outlook
Position: Data Analyst
Location: TBD
Salary: TBD

The Data Analyst reports to the Program & Financial Manager. The DCMP is a comprehensive program for the provision of Disaster Case Management services to flood survivors. The Data Analyst will be responsible for oversight of all data collection and forms related to the DCMP. The Data Analyst will work closely with the Program & Financial Manager to develop reports, data collection instruments, and forms. This position requires excellent verbal and written communication skills, and in-state travel.

Summary:
This is a highly responsible professional position that will be responsible for monitoring and data collection for a comprehensive multi-county program for disaster case management.

Responsibilities:
- Development of procedures for transfer of data from disparate sources into CAN
- Preparation and sorting of source documents
- Identification and interpretation of data to be entered
- Liaison with preparers of source documents to resolve questions, inconsistencies, or missing data
- Monitoring of data in CAN for completeness
- Preparation of reports requested by Program & Financial Manager and Disaster Case Managers

Education:
Minimum Bachelor’s degree in statistics, public administration or closely related field

Experience:
Nonprofit or public program experience preferred
Sample
Disaster Case Management Program
Position Description

Position: DCM Program & Finance Manager
Location: TBD
Salary: TBD

The Program & Finance Manager provides program management and fiscal oversight of the Disaster Case Management Program (DCMP). The DCMP is a comprehensive program for the provision of Disaster Case Management Services to flood survivors. This position requires excellent verbal and written communication skills, experience managing staff, knowledge of accounting principles and extensive in state travel.

Summary:
This is a highly responsible professional position that will be responsible for implementation of comprehensive multi-county program for disaster case management.

Responsibilities:
• Direct supervision of the Disaster Case Managers
• Adaptation of the Florida Disaster Case Management Base Plan into a Policy and Procedure Manual for use by all DCMP staff
• Ensuring overall program and fiscal implementation aligns with the approved grant application and all applicable federal and state regulations
• Ensuring periodic reports and other documentation are timely and accurate
• Liaison to Volunteer Florida, the Florida Voluntary Organizations Active in Disasters (VOAD) and other partner agencies engaged in recovery
• Fiscal training for sub-grantees
• Ensuring all program staff receives required training
• Monitoring of the budget to actual
• Preparation of invoices
• Review and approval of invoices
• Fiscal on-site monitoring

Education:
Minimum Bachelor's degree in Public Administration, Social Sciences, Finance or other related degree Masters preferred

Experience:
Have experience implementing social services programs. Executive level nonprofit experience preferred
Sample
Disaster Case Management Program
Position Description

Position: DCMP Construction Manager
Location: TBD
Salary: TBD

The Construction Manager will report directly to the Program & Finance Manager and liaison with Disaster Case Managers, and long-term recovery organizations. This position will require extensive in-state travel.

Summary:
Review, analyze, provide recommendations and/or negotiate with contractors regarding cost estimates for structural/construction repairs/rebuilds resulting from flood damage. Directs activities of workers concerned with implementing residential construction projects and manage all aspects of DCMP related residential home repair operations by performing the following duties.

Responsibilities:
- Visit each site, gather and record information on access to the site; surface topography and drainage, and the availability of electricity, water, and other services
- Develop an analysis of the condition of the structure prior to the flood and construction needed to restore the structure to the pre-flood condition
- Determine the quantity of materials and the labor required
- Prepare a cost summary, which includes the costs of labor, equipment, materials, subcontractors, overhead, taxes, insurance, markup, and any additional costs that may affect the project
- Review construction cost estimates and compare with analysis
- Work with homeowner to request modifications to cost estimate if needed
- Provide homeowner with a checklist to monitor progress and cost on construction project

Education:
Bachelors or associate degree in construction management, building science or construction science preferred

Experience:
Construction and cost estimation experience required and may substitute for a degree based on years of experience
Sample
Disaster Case Management Program
Position Description

Position: Disaster Case Manager Supervisor
Location: TBD
Salary: TBD

The Disaster Case Manager Supervisor reports directly to the Program & Finance Manager and will supervise Case Managers, and liaise with Construction Managers, providers of assistance to survivors and long-term recovery organizations. This position will require extensive multi-county travel. This position is eligible for state benefits including: annual and sick leave, retirement and health insurance.

Summary:
Provides leadership and coordinates all activities involved with Disaster Related Case Management, ensuring that resources are utilized as effectively as possible in meeting the needs of those affected by (disaster name). The Case Management Supervisor reports to the Program & Finance Manager.

Responsibilities:
- Ensures that all DCM staff engaged in DCMP and long-term recovery case management are utilizing the Coordinated Assistance Network (CAN) to minimize duplication of service
- Assigns all referrals and surveys with identified needs to DCM staff and other Participating Agencies, keeps records concerning such assignment, monitors case work progress, acts as a resource to DCM and Participating Agencies, and recommends action when necessary
- Receives needs assessment surveys and referrals from sources other than Participating Agencies and assigns them to DCM
- Evaluates training needs for DCM and Participating Agencies, makes recommendations related to such training and schedules additional training as appropriate
- Maintains list of individuals who have received DCMP related training, including types of training received and dates
- Identifies best practices in DCM and communicates them to ensure the highest level of service and assistance is provided
- Establishes expectations and provides DCMP performance reports (including case closures) to the Program & Finance Manager
- Submits reports as required for reimbursement requests and financial tracking
- Schedules and leads Case Manager Meetings and provides support to LTRO groups in coordinating DCM activities
- Ensures commitments of other funding organizations are secured and shared with DCM and participating agencies and are best utilized to meet the survivor needs
• Ensures appropriate confidentiality agreements are signed by all DCMP staff and volunteers and other participating agencies attends LTRO meetings and provides DCMP updates and recommendations as appropriate

Education:
Bachelor’s degree in Social Science or other related field.

Experience: Some case management experience is required. Long-term Disaster Case Management experience is preferred
Position: Disaster Case Manager  
Location: TBD  
Salary: TBD  

The Disaster Case Manager will report directly to the Program & Finance Manager and liaise with Construction Manager and long-term recovery organizations. This position will require extensive multi-county travel.

Summary:
Review, analyze, provide recommendations and/or negotiate with contractors regarding cost estimates for structural/construction repairs/rebuilds resulting from flood damage

Responsibilities:
- Makes contact with assigned individuals or families as soon as feasible
- Secures and maintains appropriate "Release of Confidential Information" forms for each client.
- Helps clients develop a Recovery Plan by jointly reviewing the assistance they have received, identifying any unmet urgent needs, and determining possible sources for gaps in resources.
- Refers the client to another program or agency where appropriate
- Presents individual cases to the Case Manager Meetings and the long-term recovery committee, when appropriate
- Follows up with other agencies to assure that assistance commitments have been met
- Remains in contact with the client until the disaster-related needs are met and/or the case is closed
- Recommends to Program & Finance Manager and/or Case Management Administrator closing or referring the case when no more can be accomplished, being certain to take time for closure with the individual or family
- Keeps detailed records of every case, every home visit, every referral and every contact with resources on client's behalf
- Networks with other agencies to stay informed about services and resources
- Respects confidentiality at all times, at home, in public, in committee meetings and in consultations.
- Attends required training sessions
- Enables clients to take responsibility for their recovery, acting as advocate and facilitator as opposed to rescuer

Education:
High school diploma or equivalent

Experience: Experience working in social service programs is preferred