



**2023 Home Delivered Meals
Request for Qualification
Guidelines
and
Application
(Amended 3/6/2023)**

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***Timeline subject to change**

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Guidelines

INTRODUCTION

The Aging and Disability Services (ADS) Division of the City of Seattle Human Services Department (HSD) is seeking applicants interested in helping older adults maintain quality of life and age in place. The Home Delivered Meals (HDM) Request for Qualification (RFQ) is competitive and open to any legally constituted entities that meet the standard [HSD Agency Minimum Eligibility Requirements](#) and any additional outlined in Section G of the Guidelines.

The Home Delivered Meals Program provides meals to older adults who are unable to leave their home unassisted, unable to prepare meals for themselves, and do not have a social support system to help them.

Approximately **\$2,394,879** is available through this RFQ from the following sources:

Fund Sources	Request for Qualification Amount
Older Americans Act	\$1,290,013
HSD General Fund	\$394,504
Nutrition Services Incentive Program	\$292,106
Washington State Funds	\$418,256
Total	\$2,394,879

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

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

Number of awards

HSD intends to fund a maximum of 3 proposals for HDM. Initial awards will be made for the period of January 1, 2024-December 31, 2024. While it is the City's intention to renew agreements resulting from this funding opportunity on an annual basis through the 2027 program year, future funding will be contingent upon performance and funding availability.

TIMELINE*

Date	Time	Activity
March 1, 2023		Funding Opportunity Released
March 8, 2023	10:00 a.m.- 11:00 a.m. PT	Information Session #1 – In person only Neighborhood House – High Point 6400 Sylvan Way SW Seattle, WA 98126 Room 207 A&B
March 10, 2023	1:00 p.m.-2:00 p.m. PT	Information Session #2 – Virtual Join meeting here via Webex, access code: 2483 292 8009 Meeting Password: 848VGtWiFJJ Or Call: 1-206-207-1700, 24832928009 ## Contact Lori Mina at lori.mina@seattle.gov if you encounter technical issues.
April 3, 2023	4:00 p.m. PT	Last Day to Submit Questions (via email only) Angela.Miyamoto@Seattle.Gov
April 12, 2023	12:00 p.m. (noon) PT	Applications Deadline (electronic submissions only) 1. HSD Online Submission System: http://web6.seattle.gov/hsd/rfi/index.aspx 2. Email: HSD_RFP_RFQ_Email_Submissions@seattle.gov
June 27, 2023		Planned Award Notification
January 1, 2024		New Contracts Start

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

Information Sessions

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

INVESTMENT AREA BACKGROUND & REQUIREMENTS
A. Overview of Investment Area

Home Delivered Meals is one of many services administered by HSD’s Aging and Disability Services Division, the Area Agency on Aging (AAA) for Seattle-King County. These services are funded by the Older Americans Act and provided in partnership with local community organizations. The purpose of Older American’s Act funded nutrition programs is to reduce hunger and food insecurity, encourage socialization of older individuals, promote health and well-being, and delay adverse health conditions.¹

Home Delivered Meals reach older adults that may live alone and have difficulty going outside the home. Delivery of meals enables them to live independently.² Participants are highly vulnerable and at risk of social

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

² IBID.

isolation. Home Delivered Meal drivers may be the sole social contact for meal recipients and may also report safety or unhealthy environmental concerns back to agencies who can then address issues.³

B. Model

Home Delivered Meals (HDM) are nutritious meals delivered to King County residents, 60 years of age and older. HDM are tailored for older adults in King County who are unable to leave their home unassisted, unable to prepare meals for themselves, and do not have a formal or informal support system to prepare meals. Section C details participant eligibility requirements.

Applicants must have at least two years of successful experience in providing food or nutrition-related services or two years' experience working with the community(ies) identified in the applicant's proposal. Applicants must provide HDMs throughout all regions of King County (Attachment 7); Applicants that do not provide service in all regions of King County will not be considered for funding. Formal partnerships and collaborations that support eligible participants in accessing culturally relevant HDMs are encouraged.

HDM requirements are detailed in the [Senior Nutrition Program Standards](#) and address components such as nutrition guidelines, food safety, staffing and experience, donation policies, assessments, and access to other services.⁴ Specifically, HDMs should address the following categories and applicants meeting high quality criteria will be rated higher.

1. Assessment and Enrollment

Eligible applicants must demonstrate the ability to:

- Conduct an initial assessment of participant eligibility in their home within three weeks of first service.
- Reassess participants' eligibility in their home on an annual basis, or more frequently if services were intended to cover a temporary or short-term need.
- Collect basic enrollment information for participants and update regularly (annually or as new information becomes available) and must attempt to complete missing demographic information.
- Develop screening criteria and delivery protocol to ensure services are provided to participants in greatest need.
- Conduct outreach designed to reach and serve isolated, vulnerable groups.
- Not use income as a factor in determining a participant's eligibility for service.

High quality criteria:

- Conduct an initial assessment of participant eligibility within the first week of first service.
- Apply cost effective strategies to expand and sustain HDMs including rural and geographically isolated communities.

³ Meals on Wheels of America. Older Americans Act Nutrition Program fact Sheet: United States 2021.

https://www.mealsonwheelsamerica.org/docs/default-source/fact-sheets/2021/2021-national/oaafactsheet_february2022_mowa.pdf?sfvrsn=5da1b23b_2. Accessed October 27, 2022.

⁴ Senior Nutrition Program Standards: <https://www.dshs.wa.gov/sites/default/files/ALISA/hcs/documents/SNPStandards.pdf>. Standards are subject to change and programs are required to comply with updated standards.

2. Menus

Eligible applicants must demonstrate the ability to:

- Offer a variety of regular, medically tailored, or culturally relevant meals. Meals are nutrient analyzed and meet one-third (1/3) of the Dietary Reference Intake (DRI) established by the Food and Nutrition Board of the National Academy of Science, National Research Council (Attachment 8). Medically tailored meals are nutrient controlled or tailored for a specific medical condition (heart disease, hypertension, renal disease, gastroesophageal reflux disease, etc.), must also meet the 1/3 DRI per meal except when nutrient-controlled for a specific medical condition.
- Provide monitoring and oversight by a registered dietitian nutritionist (RDN), or an individual of comparable expertise (ICE), to ensure menus meet nutritional guidelines.
- Involve participants in menu planning and solicit participant preferences in development of menus.

High quality criteria:

- Include high quality ingredients, including fresh local produce, from regional farms and producers.
- Enable older adults to consume less sodium and sugar.
- Enable older adults to consume more vitamins D, E, K; calcium; potassium; and fiber.

3. Meal Preparation

Eligible applicants must demonstrate the ability to:

- Ensure food preparation facilities are eligible for a permanent food permit issued by [Public Health—Seattle & King County](#).⁵ Proposal review process may include verification of kitchen permit and assessment of inspection reports.
- Have access to a [Certified Food Protection Manager](#) (CFPM) to ensure persons in charge are properly trained, procedures are developed, and food safety requirements are understood and followed.
- Ensure that staff and volunteers receive adequate training and that food handler permits are up to date.

High quality criteria:

- Use high quality ingredients, including fresh local produce, from regional farms and producers.
- Implement strategies to reduce food waste such as inventory control and adaptable menus (e.g., use of seasonal ingredients and maximizing use of available inventory).
- Utilize creative and cost-effective approaches to food purchasing.

4. Meal Ordering and Delivery

Eligible applicants must demonstrate the ability to:

- Provide the opportunity for participants to make voluntary and confidential donations toward meal costs; donation requests should be culturally considerate and not deter participation.
- Ensure safety of food being delivered.
- Ensure safety of participants, delivery staff, and volunteers.
- Provide participants with flexible and accommodating methods to order meals.
- Provide meals in all regions of King County (Attachment 7).

⁵ [Permanent food service business permit - King County](#)
(Amended 3/6/2023)

High quality criteria:

- Encourage and support clients in selecting options to promote optimal health.
- Provide culturally relevant meal options.
- Promote effective communication between all parties (staff, volunteers, participants and/or their family members and/or caregivers) during the ordering and delivery processes that responds to needs of participants.
- Provide ongoing training opportunities for staff and volunteers to help them better identify and respond to participant needs.
- Allow participants to order meals in their preferred language and method of communication.

5. Additional Services

Eligible applicants must demonstrate the ability to:

- Provide participants with nutrition and health education materials, including information on physical activity, at a minimum of two times per year.
- Provide participants with referrals to Community Living Connections and to the Washington State Basic Food Program and coordinate with local agencies and Department of Social & Health Services (DSHS) Community Service Offices as appropriate.
- Offer the Nutrition Screening Intake (NSI, Attachment 9) to all participants.

High quality criteria:

- Offer additional nutrition education activities and materials beyond the required minimum, which incorporate older adult learning styles and address the needs and preferences of participants.
- Follow-up with nutritionally at-risk participants with a NSI score greater than 6 to identify opportunities for improving their nutritional status.

6. Meal costs

Eligible applicants must:

- Provide a minimum of 25% of the total program cost (in-kind or other non-federal fund sources) as match.
- Use funds only for operating expenses, staffing and food.
- Not use funds for capital improvements, such as a kitchen or facility room remodel, or other one-time costs associated with implementing a new program.

C. Participant Eligibility Criteria

HDM participants are King County residents ages 60 and over that are:

- Unable to leave home unassisted; and
- Unable to prepare meals for themselves; and
- Unable to perform one or more of the Activities of Daily Living (ADL) or Instrumental Activities of Daily Living (IADL) or has a behavioral or mental health condition that could result in premature institutionalization; and
- Lack informal support systems.

D. Priority Population and Focus Population

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

A. Priority Populations

Priority populations for HDMs are identified through the Older American's Act (OAA). The OAA requires outreach focused on individuals:⁶

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

B. Focus Populations

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

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

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

E. Expected Performance Commitments

Quantity, quality, and impact measures for Home Delivered Meals may include, but are not limited to:

A. Quantity:

- # of meals
- # of unduplicated participants

B. Quality:

- Older adults receive nutritious meals

C. Impact:

- % of participants with increased food security as a result of the Home Delivered Meals

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

(Amended 3/6/2023)

F. Description of Key Staff and Staffing Level

Staffing requirements are specified in the [Nutrition Service Standards](#) and include, but not limited to, the following:

- Nutrition Director with authority to conduct day-to-day management and administrative functions of the program.
- A registered dietitian nutritionist (RDN), or individual of comparable expertise (ICE) must provide monitoring and oversight to ensure that meals meet nutrition guidelines and send monthly reports to HSD.
- Have access to a [Certified Food Protection Manager](#) (CFPM) to comply with [WAC 246-215-02107](#).
- Home Delivered Meals must have adequate number of qualified personnel to assure satisfactory program performance.

G. Data, Safety, and Contracting Requirements

In addition to the standard HSD requirements found on the [HSD Funding Opportunities Webpage](#), applicants must meet the following criteria:

A. Data Collection and Evaluation:

- All data must be entered into GetCare, a state data system used by all AAA's in Washington to track and report services funded by OAA and other sources.
- Applicants must be able to collect and report [participant-level data](#) as required under the [Older Americans Act Performance System](#) (OAAPS).
- Nutrition Risk Screening must be offered to all participants (Attachment 9). Nutritional risk status is an OAAPS required data element.

B. Fiscal Sponsor:

If you have a fiscal sponsor, provide a signed letter of agreement from them. The letter will not count toward the 12-page limit. The HSD Fiscal Sponsor requirements can be found here:

https://www.seattle.gov/Documents/Departments/HumanServices/Funding/HSD-Fiscal-Sponsor-Requirements_v6_2021.pdf

2023 Home Delivered Meals Application

HOW TO COMPLETE THE APPLICATION

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

Required format for written application:

- Typed and formatted to letter-size (8 ½ x 11-inch) paper
- One-inch margins and size 11-point font
- Be no longer than 12 pages (requested attachments will not count towards the page limit)

When submitting documents, name them as following:

Document Type	Document Name
Narrative Response	Narrative
Attachment 2: Application Cover Sheet	Cover Sheet
Attachment 3: Proposal Budget	*Proposal Budget
Attachment 4: Proposal Personnel Detail Budget	*Personnel Detail Budget
Attachment 5: Meal Cost Worksheet	Meal Cost Worksheet
Attachment 6: Summary of Proposal Deliverables	Summary of Proposal Deliverables
Nutrient analysis for at least 10 meals	Nutrient Analysis
Letter of commitment from subcontracted agency	Letter of Commitment
Letter of agreement from fiscal sponsor	Letter of Agreement
Letter of collaboration from partner	Letter of Collaboration
Startup timeline for Home Delivered Meals	Startup timeline

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

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

PROPOSAL NARRATIVE & RATING CRITERIA

Please complete sections A through E with narrative responses that fully answer each question. Do not exceed a total of twelve (12) pages. Proposals will be evaluated against the rating criteria listed next to each section of questions. Highly rated proposals will describe how the applicant will meet **all** rating criteria.

A. PROJECT DESCRIPTION	POINTS: 55	RATING CRITERIA
<p>1. Describe how your home delivered meals meet minimum requirements and high-quality criteria from Section B: Model.</p> <p>a. <u>Assessment and enrollment</u>: Describe your assessment and enrollment process including key staff (who conducts the assessment and their relevant qualifications), timeframe (inquiry, assessment, enrollment, and food delivery) and method (in-home, telephonic, virtual, etc.). Describe the process for conducting the Nutrition Screening Intake with participants.</p> <p>b. <u>Menus</u>: Develop and attach menu choices with nutrient analysis showing that Dietary Reference Intake requirements are met for one week of home delivered meals (minimum of ten meals). Nutrient restricted, medically tailored meals should include an analysis with nutrient reference point if target values are less than the DRI. All components that are included with the meal should be included in the nutritional analysis (e.g., bread, rice, milk, etc.). Menus will not count toward maximum page limit. Describe how you will address cultural or other dietary preferences for home delivered meals participants.</p> <p>c. <u>Meal preparation</u>: Explain your meal preparation process, including where the meals will be prepared and by whom. Describe relevant qualifications, training, experience, and supervision of staff and/or volunteers involved in meal preparation. Describe how you will ensure and monitor safety and hygiene regarding food preparation. Describe how and where you purchase food and your systems for monitoring food costs and inventory.</p> <p>d. <u>Meal ordering and delivery</u>: Describe how participants order meals and how you meet their access needs. Explain how meals will be delivered in all regions of King County (see Attachment 7), including: who will deliver meals; staff and/or volunteer screening; training and other supports for delivery staff and/or volunteers. Describe how you will ensure and monitor safety and hygiene regarding meal</p>	<ul style="list-style-type: none"> • Applicant describes how they meet minimum requirements and high quality criteria from Section B: Model. • Applicant clearly describes assessment and enrollment process including key staff, timeframe, and method. Applicant describes process for conducting the Nutrition Screening Intake with participants. • Applicant provides menu choices with nutrient analysis showing DRI requirements are met for one week of home delivered meals and includes an analysis for nutrient restricted, medically tailored meals if applicable. Applicant describes how cultural or other dietary preferences for home delivered meals will be addressed. • Applicant clearly explains meal preparation process including where and by whom. Applicant describes relevant qualifications, training, experience, and supervision of staff and/or volunteers. Applicant describes how they will ensure and monitor safety and hygiene for food preparation. Applicant describes how and where they purchase food and their systems for monitoring food costs and inventory. • Applicant describes how participants order meals and how they meet their access needs. Applicant explains how meals will be delivered in all regions of 	



delivery, including systems for packaging and maintaining appropriate temperatures. Describe your methods to solicit and collect participant donations.

- e. Additional Services: Describe the nutrition education activities provided to enhance participants’ health and well-being. Describe how you identify and respond to additional participant needs presented during assessment, ordering, and delivery. Describe your outreach strategy and implementation.

2. Describe the population with whom you will work.

- a. Complete the Summary of Proposal Deliverables, Attachment 6. This worksheet will not count toward the 12-page narrative limit. Applicants are requirement to deliver meals throughout King County.
- b. What are the unique characteristics and experiences of the participants with whom you will work? What are their strengths, needs, concerns, geographic location, age, ethnicity, language, and other defining attributes.
- c. Describe how you will seek and use input from participants into delivering home delivered meals and other activities.
- d. How are your meals are relevant to the population with whom you will work?

King County (Attachment 7). Applicant describes how they will ensure and monitor safety and hygiene for meal delivery. Applicant clearly describes their methods to solicit and collect participant donations.

- Applicant describes the nutrition education activities provided to enhance participants’ health and well-being. Applicant describes how they identify and respond to additional participant needs presented during assessment, ordering, and delivery. Applicant describes their outreach strategy and implementation.
- Applicant clearly describes with whom they will work.
- Applicant completed the Summary of Proposal Deliverables, Attachment 6.
- Applicant clearly describes the unique characteristics and experiences of the participants with whom they will work, including their strengths, needs, concerns, geographic location, age, ethnicity, language, and other defining attributes.
- Applicant describes how they will seek and use input from participants into delivering home delivered meals and other activities.
- Applicant demonstrates how their meals are relevant to the population with whom they will work.

B. CAPACITY AND EXPERIENCE	POINTS: 20	RATING CRITERIA
<ol style="list-style-type: none"> 1. Describe your success with home delivered meals, including your network or system to effectively deliver meals throughout King County. If you have no experience with home delivered meals, describe your experience working with the community(ies) identified in your proposal and a plan for rapid capacity development. Attach a start-up timeline for your home delivered meals. The timeline will not be counted toward the maximum page limit. Home delivered meals must be fully operational by March 1, 2024. You must have at least two years of successful experience providing food or nutrition related work or working with the community(ies) identified in your proposal. 2. Provide a list of and a brief job description for all key personnel who will have a significant role with home delivered meals including staff listed in Section F, Description of Key Staff and Staffing Level. 3. Complete the Proposal Personnel Detail Budget (Attachment 4). This worksheet will not count towards the 12-page maximum narrative limit. 4. Describe your plan for staff and volunteer recruitment, training, supervision, and retention. 5. Funded applicants are required to enter client level data in GetCare, a state data system used by all AAA's in Washington to track and report services funded by OAA and other sources. What is your experience with GetCare? If you do not have experience with GetCare, what is your experience learning new data systems? Describe your data management experience: collecting, storing, and analyzing participant information and agency work. How do you track participant information and produce reports? 	<ul style="list-style-type: none"> • Applicant describes at least two years' successful experience with home delivered meals. Or, for applicants offering home delivered meals for the first time, the applicant presents a clear and realistic description and timeline for setting up and providing a home delivered meals program. • Applicant has adequate staff to support home delivered meals including staff listed in Section F, Description of Key Staff and Staffing Level. • Applicant completed the Proposal Personnel Detail Budget (Attachment 4). • Applicant clearly describes plan for staff and volunteer recruitment, training, supervision, and retention. • Applicant clearly describes experience with GetCare or learning new data systems; and data management experience for collecting, storing, analyzing, tracking, and reporting purposes. 	

C. PARTNERSHIPS AND COLLABORATION	POINTS: 10	RATING CRITERIA
<ol style="list-style-type: none"> 1. Describe how you will work with other agencies awarded through this funding process to ensure that participants receive home delivered meals efficiently and effectively? 2. Describe partnerships with other agencies essential to your home delivered meals program. Explain the roles and responsibilities of your partners. Provide signed letters of intent from any partner providing key home delivered meals elements. Partnership letters will not be counted toward the maximum page limit. 		<ul style="list-style-type: none"> • Applicant describes how they will work with other agencies to ensure participants receive home delivered meals efficiently, effectively and are not duplicative in King County. • Applicant describes partnerships with other agencies essential to their home delivered meals. Applicant explains roles and responsibilities of their partners. Applicant provided signed letters of intent from partners providing key home delivered meals elements.
D. FOOD SYSTEM AND COMMITMENT TO COMMUNITY	POINTS: 30	RATING CRITERIA
<ol style="list-style-type: none"> 1. Describe how your home delivered meals contribute to a sustainable food system, including economic, social, and environmental benefits. How will you reduce the carbon footprint for home delivered meals and impact climate change? 2. How will you outreach to BIPOC older adults? How will you tailor your home delivered meals to the needs of these communities? Include specific examples. 3. Why is this funding important for your home delivered meal program and the community that will receive the meals? 		<ul style="list-style-type: none"> • Applicant clearly describes how their home delivered meals contribute to a sustainable food system, including economic, social, and environmental benefits. Applicant describes how they will reduce their carbon footprint for home delivered meals and impact climate change. • Applicant provides specific examples of how they will conduct outreach to BIPOC older adults and tailor their home delivered meals to the needs of these communities. • Applicant clearly describes the importance of the funding to their home delivered meals and the community that will receive them.

E. BUDGET AND LEVERAGING	POINTS: 15	RATING CRITERIA
<p>1. How many meals do you intend to deliver? Complete the Meal Cost Worksheet (Attachment 5) and Proposal Budget (Attachment 3). Budget worksheets will not count toward the 12-page narrative limit. The costs reflected in this budget should be for home delivered meals only, not your total agency budget.</p> <p>a. Describe how these funds will be used and identify other resources and amounts that will be used for home delivered meals. Describe your efforts to build diverse financial support and create awareness of home delivered meals to fundraise and market for volunteers, resources, and monetary contributions.</p> <p>b. Describe your financial management system. How do you establish and maintain generally accepted accounting principles to ensure adequate administrative and accounting procedures and internal controls necessary to safeguard all funds that may be awarded under the terms of this RFP? Entities without such capabilities may wish to have an established agency act as fiscal agent.</p> <p>c. Describe your organization’s capacity to cover expenses for home delivered meals in advance of reimbursement.</p>		<ul style="list-style-type: none"> • Applicant clearly indicates how many meals they intend to deliver. Applicant completed the Meal Cost Worksheet (Attachment 5) and the Proposal Budget (Attachment 3). • Applicant describes how funds will be used and identifies other resources and amounts that will be used for home delivered meals. Applicant describes their efforts to build diverse financial support and create awareness of home delivered meals to fundraise and market for volunteers, resources, and monetary contributions. • Applicant describes their financial management system and how they establish and maintain generally accepted accounting principles to ensure adequate administrative and accounting procedures and controls necessary to safeguard all funds that may be awarded under the terms of this RFP. • Applicant describes their capacity to meet expenses for home delivered meals in advance of reimbursement.

TOTAL: 130

COMPLETED APPLICATION REQUIREMENTS**A. Application Submittal**

The proposal **must** include:

- A completed and signed Application Cover Sheet (Attachment 2).
- A completed Narrative Response that is a maximum of twelve (12) pages, not counting the budget or other required documents.
- A completed Proposal Budget (Attachment 3), in Excel.
- A completed Personnel Detail Budget (Attachment 4), in Excel.
- A completed Meal Cost Worksheet (Attachment 5), in Excel.
- Nutrient analysis for at least 10 meals, including analysis for Medically Tailored Meals, as applicable.
- A completed Summary of Proposal Deliverables (Attachment 6)
- If Home Delivered Meals is a new service for you, attach a start-up timeline.
- Completed applications are due by **April 12, 2023, 12:00 P.M. (noon)** Pacific Daylight Time.
- Proposals must be submitted through the HSD Online Submission System or via email. No faxed or mailed proposals will be accepted. Allow ample time for uploading and confirmation receipt.

Subcontracting:

- If you are proposing a subcontract with another agency or individual, attach a signed letter of commitment from that agency's director or other authorized representative.

Partnerships:

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

Fiscal Sponsorship:

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

Submission:

1. **Via HSD Online Submission System** at <http://web6.seattle.gov/hsd/rfi/index.aspx>. HSD advises uploading proposal documents several hours prior to the deadline in case you encounter an issue with Internet connectivity. HSD is not responsible for ensuring that applications are received by the deadline. If you encounter issues with the online submission system, please email Sola Plumacher at sola.plumacher@seattle.gov.
2. **Via Email** at HSD_RFP_RFQ_Email_Submissions@seattle.gov. Email attachments are limited to 30 MB. **The subject heading must be titled: 2023 Home Delivered Meals RFQ.** Any risks associated with submitting a proposal by email are borne by the applicant. Applicants will receive an email acknowledging receipt of their application.

Only one submission method is necessary – choose either online or email, not both. If for any reason a proposal is submitted twice, the last submission received will be the one accepted for review by the rating panel.

HSD Proprietary and Confidential Information

The State of Washington’s Public Records Act (Release/Disclosure of Public Records) under Washington State Law (reference RCW Chapter 42.56, the Public Records Act) states that all materials received or created by the City of Seattle are considered public records. These records include but are not limited to: RFP/Q narrative responses, budget worksheets, board rosters, other RFP/Q materials, including written/or electronic correspondence. In addition, HSD RFP/Q application materials are released to rating committee members and all rating committee members must sign and adhere to the [Confidentiality and Conflict of Interest Statement](#).

Personal identifiable information entered on these materials is subject to the Washington Public Records Act and may be subject to disclosure to a third-party requestor.

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

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

I. List of Attachments & Related Materials

- Attachment 1: Application Checklist
- Attachment 2: Application Cover Sheet
- Attachment 3: Proposal Budget
- Attachment 4: Proposal Personnel Detail Budget
- Attachment 5: Meal Cost Worksheet
- Attachment 6: Summary of Proposal Deliverables
- Attachment 7: Cities and Regions of King County
- Attachment 8: Dietary Reference Intake
- Attachment 9: Nutrition Risk Screening

**2023 Home Delivered Meals
Request for Qualification (RFQ)
Application Checklist**

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

HAVE YOU....

- Read and understood the following additional documents found on the [Funding Opportunities Webpage](#)?**
- HSD Agency Minimum Eligibility Requirements
 - HSD Client Data and Program Reporting Requirements
 - HSD Contracting Requirements
 - HSD Fiscal Sponsor Requirements
 - HSD Funding Opportunity Selection Process
 - HSD Appeal Process
 - HSD Commitment to Funding Culturally Responsive Services
 - HSD Guiding Principles
 - HSD Master Agency Services Agreement Sample
 - HSD 2023 Home Delivered Meals RFQ Theory of Change
- Completed and signed the Application Cover Sheet (Attachment 2)?***
- If your application names specific partner agencies, representatives from these agencies must sign the application cover sheet.
 - If your application names a fiscal sponsor, authorized representatives from this agency must read and understand the HSD Fiscal Sponsor Requirements document and must sign the application cover sheet.
- Completed each section of the Application Questions?**
- Must not exceed 12 pages (8 ½ x 11), single spaced, size 11 font with 1-inch margins.
 - Page count does not include the required forms and supporting documents requested in this funding opportunity.
- Completed the full Proposal Budget (Attachment 3)?***
- Completed the full Proposal Personnel Detail Budget (Attachment 4)?***
- Completed the Meal Cost Worksheet (Attachment 5)?***
- Completed the Summary of Proposal Deliverables (Attachment 6)?***
- Provided nutrient analysis for at least 10 meals, including analysis for medically tailored meals, as applicable.***
- If Home Delivered Meals is new work for you, have you attached a start-up timeline with start date of March 1, 2024?***
- If you are proposing a significant collaboration with another agency, have you attached a signed letter of intent from that agency's director or other authorized representative?***

**These documents do not count against the 12-page limit for the proposal narrative section.*

All applications are due to HSD by 12 P.M. (noon) April 12, 2023. Application packets received after this deadline will not be considered. See completed application requirements for submission instructions.



**City of Seattle
Human Services Department**

**2023 Home Delivered Meals
Request for Qualification
Application Cover Sheet**

1. Applicant:			
2. Executive Director:			
3. Executive Director Email and Phone #	Email	Phone #	
<p>The Executive Director will be notified by HSD regarding the final funding decision and if the application does not meet minimum requirements.</p> <p>HSD will communicate with the Applicant Primary Contact for all other matters including but not limited to requesting financial documents (including documents from the fiscal sponsor if there is one), scheduling interviews, and clarifying details of the application as needed.</p>			
4. Applicant Primary Contact:			
Name:			Title:
Address:			
Email:			
Phone #:			
5. Organization Type			
<input type="checkbox"/> Non-Profit	<input type="checkbox"/> For Profit	<input type="checkbox"/> Public Agency	<input type="checkbox"/> Other (Specify):
6. Federal Tax ID or EIN:		7. DUNS Number:	
8. WA Business License Number:			
9. Proposal Name:			
10. Focus Population(s) to receive home delivered meals (check all that apply; those checked should match who you describe in your application):	BIPOC older adults <input type="checkbox"/> American Indian/Alaska Native/Indigenous <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American/African Descent <input type="checkbox"/> Hispanic/Latinx/Indigenous <input type="checkbox"/> Native Hawaiian/Pacific Islander		

11. Funding Requested:		
12. # of unduplicated people who will receive home delivered meals from you each year:		
13. How many meals will be delivered in each region of King County? See Attachment 7.	North _____ Seattle _____ East Urban _____	East Rural _____ South Urban _____ South Rural _____
14. Partner Agency (if applicable): Contact Name: _____ Title: _____ Address: _____ Email: _____ Phone Number: _____ Description of partner agency proposed activities: Signature of partner agency representative: _____ Date: _____		
15. Partner Agency (if applicable): Contact Name: _____ Title: _____ Address: _____ Email: _____ Phone Number: _____ Description of partner agency proposed activities: Signature of partner agency representative: _____ Date: _____ Add additional sections if you have more than two partner agencies.		
16. Fiscal Sponsor (if applicable): Contact Name: _____ Title: _____ Address: _____ Email: _____ Phone Number: _____ <i>I have read and understood the Fiscal Sponsor Requirements document and will comply with all obligations if the applicant is awarded funding.</i> Signature of fiscal sponsor representative: _____ Date: _____		
17. Provide a high-level summary (about 200 words or less) of your proposal here:		

--

Authorized physical signature of applicant/lead organization

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

Name and Title of Authorized Representative: _____

Signature of Authorized Representative: _____

Date: _____

2023 Home Delivered Meals RFQ
Proposal Budget
January 1, 2024 – December 31, 2024

Complete and submit this document using Excel. Excel versions of the budget templates can be found on the application page of the [HSD Funding Opportunity Webpage](#)

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

¹ Identify specific funding sources included under the "Other" column(s) above:	
	\$
	\$
	\$
	\$
Total	\$

² Operating Expenses- Itemize below (Do not include Office Supplies):	
	\$
	\$
	\$
	\$
Total	\$

³ Contractual Employment/Other Professional Services	
	\$
	\$
	\$
	\$
Total	\$

⁴ Other Miscellaneous Expenses- Itemize below:	
	\$
	\$
	\$
	\$
Total	\$

⁵ Indirect Facilities and Administration (F & A) Costs- Itemize below:	
	\$
	\$
	\$
	\$
Total	\$

⁵ Indirect Facilities and Administration (F&A) Costs: Those costs referred to as overhead costs or administrative costs. These are actual costs incurred to conduct the normal business activities of an agency and are not readily identified with or directly charged to a program, making it difficult to precisely assess each user's share. Those indirect F&A expenses include:

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

**2023 Home Delivered Meals RFQ
 Proposal Personnel Detail Budget
 January 1, 2024 – December 31, 2024**

Excel versions of the budget templates can be found on the application page of the [HSD Funding Opportunity Webpage](#)

Applicant:	
Proposal Name:	

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

2023 Home Delivered Meals RFQ		
Meal Cost Worksheet		
Provide a brief description of costs associated with each category and the estimated amount for the year. Total cost (sum of base and unit costs) should align with Total Proposal Cost/Total Expenditures on Proposed Line Item Budget, Attachment 3.		
Category	Description	Amount
Base Costs		
Labor, paid staff		
Fringe Benefits		
Office Supplies (Includes printing, postage and general supplies. Does not include computer or technology expenses.)		
Rent		
Contractual Employment/Other Professional Services		
Travel (includes mileage, parking)		
Insurance		
Utilities (Includes electric, internet, phone)		
*Other Miscellaneous Expenses		
Indirect Facilities and Administrative (F &A) Costs		
Sum of Base Costs		\$ -
Monthly Base Costs		\$ -
Unit Costs		
Operating supplies (food and supplies for meals)		
Sum of Unit Costs		\$ -
Total Number of Meals Proposed		
Cost per Meal (sum of base and unit costs divided by number of meals)		#DIV/0!
Total Costs (Sum of Base & Unit Costs)		\$ -
Match (Volunteer Hours)		
Match ("Other" Donations)		
Total Match Contribution		\$ -
*Food is included in operating supplies (Item #2200) on the line item budget (Attachment 3).		

**2023 Home Delivered Meals RFQ
Summary of Proposal Deliverables**

Geographic Sub-Region	Number of Meals (2024 Contract Year)	% of Total Meals	Number of Participants (Unduplicated for 2024 Contract Year)	% of Total Participants
<i>*Example: North Urban</i>	<i>5,000</i>	<i>10%</i>	<i>1000</i>	<i>10%</i>
Seattle				
North Urban				
East Urban				
South Urban				
East Rural				
South Rural				
Total Meals:		Total Participants:		

*Example based on 1,000 total participants and 100,000 total meals.

Cities and Regions of King County

Region	Cities
North	<ul style="list-style-type: none"> • Bothell • Kenmore • Lake Forest Park • Shoreline • Woodinville
Seattle	<ul style="list-style-type: none"> • Seattle Neighborhoods
East Urban	<ul style="list-style-type: none"> • Bellevue • Issaquah • Kirkland • Medina • Mercer Island • Newcastle • Beaux Arts • Redmond • Sammamish
East Rural	<ul style="list-style-type: none"> • Baring • Carnation • Duvall • Fall City • Gold Bar • North Bend • Preston • Skykomish • Snoqualmie
South Urban	<ul style="list-style-type: none"> • Auburn • Burien • Covington • Des Moines • Federal Way • Kent • Normandy Park • Redondo • Renton • Sea Tac • Tukwila • Vashon
South Rural	<ul style="list-style-type: none"> • Black Diamond • Enumclaw • Hobart • Maple Valley • Ravensdale

Complete list of sub-region by zip code and city name can be found here:

<http://www.agingkingcounty.org/about-us/contracted-providers/> under "Sub-Region by Zip Code."

33% Dietary Reference Intake (DRI) (Highest level required for all adults age 51-70 and >70)

	1 meal/day 33% DRI (≥ 70 year old Male)
*Kilocalories (Kcal)	667
*Protein (gm)	19
Carbohydrate (gm)	43
*Fat (gm)	20-35% of total Kcals
#Saturated Fat	< 10% of total kcals
*Dietary Fiber (gm)	9.3
*Vitamin A (mg RAE)	300
*Vitamin C (mg)	30
#Vitamin D (IU)	267
Vitamin E (mg AT))	5
Thiamin (mg)	.40
Riboflavin (mg)	.44
Vitamin B6 (mg)	.57
Folate (mcg DFE)	133
Vitamin B12 (mcg)	.8
*Calcium (mg)	400
Copper (ug)	300
Iron (mg)	2.7
Magnesium (mg)	140
Zinc (mg)	3.70
Potassium (mg)	1567
**Sodium (mg)	767

Reference: https://fnic.nal.usda.gov/sites/fnic.nal.usda.gov/files/uploads/estimated_average_requirements.pdf;
<http://health.gov/dietaryguidelines/2015/guidelines/appendix-7/>

Nutrients marked with an asterisk () are found on the Nutrition Facts Label. At a minimum, these must be included in a nutrient analysis report.

** 2300 mg per 2015 DGA There is strong evidence for the benefit of lowering sodium for people who have high blood pressure, e.g. 1500 mg per day.

It is very difficult to achieve this level of Vitamin D from food alone. Vitamin D supplementation is generally recommended for older adults.

Nutrition Risk Screening

Senior Nutrition Program Standards:

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

Determine Your Nutritional Health

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

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

TOTAL _____

Total your nutritional score. If it's--

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