

**2023 Multicultural Registered Dietitian Nutritionist (RDN) Services**

**Request for Proposal (RFP)**

**Guidelines**

**and**

**Application**

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**\*Timeline subject to change**

**Funding Process Coordinator:**

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# Guidelines

## INTRODUCTION

The Aging and Disability Services (ADS) Division of the City of Seattle Human Services Department (HSD) seeks applications from a diverse group of applicants interested in helping older adults maintain their quality of life and age in place. The Multicultural Registered Dietitian Nutritionist (RDN) Services Request for Proposal (RFP) is competitive and open to any legally constituted entities that meet the standard [HSD Agency Minimum Eligibility Requirements](http://www.seattle.gov/humanservices/funding-and-reports/funding-opportunities) and any additional requirements outlined in Section G of the Guidelines.

**Multicultural Registered Dietitian Nutritionist (RDN) Services** provide technical assistance and support to congregate meal sites with cultural and linguistic barriers to mainstream nutrition services and standards**.**

Approximately **$160,000** is available from the following sources:

|  |  |
| --- | --- |
| **Fund Sources** | **Request for Proposal Amount** |
| Older Americans Act | $100,000 |
| HSD General Fund | $60,000 |
| **Total** | **$160,000** |

All materials and updates to the RFP are available on [HSD’s Funding Opportunities webpage](https://www.seattle.gov/humanservices/funding-and-reports/funding-opportunities). 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 Multicultural RDN Services RFP or would like to request an accommodation, please contact Funding Process Coordinator Angela Miyamoto at [Angela.Miyamoto@seattle.gov](mailto:Angela.Miyamoto@seattle.gov).

**Number of awards**

HSD intends to fund one (1) proposal that demonstrates the ability to work with diverse communities in delivering Multicultural RDN services. 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 7, 2023 | 11:00 a.m.-12:00 p.m. PT | Information Session #1 – In person only  Aging and Disability Services Division South King County Office  Times Square Complex  600 SW 39th Street, Suite 155  Renton, WA 98057  (Mount St Helens Room) |
| March 9, 2023 | 2:00 p.m.-3:00 p.m. PT | Information Session #2 – Virtual  Join meeting [here](https://seattle.webex.com/seattle/j.php?MTID=m710b62213bbcbf7851d87c2361305cd3) via webex, access code: 2484 596 8751 Meeting Password: 2m53gNxSJeb or  Call: 1-206-207-1700, 24845968751##  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) to  [Angela.Miyamoto@Seattle.Gov](mailto: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](mailto:HSD_RFP_RFQ_Email_Submissions@seattle.gov) |
| May 1 – May 2, 2023 | TBD | Interviews |
| June 27, 2023 |  | Planned Award Notification |
| January 1, 2024 |  | New Contracts Start |

\*HSD reserves the right to change dates in the RFP timeline.

**Information Session**

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](https://www.seattle.gov/humanservices/funding-and-reports/funding-opportunities). Any agency interested in learning more about this RFP is encouraged to attend a session and ask questions. Attendance is not required.

## INVESTMENT AREA BACKGROUND & PROGRAM REQUIREMENTS

### Overview of Investment Area

Aging and Disability Services, the Area Agency on Aging (AAA) for Seattle-King County, administers Older Americans Act (OAA) funds in partnership with local community organizations. The Congregate Meal Program is one of the aging network services funded by OAA funds. The purpose of the Congregate Meal Program is to reduce hunger and food insecurity, promote social connection between older individuals, promote health and well-being, and delay adverse health conditions. Congregate Meal Program sites are required to have a Registered Dietitian Nutritionist (RDN) per Nutrition Service Standards.[[1]](#footnote-2)

The Multicultural RDN services are key to Congregate Meal Program success. RDNs play a critical role by providing food and nutrition education, technical assistance, and support to meal programs. As nutrition experts, they provide nutrition and food safety guidance to promote health, reduce risk and manage diseases to improve and/or maintain health, independence, and quality of life.

### Service/Program Model

Multicultural RDNs provide technical assistance and oversight to ADS funded congregate meal programs serving specific cultural and ethnic communities throughout King County, ensuring meals are nutritious and safe to consume. Services are culturally resonant and tailored to the needs of the participant population(s). Multicultural RDNs ensure ADS funded congregate meal programs comply with the Nutrition Service Standards through the following activities: [[2]](#footnote-3)

* Assist with menu development and certify all meals meet Dietary Reference Intake (DRI) guidelines (See [Senior Nutrition Program Standards](https://www.dshs.wa.gov/sites/default/files/ALTSA/hcs/documents/SNPStandards.pdf)). Provide practical suggestions to improve food quality and incorporate local produce, when feasible.
* Conduct monthly site visits with congregate meal programs and oversee food safety and food handling practices in accordance with King County Public Health guidelines. Coordinate with King County Public Health staff to ensure congregate meal program sites meet requirements. Congregate meal program site visits may be scheduled or unannounced.
* Train congregate meal program site staff and volunteers to comply with King County Public Health guidelines.
* Perform duties and responsibilities of a [Certified Food Protection Manager](https://kingcounty.gov/depts/health/environmental-health/food-safety/~/media/depts/health/environmental-health/documents/food-safety/certified-food-protection-manager.ashx) for the congregate meal sites to ensure persons in charge are properly trained, procedures are developed, and food safety requirements are understood and followed.
* Provide culturally relevant nutrition education materials tailored to the needs of the congregate meal program site population. Provide or oversee the provision of nutrition education sessions which may include staff training. Congregate meal program sites are expected to provide at least two nutrition education sessions per calendar year.
* Assist congregate meal program sites with other HSD funded food-related initiatives and provide monthly reports to HSD about those activities.
* Coordinate and communicate with other RDNs that support ADS funded congregate meal program sites.
* Coordinate provision of supplies, resources and services which may include procuring equipment, resources or services on behalf of congregate meal program sites.

### Service Criteria

Multicultural RDN services will be provided at up to 25 congregate meal program sites awarded through the Congregate Meals for Older Adults Request for Qualifications process. The Congregate Meal sites will be identified by the ADS program specialist and will be selected based on the following attributes: language and cultural barriers to mainstream nutrition services and standards; program/site operated by volunteer organization or association; program does not have direct ownership or oversight of facility; program is located in and serves a rural community.

### 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 the department’s investments are dedicated to addressing disparities in the population.

#### Priority Populations

Priority populations of Multicultural RDN services are identified through the OAA, which requires outreach focused on individuals: [[3]](#footnote-4)

* 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 people of color 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.

#### 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 Multicultural RDN services are:

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

### Expected Performance Commitments

Service-dependent quantity, quality, and impact measures may include, but are not limited to:

1. **Quantity:** 
   * # of nutrition education lessons
   * # of site visits
2. **Quality:**

* Materials or information are relevant to meal site participants
* RDN menu changes are culturally relevant to the congregate meal sites based on population served

1. **Impact:**

* Congregate meal programs value and use the Multicultural RDN services to improve the quality and cultural relevance of their meals.

### Description of Key Staff and Staffing Level

Staff are Registered Dietitian Nutritionist credentialed through the Commission on Dietetic Registration or an individual with comparable expertise. A dietitian nutritionist is defined by the Commission on Dietetic Registration (Registered Dietitian Nutritionist or RDN). An individual with comparable expertise (ICE) is defined as a nutritionist according to RCW 18.138, which requires a master's or doctorate degree in one of the following areas: human nutrition, nutrition education, foods and nutrition, public health nutrition, or nutrition sciences. Recommend that the RD or nutritionist be certified by the State of Washington in accordance with RCW 18.138.

Staff meet [Certified Food Protection Manager Guidelines](https://kingcounty.gov/depts/health/environmental-health/food-safety/~/media/depts/health/environmental-health/documents/food-safety/certified-food-protection-manager.ashx) to comply with [WAC 246-215-02107](https://app.leg.wa.gov/WAC/default.aspx?cite=246-215-02107).

Minimum expectations:

* Ability to travel to congregate meal sites throughout King County
* Experience working with diverse communities including knowledge of cultural foods

Desirable qualification:

* Organization is committed to food systems work

### RFP Specific Eligibility, Data, and Contracting Requirements

In addition to the standard HSD requirements found on the [HSD Funding Opportunities Webpage](http://www.seattle.gov/humanservices/funding-and-reports/funding-opportunities), applicants must meet the following criteria:

#### Data Collection and Evaluation

* + Track expenditures.
  + Submit monthly site visit, nutrition education and narrative reports.
  + May be required to input data into GetCare, a state data system used by all AAA’s in Washington to track and report services funded by OAA and other sources.

#### Fiscal Sponsor:

If you have a fiscal sponsor, provide a signed letter of agreement from the sponsor. The letter will not count toward the 5-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 Multicultural Registered Dietitian Nutritionist (RDN)

# Application

## HOW TO COMPLETE THE APPLICATION

Applications will be rated only on the information requested in this RFP, 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, single spacing, and size 11-point font.
* Be no longer than 5 pages (requested attachments will not count towards the page limit).

When submitting documents, name them as following:

|  |  |
| --- | --- |
| **Document** | **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 |
| Letter of agreement from fiscal sponsor | Letter of Agreement |
| Letter of support from narrative example | Letter of Support |

**\*Submit the Proposal Budget and Personnel Detail Budget in excel.**

The RFP Guidelines is a separate document that provides background on HSD’s guiding principles and results-based accountability framework and an overview of the RFP program requirements. [HSD’s Funding Opportunities webpage](http://www.seattle.gov/humanservices/funding-and-reports/funding-opportunities) 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 D with narrative responses that fully answer each question. Do not exceed a total of five (5) 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.

|  |  |  |
| --- | --- | --- |
| 1. **PROPOSAL DESCRIPTION** | **POINTS: 40** | **RATING CRITERIA** |
| 1. Describe your Registered Dietitian Nutritionist (RDN) services. How will you provide culturally inclusive technical assistance and support with menu development, nutrition education, food safety, and meal site monitoring? 2. How will you customize technical assistance and support to meet the needs of the congregate meal sites to include in-person, virtual, and other methods of providing RDN services? 3. How will you serve the focus and priority populations? 4. What is your understanding of the unique characteristics and experiences of the focus and priority populations, such as strengths, needs, concerns, geographic region, age, ethnicity, language, and other defining attributes? 5. How will you seek and use input from congregate meal site coordinators and participants into your RDN services? 6. How will you learn about the cultural nuances of BIPOC communities and other cultural communities to effectively provide RDN services? | | * Applicant thoroughly describes their RDN services and how their technical assistance and support with menu development, nutrition education, food safety and meal site monitoring is culturally inclusive. * Applicant clearly explains how they will customize their technical assistance and support to congregate meal sites. * Applicant demonstrates an understanding of the unique characteristics and experiences of the focus and priority populations. * Applicant demonstrates a plan to solicit and incorporate input from meal site coordinators and program participants. * Applicant describes how they will learn about cultural nuances to effectively provide RDN services. |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **CAPACITY AND EXPERIENCE** | **POINTS: 25** | | **RATING CRITERIA** |
| 1. Describe your organization’s success providing technical assistance and support to congregate meal programs including menu reviews, safe food handling training, nutrition education and reporting. Your organization must have a minimum of 2 years of experience providing food and nutrition related RDN services. 2. Provide a list of and a brief job description for all key personnel, including credentials, who will have a significant role in program coordination and service delivery. 3. Describe how staff/volunteers possess the cultural and linguistic capability to work with BIPOC communities, specifically with different language groups.   *\*Complete the Proposal Personnel Detail Budget using Attachment 4.*  *Budget worksheets will not be counted toward the five (5) page limit*. | | | * Applicant clearly describes experience and success in providing RDN services for at least two years. * Applicant has staff to perform RDN services including RDN(s) and CFPM(s). * Applicant clearly describes how staff have the cultural and linguistic capacity to serve BIPOC communities. |
| 1. **PARTNERSHIPS AND COLLABORATION** | **POINTS: 25** | | **RATING CRITERIA** |
| 1. What does partnering and collaborating mean to you? 2. Describe your experience partnering with BIPOC communities. 3. What are important characteristics in a successful partnership? 4. Provide a(n) example(s) of successful partnerships with BIPOC communities. Describe the partnership, why it was successful and include a letter of support from your example. 5. Describe how you will partner and communicate with umbrella agencies that support multicultural congregate meal sites? | | | * Applicant describes experience partnering with BIPOC communities including important characteristics in a successful partnership. * Applicant describes a successful partnership with a BIPOC community and provides a letter of support from the example. * Applicant clearly describes how they will partner and communicate with umbrella organizations that support BIPOC serving congregate meal sites. |
| 1. **BUDGET AND LEVERAGING** | | **POINTS: 10** | **RATING CRITERIA** |
| 1. Describe how these funds will be used and identify other resources and amounts that will be used to support the clients served by this program. Complete the Proposal Budget (Attachment 3). Budget worksheets will not count towards the page limit. The costs reflected in this budget should be for the service area only, not your total agency budget. 2. Describe your organization’s ability to address changes in funding, staffing, changing needs in the community, and developing and/or maintaining board or leadership support. 3. Describe your capacity to meet proposal expenses in advance of reimbursement. 4. Describe your organization’s financial management system. How do you establish and maintain general 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? | | | * The applicant identifies other funds to be used with any funds awarded from this funding opportunity for providing the services described in the proposal. * Applicant completed the proposal budget (Attachment 3). * Applicant demonstrates successful experience adapting to changes in funding and community needs. * Applicant’s leadership is likely to provide strong ongoing support for the service proposed. * Applicant demonstrates ability to meet program expenses ahead of reimbursement. * The applicant has a demonstrated capacity to ensure adequate administrative and accounting procedures and controls necessary to safeguard all funds that may be awarded under the terms of this funding opportunity. |
|  | | **TOTAL: 100** |  |

**INTERVIEWS & TOTAL APPLICATION SCORES**

All agencies with applications that meet the minimum eligibility requirements will be interviewed. Interviews will be scheduled May 1-2 and will be conducted in person or virtually and may be recorded. Interviews will focus on the applicant’s experience with food systems work, commitment to Multicultural RDN services, and experience serving BIPOC communities. The interview will be scored separately from the written proposal. The interview portion is worth 100 points. The combined application and interview are worth a total of 200 points.

## COMPLETED APPLICATION REQUIREMENTS

### Application Submittal

The proposal **must** include:

* A completed and signed Application Cover Sheet (Attachment 2).
* A completed Narrative Response that is a maximum of five (5) pages, not counting the budget form.
* A signed Letter of Support from your narrative example.
* A completed Proposal Budget (Attachment 3).
* A completed Proposal Personnel Detail Budget (Attachment 4).
* Completed applications are due by **April 12, 2023 at 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.

*Fiscal Sponsorship:*

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

1. **Via HSD Online Submission System** (<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 your 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](mailto:Sola.Plumacher@Seattle.Gov).
2. **Via Email**

[HSD\_RFP\_RFQ\_Email\_Submissions@seattle.gov](mailto:HSD_RFP_RFQ_Email_Submissions@seattle.gov). Email attachments are limited to 30 MB. **The subject heading must be titled: Registered Dietitian Nutritionist Services Request for Proposal**. 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](http://www.seattle.gov/humanservices/funding-and-reports/how-to-do-business-with-hsd). **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 (<http://web6.seattle.gov/hsd/rfi/index.aspx>) or email ([HSD\_RFP\_RFQ\_Email\_Submissions@seattle.gov](mailto: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 applicant’s CFO, Finance Officer, or Board Treasurer.
  2. The most recent audit report.
  3. The most recent fiscal year-ending Form 990 report.
  4. A current certificate of commercial liability insurance (if awarded, the applicant’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/employer identification number.
  6. Proof of federally approved indirect rate, if applicable.

|  |
| --- |
| 1. **List of Attachments & Related Materials** |

Attachment 1: Application Checklist

Attachment 2: Application Cover Sheet

Attachment 3: Proposal Budget

Attachment 4: Proposal Personnel Detail Budget

**2023 Multicultural Registered Dietitian Nutritionist (RDN) Services**

**Request for Proposal (RFP)**

**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](http://www.seattle.gov/humanservices/funding-and-reports/funding-opportunities)**?**

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 Multicultural Registered Dietitian Nutritionist Request for Proposal Theory of Change

**Completed and signed the Application Cover Sheet (Attachment 2)?\***

If your application names specific partner agencies, representatives from these agencies must also sign the application cover sheet.

If your application names a fiscal sponsor, authorized representatives from this agency must have read and understood the HSD Fiscal Sponsor Requirements document and must sign the application cover sheet.

**Completed each section of the Application Questions?**

* Must not exceed 5 pages (8 ½ x 11), single spaced, size 11 font, with 1-inch margins.
* Page count does not include the required forms (Attachments 2, 3 and 4) and supporting documents requested in this funding opportunity such as the **signed letter of support** from that agency’s Director or authorized representative from your narrative example.

**Completed the full Proposal Budget (Attachment 3)?\***

**Completed the full Proposal Personnel Detail Budget (Attachment 4)?\***

**\****These documents do not count against the 5-page limit for the proposal narrative section.*

All applications are due to the City of Seattle HSD by 12 P.M. on April 12, 2023. Application packets received after this deadline will not be considered. See completed application requirements for submission instructions.

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**City of Seattle**

**Human Services Department**

**2023 Multicultural Registered Dietitian Nutritionist (RDN) Services**

**Request for Proposal (RFP)**

**Application Cover Sheet**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. Applicant: | | | | | |  | | | | | | | | | | | | |
| 1. Applicant Executive Director: | | | | | |  | | | | | | | | | | | | |
| 1. Applicant Executive Director Email and Phone # | | | | | | Email  Phone # | | | | | | | | | | | | |
| The Executive Director will be notified by HSD regarding the final funding decision, and if the application does not meet minimum requirements.  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. | | | | | | | | | | | | | | | | | | |
| 1. Applicant Primary Contact for this RFP: | | | | | | | | | | | | | | | | | | |
|  | | Name: |  | | | | | | | | Title: | |  | | | | | |
|  | | Address: |  | | | | | | | | | | | | | | | |
|  | | Email: |  | | | | | | | | | | | | | | | |
|  | | Phone #: |  | | | | | | | | | | | | | | | |
| 1. Organization Type | | | | | | | | | | | | | | | | | | |
|  | | Non-Profit | | For Profit | | | | Public Agency | | | | | | Other (Specify): | | | | |
| 1. Federal Tax ID or EIN: | | | | |  | | | | | | 1. DUNS Number: | | | | |  | | |
| 1. WA Business License Number: | | | | | | |  | | | | | | | | | | | |
| 1. Proposed Program Name: | | | | | | |  | | | | | | | | | | | |
| 1. Focus Population(s) program will serve (check all that apply; those checked should match who you describe serving in your application: | | | | | | | BIPOC older adults  American Indian/Alaska Native/Indigenous  Asian  Black/African American/African Descent  Hispanic/Latinx/Indigenous  Native Hawaiian/Pacific Islander | | | | | | | | | | | |
| 1. Funding Amount Requested: | | | | | | |  | | | | | | | | | | | |
| 1. # of meal sites your organization will serve each year: | | | | | | | # of meal sites # of site visits | | | | | | | | | | | |
| 1. In which City Council District is your program located?   [Council district search page](http://www.seattle.gov/council/meet-the-council/find-your-district-and-councilmember) | | | | | | |  | | | | | | | | | | | |
| 1. 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, as needed. | | | | | | | | | | | | | | | | |
|  | |
| 16. Fiscal Sponsor (if applicable): | | | | | | | | | | | | | | | | | | |
|  | Contact Name: | | |  | | | | | | | | Title: | | |  | | | |
| Address: | | |  | | | | | | | |  | | |  | | | |
| Email: | | |  | | | | | | | | Phone Number: | | |  | | | |
| *I have read and understood the Fiscal Sponsor Requirements document and will comply with all obligations if the applicant is awarded funding.*  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 Multicultural Registered Dietitian Nutritionist (RDN) Services Request for Proposal (RFP)**

**Proposal 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*](http://www.seattle.gov/humanservices/funding-and-reports/funding-opportunities)

|  |  |
| --- | --- |
| **Applicant Name:** |  |
| **Proposal Name:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Amount by Fund Source** | | | |  |
| **Item** | **Requested HSD Funding** | **Other1** | **Other1** | **Other1** | **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 Supplies2 (includes computers, other technology expenses (not internet) and other expenses related to providing services) | $ | $ | $ | $ | $ |
| Rent | $ | $ | $ | $ | $ |
| Contractual Employment/Other Professional Services3 | $ | $ | $ | $ | $ |
| Travel (includes mileage, parking) | $ | $ | $ | $ | $ |
| Insurance | $ | $ | $ | $ | $ |
| Utilities (includes electric, internet, phone) | $ | $ | $ | $ | $ |
| Other Miscellaneous Expenses4 | $ | $ | $ | $ | $ |
| Indirect Facilities and Administration (F &A) Costs5 | $ | $ | $ | $ | $ |
| **SUBTOTAL - SUPPLIES, OTHER SERVICES & CHARGES** | **$** | **$** | **$** | **$** | **$** |
| **TOTAL EXPENDITURES** | **$** | **$** | **$** | **$** | **$** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1 Identify specific funding sources included under the"Other" column(s) above: | | | |  | 2 Operating Expenses- Itemize below (Do not include Office Supplies): | | | |
|  | | $ | |  |  | | | $ |
|  | | $ | |  |  | | | $ |
|  | | $ | |  |  | | | $ |
|  | | $ | |  |  | | | $ |
| **Total** | | **$** | |  | **Total** | | | **$** |
|  | |  | |  |  |  |  | |
| 3 Contractual Employment/Other Professional Services | | | |  | 4 Other Miscellaneous Expenses- Itemize below: | | | |
|  | | $ | |  |  | | | $ |
|  | | $ | |  |  | | | $ |
|  | | $ | |  |  | | | $ |
|  | | $ | |  |  | | | $ |
| **Total** | | **$** | |  | **Total** | | | **$** |
|  | |  | |  |  |  |  | |
| 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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Does the applicant have a federally approved rate? | |  | Yes |  | No |
| If yes, provide the rate. |  | | | | |

**2023 Multicultural Registered Dietitian Nutritionist (RDN) Services Request for Proposal (RFP)**

**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*](http://www.seattle.gov/humanservices/funding-and-reports/funding-opportunities)

|  |  |
| --- | --- |
| **Applicant:** |  |
| **Proposal Name:** |  |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant’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):** | | | | | | |  |  |  |  |  |

1. [Senior Nutrition Program Standards](https://www.dshs.wa.gov/sites/default/files/ALTSA/hcs/documents/SNPStandards.pdf). Washington State Department of Social and Health Services. Aging and Long Term Support Administration. 2016. [↑](#footnote-ref-2)
2. IBID. Standards are subject to change and RDNs will need to comply with any changes. [↑](#footnote-ref-3)
3. 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)> [↑](#footnote-ref-4)