

A blue-tinted photograph of a group of seven children of various ages sitting on a playground slide. They are all smiling and looking towards the camera. One child at the top of the slide has their hands raised in the air. In the bottom left corner, there is a large, white, hand-drawn heart shape.

Request for Application

2022-2023



May 11, 2021

TO: First 5 Grantees

SUBJECT: FY 2022-2023 Request for Application (RFA)

Enclosed are instructions and forms required for programs seeking First 5 Sierra funding.

This RFA is being issued with the goal of placing grant awards into agreement by July 1, 2022.

Grant awards are contingent upon the availability of funds. Should State Prop. 10 tobacco tax funds allocated for the FY 2022-2023 be less than the projected amounts, or any loss of such funding is experienced, you will be notified, and grant awards may need to be modified.

Please Note: Accurate and complete submission of information requested in this RFA will expedite timely processing of your application. Please pay particular attention to:

- *line-item detail* is required for each budget item, along with justification for how the item ties to the objectives and activities of the family resource center grant;
- *Mathematical calculations* for all line-item expenses; and
- *Electronic signatures* by designated individuals, in the correct section of the form.

Applications are due by 4:00 p.m. on **June 10, 2022**. Delivery options are listed on Page 4 of this RFA.

Please feel free to reach out to me if you have any questions.

Sincerely,

Candy Corcoran

Candy Corcoran, Executive Director
First 5 Sierra County

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Part I. Information

Background

The First 5 Sierra County Children and Families Commission (herein referred to as First 5 Sierra) was formed following the passage of California Proposition 10 (Prop 10). The Prop 10 initiative added taxes on cigarette and other tobacco products to fund early childhood health, development and education programs, family supports, and systems change efforts designed to improve services for young children and their families.

First 5 Sierra operates under the policy direction of the First 5 Sierra Children and Families Commission. It has an annual budget of approximately \$300,000 made up of Prop 10 funds. As a small county, First 5 Sierra is dependent on Small Population County Augmentation Funds (SPCFA) provided by First 5 California. Funds are used to provide services and make system improvements that support young children and families. The aim is to invest effectively in a network of prevention and early intervention supports for families with young children.

Introduction

Funds are being made available to implement the Commission's 2021-2024 strategic plan, all in an effort to achieve its vision and support its mission. This Request for Application (RFA) provides all of the information and forms necessary to prepare an application for grant funds. The terms and conditions described in this RFA supersede all previous grant making strategies and any conflicting provisions.

Funding Available

The following funding is being made available through this RFA. Please use the funding allocation found below to base your budget. If you are applying for a grant through the Community Responsive Grant funding stream, please specify if your efforts will support COVID relief efforts or if you are applying through the general min-grant process. Mini-grants are limited to \$10,000 per application.

Contact Information

Questions concerning this RFA, the application process, or programmatic issues should be addressed to Candy Corcoran, First 5 Sierra Executive Director at candy@first5sierra.org

Application Due Date

When	The application is due on June 10, 2022.
Where	candy@first5sierra.org
How	The application should be delivered electronically, with the title in the email subject line as: First 5 Sierra Request for Application FY 22-23

Application Timeline

Request for Application Published:	April 15, 2022
Application Deadline	June 10, 2022
Application Review & Contract Negotiations	June 10, 2022 – June 15, 2022
Recommendations to Commission	June 16, 2022
Agreements Finalized	June 30, 2022
Grant/Contract Term Begins	July 1, 2022
Grant/Contract Term Ends	June 30, 2022

Source and Use of Funds

Tobacco Tax Revenues

The California Children and Families Commission, created by Proposition 10, supports children from prenatal through age 5 by creating a comprehensive and integrated system of information and services to promote early childhood development and school readiness. The initiative, approved by voters in November 1998, added a 50 cent-per-pack tax to cigarettes and a comparable tax to other tobacco products. All proposed services and programs must be specifically related to the well-being and development of children age 0-5. Reasonable administrative expenses that appropriately support these services are allowable.

Supplantation Policy: Health and Safety Code section 30131.4 provides, in part, that Proposition 10 funds shall be used only to supplement existing levels of service and not to fund existing levels of service. It further provides that no money in the Commission's trust fund shall be used to supplant state or local general fund money for any purpose.

By signing and submitting this application the applicant/grantee certifies that it will comply with the requirements of the California Children & Families Act.

General Requirements

Compliance with Laws: The successful applicants will be required to comply with all applicable Federal, State and County guidelines in its operation of the program and any laws, statutes, ordinances and regulations that apply and are required of a contractor. These include but are not limited to, The Social Security Act, the Civil Rights Act, the Clean Air Act, Federal Single Audit Act, the State Energy Efficiency Plan, the California Welfare and Institutions Code, and the Drug-Free Workplace Act.

Terms and Conditions of the Application: The grant application face sheet stipulates that each applicant accepts all terms and conditions in this RFA packet. Each applicant shall submit its application with the understanding that First 5 Sierra is a public agency, and the application submission shall be subject to disclosure, if requested by a member of the public, following the final award decision. The grant application face sheet also stipulates that each applicant certifies that all statements in the application are true. This constitutes a warranty, the falsity of which shall include the right, at the Commission's option, of declaring any contract made as a result thereof to be null and void.

Pre-contract Assessment: Prior to the execution of a contract and when deemed advisable by the Commission, the Commission reserves the right to arrange on-site fiscal or program assessments and/or audits by Commission staff to determine the potential contractor's ability to meet the terms and conditions of the RFA and the proposed contract.

Reporting Responsibilities: The successful applicants will be required to submit to the Commission clear and detailed quarterly reports which outline the activities and progress of the project. They will also be required to submit quarterly financial invoices that include documentation of all claimed payments. Report formats will be at the discretion of the Commission in conformity with State Commission reporting requirements.

Indemnification: The successful applicant shall agree to indemnify, defend and hold harmless the Commission, its officers, agents and employees from any and all claims and losses occurring or resulting to any person, firm or corporation who may be injured or damaged by the proponents in the performance of such an agreement.

Insurance: The successful applicants shall, upon the execution of any subsequent Agreement, file with the Commission, within ten (10) days, a certificate of insurance verifying that the required coverage is in full force and effect, and in compliance with such Agreement.

Record Establishment and Maintenance: Successful applicants shall establish and maintain records in accordance with those requirements prescribed by the Commission, with respect to all matters covered by any subsequent Agreement. Upon request, and within five days, these records must be made available to authorized County, County Commission, or State Commission personnel/consultant. All confidential information is to be safeguarded in accordance with the generally accepted practices.

Conflict of Interest Disclosure: All applicants other than governmental agencies must fully disclose to the Commission whether the organization holds a controlling interest in any other organization or is owned or controlled by any other organization or maintains a financial interest in any other business.

Part II. Instructions

The instructions in this section correspond to each of the application components, as well as to the forms provided in Part III.

Grant Application Face Sheet

Administrative Agency

Enter the complete name of the governing body/organization applying for funding.

Project Name

Enter the complete title of the project. Do not use acronyms.

Funds Being Requested

Please provide the budget information for the project within each of the following categories:

- **Grant Amount Requested:** Enter the amount of funds requested for the project. The amount must be consistent with the proposed budget.
- **Cash Match:** If applicable, enter the amount of cash match. The amount must be consistent with the proposed budget. If not applicable, enter N/A.
- **In-Kind Match:** If applicable, enter the amount of in-kind match. The amount must be consistent with the proposed budget. If not applicable, enter N/A.
- **Total Project Cost:** Enter the sum of the grant amount requested, cash match and in-kind match. The amount must be consistent with the proposed budget.

Project Contact Information

Please provide the contact information for the following individuals:

- **Project Director:** Enter the name, title, mailing address, and telephone number of the individual ultimately responsible for the project.
- **Financial Officer:** Enter the name, email address and telephone number of the person who will be responsible for all fiscal matters relating to the project.

Grantee Type

Please indicate what type of organization is applying for grant funds.

Official Authorized to Sign for Applicant

Enter the signature, name, title, address, and telephone number of the official authorized to enter into the Grant Award Agreement. Provide an electronic signature of the individual authorized to sign the application.

Project Plan

Please provide a brief (no more than 1 page) description of the project that you are seeking funding for, the services to be rendered, and how it will impact children age 0-5 and their families.

Project Scope of Work

The Project Scope of Work must represent activities that will occur for the 12-month FY 2022-2023 grant period. To complete the scope of work form, please include the service to be provided and the population to be served.

- Example: Provide Early Childhood Enrichment Activities to children 0-2 years of age.

Project Budget

The Forms Section (Part III) contains a separate section for the following budget categories:

- Personnel Services – Salaries/Employee Benefits,
- Operating Expenses,
- Programmatic Expenses,
- Capital Expenses, and
- Indirect Costs

Each budget item requires line-item detail that addresses 1) the method of calculation and 2) justification for the expense. Enter the amount of each line item in the right-hand column of the Budget Category form. All charges must be clearly documented **and rounded off to the nearest whole dollar**. Enter the total amount of each budget category where designated on the form, with a project total at the conclusion of the document.

Personnel Services – Salaries/Employee Benefits:

Salaries

Personnel services include all services performed by staff that are directly employed by the applicant and must be identified by position and percentage of their full time equivalent (FTE). All other persons are to be shown as consultants in the Operating Expenses Category supported by a memorandum of understanding (MOU), contract, or operational agreement (OA). Sick leave, vacation, holidays, overtime, and shift differentials must be budgeted as salaries.

Benefits

Employee benefits must be identified by type and percentage of salaries. Applicant may use fixed percentages of salaries to calculate benefits. Employer contributions or expenses for social security, employee life and health insurance plans, unemployment insurance, and/or pension plans are allowable budget items.

A line item is required for each different position/classification, but not for each individual employee. If several people will be employed full-time or part-time in the same position/classification, provide the number of full-time equivalents (e.g., three half-time clerical personnel should be itemized as 1½ clerical positions).

Operating Expenses

Operating expenses are defined as necessary expenditures in the operational maintenance of the program.

The following items typically fall within the operating expenses category:

- Rent & Utilities
- Office Supplies & Materials
- Computer Purchase
- Telephone & Communications
- Postage/Mailing
- Printing/Copying
- Equipment Lease
- Other Operational Costs

Programmatic Expenses

Programmatic expenses are defined as necessary expenditures in the operations of the program. The following items fall within this category:

- Staff Travel
- Subscriptions
- Consultants
- Subcontracts for Services
- Program Materials: Client workbooks, education & outreach materials
- Other Program Specific Costs

Capital Expenditures

Capital expenditures must be specific and directly tied to First 5 related service delivery. Capital Expenses must be line-item specific and not general. Capital expenses are closely scrutinized prior to approval, and the need for such investment must be clearly identified in the project description of the proposal.

Indirect Costs

Indirect costs are shared costs that cannot be directly assigned to a particular activity but are necessary to the operation of the organization and the performance of the project. The costs of operating and maintaining facilities, accounting services, and administrative salaries are examples of indirect costs.

Applicants must submit their budget on the budget pages included in Part III, or an identical computer-generated form. These pages require that the funding source and amount be identified for each line item. Each budgeted item requires line-item detail showing the method of calculation and a brief justification for the item.

For example:

Correct	
Budget Category and Line-Item Detail	TOTAL
<u>Mileage:</u> 500 miles/mo. x .56 x 12 months = Travel to provide home visitation services, to provide community program outreach and attend project-related meetings.	\$3,360.00
Not correct	
<u>Mileage</u>	\$3,360.00

Part III. Forms

The following five components are required for a complete application:

- Grant Application Face Sheet
- Project Plan
- Project Scope of Work
- Project Budget

This RFA does not commit the First 5 Sierra to fund any application submitted. All costs incurred in the preparation of an application are the responsibility of each applicant and will not be reimbursed by the First 5 Sierra.

First 5 Sierra reserves the right to reject any and all applications received, to negotiate with any and all qualified applicants or to cancel this RFA in part or in its entirety. Funding for the contract shall be contingent upon the availability of funds.

Grant Application Face Sheet

Grant Application Face Sheet			
Administrative Agency:			
Project Name:			
Funding Being Requested		Project Contact Information	
Grant Amount Request:	\$	Project Director:	
Cash Match:	\$	Email Address:	
In-Kind Match	\$	Phone Number:	
Total Project Costs:	\$	Financial Officer:	
		Email Address:	
		Phone Number:	
Grantee Type (choose only one)	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> County Health & Human Services <input type="checkbox"/> Family Child Care <input type="checkbox"/> Higher Education <input type="checkbox"/> Resource & Referral <input type="checkbox"/> Community-Based Organization </div> <div style="width: 48%;"> <input type="checkbox"/> County Office of Education / School District <input type="checkbox"/> Child Care Centers <input type="checkbox"/> Hospital / Health Plan <input type="checkbox"/> Other Public Agency <input type="checkbox"/> Research / Consulting Firm </div> </div>		
<p>I hereby certify that: (1) I am vested with authority to, and have the approval of the Financial Officer, Director or Governing Board Chair, to submit this grant application for consideration of funding, (2) all funds received pursuant to the successful submission of this application will be spent exclusively on the purposes specified, and (3) all statements in the proposal are true. Furthermore, by signing below accept all terms and conditions of the RFA packet associated with this application and understand that by submission to the First 5 Sierra Children and Families Commission, expose the proposal to disclosure if requested by a member of the public following the final award decision.</p>			
Signature			
Name:			
Title:			
Address:			
Telephone:			
Email:			
Today's Date:			

Project Plan

Project Name:

Only choose between one of the two options	Program Model (choose only one)	Improved Family Functioning <input type="checkbox"/> 2-1-1 <input type="checkbox"/> HIPPY <input type="checkbox"/> Benefits Enrollment <input type="checkbox"/> Abriendo Puertas <input type="checkbox"/> Triple P 2-3 <input type="checkbox"/> Family Resource Center <input type="checkbox"/> Five Protective Factors <input type="checkbox"/> Avance <input type="checkbox"/> Triple P 4-5 <input type="checkbox"/> Incredible Years <input type="checkbox"/> Nurturing Parenting Prog. <input type="checkbox"/> Parents as Teachers <input type="checkbox"/> Safe Care <input type="checkbox"/> Other:		Improved Child Development <input type="checkbox"/> Summer Programs <input type="checkbox"/> Playgroups <input type="checkbox"/> Funded Preschool Slots <input type="checkbox"/> Business Supports <input type="checkbox"/> CLASS <input type="checkbox"/> CSEFEL <input type="checkbox"/> ERS <input type="checkbox"/> Facility Grants <input type="checkbox"/> PITC <input type="checkbox"/> Other:		Improved Child Health <input type="checkbox"/> Nutrition <input type="checkbox"/> Health Access <input type="checkbox"/> Safe Sleep <input type="checkbox"/> Car Safety <input type="checkbox"/> Tobacco/Drug <input type="checkbox"/> Nurse Family Partnership <input type="checkbox"/> Healthy Families America <input type="checkbox"/> Avance <input type="checkbox"/> Other:	
		Systems Change Efforts (choose only one)		Programs and Systems Improvement Efforts <input type="checkbox"/> Quality Improvement Efforts <input type="checkbox"/> Infrastructure Supports <input type="checkbox"/> Trainings/Conference Supports <input type="checkbox"/> Coordination Efforts		Policy and Public Advocacy <input type="checkbox"/> Community Awareness Efforts <input type="checkbox"/> Public Outreach and Education <input type="checkbox"/> Town Hall Meetings <input type="checkbox"/> Policy Change Efforts	
	Project Description Please provide a brief description of the project that you are seeking funding for, the services to be rendered, and how it will impact children age 0-5 and their families.						

Scope of Work

Scope of Work								
Project Name:					Contract Term			
1	2		3		4		5	
Program Specific Activities	Children (0-5) to be served		Primary Caregivers to be served		Other Family Members to be served		Providers to be served	
	Number to be served	Number of services to be provided	Number to be served	Number of services to be provided	Number to be served	Number of services to be provided	Number to be served	Number of services to be provided
Provide <INSERT SERVICE> to <INSERT SERVICE POPULATION>.								
Provide <INSERT SERVICE> to <INSERT SERVICE POPULATION>.								
Provide <INSERT SERVICE> to <INSERT SERVICE POPULATION>.								
Provide <INSERT SERVICE> to <INSERT SERVICE POPULATION>.								
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Provide <INSERT SERVICE> to <INSERT SERVICE POPULATION>.								
Provide <INSERT SERVICE> to <INSERT SERVICE POPULATION>.								
Provide <INSERT SERVICE> to <INSERT SERVICE POPULATION>.								

Line-Item Project Budget

Line-Item Project Budget					PAGE 1 of 2
Project Name:				Contract Term:	
Budget Category and Item Detail	Line-	First 5 Funds Requested	Cash Match	In-Kind Match	Total Costs
A. Personnel Costs					
<u>Job Title (% FTE)</u> Costs (per hour/month x grant term) Brief Description of duties					
<u>Job Title (% FTE)</u> Costs (per hour/month x grant term) Brief Description of duties					
<u>Job Title (% FTE)</u> Costs (per hour/month x grant term) Brief Description of duties					
TOTAL Personnel Costs					
B. Operational Costs					
<u>Rent & Utilities</u> (Cost per month x grant term)					
<u>Office Supplies & Materials</u> (Cost per month x grant term)					
<u>Telephone & Communication</u> (Cost per month x grant term)					
<u>Postage/Mailing</u> (Cost per month x grant term)					
<u>Printing/Copying</u> (Cost per month x grant term)					
<u>Equipment Lease</u> (Cost per month x grant term)					
<u>Other (list all)</u> Justify all costs					
TOTAL Operational Costs					

Line-Item Project Budget				PAGE 2 of 2	
Project Name:				Contract Term:	
Budget Category and	Line-Item Detail	First 5 Funds Requested	Cash Match	In-Kind Match	Total Costs
C. Program Costs					
Travel (monthly mileage estimates x mileage reimbursement rate x grant term)					
Consultants Specify service area and estimated cost per contract					
Subcontractors (list all)					
Program Materials & Supplies (Cost per month x grant term)					
Other (list all)					
TOTAL Program Costs					
D. Capital Costs					
List all Projects Estimated Costs of completion					
List all Projects Estimated Costs of completion					
TOTAL Capital Costs					
E. Indirect Costs					
Indirect Costs List justification of indirect cost rate					
TOTAL Indirect Costs					
TOTAL PROJECT COSTS					