



Delegate Agency Solicitation #8675 (RFP)

**CDGA MOPD Personal Assistance Program**

**Specification Number:1245779**

**Required for use by:** OFFICE FOR PEOPLE WITH DISABILITIES

**Bid/Proposal Submittal Date and Time:** 12:00 PM Central Time, 30-SEP-2022

**Deadline for Questions:** 12:00 PM Central Time, 24-SEP-2022

**Buyer:** MCCLARN, GRAYLEN

**Email Address:** Graylen.McClarn@cityofchicago.org

**Phone Number:** 3127449745

**Pre-Solicitation Conference Date and Time:** N/A

**Pre-Solicitation Conference Location:** N/A

**Site Visit Date & Time:** N/A

**Site Visit Location:** N/A

***Please submit your response to:***

<http://www.cityofchicago.org/eProcurement>  
iSupplier vendor portal registration is required.  
Allow 3 business days to complete registration.

**LORI E. LIGHTFOOT**  
MAYOR

**RACHEL M. ARFA**  
Commissioner

**Specification Number:** 1245779

**Type of Funding:**

**Title:** CDGA MOPD Personal Assistance Program

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**1 Header Information**

**1.1 General Information**

Title	<b>CDGA MOPD Personal Assistance Program</b>		
Description	<b>CDGA MOPD Personal Assistance Program</b>		
Preview Date	<b>Not Specified</b>	Open Date	<b>01-SEP-2022 09:00:00</b>
Close Date	<b>12:00 PM Central Time, 30-SEP-2022</b>	Award Date	<b>Not Specified</b>
Time Zone	<b>Central Time</b>	Buyer	<b>MCCLARN, GRAYLEN</b>
Quote Style	<b>Blind</b>	Email	<b>Graylen.McClarn@cityofchicago.org</b>
Event	<b>Delegate Agency</b>	Outcome	<b>Delegate Agency Blanket Agreement</b>

**1.2 Terms**

Effective Start Date	<b>Not Specified</b>	Effective End Date	<b>Not Specified</b>
Ship-To Address	<b>048-2510 INDEPENDENT LIVING FOR DISABLE 50 W WASHINGTON Chicago, IL 60601 United States</b>	Bill-To Address	<b>048-2510 INDEPENDENT LIVING FOR DISABLE 50 W WASHINGTON Chicago, IL 60601 United States</b>
Payment Terms	<b>IMMEDIATE</b>	Carrier	<b>United Parcel Service</b>
FOB	<b>CITY OF CHICAGO</b>	Freight Terms	<b>Paid</b>
Currency	<b>USD (US Dollar)</b>	Price Precision	<b>Any</b>
Total Agreement Amount (USD)	<b>Not Specified</b>	Minimum Release Amount (USD)	<b>Not Specified</b>

**1.3 Requirements**

<b>Contact</b>
Contact First Name ..... Provide your answer below
Contact Last Name ..... Provide your answer below
Contact Telephone Number ..... Provide your answer below

Contact
Contact E-mail Address ..... Provide your answer below
Contact Type ..... Provide your answer below
Organization Information
Legal Organization Name ..... Provide your answer below
Address ..... Provide your answer below
City ..... Provide your answer below
State ..... Provide your answer below

Organization Information
Zip ..... Provide your answer below
County ..... Provide your answer below
Organization Telephone Number ..... Provide your answer below
Federal Employer Identification Number ..... Provide your answer below
UEI Number ..... Provide your answer below
Head of Agency Name ..... Provide your answer below

<b>Organization Information</b>
Head of Agency Title ..... Provide your answer below
Head of Agency Contact Telephone ..... Provide your answer below
Head of Agency E-mail Contact ..... Provide your answer below
Website Address ..... Provide your answer below
Year Org. Established ..... Provide your answer below
Did you attach the following in your Admin. section? *Liability Insurance *Board Member Identification *IRS Determination Letter *SAM Certificate *Certificate of Good Standing *Bylaws and Articles of Incorporation *Financial Statement ..... Circle one from the response values below: Yes No
<b>Auditing Requirements</b>

<b>Auditing Requirements</b>
<p>What is your agency's fiscal year?</p> <p>.....</p> <p>Provide your answer below</p>
<p>When do you intend to conduct an audit of this contract?</p> <p>.....</p> <p>Provide your answer below</p>
<p>Will your audit be annual (once a year) or biennial (once every two years)?</p> <p>.....</p> <p>Circle one from the response values below:</p> <p>Annual</p> <p>Biennial</p>
<p>Does your agency anticipate receiving funding from any Federal or State agency for this program during 2021?</p> <p>.....</p> <p>Circle one from the response values below:</p> <p>No</p> <p>Yes</p>
<p>Please identify the Federal or State sources that will be funding your agency and the associated dollar values.</p> <p>.....</p> <p>Type <b>Optional</b></p> <p>.....</p> <p>Provide your answer below</p>
<b>Organization Overview</b>
<p>What is the mission of your organization and what are its major accomplishments in the last 12 months?</p> <p>.....</p> <p>Provide your answer below</p>
<p>Please provide a narrative overview of your agency. The narrative should, at a minimum, address the following items: the agency's philosophy; services or programs provided; the number of years that the agency has provided these services and current demographics regarding service area(s) including client populations served and geographic delivery area The narrative should also include how the agency</p>

<b>Organization Overview</b>
effectively communicates with individuals with various disability types. ..... Provide your answer below
Please attach your agency's organizational chart. An organizational chart must be provided that describes the agency's administrative framework and staff positions, indicating where the proposed project will fit into the organizational structure and identify any staff positions of shared responsibility. ..... Provide your answer below
<b>Geographic Area(s) Served</b>
Please provide the street number for your site 1 address. ..... Type <b>Optional</b> ..... Provide your answer below
Please identify the street direction associated with your site street address. ..... Type <b>Optional</b> ..... Provide your answer below
Please provide the street name. ..... Type <b>Optional</b> ..... Provide your answer below



<b>Geographic Area(s) Served</b>
Please provide the city. ..... Type <b>Optional</b> ..... Provide your answer below
Please provide the zip code. ..... Type <b>Optional</b> ..... Provide your answer below
In which ward is this site located? ..... Type <b>Optional</b> ..... Provide your answer below
Please provide the street number for your site 2 address. ..... Type <b>Optional</b> ..... Provide your answer below
Please identify the street direction associated with your site 2 street address. ..... Type <b>Optional</b> ..... Circle one from the response values below: N. S. E. W.
Please provide the street name for site 2 .

<b>Geographic Area(s) Served</b>
..... Type <b>Optional</b> ..... Provide your answer below  
Please provide the city for site 2. ..... Type <b>Optional</b> ..... Provide your answer below  
Please provide the zip code for site 2. ..... Type <b>Optional</b> ..... Provide your answer below  
In which ward is site 2 located? ..... Type <b>Optional</b> ..... Provide your answer below  
Please provide the street number for your site 3 address. ..... Type <b>Optional</b> ..... Provide your answer below  

<b>Geographic Area(s) Served</b>
Please identify the street direction associated with your site 3 street address. ..... Type <b>Optional</b> ..... Circle one from the response values below: N. S. E. W.
Please provide the street name for site 3. ..... Type <b>Optional</b> ..... Provide your answer below
Please provide the city for site 3. ..... Type <b>Optional</b> ..... Provide your answer below
Please provide the zip code for site 3. ..... Type <b>Optional</b> ..... Provide your answer below
In which ward is site 3 located? ..... Type <b>Optional</b> ..... Provide your answer below
Please provide any additional wards outside of your corporate or site locations your organization provide

<p><b>Geographic Area(s) Served</b></p> <p>services?</p> <p>.....</p> <p>Type <b>Optional</b></p> <p>.....</p> <p>Provide your answer below</p>
<p><b>Additional Locations</b></p> <p>Does your organization operate additional sites outside of your corporate location?</p> <p>.....</p> <p>Circle one from the response values below:</p> <p>Yes</p> <p>No</p>
<p><b>Monitoring</b></p> <p>Please describe how you will measure the project's performance, collect data and track or verify outcomes? Discuss who will be responsible for monitoring and reporting program progress and their specific qualifications.</p> <p>.....</p> <p>Provide your answer below</p>
<p>Please describe how your organization will monitor program expenditures and ensure that appropriate fiscal controls and records are in place.</p> <p>.....</p> <p>Provide your answer below</p>
<p><b>Program Summary</b></p> <p>Please provide the title of your proposed program.</p> <p>.....</p> <p>Provide your answer below</p>
<p>Please describe the proposed program. The narrative should include the need or problem to be addressed, as well as the population to be served or the area to benefit. Describe the work to be performed, including the activities to be undertaken or the services to be provided, the goals and the anticipated results and the implementation schedule. <b>Make sure to address the required core elements identified in the Program Description section of the RFP.</b></p> <p>.....</p>

<b>Program Summary</b>
Provide your answer below
Briefly describe the agency's existing staff positions and qualifications, its capacity to carry out the activity and state whether the agency has a personnel policy manual, affirmative action plan and grievance procedures. ..... Provide your answer below
Please attach an up-to-date resume for the individual who will manage the program for which you are requesting funding. ..... Provide your answer below
Please explain how you propose to coordinate services with other community agencies. ..... Provide your answer below
<b>Work Program</b>
Following these instructions, please complete and attach the Work-Program Form provided. ..... Provide your answer below
Please indicate how you will identify clients and retain them in the program, as appropriate. Provide an estimate of the number of clients to be served and describe them in terms of age, gender, ethnicity, income level, and other defining characteristics. ..... Provide your answer below

<b>Work Program</b>
If your agency currently receives funding for this program model, please provide your performance outcomes over the last 12 month period. ..... Provide your answer below
<b>Organizational Capacity</b>
Why is your agency interested in a contract with MOPD? What is unique about your agency's program design? ..... Provide your answer below
Please provide the agency's contract history with MOPD if applicable. Specify contracts funded by MOPD, number of years and corresponding amounts funded if applicable. ..... Provide your answer below
Please submit evidence that the agency is accessible in terms of its physical facility. ..... Provide your answer below
Please describe your plan, with specific activity and timeline required for this program to become operational by January 1, 2022. ..... Provide your answer below
Please specify all days/hours that clients may receive services. This may differ from agency's operating hours. .....

<b>Organizational Capacity</b>
Provide your answer below
Does your agency provide training on how staff can communicate with someone using a videophone? Does your agency provide both email and telephone options as a way to contact your agency? Is this information shared on your website and printed information? ..... Provide your answer below
If your agency has had experience in delivering the proposed service, please provide the names, addresses and phone numbers of 5 individuals or organizations that can attest to the quality of services provided. Do not list MOPD staff. ..... Provide your answer below
Please attach resumes, job descriptions, and any other employee qualifications for: a.) personnel involved in the direct provision of Personal Assistance/Homemaker services, b) full time professional staff assigned to this program. ..... Provide your answer below
Please provide an outline of staff training to be provided during the contract period. Indicate whether the training includes orientation and ongoing seminars related to serving people with various disabilities. Provide information on whether or not staff is trained to transfer, toilet, clean catheters and perform other personal assistance tasks. ..... Provide your answer below
Please provide samples of forms that your agency uses to document service delivery (intake forms, timesheets, etc.). .....

<b>Organizational Capacity</b>
Provide your answer below
Please describe the system used to assign workers to clients. Include steps beginning with the initial referral. Include an estimate of the average time interval from referral to service start. ..... Provide your answer below
Please describe how your agency will ensure that charges for reimbursement are correct. ..... Provide your answer below
Please define your agency's policy and procedures for responding to complaints, including claims of damage, loss or theft, and/or bed bugs. Under what circumstances does the client receive restitution for damage, loss or theft against a worker and what follow-up occurs with workers who are accused of damage, loss or theft ? ..... Provide your answer below
Please describe your agency's client satisfaction policy and procedures regarding services rendered. ..... Provide your answer below
Please describe the agency's plan to provide services in special situations such as periods of severe weather conditions that fall outside of normal office hours. ..... Provide your answer below



<b>Organizational Capacity</b>
<p>Is your agency willing and able to use the City's database system (ECM) for maintaining client demographics, service delivery, and client billing activities?</p> <p>.....</p> <p>Provide your answer below</p>
<b>Budget Information</b>
<p>Requested Grant Amount</p> <p>.....</p> <p>Value Type <b>Numeric Value only</b></p> <p>.....</p> <p>Provide your answer below</p>
<p>Please provide the total amount (including funding from other sources) that you plan to devote to this program.</p> <p>.....</p> <p>Provide your answer below</p>
<p>Using these instructions, please complete and attach the budget forms provided.</p> <p>.....</p> <p>Provide your answer below</p>
<p>Please describe your financial capacity (cash-flow) to expend funds prior to reimbursement.</p> <p>.....</p> <p>Provide your answer below</p>
<p>Please describe your plans to use other funding on this program. In this section, only describe funds that are secured. Provide the sources of funds, amount of funds and how these funds will be used.</p> <p>.....</p> <p>Provide your answer below</p>

**Budget Information**

Please describe your plans to seek new funding to supplement City funding. Describe the sources to which you will apply, the amounts sought and the proposed use of those funds.

.....  
Provide your answer below

Please describe your donated goods and services. Estimate the value of these services and describe how you arrive at these amounts.

.....  
Provide your answer below

Please explain why you consider your program costs to be reasonable.

.....  
Provide your answer below

**Service Provision**

How will services be assured to individuals who are Deaf, hard of hearing, blind, visually impaired and Deaf/blind?

.....  
Provide your answer below

Please describe in detail your organizations ability to provide personal assistance services to multiple individuals with a wide range of disabilities throughout the City of Chicago.

.....  
Provide your answer below

Service Provision
<p>Please describe the client service steps from initial intake, to assessment, service start and follow-up. Show an estimate of average time interval from receipt of referral to service start for both regular referrals and emergency referrals.</p> <p>.....</p> <p>Provide your answer below</p>
<p>Please describe how your agency will collaborate with the Independent Living Program staff to ensure that appropriate services are being provided and assess when Personal Assistance services are no longer needed.</p> <p>.....</p> <p>Provide your answer below</p>
<p>Please describe your agencies policy and procedure for handling emergency requests for service. Include the agency's capability to provide services within 24 hours of receiving a verbal referral.</p> <p>.....</p> <p>Provide your answer below</p>
<p>Please describe how staff will respond to a client who is angry about his/her hours of service being changed and/or terminated.</p> <p>.....</p> <p>Provide your answer below</p>
<p>Please describe how the agency will collaborate and follow-up with Independent Living Program staff to ensure that appropriate services are being provided and assess when the services are no longer needed or additional services may be beneficial.</p> <p>.....</p> <p>Provide your answer below</p>
<p>Please describe how staff activities and performance will be monitored.</p>

<b>Service Provision</b>
<p>.....</p> <p>Provide your answer below</p>
<b>National Objective Narrative</b>
<p>Did you read the HUD National Objective Narrative_LMC?</p> <p>.....</p> <p>Circle one from the response values below:</p> <p>Yes</p> <p>NO</p>
<b>City of Chicago Compliance Acknowledgement</b>
<p>Do you acknowledge the Compliance with Laws, Statutes, Ordinances and Executive Orders for the City of Chicago?</p> <p>.....</p> <p>Circle one from the response values below:</p> <p>Yes</p> <p>No</p>
<b>Conflict of Interest</b>
<p>Did you complete and attach the Conflict of Interest Questionnaire?</p> <p>.....</p> <p>Circle one from the response values below:</p> <p>Yes</p> <p>No</p>

**1.4 Attachments**

Name	Data Type	Description
ATTACHMENT 01 :RFQ	File	

**1.5 Response Rules**

- Solicitation is restricted to invited suppliers
- Suppliers are allowed to respond to selected lines
- Suppliers are allowed to provide multiple responses
- Buyer may close the solicitation before the Close Date
- Buyer may manually extend the solicitation while it is open

**2 Price Schedule**

**2.1 Line Information**

Display Rank As **No indicator displayed**  
 Ranking **Price Only**  
 Cost Factors **None**

Line	Item, Rev / Job	Target Quantity	Unit	Unit Price	Amount
1	0005 - Personnel	1	USD		
2	0044 - Fringe Benefits	1	USD		
3	0100 - Operating/Technical	1	USD		
4	0140 - Professional and Technical Services	1	USD		
5	0200 - Travel	1	USD		
6	0300 - Materials and Supplies	1	USD		
7	0400 - Equipment	1	USD		
8	0801 - Indirect	1	USD		
9	0999 - Other	1	USD		

**2.2 Line Details**

**2.2.1 Line 1 0005 - Personnel**

Category	<b>94855.DA.</b>	Start Price (USD)	<b>Not Specified</b>
Shopping Category	<b>Not Specified</b>	Target Price (USD)	<b>Not Specified</b>
Minimum Release Amount (USD)	<b>Not Specified</b>		
Estimated Total Amount (USD)	<b>Not Specified</b>		

**2.2.2 Line 2 0044 - Fringe Benefits**

Category	<b>94855.DA.</b>	Start Price (USD)	<b>Not Specified</b>
Shopping Category	<b>Not Specified</b>	Target Price (USD)	<b>Not Specified</b>
Minimum Release Amount (USD)	<b>Not Specified</b>		
Estimated Total Amount (USD)	<b>Not Specified</b>		

**2.2.3 Line 3 0100 - Operating/Technical**

Category	<b>94855.DA.</b>	Start Price (USD)	<b>Not Specified</b>
Shopping Category	<b>Not Specified</b>	Target Price (USD)	<b>Not Specified</b>
Minimum Release Amount (USD)	<b>Not Specified</b>		
Estimated Total Amount (USD)	<b>Not Specified</b>		

**2.2.4 Line 4 0140 - Professional and Technical Services**

Category	<b>94855.DA.</b>	Start Price (USD)	<b>Not Specified</b>
Shopping Category	<b>Not Specified</b>	Target Price (USD)	<b>Not Specified</b>
Minimum Release Amount (USD)	<b>Not Specified</b>		
Estimated Total Amount (USD)	<b>Not Specified</b>		

**2.2.5 Line 5 0200 - Travel**

Category	<b>94855.DA.</b>	Start Price (USD)	<b>Not Specified</b>
Shopping Category	<b>Not Specified</b>	Target Price (USD)	<b>Not Specified</b>
Minimum Release Amount (USD)	<b>Not Specified</b>		
Estimated Total Amount (USD)	<b>Not Specified</b>		

**2.2.6 Line 6 0300 - Materials and Supplies**

Category	<b>94855.DA.</b>	Start Price (USD)	<b>Not Specified</b>
Shopping Category	<b>Not Specified</b>	Target Price (USD)	<b>Not Specified</b>
Minimum Release Amount (USD)	<b>Not Specified</b>		
Estimated Total Amount (USD)	<b>Not Specified</b>		

**2.2.7 Line 7 0400 - Equipment**

Category	<b>94855.DA.</b>	Start Price (USD)	<b>Not Specified</b>
Shopping Category	<b>Not Specified</b>	Target Price (USD)	<b>Not Specified</b>
Minimum Release Amount (USD)	<b>Not Specified</b>		
Estimated Total Amount (USD)	<b>Not Specified</b>		

**2.2.8 Line 8 0801 - Indirect**

Category	<b>94855.DA.</b>	Start Price (USD)	<b>Not Specified</b>
Shopping Category	<b>Not Specified</b>	Target Price (USD)	<b>Not Specified</b>
Minimum Release Amount (USD)	<b>Not Specified</b>		
Estimated Total Amount (USD)	<b>Not Specified</b>		

**2.2.9 Line 9 0999 - Other**

Category	<b>94855.DA.</b>	Start Price (USD)	<b>Not Specified</b>
Shopping Category	<b>Not Specified</b>	Target Price (USD)	<b>Not Specified</b>
Minimum Release Amount (USD)	<b>Not Specified</b>		
Estimated Total Amount (USD)	<b>Not Specified</b>		

# City of Chicago



## Mayor's Office for People with Disabilities,

### CDGA MOPD Personal Assistance

#### REQUEST FOR PROPOSAL (RFP)

# 8675

APPLICATIONS MUST BE ENTERED AND SUBMITTED ONLINE AT:

[HTTP://WWW.CITYOFCHICAGO.ORG/EPROCUREMENT](http://www.cityofchicago.org/eprocurement)

Contact for further information:

Deputy Commissioner

Christina McGleam

(312)744-9079

[christina.mcgleam@cityofchicago.org](mailto:christina.mcgleam@cityofchicago.org)

City of Chicago  
Mayor's Office for People with Disabilities  
Commissioner  
Rachel Arfa

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## **GENERAL INFORMATION**

### ***Purpose of this RFP***

On behalf of the Mayor's Office for People with Disabilities (MOPD), OBM is releasing this request for proposal (RFP) to fund MOPD's Personal Assistance Program from September 1, 2022 to December 31, 2022

Submittal of an application does not ensure that you will receive an award. The City assumes no liability for costs incurred in submitting this application or for expenses incurred in anticipation of receiving an award. If you receive an award, the award will not be final until your organization and the City have fully negotiated and signed a grant agreement. All payments of funds, terms, and conditions of the grant agreement will be subject to the annual appropriation and availability of funds as well as the terms and conditions of the grant agreement. The City may, in its sole discretion, reduce the compensation payable under the grant agreement. The grant agreement will terminate on whichever date comes earlier, the last day of the fiscal period for which enough appropriation occurs or when funds appropriated for payment under the grant agreement are exhausted, OR as otherwise provided under the grant agreement.

Applicants must follow the directions of this RFP, and all responses must be complete, legible, and coherent. Applicants' conformity to the RFP instructions will facilitate the evaluation of all proposals. Non-responsiveness or incomplete responses to this RFP may be cause for the proposal to be disqualified from further consideration. The City reserves the right to accept any proposal, any part or parts thereof, and reject any or all proposals.

### ***MOPD Program: Personal Assistance***

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#### **PROGRAM DESCRIPTION:**

The Personal Assistance Program allows qualified individuals with disabilities who live in the city of Chicago the opportunity to receive in-home services to increase independence and daily living skills. Services are provided for an average of four (4) to six (6) hours per week and include, but are not limited to, personal health care such as hygiene and grooming, housekeeping tasks, (laundry, washing dishes, mopping, sweeping, etc.), as well as money management and accompaniment to appointments or errands.

#### **PROGRAM REQUIREMENTS:**

***All program specific questions, forms, or templates that applicants are required to answer or complete will be available on the City of Chicago eProcurement site.***

Successful applicants must be able to adequately offer the following services and comply with the following requirements:

- Provide Personal Assistance services to Chicago residents with various types of disabilities, including, but not limited to, personal hygiene, bathing, toileting, grooming, and dressing; housekeeping; shopping; food preparation, money management and accompaniment to appointments or errands.
- Provide services as outlined in the client's agreed upon Service Plan.

- Provide Personal Assistance Services to Chicagoans with various types of disabilities, while demonstrating appropriate disability etiquette, effective communication and ability to provide information in alternative formats based on the specific needs of the target population.
- Ensure Personal Assistants (PAs) are trained routinely on providing effective communication when serving clients with disabilities. This includes any clients for whom spoken English is not their first language.
- Maintain a staff-to-client ratio of one full-time PA for every ten clients, based on an estimate that each PA will work for each client four (4) to six (6) hours per week.
- Personal Assistant is required to assist and actively engage client with activities and services as outlined in client's Service Plan.
- Invoice clients for services rendered monthly in a manner prescribed by MOPD.
- Receive referrals only from authorized MOPD staff.
- Maintain client files of all MOPD clients receiving services.
- Use the City's Enterprise Case Management database system to track client demographics and services via this program. High-speed internet capabilities are required. ECM requires high-speed internet for users to be able to fully access the database without issues such as the system timing out.
- Communicate on an ongoing basis with MOPD regarding services including regular updates on service delivery, troubleshooting any problems or barriers, in the manner requested by MOPD staff.

**PERFORMANCE GOALS:**

- Vendor will ensure that the occurrence of unscheduled absences and "no shows" of the PA are at less than 5 percent of the time the PA are scheduled to provide services at clients' homes.
- Vendor will submit accurate monthly fee-for-service billing to service recipients by the 25th of each month, 100% of the time.
- Vendor will submit correct voucher reimbursement requests to MOPD by the 10th of each month, 100% of the time.
- All client records (ECM or hard file as stipulated by MOPD) will meet criteria standards at a minimum of 90 percent for all Program Service Delivery Evaluations conducted by MOPD. Criteria identified from the current year's Statement of Work.
- 100 percent of all client complaints will be rectified in the manner and timeframe described in the current year's Statement of Work.

**SELECTION CRITERIA:**

- Not-for-profit and for-profit agencies may apply.
  - The applicant must explain their organization's ability to achieve the above performance requirements and provide any supporting documentation.
  - The applicant must explain their organization's ability to serve Chicago residents in all 77 neighborhoods, for the advertised hours, including those geographic locations with limited or no public transportation access.
  - The applicant must provide supporting documentation of their ability to serve individuals who use a language other than spoken English. For example, individuals who communicate only in American Sign Language, or only use Spanish or other language to communicate.
- available, total funding of \$360,000, plus the 10 percent required of a successful respondent).
- The selected agency must have the ability to respond to referrals within five (5) business days for a standard referral and 48 hours for an emergency referral.
  - Program dollars must be for services rendered with a small dollar amount of funding available for administrative support.
  - Applicant must pay Personal Assistants the current living wage rate (changes annually on July 1 of each year, and successful organizations must use the most recent living wage rate to set at least a minimum pay rate).

**FUNDING AND REIMBURSEMENT RATE**

Total funding: \$100,000  
9/1/2022-12/31/2022 reimbursement rate: \$21/hr.

**PROGRAM CONTACTS:**

Christina McGleam, Deputy Commissioner:  
312-744-9079

Email: [Christina.McGleam@cityofchicago.org](mailto:Christina.McGleam@cityofchicago.org)

Website: [www.cityofchicago.org/MOPD](http://www.cityofchicago.org/MOPD)

***Eligibility Requirements***

This RFP is a competitive process open to not-for-profit community-based organizations (unless explicitly stated otherwise in the "Program Description" section of this document). Applicants must provide their federal 501(c)(3) tax-exempt designation and State of Illinois articles of incorporation as verification of their not-for-profit status. Applicants are required to deliver services within the City of Chicago and to Chicago residents only.

Applicants with existing contracts with the City that are not in good standing do not receive consideration for new funding. Also, respondents that have had a City contract and were terminated for default, or currently debarred or issued a final determination by a City, State, or Federal agency for the performance of a criminal act, or abridgment of human rights or illegal/fraudulent practices will not receive new funding.

***Funding Sources***

All final awards will be subject to the availability of funds from the source identified below. For more information about the various rules and regulations that may govern the use of these funding sources, visit the specific web site referenced by each funding source.

- U.S. Department of Housing and Urban Development (HUD): Community Development Block Grant (CDBG)

***Anticipated Term of Contract and Funding Source***

The term of contracts executed under this RFP will be for the time period of September 1, 2022 to December 31, 2022. Other extensions may be granted, not to exceed one additional year. Programs can receive funds with a combination of federal, state, or local funds with each funding source representing a separate contract. Final awards are contingent on the availability of funds from the various sources identified above.

***Compliance***

Applicants must comply with all applicable Federal, State, and City requirements necessary to execute and perform services under a contract funded by this application.

**RFP, PROGRAM SPECIFIC, AND EPROCUREMENT QUESTIONS**

## **E-PROCUREMENT SYSTEM**

**Proposals must be submitted via online application. Emailed or faxed proposals will not be accepted.**

To complete an application for this RFP, applicants will need to set up an account in the new eProcurement/iSupplier system.

The Department of Procurement Services (DPS) manages the iSupplier registration process. All delegate agencies are required to register in the iSupplier portal at [www.cityofchicago.org/eProcurement](http://www.cityofchicago.org/eProcurement). All vendors must have a Federal Employer Identification Number (FEIN) and an IRS W9 for registration and confirmation of vendor business information.

- New Vendors – Must register at [www.cityofchicago.org/eProcurement](http://www.cityofchicago.org/eProcurement). Registration in iSupplier is the first step to ensuring your agency’s ability to conduct business with the City of Chicago. Please allow five to seven days for your registration to be processed.
- Existing Vendors – Must request an iSupplier invitation via email. Include your Complete Company Name and City of Chicago Vendor/Supplier Number (found on the front page of your contract) in your email to [customersupport@cityofchicago.org](mailto:customersupport@cityofchicago.org). You will then receive a response from DPS so you can complete the registration process. Please check your junk email folder if you have made a request and not heard back as many agencies have reported responses going their junk folder.

For further eProcurement help use the following contacts:

1. Questions on Registration: [customersupport@cityofchicago.org](mailto:customersupport@cityofchicago.org)
2. Questions on eProcurement for Delegate Agencies including: [CustomerSupport@cityofchicago.org](mailto:CustomerSupport@cityofchicago.org) or contact the eProcurement hotline at 312-744-4357 (HELP)
3. Online Training Materials: <https://www.cityofchicago.org/city/en/depts/dps/isupplier/online-training-materials.html>

If you are having difficulty registering additional people, please refer to this handout:

[https://www.cityofchicago.org/content/dam/city/depts/dps/isupplier/training/Vendor\\_Create\\_New\\_Address\\_and\\_Contact.pdf](https://www.cityofchicago.org/content/dam/city/depts/dps/isupplier/training/Vendor_Create_New_Address_and_Contact.pdf)

Additionally, respondents may e-mail [CustomerSupport@cityofchicago.org](mailto:CustomerSupport@cityofchicago.org) to receive more specific advice and troubleshooting.

Respondents must submit an application for the request for proposal via eProcurement.

For this application, all answers to the application questions are limited to 4,000 characters, including spaces and punctuation.

### ***Program Specific***

Program specific questions must be submitted in writing to the appropriate program liaison identified below:

- **Mayor’s Office for People with Disabilities (MOPD). Christina McGleam, Deputy Commissioner, [Christina.Mcgleam@cityofchicago.org](mailto:Christina.Mcgleam@cityofchicago.org)**

## **EVALUATION AND SELECTION CRITERIA**

Each lead department administering the programs listed in this RFP will evaluate and score all proposals based upon the criteria identified in the Program Description. During the evaluation process, lead departments reserve the right to consult with community advisory groups or committees, external experts, other City departments, and public and private funders.

The Applicant must show to the complete satisfaction of the lead department that it has the necessary facilities, ability, and financial resources to provide the services specified in the Program Descriptions in a satisfactory manner. The lead department may make reasonable investigations deemed necessary and proper to determine the ability of the Applicant to perform the work and the Applicant shall furnish to the lead department all information that may be requested. The lead department reserves the right to reject any application if the materials or information provided by the Applicant fail to satisfy the lead department that the Applicant is properly qualified to carry out the obligations of the contract and to complete the work described in the Program Description.

Evaluation of the Applicants qualifications shall include:

- The ability, capacity, skill, and the financial and other necessary resources to perform the work or provide the service required.
- The ability to perform the work or provide the service promptly or within the time specified, without delay or interference.
- The experience and efficiency of the agency.
- The quality of work and performance of previous contracts or services, as applicable.
- The experience and ability to appropriately communicate with and provide services to individuals with various types of disabilities including individuals who are Deaf/Blind.

Final department funding recommendations must be approved by the Chicago City Council (as appropriate) and are subject to the availability of funds.

Once submitted and RFP is closed, no proposal may be amended or substituted, unless an addendum is issued by the City. The City, at its sole discretion, reserves the right to contact an applicant if additional information or clarification is required.

***The table on the following page lists the maximum score an applicant can receive, along with examples of the review criteria for each section. Lead departments may incorporate additional criteria for specific program models.***

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## APPLICATION REVIEW CRITERIA

*The maximum points an application can receive is 100. There are additional requirements identified in the Program Descriptions section of this document.*

Points	CRITERIA
10	<p><b>Program Summary</b></p> <ul style="list-style-type: none"> <li>• The Applicant provides a proposed program description.</li> <li>• The Applicant describes the agencies existing staff positions and qualifications.</li> </ul>
10	<p><b>Work Program</b></p> <ul style="list-style-type: none"> <li>• The Applicant identifies how they will identify clients and retain them in the program, as appropriate.</li> </ul>
36	<p><b>Organizational Capacity</b></p> <ul style="list-style-type: none"> <li>• The Applicant identifies qualified staff responsible for program oversight, management, fiscal oversight, and evaluation and performance management methods.</li> <li>• The Applicant provides evidence of successful past program performance or success in initiating, maintaining, and completing a similar program, and consistently meeting program goals.</li> </ul>
15	<p><b>Budget information</b></p> <ul style="list-style-type: none"> <li>• The Applicant must describe your plans to use other funding on this program. In this section, only describe funds that are secured. Provide the sources of funds, amount of funds and how these funds will be used.</li> </ul>
24	<p><b>Service Provision</b></p> <ul style="list-style-type: none"> <li>• The Applicant demonstrates how their services will be assured to individuals who are Deaf, hard of hearing, blind, visually impaired and Deaf/blind?</li> <li>• The Applicant will describe the client service steps from initial intake, to assessment, service start and follow-up. Show an estimate of average time interval from receipt of referral to service start for both regular referrals and emergency referrals.</li> <li>• The Applicant must describe how the agency will collaborate and follow-up with Independent Living Program staff to ensure that appropriate services are being provided and assess when the services are no longer needed or additional services may be beneficial.</li> <li>• The Applicant must describe how staff activities and performance will be monitored.</li> </ul>
5	<p><b>Overall Responsiveness</b></p> <ul style="list-style-type: none"> <li>• The Applicant completed the application in an accurate manner, answers all questions with enough detail to demonstrate knowledge and capacity to carry out the proposed program(s), and submits all necessary information or documentation.</li> </ul>

## **COMPLIANCE WITH LAWS, STATUTES, ORDINANCES, AND EXECUTIVE ORDERS**

Grant awards will not be final until the City of Chicago and the applicant have fully negotiated and executed a grant agreement. All payments under Agreements are subject to annual appropriation and availability of funds. The City assumes no liability for costs incurred in responding to this RFP or for costs incurred by the applicant in anticipation of a grant agreement. As a condition of a grant award, applicants must comply with the following and with each provision of the grant agreement:

1. Conflict of Interest Clause: No member of the governing body of the City or other unit of government and no other officer, employee, or agent of the City or other government unit who exercises any functions or responsibilities in connection with the carrying out of the project shall have any personal interest, direct or indirect, in the grant agreement.

The applicant covenants that he/she presently has no interest, and shall not acquire any interest, direct, or indirect, in the project to which the grant agreement pertains which would conflict in any manner or degree with the performance of his/her work hereunder. The applicant further covenants that in the performance of the grant agreement no person having any such interest shall be employed.

2. Governmental Ethics Ordinance, Chapter 2-156: All applicants agree to comply with the Governmental Ethics Ordinance, Chapter 2-156 which includes the following provisions: a) a representation by the applicant that he/she has not procured the grant agreement in violation of this order; and b) a provision that any grant agreement which the applicant has negotiated, entered into, or performed in violation of any of the provisions of [Governmental Ethics Ordinance, Chapter 2-156] shall be voidable by the City.
3. Drug-free Workplace: Selected applicants shall establish procedures and policies to promote a Drug-free Workplace. The selected applicant shall notify employees of its policy for maintaining a drug-free workplace and the penalties that may be imposed for drug abuse violations occurring in the workplace. The selected applicant shall notify the City if any of its employees are convicted of a criminal offense in the workplace no later than ten days after such conviction.
4. Business Relationships with Elected Officials: Pursuant to Section 2-156-030(b) of the Municipal Code of Chicago as amended (Municipal Code), it is illegal for any elected official of the City, or any person acting at the direction of such official, to contact, either orally or in writing, any other City official or employee with respect to any matter involving any person with whom the elected official has a business relationship, or to participate in any discussion in any City Council committee hearing or in any City Council meeting or to vote on any matter involving the person with whom an elected official has a business relationship. Violation of Section 2-156-030(b) by any elected official with respect to the Agreement shall be grounds for termination of the Agreement. The term business relationship is defined as set forth in Section 2-156-080 of the Municipal Code.

Section 2-156-080 defines a “business relationship” as any contractual or other private business dealing of an official, or his or her spouse or domestic partner, or of any entity in which an official or his or her spouse or domestic partner has a financial interest, with a person or entity which entitles an official to compensation or payment in the amount of \$2,500 or more in a calendar year; provided, however, a financial interest shall not include: (i) any ownership through purchase at fair market value or inheritance of less than one percent of the share of a corporation, or any corporate subsidiary, parent or affiliate thereof, regardless of the value of or dividends on such shares, if such shares are registered on a securities exchange pursuant to the

Securities Exchange Act of 1934, as amended; (ii) the authorized compensation paid to an official or employee for his office or employment; (iii) any economic benefit provided equally to all residents of the City; (iv) a time or demand deposit in a financial institution; or (v) an endowment or insurance policy or annuity contract purchased from an insurance company. A “contractual or other private business dealing” shall not include any employment relationship of an official’s spouse or domestic partner with an entity when such spouse or domestic partner has no discretion concerning or input relating to the relationship between that entity and the City.

5. Legal Compliance: Compliance with Federal, State of Illinois and City of Chicago regulations, ordinances, policies, procedures, rules, executive orders and requirements, including: Disclosure of Ownership Interests Ordinance (Chapter 2-154 of the Municipal Code); the State of Illinois - Certification Affidavit Statute (Illinois Criminal Code); State Tax Delinquencies (65ILCS 5/11-42.1-1); Governmental Ethics Ordinance (Chapter 2-156 of the Municipal Code); Office of the Inspector General Ordinance (Chapter 2-56 of the Municipal Code); Child Support Arrearage Ordinance (Section 2-92-380 of the Municipal Code); and Landscape Ordinance (Chapters 32 and 194A of the Municipal Code).
6. Economic Disclosure Statement: If selected for grant award, applicants are required to (a) execute the Economic Disclosure Statement and Affidavit and (b) indemnify the City as described in the Agreement between the City and the successful applicants.
7. Prohibition on Certain Contributions, Mayoral Executive Order 2011-4: Neither you nor any person or entity who directly or indirectly has an ownership or beneficial interest in you of more than 7.5% (Owners), spouses and domestic partners of such Owners, your Subcontractors, any person or entity who directly or indirectly has an ownership or beneficial interest in any Subcontractor of more than 7.5% (Sub-owners) and spouses and domestic partners of such Sub-owners (you and all the other preceding classes of persons and entities are together, the Identified Parties), shall make a contribution of any amount to the Mayor of the City of Chicago (the Mayor) or to his political fundraising committee during (i) the bid or other solicitation process for the grant agreement or Other Contract, including while the grant agreement or Other Contract is executory, (ii) the term of the grant agreement or any Other Contract between City and you, and/or (iii) any period in which an extension of the grant agreement or Other Contract with the City is being sought or negotiated.

You represent and warrant that since the date of public advertisement of the specification, request for qualifications, RFP or request for information (or any combination of those requests) or, if not competitively procured, from the date the City approached you or the date you approached the City, as applicable, regarding the formulation of the grant agreement, no Identified Parties have made a contribution of any amount to the Mayor or to his political fundraising committee.

You shall not: (a) coerce, compel or intimidate your employees to make a contribution of any amount to the Mayor or to the Mayor’s political fundraising committee; (b) reimburse your employees for a contribution of any amount made to the Mayor or to the Mayor’s political fundraising committee; or (c) bundle or solicit others to bundle contributions to the Mayor or to his political fundraising committee.

The Identified Parties must not engage in any conduct whatsoever designed to intentionally violate this provision or Mayoral Executive Order No. 2011-4 or to entice, direct or solicit others to intentionally violate this provision or Mayoral Executive Order No. 2011-4.



Violation of, non-compliance with, misrepresentation with respect to, or breach of any covenant or warranty under this provision or violation of Mayoral Executive Order No. 2011-4 constitutes a breach and default under the grant agreement, and under any Other Contract for which no opportunity to cure will be granted. Such breach and default entitle the City to all remedies (including without limitation termination for default) under the grant agreement, under any Other Contract, at law and in equity. This provision amends any Other Contract and supersedes any inconsistent provision contained therein.

If you violate this provision or Mayoral Executive Order No. 2011-4 prior to award of the Agreement resulting from this specification, the Commissioner may reject your bid.

For purposes of this provision:

- “Other Contract” means any agreement entered into between you and the City that is (i) formed under the authority of Municipal Code Ch. 2-92; (ii) for the purchase, sale or lease of real or personal property; or (iii) for materials, supplies, equipment or services which are approved and/or authorized by the City Council.
- “Contribution” means a “political contribution” as defined in Municipal Code Ch. 2-156, as amended.
- “Political fundraising committee” means a “political fundraising committee” as defined in Municipal Code Ch. 2-156, as amended.

8. Hiring Practices:

- a) The City is subject to the June 24, 2011 “City of Chicago Hiring Plan” (the “2011 City Hiring Plan”) entered in *Shakman v. Democratic Organization of Cook County*, Case No 69 C 2145 (United States District Court for the Northern District of Illinois). Among other things, the 2011 City Hiring Plan prohibits the City from hiring persons as governmental employees in non-exempt positions based on political reasons or factors.
- b) You are aware that City policy prohibits City employees from directing any individual to apply for a position with you, either as an employee or as a subcontractor, and from directing you to hire an individual as an employee or as a subcontractor. Accordingly, you must follow your own hiring and contracting procedures, without being influenced by City employees. Any and all personnel provided by you under the grant agreement are employees or subcontractors of you, not employees of the City of Chicago. The grant agreement is not intended to and does not constitute, create, give rise to, or otherwise recognize an employer-employee relationship of any kind between the City and any personnel provided by you.
- c) You will not condition, base, or knowingly prejudice or affect any term or aspect of the employment of any personnel provided under the grant agreement, or offer employment to any individual to provide services under the grant agreement, based upon or because of any political reason or factor, including, without limitation, any individual's political affiliation, membership in a political organization or party, political support or activity, political financial contributions, promises of such political support, activity or financial contributions, or such individual's political sponsorship or recommendation. For purposes of the grant agreement, a political organization or party is an identifiable group or entity that has as its primary purpose the support of or opposition to candidates for elected public office. Individual political activities are the activities of individual persons in support

of or in opposition to political organizations or parties or candidates for elected public office.

- d) In the event of any communication to you by a City employee or City official in violation of paragraph (b) above or advocating a violation of paragraph (c) above, you will, as soon as is reasonably practicable, report such communication to the Hiring Oversight Section of the City's Office of the Inspector General ("IGO Hiring Oversight"), and also to the head of the Department. You will also cooperate with any inquiries by IGO Hiring Oversight related to this Agreement.

## **INSURANCE REQUIREMENTS**

Insurance requirements are applicable at the time of contract execution.

A) Required Insurance –The kinds and amounts of insurance required are as follows:

- 1) Workers Compensation and Employers Liability: Workers Compensation as prescribed by applicable law covering all employees who are to provide services under a grant agreement and Employers Liability coverage with limits of not less than \$100,000 each accident, illness, or disease.
- 2) Commercial General Liability (Primary and Umbrella): Commercial General Liability Insurance or equivalent with limits of not less than \$500,000 per occurrence for bodily injury, personal injury, and property damage liability. Coverage must include the following: all premises and operations, products/completed operations, separation of insureds, defense, and contractual liability (not to include Endorsement CG 21 39 or equivalent). The City is to be named as an additional insured on a primary, non-contributory basis for any liability arising directly or indirectly from the work or services.
- 3) Automobile Liability (Primary and Umbrella): When any motor vehicles (owned, non-owned and hired) are used in connection with work or services to be performed, Sub-grantee must provide Automobile Liability Insurance with limits of not less than \$300,000 per occurrence for bodily injury and property damage.
- 4) Professional Liability: When any professional consultants perform work or services in connection with a grant agreement, Professional Liability Insurance covering errors, omissions, or negligent acts, must be maintained with limits of not less than \$500,000. When policies are renewed or replaced, the policy retroactive date must coincide with, or precede start of work or services on a grant agreement. A claims-made policy which is not renewed or replaced must have an extended reporting period of 2 years.
- 5) Medical/Professional Liability: When any medical services are performed in connection with a grant agreement, Medical/Professional Liability Insurance must be provided to include coverage for errors, omissions and negligent acts related to the rendering or failure to render professional, medical or health services with limits of not less than \$1,000,000. When policies are renewed or replaced, the policy retroactive date must coincide with or precede the start of work or services on the grant agreement. A claims-made policy which is not renewed or replaced must have an extended reporting period of 2 years.
- 6) Builders Risk: When any Sub-grantee performs any construction, including improvement, betterments, and/or repairs, Sub-grantee must provide All Risk Builders Insurance to cover materials, supplies, equipment, machinery and fixtures that are part of the structure.

B) Related Requirements

- 1) If coverage has an expiration or renewal date occurring during the time for performance of the grant agreement, Sub-grantee must furnish renewal certificates to the Federal Funds Insurance Unit at the address listed in Section 2.5 of the grant agreement. The receipt of any certificate does not constitute agreement by the City that the insurance requirements in the grant agreement have been fully met or that the insurance policies indicated on the certificate follow all Agreement requirements. The failure of the City to obtain certificates or other insurance evidence from Sub-grantee is not a waiver by the City of any requirements for sub-grantee to obtain and maintain specified coverage. Sub-grantee must advise all insurers of

the grant agreement provisions regarding insurance. Non-conforming insurance does not relieve sub-grantee of your obligation to provide insurance as specified here. Nonfulfillment of the insurance conditions may constitute a violation of the grant agreement, and the City retains the right to stop work or services or terminate the grant agreement until proper evidence of insurance is provided.

- 2) The sub-grantee must provide for 30 days prior written notice to be given to the City in the event coverage is substantially changed, canceled or non-renewed.
  - 3) All deductibles or self-insured retentions on referenced insurance coverage must be borne by sub-grantee.
  - 4) Sub-grantee will waive and agree to require their insurers to waive their rights of subrogation against the City, its employees, elected officials, agents or representatives.
  - 5) The coverage and limit furnished by sub-grantee in no way limits sub-grantee's liabilities and responsibilities specified within the grant agreement or by law.
  - 6) Any insurance or self-insurance programs maintained by the City do not contribute to the insurance provided by sub-grantee under the grant agreement.
  - 7) The required insurance to be carried is not limited by any limitations expressed in the indemnification language in the grant agreement or any limitation placed on the indemnity in the grant agreement given as a matter of law.
  - 8) If sub-grantee is a joint venture or limited liability company, the insurance policies must name the joint venture or limited liability company as a named insured.
  - 9) Sub-grantee must require all subcontractors to provide the insurance required in the grant agreement or sub-grantee may provide the coverage for sub-contractors. All subcontractors are subject to the same insurance requirements of sub-grantee unless otherwise specified in the grant agreement.
  - 10) If sub-grantee or sub-contractors desire additional coverage, the party desiring additional coverage is responsible for the acquisition and cost of such additional protection.
  - 11) Notwithstanding any provisions in the grant agreement, the City maintains the right to modify, delete, alter, or change these requirements.
- C) If you need additional information related to insurance, please call the Department of Finance (Finance) at (312) 744-7923.

## **SECTION 3**

Section 3 is a provision of the Housing and Urban Development Act of 1968, as amended by the Housing and Community Development Act of 1992, with implementing regulations at 24 CFR Part 135. The legislation requires that employment, training and contracting opportunities generated by HUD financial assistance for housing and community development must, to the greatest extent feasible, be given to low- and very low-income persons, i.e., those under 80% of area median income (Section 3 residents). Section 3 applies to those projects (Section 3 projects) financed by the City in whole or in part with HUD funds and which involve housing construction, housing rehabilitation or other publicly funded construction. There are minimum dollar thresholds for determining whether a Section 3 project is subject to Section 3 requirements. In order to demonstrate compliance with Section 3, recipients, contractors and subcontractors must meet specific hiring and contracting goals. Under these goals, there are resident and business preferences that dictate the order in which Section 3 residents and businesses are to be hired.

### ***DOLLAR THRESHOLDS***

If a project receives more than \$200,000 in HUD assistance, the developer must comply with Section 3. All a developer's HUD-funded Section 3 projects with the City will be counted in determining whether the Section 3 threshold is met; if so, Section 3 applies to the Section 3 project causing the threshold to be exceeded and not to the earlier projects. In addition, if on the same Section 3 project there are contracts and subcontracts in excess of \$100,000, Section 3 applies to the contractor and those subcontractors. If the developer also acts as general contractor, the amount of assistance need only exceed \$100,000 for Section 3 to apply to the developer. If the dollar thresholds are met, Section 3 applies to the entire Section 3 project, regardless of whether the Section 3 project is fully or partially funded with HUD assistance.

### ***NUMERICAL GOALS***

Hiring: HUD has devised numerical standards for recipients of Section 3-covered housing and community development assistance, and for their contractors and subcontractors, to demonstrate compliance. For housing assistance, contractors and subcontractors can show compliance by committing to employ Section 3 residents as 10% of the total number of new hires needed to complete a project. For community development assistance, contractors and subcontractors must commit to employ Section 3 residents as 30% of the total number of new hires needed to complete the project. Recipients of the assistance have the responsibility of ensuring compliance in the operations of their contractors and subcontractors. These hiring goals also apply to entities that own or manage at least 500 units located in the Chicago metropolitan area that receive housing assistance from HUD.

Contracting: Numerical goals also exist for contracting activities. Section 3 business concerns must receive a minimum percentage (10% for building trades work; 3% for non-building trades such as architecture or engineering) or the total dollar amount of all contracts awarded in connection with Section 3 projects. A "Section 3 business concern" is defined as a business:

1. That is at least 51% owned by Section 3 residents;
2. Whose permanent, full-time employees include persons, at least 30% of whom are, or were within 3 years of the date of first employment with the business, Section 3 residents; or
3. That provides evidence of a commitment to subcontract more than 25% of the dollar amount of all subcontracts to be awarded to businesses that satisfy (1) or (2) above.

Training: Section 3 does not require recipients or contractors to create training programs. However, where training opportunities exist in connection with Section 3 projects, they must be in part directed to Section 3 residents.

***PREFERENCES***

Hiring: Hiring opportunities must be provided where feasible in the following order of priority:

1. Section 3 residents residing in the Section 3 project's service area;
2. Participants in HUD Youth-build programs; and
3. All other Section 3 residents

For Section 3 projects receiving assistance under the Stewart McKinney Homeless Assistance Act, homeless persons residing in the Section 3 project's service area must receive the highest priority.

Contracting: Contracting opportunities must be provided where feasible in the following order of priority:

1. Section 3 business concerns that provide economic opportunities for Section 3 residents in the Section 3 project's service areas;
2. Applicants selected to carry out HUD Youth-build programs; and
3. All other Section 3 business concerns.

## **SUB-RECIPIENT FINANCIAL ACCOUNTABILITY IN FEDERALLY FUNDED PROGRAMS**

CDBG sub-recipients/ “Delegate Agencies” are an indispensable part of the CDBG program. Delegate Agencies provide the City and HUD with assurances that the diverse communities, groups, and individuals whom the CDBG program is intended to serve are in fact reached by the program. HUD and the City count on sub-recipients to make sure that needed services are delivered in a cost-effective manner. In the past, some sub-recipients have encountered administrative problems in achieving their mission. The following are key regulations defining Federal administrative requirements for nonprofit sub-recipients:

In 2013, the Federal Office of Management and Budget (OMB) issued final guidance on administrative requirements, cost principles and audit requirements for federal awards (which includes research grant awards). This final guidance supersedes and streamlines requirements from OMB Circulars A-21, A-87, A-110 and A-122 (which have been placed in 2 CFR Parts 220, 225, 215 and 230): Circulars A-89, A-102 and A-133; and the guidance in Circular A-50 on Single Audit Act follow-up

Copies of the OMB Circulars that are superseded by this guidance are available on OMB’s Website at [https://www.whitehouse.gov/omb/grants\\_circulars](https://www.whitehouse.gov/omb/grants_circulars). The final guidance consolidates the guidance previously contained in the aforementioned citations into a streamlined format that aims to improve both the clarity and accessibility. This final guidance is in Title 2 of the Code of Federal Regulations.

The following is a more detailed explanation of audits that might be required in connection with Subpart F of 2 CFR Part 200, Sections 200.500 through 200.512.

If the sub-recipient is a nonprofit corporation and is expending federal funds totaling \$750,000 or more during its fiscal year, it must submit under Subpart F section 200.501 a single audit in accordance with section 200.514 or a program-specific audit in accordance with the provisions of Subpart F section 501c and 200.507.

If the sub-recipient is a nonprofit corporation and is expending federal funds under this and other agreements totaling less than \$750,000 during its fiscal year, then the sub-recipient, under Subpart F section 200.501 is exempt from federal audit requirements for that year, except as noted in section 200.503 Relation to other audit requirements. However, records must be available for review or audit by appropriate officials of the Federal agency, pass-through entity, and Government Accountability Office.

The audit must cover the time period specified by Subpart F section 200.507 for program-specific audits. In addition to the audit opinion, reports, and schedules required by, section 507 the program-specific audit shall include the following financial statements: (1) Statement of Financial Position (Balance Sheet) (if applicable) and (2) Statement of Activities (Revenue and Expenses). The City may perform, or cause to be performed, various monitoring procedures relating to the sub-recipient’s award(s) of federal funds, including, but not limited to, “limited scope audits” of specific compliance areas. The sub-recipients must submit the audit reports within 6 months after the end of the audit period. The sub-recipient will submit the audit, within this time frame, to their lead department and to Finance’s Internal Audit Division.

If a Single audit is required, the sub-recipient will also send a copy of the audit, within the time frame indicated in Subpart F section 200.512, to the Federal Audit Clearinghouse. Further, the sub-recipient must submit, with the audit, a report that comments on the findings and recommendations in the audit, including corrective action planned or taken. If no action is planned or taken, an explanation must be included. Copies of written communications on non-material compliance findings will be submitted to the sub-recipient’s lead department and Finance’s Internal Audit Division. The City also retains its right to independently audit the sub-recipient. If the sub-recipient is found in non-compliance with these audit

requirements, by either the City or any federal agency, the sub-recipient may be required to refund financial assistance received from the City or any federal agency or agencies.

The City may in its sole discretion audit the records of sub-recipients or its subcontractors, or both, at any time during the term of the grant agreement or within 5 years after the City, and, if applicable, the federal government determines that sub-recipients have met all closeout requirements for the grant agreement in connection with the goods, work, or services provided under the grant agreement. Each calendar year or partial calendar year is considered an “audited period.” If, as a result of such an audit, it is determined that the sub-recipient or any of its subcontractors has overcharged the City in the audited period, the City will notify sub-recipient. The sub-recipient must then promptly reimburse the City for any amounts the City has paid sub-recipient due to the overcharges and some or all the cost of the audit.