

# **NUTRITION OUTREACH AND EDUCATION PROGRAM**

## **Request for Proposals (RFP)**

**DATE ISSUED:** July 21, 2017

**LETTER OF INTENT TO APPLY DUE:** August 11, 2017

**BIDDERS' WEBINAR/CONFERENCE  
CALL:** August 17, 2017

**QUESTIONS DUE:** August 21, 2017

**QUESTIONS & ANSWERS POSTED:** August 28, 2017

**PROPOSAL DUE:** September 29, 2017

**SUBMIT TO:** Hunger Solutions New York, Inc.  
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Albany, NY 12205

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REQUEST FOR PROPOSALS

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## **NUTRITION OUTREACH AND EDUCATION PROGRAM (NOEP) REQUEST FOR PROPOSALS**

### **A. PURPOSE**

Through this Request for Proposals (RFP), Hunger Solutions New York, Inc. (Hunger Solutions New York) is seeking to enter into contracts with community-based 501(c)(3) organizations in order to operate the Nutrition Outreach and Education Program (NOEP) in service areas across New York State.

### **B. DESCRIPTION OF HUNGER SOLUTIONS NEW YORK, INC.**

Hunger Solutions New York is a statewide not-for-profit organization formed in 1985 to address the problem of hunger in New York State. The mission of Hunger Solutions New York is to alleviate hunger for all residents of New York State by expanding the availability of, access to, and use of government-funded nutrition assistance programs through outreach, education, and advocacy. Hunger Solutions New York accomplishes its mission through a variety of activities, including: researching issues pertaining to the problem of hunger; analyzing public policies to assess effectiveness with regard to alleviating hunger; advocating for effective programs and policies to serve people who are hungry; conducting outreach to maximize participation in federal nutrition assistance programs; establishing programs where needed but do not exist; and administering anti-hunger programs.

Hunger Solutions New York is the current statewide contractor for NOEP. Hunger Solutions New York was chosen through a competitive process for a five-year period which began July 1, 2015. Through NOEP, Hunger Solutions New York works under contract with the New York State Office of Temporary and Disability Assistance (OTDA). Hunger Solutions New York conducts statewide outreach, education, and advocacy for SNAP and Child Nutrition Programs such as the Summer Food Service Program, School Breakfast Program, and Child and Adult Care Food Program (CACFP). Hunger Solutions New York is also responsible for subcontracting with community-based organizations to operate NOEP projects that provide free and confidential services at the local level. Hunger Solutions New York provides training and technical assistance to the NOEP subcontractors, and monitors the implementation of their NOEP subcontracts.

### **C. THE NUTRITION OUTREACH AND EDUCATION PROGRAM**

New York State has long recognized that the use of federal nutrition assistance programs is critical to addressing the problem of hunger and that many of these programs are underutilized. As a result, the NOEP has operated in New York State since 1987. Through the NOEP, 501(c)(3) community-based organizations are funded to: promote the benefits of the Supplemental Nutrition Assistance Program (SNAP) to the local community; provide outreach to eligible, non-participants of SNAP; assist households through the SNAP application process; and help reduce or eliminate barriers to participation in SNAP. Additionally, NOEP projects promote awareness of and participation in child nutrition programs, including, but not limited to, the Summer Food Service Program (SFSP) and the School Breakfast Program (SBP).

In contract year 2017-2018 (July 1 – June 30), NOEP funding supports 20 subcontractors across all five boroughs in New York City and 32 subcontractors covering 51 counties throughout the rest of the state. The current distribution of NOEP funding is approximately one-third for NYC-based projects and two-thirds for projects in the rest of the state. Funding for the initial and any subsequent period is contingent on the continued availability of funding and satisfactory performance of the contractor.

The NOEP has two sources of funding: (1) New York State funds, and (2) matching most of the state dollars, federal SNAP outreach reimbursement funding [Catalog of Federal Domestic Assistance (CFDA) # 10.561, Supplemental Nutrition Assistance Program (SNAP)]. The state and federal reimbursement funding are used solely for SNAP outreach and application assistance. The small portion of state funds that is not federally matched may be used for certain other activities, including outreach for child nutrition programs. For a list of NOEP activities allowable with state and federal matching funds and a list of activities allowable with state-only funds, see *Appendix A*.

Organizations that receive NOEP funds are required to employ at least one, 100% NOEP-funded, full-time NOEP Coordinator who is solely devoted to performing NOEP-funded activities. Organizations outside of NYC that are funded to serve more than one county must employ at least one, 100% NOEP-funded, full-time NOEP Coordinator, solely devoted to providing all NOEP-funded activities, in each county served. Additionally, organizations outside of NYC serving more than one county must provide office space for the NOEP Coordinator in each county, and maintain a daily presence in each county.

Hunger Solutions New York works closely with each organization that receives a NOEP subcontract. It is very important that the NOEP Coordinator, who is solely devoted to performing NOEP-funded activities, be available and in continued contact directly with Hunger Solutions New York. Specifically, Hunger Solutions New York will assign each subcontractor a NOEP Contract Manager for program-related assistance, information and technical support. Also, a SNAP Technical Assistance Specialist is available to all subcontractors to assist with SNAP enrollment-related information. The NOEP Contract Manager and the SNAP Technical Assistance Specialist must have unrestricted communication with the NOEP Coordinator at all times.

Prior to distribution, all outreach materials for the NOEP must be submitted for approval through the *NOEP Outreach Approval Request* Process. It is required that the 100% NOEP-funded position will develop and submit outreach materials for approval directly to Hunger Solutions New York. The NOEP Contract Manager will provide technical assistance as needed for developing outreach and ultimately approve the outreach for distribution. In order to ensure timeliness, consistency, and meet NOEP outreach criteria, subcontractors may need to make an exception to their internal communications, outreach development, and approval processes.

All NOEP program and fiscal contract management is conducted through *NOEP Online*, a web-based contract management system. All subcontractors are required to have the capacity to enter and retrieve data via web-based portal on a daily basis. NOEP Online training will be provided to subcontractor program and fiscal staff via live webinar and web-based online training modules presented by Hunger Solutions New York.

#### **D. AGENCY ELIGIBILITY**

Pursuant to Article 8-A of NYS Social Services Law, NOEP funds are to be awarded to community-based organizations. To be eligible to participate in the process, an agency must be a 501(c)(3), tax-exempt organization incorporated for a purpose sufficiently broad enough to include providing services or other assistance to economically or socially disadvantaged persons.

#### **E. OPEN COMPETITIVE PROCESS**

This is a statewide, open, competitive process. All interested, eligible agencies are encouraged to apply. Prior receipt of a NOEP contract does not guarantee nor prohibit an award under this RFP. Each proposal will be reviewed and scored based on its own merit and contracts will be awarded in accordance with the award determination criteria as detailed in Section P of this RFP.

#### **F. PROJECT REQUIREMENTS**

All funded projects must meet each of the requirements listed in *Appendix B*. Submitting an application in response to this RFP attests that the bidding agency will adhere to all requirements for the duration of the contract. Failure to adhere to these requirements may result in contract termination.

#### **G. NOEP ACTIVITY GOALS**

Under the contract with OTDA, Hunger Solutions New York is committed to achieving annual statewide goals including numerical targets. Each organization awarded a contract through this RFP process will be required to commit to annual numerical targets for each service area. These numerical targets are subject to change annually.

You will be assigned numerical targets for the following NOEP goals:

## **Nutrition Outreach and Education Program Statewide Activity Goals:**

- Promote a positive perception of the Supplemental Nutrition Assistance Program (SNAP) and disseminate SNAP eligibility information to potentially eligible individuals through statewide outreach campaigns conducted at the local level by the NOEP subcontractors;
- Provide SNAP information directly to at least **a minimum number of** individuals who may qualify for benefits;
- Provide SNAP prescreening services, application assistance, and referrals to SNAP and other government nutrition assistance programs to **a minimum number of** households;
- Assist **a minimum number of** households to complete the application process and receive SNAP benefits;
- Provide direct assistance to enable at least **a minimum number of** households to continue to receive SNAP benefits;
- Educate **a minimum number of** local agencies, including departments of local government and/or community organizations, about the benefits of collaboration with the NOEP;
- Reduce or resolve at least **a minimum number of** local, systemic barriers to SNAP;
- Reduce or resolve at least **one or more** statewide SNAP barriers;
- Expand participation in the Summer Food Service Program (SFSP) by increasing the number of SFSP sites across the state and increasing awareness about the SFSP via statewide outreach campaign;
- Expand participation in the School Breakfast Program (SBP) by increasing awareness about the SBP via statewide outreach campaign; and
- Display and/or distribute materials developed by OTDA related to [myBenefits.ny.gov](https://myBenefits.ny.gov) to program participants.

## **H. PROJECT SCOPE, GEOGRAPHIC AREA, AND SPECIFIC TARGET POPULATIONS**

All proposals must be for projects to be conducted at the local level. Statewide activities are not fundable through this RFP.

**For New York City (NYC):** an eligible geographic area is all of NYC (i.e. all five boroughs) or only a part of NYC (i.e. one or more boroughs or specific areas or neighborhoods within one or more boroughs). In addition, a NYC bidder may choose to target a specific population, e.g., immigrants, homeless, persons with disabilities, etc., within all of NYC or only a part of NYC. Each NYC project must have office space and conduct outreach in their proposed service area. All NYC projects must serve any resident of the five boroughs. It is anticipated that several awards will be made to serve the various geographic areas and/or specific target populations of NYC.

**For all counties outside of NYC:** an eligible geographic area is defined as an entire county. It is required that the agency ensure service to the entire county and serve any resident within the county regardless of targeted populations. Currently, five is the largest number of counties served under a single contract. Hunger Solutions New York invites proposals that serve multiple counties within a bidder's established regional service area. The bidder must have office space that meets the specifications listed in *Appendix B* in each county it proposes to serve.

**For all Projects:** Hunger Solutions New York reserves the right to: award a contract to serve all, or only a specific part, of an organization's proposed geographic service area(s); and add an unserved county to a contract in the event that no applications are submitted for a certain county or in the unforeseen event that a contractor is no longer able to serve a certain county. Outside of New York City, generally only one contract will be awarded per county (service area). Hunger Solutions New York reserves the right to enter into a contract to fund more than one NOEP Coordinator position in a service area if there is a very high need or a high concentration of a specific target population(s), or at its sole discretion.

## **I. DURATION OF CONTRACT PERIOD AND EXPECTED FUNDING LEVELS**

As a result of this RFP, awards will be issued for a four-year cycle (July 1, 2018 – June 30, 2022). Within this four-year cycle, and subject to the availability of a combination of state and federal funds, annual contracts will be awarded to begin July 1, 2018 with the potential for negotiated target and budget renewals for up to three additional years.

The annual funding level for projects providing services in New York City and Long Island is expected to be approximately \$75,000. The annual funding level for services in a county in the rest of the state is expected to be approximately \$65,000. For organizations outside of New York City proposing to serve more than one county, the annual funding level is expected to be approximately \$55,000 for each additional county to be served.

## **J. LETTER OF INTENT TO SUBMIT A PROPOSAL**

A letter of intent to submit a proposal in response to this RFP should be e-mailed, to the attention of William Heptig, Strategic Projects Manager, and received by Hunger Solutions New York no later than **5:00 pm on Friday, August 11, 2017**. The letter of intent should be on the organization's letterhead and include organization name, physical address, name of Executive Director, and a brief statement of intent to apply for this RFP. Failure to submit a letter of intent by the due date does not prohibit a bidder from submitting a proposal in response to this RFP.

William Heptig  
Strategic Projects Manager  
Hunger Solutions New York  
[William.Heptig@HungerSolutionsNY.org](mailto:William.Heptig@HungerSolutionsNY.org)

## **K. ASKING QUESTIONS ABOUT THIS RFP**

All potential bidders will be allowed to ask Hunger Solutions New York questions about this RFP. In an effort to be fair and to provide all bidders access to the same information, the process for asking questions and posting responses will be as follows:

1. A webinar will be held on **Thursday, August 17, 2017 at 1:00 pm** for all interested bidders. Bidders that do not have webinar capability can join the discussion via conference call. Participation in this webinar/conference call is not required. To register for this webinar/conference call please follow this link: <https://attendee.gotowebinar.com/register/4399697262181151235>. The invitation will provide directions for both webinar and conference call participation.
2. Bidders are encouraged to submit questions prior to the webinar on **August 11, 2017** described previously. Questions may be submitted by e-mail or fax to Hunger Solutions New York. Questions submitted prior to the webinar will be addressed during the webinar. However, questions that are received after the webinar but before **5:00 pm on Monday, August 21**, will be addressed and the answers uploaded to [www.NOEPrfp.org](http://www.NOEPrfp.org).

Questions about the RFP may be asked during the webinar/conference call. Questions may not be conveyed by phone at any other time. Although responses to questions will be provided during the webinar/conference call, bidders are advised that the official answers to questions will be provided in writing and posted on the Hunger Solutions New York website at [www.NOEPrfp.org](http://www.NOEPrfp.org) as specified in Section L of this RFP.

Send questions to:

William Heptig  
Strategic Projects Manager  
Hunger Solutions New York  
[William.Heptig@HungerSolutionsNY.org](mailto:William.Heptig@HungerSolutionsNY.org)  
Fax: (518) 458-6068  
Subject Line: NOEP RFP Q&A

## **L. ANSWERS TO QUESTIONS**

Hunger Solutions New York will post by Monday, August 28, 2017 on the Hunger Solutions New York website at [www.NOEPrfp.org](http://www.NOEPrfp.org) the official answers to all questions received by the aforementioned deadline. Answers to all questions answered on the webinar will be included in this posting.

## **M. SUBMITTING A PROPOSAL FOR FUNDING**

To receive funds through this RFP, each bidder must submit a complete Proposal Package which shall include:

- One original plus 5 copies (total of 6) of the **Proposal Coversheet & Proposal Checklist** (See Appendices C & D);
- One original plus 5 copies (total of 6) of the **Nutrition Outreach and Education Program Proposal Form** (See Appendix E); and
- One copy of each of the Required Attachments (See Section N of this RFP).

Responses to the Proposal Form questions (*Appendix E*) should be entered onto the form per the instructions provided. Bidders should download the **NOEP RFP Application Form** from the Hunger Solutions New York website at [www.NOEPrfp.org](http://www.NOEPrfp.org). Bidders must abide by the per-section page limits provided on the Proposal Form. All responses must be single-spaced and provided in a font size of 12, with one-inch margins. The completed Proposal Form must not exceed 12 pages for single-county or NYC proposals. For multi-county proposals outside of NYC, a completed Proposal Form for one county must not exceed 12 pages; each additional county proposed in the application will require up to nine (9) separate pages per additional county for Sections B, C, & D as explained in the *Appendix E: Proposal Form*.

## **N. REQUIRED ATTACHMENTS**

One (1) copy (*unless specified*) of each of the following must be included with your Proposal Package:

1. A copy of the IRS letter that grants 501(c)(3) status to the organization
2. A list of the organization's current board members
3. A completed Contractor Information Form (see Appendix F)
4. Two (2) copies of the organization's most recently completed fiscal audit, including audited financial statements and the A-133 audit report, if applicable

## **O. PROPOSAL DUE DATE**

Completed proposal packages must be received at the Hunger Solutions New York offices by **5:00 p.m. on Friday, September 29, 2017**. No faxed or e-mailed proposal packages will be accepted. Proposal packages should be mailed or hand-delivered to:

**NOEP Allocations Committee  
Hunger Solutions New York, Inc.  
14 Computer Dr. East, 2<sup>nd</sup> Floor  
Albany, NY 12205**

Hunger Solutions New York is not responsible for lost or late deliveries. It is the responsibility of the bidder to ensure the proposal is received by Hunger Solutions New York on time. Hunger Solutions New York will provide email notification of receipt of your RFP to the contact provided on the *Proposal Cover Sheet, Appendix C*.

## **P. PROPOSAL PRESCREENING**

Hunger Solutions New York staff will prescreen all proposals for completeness (as defined in Section M & N of this RFP) and eligibility [501(c)(3) status]. Failure to include all required information and documents may result in the deduction of points in the scoring or in the rejection of the proposal. Although some priority will be given to areas of highest need in NYS, it is clear that every area of NYS has a need for NOEP services. Proposals to serve designated high-need areas, as well as areas designated as lower-need, are encouraged.

In order to meet the statutory requirement that NOEP serve high-need areas, “high need” points will be determined for each county in the state. In accordance with legislative direction, the most recently available data for each criterion listed below are analyzed to determine high need. During the proposal prescreening process, the high need points assigned to each county will be applied to all proposals to serve that county. The high-need criteria are:

- Fifty percent or more of those potentially eligible are not participating in SNAP;
- Twenty-five percent or more of children are eligible for free or reduced-price meals within the school lunch program;
- Infant mortality or morbidity rates;
- Economic indicators including, but not limited to, the unemployment rate, prevailing wages, and recent loss of job base;
- High concentration of at-risk populations; and
- Unavailability of food assistance programs in the area because of lack of provider participation or knowledge about the existence of such programs.

## **Q. SCORING**

Up to 100 points will be awarded for each proposal scored in response to this RFP. The scores to be awarded for each section are noted on the Proposal Form (See Appendix E). In addition, each county's high need points, as described in Section P of this RFP, will be assigned to each proposal to serve that county.

Multi-county proposals will receive a separate score for each county in the proposal. A bidder submitting a proposal for multiple counties may be awarded a contract for fewer than all the counties proposed.

## **R. REFERENCE CHECKS**

Fiscal and program performance reference checks will be conducted for agencies under consideration for a contract.

## **S. AWARD DETERMINATIONS**

Award determinations will be based on:

- The proposal's score, including high need points assigned based on county need;
- Geographic distribution of projects among New York City, and metropolitan and rural areas in the rest of the state; and
- Reference checks.

## **T. TERMS AND CONDITIONS GOVERNING THIS RFP.**

Hunger Solutions New York reserves the right to accept or reject any or all proposals that do not completely conform to the instructions given in this RFP. Hunger Solutions New York reserves the right to amend, modify or withdraw this RFP. Hunger Solutions New York reserves the right to negotiate with successful bidders in order to modify, add, delete, accept and approve the bidder's terms. Hunger Solutions New York reserves the right to request and consider additional information from any bidder beyond that presented in the initial proposal. Hunger Solutions New York reserves the right to contract with any applicant during the contract cycle as funds become available. This RFP does not commit Hunger Solutions New York, Inc. to award any contracts, to pay the costs incurred in the preparation of a response to the RFP, or to procure or contract for services. The award of a contract, if any, may be made in reliance on additional information requested.

## APPENDIX A

### ACTIVITIES ALLOWABLE

#### Using **FEDERAL/STATE** SNAP Outreach Funds

(These activities correspond to the “SNAP \$” Column of the *NOEP Online* Budget Form)

Federal/State SNAP Outreach Funds allow for the execution of the activities listed below. Hunger Solutions New York will not provide Nutrition Outreach and Education Program agencies with reimbursement for any costs for activities that do not appear on this list, unless special permission has been granted by Hunger Solutions New York.

- Placing SNAP literature in soup kitchens, food pantries, shelters and other community locations.
- Outreach workers may be present during the certification interview to provide support or help to explain complicated terms.
- Staffing booths at fairs or other places to provide SNAP information or to answer SNAP questions.
- Visiting senior centers, WIC clinics, union halls, etc. to explain SNAP rules.
- Conducting SNAP workshops for members of community organizations.
- Visiting homes in impoverished neighborhoods and places where homeless or other low-income persons are known to gather, to provide SNAP information.
- Prescreening individuals for potential SNAP eligibility.
- Helping people fill out the SNAP application and obtain verification information, including providing translation services as necessary.
- Informing and educating the general public about SNAP and outreach services in local newspapers, newsletters, etc.
- Developing, producing, and distributing SNAP posters, brochures, and other written materials.
- Document and communicate local issues affecting SNAP program access and outreach outcomes.
- Meeting with local social services staff to discuss SNAP outreach activities and their impact on SNAP participation.
- Meeting with local social services staff to discuss barriers to participation in SNAP.
- Accompanying applicants to SNAP office to assist with the application process, including providing translation services as necessary.
- Attending Hunger Solutions New York-sponsored meetings.

## **ACTIVITIES ALLOWABLE for Child Nutrition and/or SNAP using STATE-ONLY funds**

(These activities correspond to the “Child Nutrition and/or SNAP \$” Column of the *NOEP Online* Budget Form)

State-only funds allow for the execution of the activities listed below. However, Nutrition Outreach and Education Program agencies/subcontractors should keep in mind that State-only funds represent only a very small portion (~2.5%) of NOEP funding. Hunger Solutions New York will not provide reimbursement for any activities that do not appear on this list, unless special permission has been granted by Hunger Solutions New York.

- All activities allowed under Appendix B.
- Providing transportation services to SNAP certification and issuance offices.
- Distribution of information that informs people about other federal nutrition assistance programs, such as the: School Breakfast Program (SBP), National School Lunch Program (NSLP), Summer Food Service Program (SFSP), Special Supplemental Nutrition Program for Women, Infants and Children (WIC), and the Child and Adult Care Food Program (CACFP), etc.
- Discussions with school board members, administrators and faculty to implement a SBP, SFSP, or other federal nutrition assistance program.
- Discussions with eligible sponsors to encourage them to operate a SFSP.
- Assisting potential SFSP sponsors to complete the application and develop a plan for implementation of the program.
- Organizing parent and community groups in support of implementing a SBP or SFSP.
- Distributing literature about the SBP or SFSP through various locations in the community.
- Staffing booths at fairs, etc. to provide information and answer questions about the SBP or SFSP.
- Conducting SBP or SFSP workshops.
- Informing and educating people about the SBP or SFSP in local newspapers, newsletters and other logical locations.
- Producing/distributing SBP or SFSP posters/brochures.
- Producing SBP or SFSP radio and TV spots to be used as PSAs or paid ads.

## **ACTIVITIES NOT ALLOWED with ANY NOEP Funding Source (STATE AND FEDERAL DOLLARS)**

Hunger Solutions New York will not reimburse Nutrition Outreach and Education Program agencies/subcontractors for any of the activities appearing on the list below. NOTE: This list is not all-inclusive, and agencies should contact Hunger Solutions New York for guidance on any activities not specifically authorized on these pages.

- ❑ Using TV, radio, or billboards, in any way, to inform or educate people about SNAP.
- ❑ Acting as an authorized representative for applying and/or receiving SNAP benefits at issuance, or food purchasing.
- ❑ Interfering during the certification interview or at other times to campaign on behalf of specific applicants or recipients.
- ❑ Recruiting individuals to participate in SNAP. Recruitment activities are those activities designed to persuade an individual who has made an informed choice not to apply for SNAP to change his/her decision.
- ❑ Lobbying to influence local, state or federal legislation.
- ❑ Serving as a member of a not-for-profit Board of Directors or Trade Association.
- ❑ Conducting activities that are not included in the Campaign Schedule without advance written approval of Hunger Solutions New York.
- ❑ Assisting in the processing and reviewing of applications to determine eligibility for SNAP and/or the benefit levels individuals will receive as distinct from prescreening and determining potential eligibility and assisting in the preparation of an application.
- ❑ Statewide activities.
- ❑ Distribution of information on a food program that urges citizens or elected officials to vote in a certain way. (Grass roots lobbying)
- ❑ Assisting in the actual operation of a government nutrition assistance program.
- ❑ Distributing outreach materials that specifically refer to an elected public official.

## **APPENDIX B REQUIREMENTS FOR ALL NOEP PROJECTS**

Hunger Solutions New York has established the following requirements (based upon federal, state, and/or Hunger Solutions New York policies) that all funded projects must meet. Failure to do so, throughout the contract term, may result in delay, corrective actions, or contract termination.

1. Sign a contract with Hunger Solutions New York within 30 days of its receipt.
2. Hire qualified staff within 30 days of the start date of the contract.
3. Hire at least one full-time person, solely devoted to providing all NOEP-funded activities, in each service area.
4. Meet all approved numerical targets.
5. Submit completed program reports and other required documents by due dates and on the forms and in the manner prescribed by Hunger Solutions New York.
6. Submit completed fiscal reports with the required documentation by due dates and on the forms and in the manner prescribed by Hunger Solutions New York.
7. Spend down all grant funds by June 30<sup>th</sup>.
8. Ensure that NOEP funds are not comingled with any other funds from other sources, including other nutrition program or outreach funds. Subcontractors are encouraged to identify in-kind funds in their contracts.
9. An organization which has other SNAP outreach, client assistance, and/or application assistance funding must ensure to the satisfaction of Hunger Solutions New York that the programs are managed and reported separately.
10. All NOEP subcontractors are required to submit annual audits of their financial statements by an independent auditor. Additionally, all subcontractors must adhere to OMB Uniform Guidance requirements. NOEP can be charged its proportional share of the costs of the audits.
11. Ensure all staff working on NOEP (program and fiscal) has regular, consistent internet access.
12. Provide staff funded full-time by NOEP with a cell phone, portable scanner, portable printer, laptop, and other equipment as needed. The laptop must meet the specifications listed below.
  - a. Capable of accessing wireless networks (WLAN 802.11 b/g/n card) and Ethernet (10/100 wired connection)
  - b. Microsoft Office 2007 or newer
  - c. Webcam (built-in or connected through an available USB port)
  - d. Capable of running Internet Explorer 9, Google Chrome, Firefox v. 17, or Safari 6(NOTE: Staff must have the necessary computer access and skills to utilize program resources and satisfy web-based reporting requirements).

13. Maintain a daily presence and a handicapped accessible office in each service area where clients can meet with the NOEP Coordinator(s) face-to-face for confidential prescreening and application assistance.
14. Ensure all 100% NOEP-funded staff have unrestricted communication with their Hunger Solutions New York NOEP Contract Manager and the SNAP Technical Assistance Specialist.
15. Within 7 calendar days of a vacancy in the full-time NOEP Coordinator position, the organization must provide the NOEP Contract Manager with a plan to cover the position's responsibilities until the vacancy is filled, including the recruiting and selection time frame. If there is a vacancy in the 100% NOEP funded position, part time coverage is required up to the first 30 days of the vacancy. After 30 days, a full time temporary coverage is required until the new 100% NOEP funded position is hired and working. All requirements of the project must be satisfied, even if there is a vacancy in the 100% NOEP funded position.
16. The NOEP Coordinator(s) will work with all clients from all backgrounds, including cultural and language differences and physical abilities.
17. Attend at least two statewide NOEP meetings annually in Albany, all appropriate regional meetings, and all required trainings sponsored by Hunger Solutions New York (project supervisors will be required to attend *NOEP Supervisory Training* via webinar).
18. Provide outreach and direct client services in all of the predominant languages in the service area(s). When submitting outreach materials to Hunger Solutions New York for approval, an English translation must accompany the non-English outreach material.
19. Have all materials produced through these funds approved by Hunger Solutions New York prior to production.
20. In order to ensure timeliness, consistency, and meet NOEP outreach criteria, subcontractors will need to make an exception to their internal communications/outreach development and approval process for NOEP.
21. Include a statement of credit for funding on all materials developed/produced by the project. The statement will be provided by Hunger Solutions New York.
22. Comply with USDA Civil Rights Guidelines, including attending SNAP Civil Rights training, as necessary, posting required postings such as *Justice for All* and *Right to File* posters and placing a non-discrimination statement on all materials developed/produced by the project.
23. Comply with federal drug-free work place rules.
24. Comply with federal requirements regarding environmental tobacco smoke.
25. Comply with federal requirements concerning disclosure of lobbying activities.

**APPENDIX C**

**NUTRITION OUTREACH AND EDUCATION PROGRAM**  
**PROPOSAL COVERSHEET**

**FOR OFFICE USE ONLY**

**DATE RECEIVED:** \_\_\_\_\_ **PROPOSAL NUMBER:** \_\_\_\_\_

**RECEIVED BY:** \_\_\_\_\_ **AREA:** \_\_\_\_\_

**MISSING INFO:** \_\_\_\_\_

**AGENCY/ORGANIZATION:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **FEDERAL TAX ID #:** \_\_\_\_\_

**AGENCY PHONE NUMBER:** \_\_\_\_\_ **AGENCY FAX:** \_\_\_\_\_

**PERSON TO CONTACT REGARDING PROPOSAL:** \_\_\_\_\_

**E-MAIL OF PROPOSAL CONTACT PERSON:** \_\_\_\_\_

**EXECUTIVE DIRECTOR:** \_\_\_\_\_

**FISCAL DIRECTOR:** \_\_\_\_\_

**ORGANIZATION'S WEBSITE:** \_\_\_\_\_

**TOTAL BUDGET REQUEST:** \_\_\_\_\_

**ATTACHED AUDIT DATE:** \_\_\_\_\_

**A – 133 AUDIT: YES / NO** (please circle one)

**PROPOSED GEOGRAPHIC AREA(S):** \_\_\_\_\_

*(Your proposed geographic area can be a single county, multiple counties, all of New York City, select New York City Borough(s), or distinct areas in New York City)*

**TARGET POPULATION(S):** \_\_\_\_\_

Provide the names and contact information of all current funding sources in the amount of \$65,000.00 or more. Attach a separate sheet of paper if necessary. (NOTE: These organizations may be contacted as a reference regarding your organization's fiscal and program performance.) \_\_\_\_\_

I, the undersigned, certify that the information provided in this document is, to the best of my knowledge, true and correct.

**SIGNATURE OF EXECUTIVE DIRECTOR:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

## APPENDIX D

### PROPOSAL CHECKLIST

#### Completed Proposal Checklist to be Included with Application Package

(PLEASE DO NOT SUBMIT BINDERS, ALL COPIES SHOULD BE STAPLED AND IN THE ORDER LISTED BELOW;  
FAILURE TO SUBMIT IN ORDER MAY RESULT IN A DEDUCTION OF POINTS)

- PROPOSAL COVERSHEET & CHECKLIST (Original + 5 copies)
- PROPOSAL FORM (Original + 5 copies)

**REQUIRED ATTACHMENTS** (1 Copy (*unless specified*) with Original Cover Sheet and Proposal)

- IRS letter granting 501(c)(3) status
- List of Board Members
- Contractor Information Form
- Two (2) copies of most recently completed fiscal audit, including the A-133 report (if applicable)

Attached Audit Date: \_\_\_\_\_

A - 133 Audit: YES  NO

\*Please be sure to include all items requested on the proposal checklist. Failure to include all required information and documents may result in the rejection of the proposal or deduction of points in the scoring.

**APPENDIX E**

**NUTRITION OUTREACH AND EDUCATION PROGRAM  
FOR CONTRACT CYCLE 2018-2022**

**PROPOSAL FORM**

ORGANIZATION NAME: \_\_\_\_\_

ORGANIZATION'S MISSION STATEMENT:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROPOSED GEOGRAPHIC AREA(S):

\_\_\_\_\_  
\_\_\_\_\_

(Your proposed geographic area can be a single county, multiple counties, all of New York City, select New York City borough(s), or distinct areas in New York City)

**\*All responses must be single-spaced and provided in a font size of 12, with one-inch margins**

**A. Organizational Overview and Capacity (two pages maximum) – 15 points:**

1. Provide a brief overview of your organization, including its mission and history and how those relate to serving low-income individuals. Provide descriptions of the population(s) you serve and the programs and services you provide. (3 pts.)
2. How does your organization keep abreast of the target populations in your community and their changing needs? (3 pts.)
3. What do you do to let the community and potential clients know about your services? (3 pts.)
4. How does your organization define and evaluate success for clients? How do you track clients and obtain follow-up information on their progress? (3 pts.)
5. Describe your organization's experience operating contracts in which you are required to achieve numerical targets. Give an example of such a contract, specifically stating your organization's target number(s) and number(s) achieved for each target. (3 pts.)

**Instructions for responses to Sections B, C, & D.**

*For Single County & NYC-based applicants: please respond to each question only once and ensure that your responses cover the entire proposed service area.*

*For all Multi-County applicants outside of NYC: for each section (B, C, & D) please respond with a separate, complete set of responses for each of the counties you are proposing to serve.*

**B. Relevant Knowledge and Experience (three pages maximum) – 20 points:**

1. Describe your organization's experience with determining whether households may be eligible for state or federal assistance programs. (3 pts.)
2. Explain how you provide services (information, education, programs) about the importance of healthy eating to your clients. (2 pts.)
3. Describe what your organization currently does to help eligible households access SNAP in the proposed service area. If you are a current NOEP subcontractor, please include information about your efforts in addition to NOEP that help eligible households to access SNAP benefits. (3 pts.)
4. Describe the underserved populations in the proposed service area that do not currently participate in SNAP and explain why you believe these populations are underserved. (4 pts.)
5. Describe the collaborative relationships your organization has for information-sharing and service coordination with the other agencies, groups or individuals in your locality.  
If there are other SNAP outreach and/or application assistance providers in your service area(s), describe how your organization communicates, contracts, and/or collaborates with them. (4 pts.)
6. Describe how the NOEP Coordinator will establish and/or maintain a working relationship with the LDSS/HRA Center(s). If possible, attach a letter of support from the LDSS/HRA Center, describing how the LDSS/HRA Center(s) will support your NOEP effort.  
*For multi-county applicants: please attach a letter of support for each county you propose to serve.* (4 pts.)

**C. NOEP Operating Plan (four pages maximum) -- 30 points:**

1. List the supervisory and administrative staff responsible for carrying out your NOEP contract. Attach a copy of the proposed organizational chart. (3 pts.)
2. Identify the most important skills and qualities of the person(s) you will assign to the 100% NOEP-funded position(s), and explain why these skills and qualities are necessary to successfully carrying out NOEP work. (4 pts.)
3. State how the supervisor will ensure that HSNYs staff, including the assigned NOEP Contract Manager and SNAP Technical Assistance Specialist, will have open communication and full access to the NOEP Coordinator(s) to assess the progress of the contract, provide guidance, and review reports. (2 pts.)
4. Describe how the NOEP Coordinator will maintain a daily physical presence and appropriate office space in the service area. (3 pts.)
5. What target population(s) do you propose to serve through the NOEP (e.g., all low-income households, seniors, working poor, disabled, homeless, non-English speaking households, etc.)? Why have you chosen the population(s)? Why do you believe your organization is well qualified to provide NOEP services to the population(s)? (4 pts.)
6. Tell us how your NOEP effort will establish and maintain an effective referral system to and from your organization and other collaborators. (2 pts.)
7. How will your organization ensure that NOEP services are known in all parts of the service area? (3 pts.)
8. How will your NOEP Coordinator provide direct service, including the determination of SNAP eligibility and the provision of application assistance, to residents of the entire geographic area(s)? (2 pts.)

9. How will your organization ensure NOEP services to clients who have transportation and/or accessibility limitations? (2 pts.)
10. How will translation services be made available to assist clients who speak a foreign language, including a language other than the NOEP Coordinator's? (2 pts.)
11. Describe your organization's ability to operate the program and provide client assistance in the event of a vacancy in the 100% NOEP-funded position. What is the expected timeline for filling a vacancy, and how will your organization provide coverage and operate NOEP during the interim? (3 pts.)

**D. Scenarios (two pages maximum) – 15 points:**

1. How would you implement a nutrition assistance outreach program targeting seniors in your service area? What means would you employ to identify members of the target group? How would you reach them? (5 pts.)
2. An immigrant family of four walks into your office, and with their limited English speaking skills, indicates they have no food in the house and no means to purchase any. Explain what you would do for them and why. (5 pts.)
3. Your agency has helped a family apply for SNAP, but the local DSS/HRA Center has rejected the application. Your NOEP coordinator believes the application was proper and that it should have been approved. What happens next? (5 pts.)

**E. Fiscal and Budget (one page maximum) – 20 points:**

1. Describe your organization's experience with reimbursement-based vouchering. (4 pts.)
2. Discuss your organization's ability, if necessary, to operate the program during a delay in availability of reimbursement. (4 pts.)
3. On the budget form provided, develop your proposed, all-inclusive budget for implementing your NOEP project. Be sure to include any in-kind costs that will be covered by your organization. On a separate sheet, provide a budget narrative explaining how you will spend the money allocated to each budget line. For each shared cost (only a portion of the cost is charged to NOEP) describe the method used to calculate the cost share for NOEP. (12 pts.)

*The budget form and narrative are not included in the page maximum for this section*

**PROPOSED BUDGET FORM**

The budget must be inclusive of all costs for a one-year period. For details on the allowable costs within the categories, see the descriptions provided.

*Note that the page limit does not apply to the following budget form and corresponding budget narrative.*

BUDGET ITEM			REQUESTED AMOUNT IN WHOLE DOLLARS  (A)	IN-KIND IN WHOLE DOLLARS  (B)	TOTAL COST IN WHOLE DOLLARS  (A + B)
<b>PERSONNEL COSTS</b> Salary for at least one full-time employee and portion of project supervisor's salary devoted to NOEP services.					
<b>FRINGE BENEFITS</b>					
<b>TRAVEL</b> includes travel necessary to implement project, including cost for each 100% NOEP-funded staff member to attend two, three-day meetings in Albany.					
<b>COMMUNICATIONS</b> local and long distance charges, cell phone and internet; no installation charges.					
<b>MATERIALS/SUPPLIES</b> needed to implement project; equipment with a unit cost not greater than \$499. <hr/> <b>PORTABLE COMPUTER</b> purchase cost of one portable computer for each 100% NOEP-funded staff member - must meet defined specifications, <i>see Appendix B.</i>					
<b>PRINTING</b> in-house and other administrative printing/copying costs					
<b>OUTREACH</b> for all eligible types of outreach materials and activities					
<b>POSTAGE</b> for mailing costs necessary to implement project activities					
<b>OVERHEAD (limited to 15%)</b> project overhead, including either federally-approved indirect rate or itemized salaries/fringe of fiscal & other support staff, space costs, audit costs, etc.					
<b>TOTAL</b>					

## APPENDIX F

### CONTRACTOR INFORMATION

1. Incorporated Agency Name:

2. Street Address:

City, State, Zip Code:

County:

3. Vouchering Mailing Address:

City, State, Zip Code:

County:

4. Agency & Program Contact:

Title:

Phone #:

Fax #:

Email Address:

Mailing Address:

Fiscal Contact:

Title:

Phone #:

Fax #:

Email Address:

Mailing Address:

5. Federal Employer Identification #:

State Registered Charitable Organization #:

Municipality # (if applicable):

**Optional:**

Community District(s):

Federal Congressional District(s):

State Senate District(s):

State Assembly District(s):

6. Organization Information

For statistical purposes, indicate yes or no for *each* of the following items as it relates to your organization. See the instructions for definitions. LEAVE NO BLANKS.

Non-Profit Organization	Yes	No	Women-Owned Business	Yes	No
Minority Business	Yes	No	Municipality	Yes	No
Small Business	Yes	No			

7. Non-Discrimination/Sectarian Organization Compliance Justification

	Yes	No
a. According to your Certificate of Incorporation, are your organization’s purposes sectarian? (For example, are you a corporation organized under the religious corporation law or a corporation that has a corporate purpose to serve a particular religious group or promoting the doctrine of a particular religion in general?)		
b. Are any of the proposed services in your project sectarian in nature?		
c. Does your organization have as its goal the furthering of any sectarian purpose?		
d. Are the services to be provided by sectarian staff?		
e. Are services being delivered in a building owned by a sectarian organization?		
If no, proceed to letter (f.). If yes, are services educational in nature?		
f. Will the proposed services be provided on the basis of race, religion, color or national origin?		
g. If the contract is with a sectarian organization, is the amount and comprehensiveness of the surveillance necessary to insure the contract does not foster or inhibit religion greater than the contract necessary to administer a similar contract with a non-sectarian agency?		

**If any of the above answers is yes, please justify the recommendation for funding below:**

8. List of Authorized Signatories

List all individuals who are authorized by the Board of Directors to sign this contract and related documents on behalf of the organization. *Should any individual be added to or removed from the list, inform Hunger Solutions New York in writing immediately.*

Name _____ (Printed)	Title _____
<b>Signature</b> _____	
Restrictions _____	
Name _____ (Printed)	Title _____
<b>Signature</b> _____	
Restrictions _____	
Name _____ (Printed)	Title _____
<b>Signature</b> _____	
Restrictions _____	

The individuals listed above are authorized to sign on behalf of the subcontractor in all matters regarding the Agreement with Hunger Solutions New York except where restrictions are shown. The recipient certifies that to the best of his/her knowledge and belief the information in the proposal/contract is true and correct. The recipient certifies that he/she has reviewed the proposal/contract, understands the terms, and agrees to be bound by the same.

---

(Signature of Official Authorized to Sign for Applicant)                      (Printed Name)                      (Date)