

REQUEST FOR PROPOSAL (RFP)

Summer Program Grants

January 9, 2025

Lucas County Board of Developmental Disabilities 1154 Larc Lane Toledo, Ohio 43614 (419) 380-4000

Due: January 31, 2025

Time: 10:00 a.m.

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LEGAL NOTICE

Sealed proposals will be received by the Lucas County Board of Developmental Disabilities at 1154 Larc Lane, Toledo, Ohio 43614, until 10:00 a.m. on January 31, 2025, and at that time opened as provided by law for "Summer Program 2025" grants. Proposals submitted shall be in accordance with specifications on file in the Office of the Superintendent, Lucas County Board of Developmental Disabilities.

The Board reserves the right to reject any, part of, or all proposals and to waive any informalities in the proposal submission process and shall have no liability whatsoever to any bidder whose proposal is not accepted.

I. BACKGROUND INFORMATION

A. Introduction

The Lucas County Board of Developmental Disabilities (LCBDD) SSA Department announces funds available to create meaningful summer program opportunities for children eligible for LCBDD services.

B. Targeted Population

This RFP targets children and teens eligible for LCBDD services.

C. Purpose and Priorities

Children and teens up to high school graduation with medical, social/emotional, personal care or therapeutic needs will participate in a fun and integrative summer program that meets their specialized needs. Integrated settings are those that support full access of youth with developmental disabilities to the greater community with the same degree of access as youth not receiving disability related services. Integration is also about access to people and places in the same manner as the broader community.

D. Funding

LCBDD will provide grant funding based on proposals submitted. Reimbursement will not be provided when the costs of child/teen's summer camp are paid for by extended school year (ESY) or a waiver.

E. Eligible Applicants

Any summer program that is willing and able to provide inclusive and integrative services to children with all types of abilities <u>in Lucas County</u>, which includes children with developmental disabilities.

II. <u>INSTRUCTIONS TO APPLICANTS</u>

A. Questions/Interpretations

No interpretations of the meaning of the RFP documents will be made to any applicant orally. Every request for such interpretation should be in writing, addressed to Heather McVay, SSA Department, 1155 Larc Lane, Toledo, Ohio 43614 (email address hmcvay@lucasdd.org), and to be given consideration, must be received at least five (5) days prior to the date fixed for the opening of proposals. Any and all interpretations will be in the form of written addenda to the specifications which will be mailed no later than three (3) days prior to the proposal due date. All addenda so issued shall become part of the Contract Documents.

B. Application Format

1. Proposal

Consists of two (2) sections: the Project Narrative and the Budget Justification. The proposal must be typed.

a. Project Narrative

- i. A description of the program/project including:
 - Qualifications of manager and staff working with children.
 - Goals and objectives of the program.
 - Specific activities that will occur during the summer program.
 - Dates the program will be in session.
 - Number of hours each program day will last.
 - Whether or not the agency will provide transportation to/from participants' homes.
 - Whether or not the agency will charge a weekly camp fee to the family? If so, how much?
 - Whether or not the agency will charge an application fee to the family? If so, how much?
 - How will program success be evaluated?
 - How will program provide the following GOOD LIFE experiences:
 - Building Relationships
 - Having Dignity

- Sharing Ordinary Places
- Making Choices
- Contributing to their Community
- ii. A description of the applicant's organizational capabilities.

This should include a description of services currently offered, the applicant's organizational mission statement, a description of personnel who will be directly involved in the summer program.

2. Budget Justification

- a. Complete the attached budget form (Attachment B).
- b. Provide a written budget narrative for each line item of your budget.

C. Criteria for Application Evaluation and Selection

Proposals will be reviewed, evaluated and rated by the Review Committee. The Review Committee will be composed of specialists in the RFP program area. Review Committee representatives will not include applicants to this RFP or those who have any conflict of interest that would prohibit a fair and equitable review process. Applicants will receive written notification if their request was approved or denied on or before March 8, 2025. A contract will be awarded to the applicants that were selected by the Review Committee during the month of March 2025.

D. Applicant Submission and Deadline

Sealed proposals will be received by the LCBDD at 1154 Larc Lane, Toledo, Ohio 43614 until 10:00 a.m. on January 31, 2025, for "Summer Program 2025" grants. EACH PROPOSAL MUST BE SUBMITTED IN A SEALED ENVELOPE BEARING ON THE OUTSIDE THE NAME OF THE APPLICANT, APPLICANT'S ADDRESS, SUMMER PROGRAM 2025 AND BID OPENING DATE AND TIME. IF SUBMITTED BY MAIL, THE SEALED ENVELOPE CONTAINING THE BID MUST BE ENCLOSED IN ANOTHER ENVELOPE ADDRESSED TO:

Michele Myerholtz, Superintendent Lucas County Board of Developmental Disabilities 1154 Larc Lane Toledo, Ohio 43614

Proposals received after the due date and time specified will be rejected.

E. Receipt of Proposals

No contract will be awarded to any person, firm or corporation that is in arrears or is in default to Lucas County upon any debt or contract, or that is a defaulter as surety or

otherwise upon any obligation to the County or has failed to perform faithfully any previous contract with the County. Complete Delinquent Personal Property Tax Statement (Attachment D).

Acceptance of the proposal of any applicant by the LCBDD shall not constitute an agreement between the LCBDD and such applicant, and shall not be binding upon the LCBDD unless and until an agreement covering all conditions and provisions of the work to be performed by the successful applicant has been reduced to writing and executed by both parties. Applicants may not withdraw a proposal within sixty (60) days of the date of proposal opening.

F. Awarding of Contracts

A contract will be awarded by the LCBDD to the applicants that were selected by the Review Committee.

G. Reporting Requirements

Each award recipient will be required to submit an End of Program Report (Attachment E) to be sent to Heather McVay (email hmcvay@lucasdd.org) and Anna Buschmann@lucasdd.org)

H. Funding and Invoicing

Payments will be made upon receipt of itemized invoices. A payment of one-half of the grant amount will be made upon execution of the Agreement and receipt of itemized invoice including names of registered participants. A final payment of one-half of the grant amount will be made upon submission of an itemized invoice and receipt of the End of Program Report. Without exception, the itemized invoice for the final payment and the End of Program Report must be received by the LCBDD by October 1, 2025, in order for award recipient to receive the last payout under the grant.

All invoices and reports are to be sent to Anna Buschmann at the following address:

Anna Buschmann Lucas County Board of DD 1155 Larc Lane Toledo, OH 43614 abuschmann@lucasdd.org

III. GENERAL CONDITIONS GOVERNING CONTRACTS

A. Intent

It is the intent of these GENERAL CONDITIONS to cover the governing conditions and factors applicable in whole or in part to this contract. These conditions shall govern except where modified elsewhere in the specifications.

B. Contract Documents

Contract Documents mean all of the various portions of this contract: LEGAL NOTICE, INSTRUCTIONS TO APPLICANTS, GENERAL CONDITIONS GOVERNING CONTRACTS, REQUEST FOR PROPOSAL, CONTRACT, ADDENDA.

C. Insurance and Indemnification

- 1. The Contractor shall carry Workers' Compensation, contractual liability, comprehensive general liability and automobile liability in minimum limits of \$500,000/\$1,000,000 for personal injury and \$1,000,000 for property damage. The Contractor agrees that the insurance policies shall name LCBDD as an additional insured. Prior to the commencement of the term of the contract, the Contractor shall furnish LCBDD with certificates of insurance for such policies.
- 2. The Contractor shall indemnify and hold harmless LCBDD, its employees and agents against all claims, demands, causes of action, suits, or liability arising out of applicant's performance or that of his employees, subcontractors, material men or agents, and said indemnity shall include defense of any lawsuit.

D. Basis for Contracts

Contract will be awarded for a term of seven (7) months – March 1, 2025 to September 30, 2025.

E. Laws and Regulations

Services shall be provided in accordance with all applicable laws and regulations.





APPLICATION FOR FUNDING COVER SHEET LUCAS COUNTY BOARD OF DEVELOPMENTAL DISABILITIES "Summer Program 2025 Grants""

Title of Project:		
Agency/Institution:		Contact Person:
Street Address:	City:	Zip:
Phone:	Fax:	Email:
() -	() -	
Project Description:		
Proposed number of LCBDD eligible st	udents to be served:	
Total Number of all participants including	ng community participants to be served:	
Project Manager Name/Title		
Street Address:	City:	Zip:
Phone: () -	Fax: () -	Email:
RFP Funds Requested:		
Financial Officer: Names/Title:		
Street Address:	City:	Zip:
Phone: () -	Fax: () -	Email:
Superintendent/Director/CEO	, ,	Date:
Signature (Blue Ink)		
Street Address:	City:	Zip:
Phone: () -	Fax: () -	Email:



2025 Summer Program Budget Form

ATTACHMENT B

Disabilities	N	lame of Applicant:		
		Title of Project:		
Budget L	ine Item	Total Budget		
200.901		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
		\$0.00		
Totals		\$0.00		
SIGNATURES BELOW INDICATE T	HAI BUDGET INFORMATIO	ON IS ACCURATE		
Project Manager		Financial Manager		
Signature	Date	Signature		Date
Phone		Phone		
Email		Email		
Fax		Fax		
-			· · · · · · · · · · · · · · · · · · ·	

ATTACHMENT C

NON-DISCRIMINATION AGREEMENT

¹ ,	
NAME	TITLE
of	, having
COMPANY	//FIRM
authority to agree on behalf of the above	e named APPLICANT, do hereby agree:
contract or any subcontract, no contract behalf, shall, by reason of race, creed, sex	imployees for the performance of work under this octor or subcontractor or any person acting on his x, handicap, or color, discriminate against any citizent or or workers who are qualified and available to tent relates.
	contractor, or any person on his behalf, shall, in any te any employee hired for the performance of work reed, sex, handicap, or color.
	BY
	APPLICANT

ATTACHMENT D

Ohio Revised Code, Section 5719.042: "After the award by a taxing district of any contract let by competitive bid and prior to the time the contract is entered into, the person making a bid shall submit to the District's Fiscal Officer a statement affirmed under oath that the person with whom the contract is to be made was not charged at the time the bid was submitted with any delinquent Personal Property Taxes on the general tax list of Personal Property of any County in which the taxing district has territory or that such person was charged with delinquent Personal Property Taxes on any such tax list, in which case the statement shall also set forth the amount of such due and unpaid delinquent taxes and any due and unpaid penalties and interest thereon. If the statement indicates that the taxpayer was charged with any such taxes, a copy of the statement shall be transmitted by the Fiscal Officer to the County Treasurer within thirty (30) days of the date it is submitted.

<u>DELINQUENT PERSONAL PROPERTY TAX STATEMENT</u> (O.R.C. SECTION 5719.042)

I,,,NAME	TITLE
of	, affirm that, at the time I submitted the bid for
COMPANY NAME	, affirm that, at the time I submitted the bid for
	, to the Lucas County Board of
Developmental Disabilities, on	, 20, that
COMPANY NAME	
WAS / WAS NOT charged with delinquent Personal Pro-	perty Taxes by the Lucas County Auditor.
(If Personal Property Taxes are delinquent, complete the	e following section):
The amount of delinquent Personal Property Taxes due	Lucas County are and unpaid
penalties and interest are	
	SIGNATURE
	COMPANY
	DATE
Sworn to before me and subscribed in my presence by _	
this, 20_	·
	NOTARY PUBLIC

ATTACHMENT E

END OF PROGRAM REPORT Due by October 1, 2025

Name of Agency/Camp/Summer program	
Amount of grant used for summer program \$	
Dates of summer program	
# of Kids served who are LCBDD eligible	
We believe children and teens should participate in programs that help them have a GOOD LIFE! The sum that they participate in should focus on the 5 Valued Experiences:	mer progran

- Building Relationships
- Having Dignity
- Sharing Ordinary Places
- Making Choices
- Contributing to their Community

Please share some success stories from your summer program: (Feel free to use the back.)

Are there any challenges you would also like to share?