



**2019**  
**FOOD ACCESS OPPORTUNITY FUND**  
**Request for Proposal**

**GUIDELINES**

**I. Introduction**

The Youth and Family Empowerment (YFE) Division of the City of Seattle Human Services Department (HSD) is pleased to announce the **Food Access Opportunity Fund Request for Proposal (RFP)**. Funding for the Food Access Opportunity Fund is provided by the City of Seattle's Sweetened Beverage Tax (SBT)<sup>1</sup> and aligns with the recommendations from the SBT Community Advisory Board (CAB). The purpose of the Food Access Opportunity Fund is to **improve healthy food access** by investing in community-based projects **designed and led** by the people most impacted by race, social, health, and environmental injustices.

HSD is seeking applications from organizations and community groups that can reach the following **priority populations**: communities of color, immigrants, refugees, people with low income, youth and young adults, and English language learners. In addition, organizations and community groups that serve American Indian/Alaska Native, Native Hawaiian/Pacific Islander, and Black/African American<sup>2</sup> communities are strongly encouraged to apply, as these populations are experiencing the highest rates of food-related disparities. This investment will support activities that address food justice, health equity, prevention of sugary drink consumption, and increase access to healthy food.

Approximately \$800,000.00 in funding is available through this Request for Proposal from the following sources:

<b>Fund Sources</b>	<b>Request for Proposal Amount</b>
<i>Sweetened Beverage Tax funds</i>	\$800,000.00
<b>Total</b>	<b>\$800,000.00</b>

HSD will not provide individual notice of changes and applicants are responsible for regularly checking the [HSD Funding Opportunities webpage](#) for any updates, clarifications, or amendments.

<sup>1</sup> The SBT was established by City Council Ordinance [125324](#).

<sup>2</sup> To view the 2019 Food Access Opportunity Fund Theory of Change, please click [here](#).

## II. Investment Area & Program Requirements

The 2019 Food Access Opportunity Fund investment will result in 18-month contracts beginning **on or after July 1, 2019 and ending by December 31, 2020**. HSD intends to fund a maximum of 16 proposals. Project budget requests may not exceed \$50,000 for the entire 18-month contract period. Successful applicants will be required to participate in a learning community. This learning community will share best practices, learn from one another, and network. This group will meet quarterly and will work closely with the City on data collection. **Organizations with operating budgets of \$750,000 (on average over the past three years) or less are eligible to apply.** Organizations with operating budgets of more than \$750,000 are ineligible to apply.

Funded projects must align with the SBT CAB's Operating Principles:

- **Priority populations** – Projects and activities should focus on reaching communities of color, immigrants, refugees, people with low income, youth and young adults, and English language learners.
- **Place-based focus areas** – Projects and activities should be located in areas where communities of color, immigrants, refugees, people with low income, and English language learners live, work, play, worship or go to school.
- **Community-driven** – Projects and activities should be led by community-based organizations with continuous connections to the focus population or community.
- **Culturally-responsive** – Projects and activities should be culturally responsive and delivered in ways that are accessible and comfortable for the focus population or community.
- **Prevention-oriented** – Projects and activities should focus on health equity by preventing sugary drink consumption and educating people about the chronic conditions caused by sugary drinks.

For the purposes of this application, the following definitions apply:

- “Food access” refers to nutritious food that is affordable, easy to find and obtain, and culturally appropriate.
- “Food justice” refers to communities exercising their right to grow, sell, and eat nutritious food that is culturally appropriate.
- “Health equity” refers to everyone having the opportunity to attain their highest level of health.

Please refer to the [HSD Funding Opportunities webpage](#) for more information about HSD's Contracting Requirements, Funding Opportunity Selection Process, Appeal Process, Commitment to Funding Culturally Responsive Services, and Guiding Principles.

If you have any questions about the Food Access Opportunity Fund RFP, please contact the RFP Coordinator, Pamela Calderon, via email at [pamela.calderon@seattle.gov](mailto:pamela.calderon@seattle.gov).

### III. Timeline

Funding Opportunity Released:	Monday, February 4, 2019
Last day to Submit Questions:	Thursday, February 21, 2019 by 12:00 p.m. (Noon)
<b>Application Deadline:</b>	<b>Wednesday, March 6, 2019 by 12:00 p.m. (Noon)</b>
Interviews:	Wednesday, March 27 & Thursday, March 28, 2019
Planned Award Notification:	Thursday, May 16, 2019
Contract Start Date:	Monday, July 1, 2019

For more information, please contact the RFP Coordinator Pamela Calderon at [pamela.calderon@seattle.gov](mailto:pamela.calderon@seattle.gov) or (206) 386-1561.

HSD reserves the right to change any dates in the Request for Proposal timeline.

### IV. Information Sessions

Applicants are highly encouraged to participate in one of two information sessions offered by HSD. Information sessions provide applicants the opportunity to ask questions of HSD staff; provide an overview of the RFP and the application; and allow applicants to learn more about the review, approval, and contracting processes.

Language interpretation or accommodations are available upon request by contacting Nasrin Afrouz at [nasrin.afrouz@seattle.gov](mailto:nasrin.afrouz@seattle.gov) or (206) 615-0744.

*In Person	Online
Monday, February 11, 2019 ( <b><i>Weather Cancellation**</i></b> ) 2:00 p.m. - 4:00 p.m. <b>Rainier Beach Library – Meeting Room</b> 9125 Rainier Avenue South Seattle, WA 98118 Light refreshments will be served.	Wednesday, February 13, 2019 2:00 p.m. - 3:00 p.m. <b>Online Information Session (SKYPE)</b> Log-in information will be provided to those who RSVP for this session.
<a href="#">Click here</a> to RSVP by Friday, February 8, 2019.	<a href="#">Click here</a> to RSVP by Tuesday, February 12, 2019.
<b>**Rescheduled Info Session</b> Tuesday, February 19, 2019, 1:00 p.m. – 3:00 p.m. 2100 Building – Community Room A; 2100 24 <sup>th</sup> Ave. S., Seattle, WA 98144 <a href="#">Click here</a> to RSVP by Friday, February 15, 2019.	

\*This session will offer a Peer Learning opportunity to hear from organizations that have previously contracted with HSD. The panel will share their experiences applying for funding opportunities and sub-contracting with HSD.

### V. Help Sessions

HSD has partnered with Sama Praxis consulting firm to provide technical assistance for Food Access Opportunity Fund RFP applicants. These help sessions are optional and are intended for grassroots, community-based organizations to receive additional grant writing assistance and/or guidance about the City of Seattle's procurement processes.

Sama Praxis will provide assistance in the form of clarifying application and budget questions, thinking through proposal development ideas, and reviewing proposal drafts, but will not write applications for applicants.

Applicant help sessions will be scheduled, by appointment, on a first come, first served basis. Appointments are in-person meetings and locations are ADA accessible. Applicants are **strongly encouraged** to schedule appointments as early as possible, as a high volume of requests close to the application deadline will result in limited availability. To schedule your help session appointment contact Sama Praxis at [samapraxis@gmail.com](mailto:samapraxis@gmail.com).

## VI. Eligibility Requirements

Applicant agencies must meet the following eligibility requirements:

- ☒ Your organization is a non-profit organization, for-profit company, faith-based organization, Seattle neighborhood-based group, community-based organization, and/or grassroots organization.
- ☒ Your proposed program is community-led and committed to food access, food justice, and health equity.
- ☒ Your organization has an operating budget of \$750,000 (on average over the past three years) or less.
- ☒ Your organization has a Federal Tax ID number/employer identification number (EIN), Washington State Business License Number (UBI), and City of Seattle Business License Number.
- ☒ Your organization has a W-9.
- ☒ All contracting organizations must agree to the standard HSD requirements found on the [HSD Funding Opportunities webpage](#).
- ☒ If applicable, non-profit organizations must have a valid 501(C)(3) tax exempt status granted by the United States Internal Revenue Service.
- ☒ If applicable, your organization is a federally-recognized or Washington State-recognized Indian tribe.
- ☒ If applicable, your organization's fiscal sponsor must have a Federal Tax ID number/employer identification number (EIN), Washington State Business License Number (UBI), City of Seattle Business License Number, and a W-9. If a fiscal sponsor is a non-profit organization, they must have been granted 501(C)(3) tax exempt status by the United States Internal Revenue Service.

### Who should **NOT** apply?

- Governmental agencies, political groups, universities, hospitals, news organizations, or individuals not associated with any group.
- Organizations unable to agree to the standard HSD requirements found on the [HSD Funding Opportunities webpage](#).
- Organizations with operating budgets of more than \$750,000.



**2019  
Food Access Opportunity Fund  
Request for Proposal**

## **APPLICATION**

### **Instructions and Materials**

This Application Instructions and Materials packet contains information and materials for respondents applying for the 2019 Food Access Opportunity Fund Request for Proposal. All accepted application packets will be reviewed by the rating committee and applicants will be contacted for interviews. Following interviews, the rating committee will forward its funding recommendations to the HSD Director for final award decisions.

Applications for the 2019 Food Access Opportunity Fund must:

- ☒ Respond to **all** narrative questions and provide **all** requested information. Do not include a cover letter, brochures, or letters of support.
- ☒ Be typed or word processed on a double-sided, letter-sized (8 ½ x 11-inch) paper.
- ☒ Use one-inch margins, single spacing, and minimum 11-point font size.
- ☒ Responses to all questions must not exceed the four-page narrative limit.
- ☒ Organize responses using the narrative titles and question numbers.

**Completed application packets must be submitted by Wednesday, March 6, 2019 at 12:00 p.m. (Noon). Late applications will not be accepted.** HSD is not responsible for ensuring applications are received by the deadline.

**DELIVERY OPTIONS:** Application packets must be received using one of the options listed below:

- Online Submission via HSD's Online Submission System: <http://web6.seattle.gov/hsd/rfi/index.aspx>

**OR**

- Hand Delivery or U.S. Mail:

Seattle Human Services Department  
RFP Response – 2019 Food Access Opportunity Fund  
Attn: Pamela Calderon

**In Person:**  
700 Fifth Avenue, 58<sup>th</sup> floor  
Seattle, WA 98104-5017

**By Mail:**  
P.O. Box 34215  
Seattle, WA 98124-4215

**Faxed or emailed application packets will NOT be accepted.**

## Application Components

Write a narrative response to sections A – D. Answer each section completely according to the questions. Do not exceed a total of four (4) pages for sections A – D combined.

NARRATIVE QUESTIONS	Points
<p><b>A. PROJECT DESCRIPTION</b></p> <ol style="list-style-type: none"> <li>1. Describe your proposed project and activities (i.e. who, what, when, and how). Please include a detailed timeline* of your project with estimated dates, frequency, and duration of activities.</li> <li>2. Where will project activities take place? Please include the project location address(es) or the intended neighborhood/location site(s).</li> <li>3. How will activities address health equity, chronic conditions caused by sugary drinks, the prevention of sugary drink consumption, and increase access to healthy food?</li> <li>4. How will you know if your project is successful?</li> </ol> <p>Please provide sufficient detail in your narrative for reviewers to have a clear understanding of your project and approach. You may provide photos of the project and location in a PDF. (Project location must be within City limits.)</p> <p><i>*The timeline and PDF photos document are not included in the four-page narrative limit.</i></p>	40
<p><b>B. PROMOTES RACIAL EQUITY, FOOD JUSTICE, AND COMMUNITY-CENTERED PROGRAMMING</b></p> <ol style="list-style-type: none"> <li>1. How will your project work to address and/or reduce racial, food access, and health disparities for the priority population or community?</li> <li>2. How will your project identify and address needs or strengths from the community you serve?</li> <li>3. How will the community served by this project be involved in the design, delivery, and evaluation of the project?</li> </ol>	35
<p><b>C. LEARNING AND ACCOUNTABILITY</b></p> <ol style="list-style-type: none"> <li>1. How will the agency share project successes, challenges, and best practices with community members, participants, and the learning community?</li> <li>2. How will project leadership be accountable to the community being served?</li> </ol>	15
<p><b>D. CAPACITY AND BUDGET</b></p> <ol style="list-style-type: none"> <li>1. Who are the key people/positions of this project with the primary responsibility for ensuring the project moves forward? Describe your plan to staff these positions if you do not yet have the staff/volunteers in place. Please provide brief position job descriptions.</li> <li>2. Describe how staff/volunteers in these positions possess the cultural and linguistic competency to work with the community this project will serve.</li> <li>3. How will the proposed budget cover expenses to achieve the desired result? Please provide a narrative response and complete the Proposed Project Budget* and Proposed Personnel Detail Budget* on pages 9 – 11.</li> </ol> <p><i>*The Proposed Project Budget and Proposed Personnel Detail Budget pages are not included in the four-page narrative limit.</i></p>	10
<b>TOTAL</b>	<b>100</b>

<b>RATING CRITERIA - A strong application meets <u>all</u> elements listed below:</b>	<b>Points</b>
<b>A. PROJECT DESCRIPTION</b> <ul style="list-style-type: none"> <li>• Proposal clearly describes the project and activities (who, what, when, and how), including a timeline with estimated dates of key activities, frequency, and duration of activities.</li> <li>• Project location(s) is accessible for participants to get to and is safe and appropriate for the activities proposed. The location(s) is within the City of Seattle limits.</li> <li>• Proposal describes how the project and activities address health equity, chronic conditions caused by sugary drinks, the prevention of sugary drink consumption, and increase access to healthy food.</li> <li>• Proposal clearly articulates project success and desired results.</li> </ul>	<b>40</b>
<b>B. PROMOTES RACIAL EQUITY, FOOD JUSTICE, AND COMMUNITY-CENTERED PROGRAMMING</b> <ul style="list-style-type: none"> <li>• Proposal clearly defines/describes the project's priority population or community, as well as racial inequities, health inequities, food access inequities, or food injustices the project will address and/or reduce.</li> <li>• Proposal describes how any identified needs or strengths in the community will be addressed by the project.</li> <li>• Proposal describes how the community being served is and/or will be involved in developing, delivering, and evaluating the project.</li> </ul>	<b>35</b>
<b>C. LEARNING AND ACCOUNTABILITY</b> <ul style="list-style-type: none"> <li>• Proposal effectively describes how successes, challenges, and best practices will be documented and shared.</li> <li>• Proposal effectively describes how the project leadership will be accountable to the community it serves.</li> </ul>	<b>15</b>
<b>D. CAPACITY AND BUDGET</b> <ul style="list-style-type: none"> <li>• The key people involved (staff and/or volunteers) are in place (hired or secured) by the time the project begins and clearly demonstrate the experience, qualifications, and cultural competency needed to implement the project.</li> <li>• Staff/volunteers reflect the cultures and languages of the community being served.</li> <li>• Proposed budget costs are reasonable, realistic, and justified. Budget is complete and aligns with proposed activities.</li> </ul>	<b>10</b>
<b>TOTAL</b>	<b>100</b>



**City of Seattle  
Human Services Department**

**2019 Food Access Opportunity Fund Request for Proposal  
Application Cover Sheet**

1. Applicant Agency:			
2. Agency Executive Director:			
3. Agency Primary Contact:			
Name:		Title:	
Address:		Email:	Phone #:
4. Organization Type: <input type="checkbox"/> Non-Profit <input type="checkbox"/> Other (Specify):			
5. Federal Tax ID or EIN:		6. DUNS Number:	
7. WA Business License Number:			
8. Proposed Project Name:			
9. Population(s) project will serve:			
10. Funding Amount Requested:			
11. Approximate # of people to be served:			
12. Location, address, and City Council District where the activities/project will take place.			
13. Partner Agency (if applicable):			
Contact Name:		Title:	
Address:		Email:	Phone Number:
Description of partner agency proposed activities:			
Signature of partner agency representative: _____ Date: _____			
<p><b>Authorized physical signature of applicant/lead organization</b></p> <p><i>To the best of my knowledge and belief, all information in this application is true and correct. The document has been duly authorized by the governing body of the applicant who will comply with all contractual obligations if the applicant is awarded funding.</i></p> <p>Name and Title of Authorized Representative:</p> <p>Signature of Authorized Representative: _____ Date: _____</p>			



# 2019 Food Access Opportunity Fund Request for Proposal

## Proposed Program Budget

July 1, 2019 – December 31, 2020

Excel versions of the budget templates can be found on the application page of the [HSD Funding Opportunity Webpage](#)

<b>Applicant Agency Name:</b>	
<b>Proposed Program Name:</b>	

Item	Amount by Fund Source				Total Project
	Requested HSD Funding	Other <sup>1</sup>	Other <sup>1</sup>	Other <sup>1</sup>	
<b>1000 - PERSONNEL SERVICES</b>					
1110 Salaries (Full- & Part-Time)					
1300 Fringe Benefits					
1400 Other Employee Benefits <sup>2</sup>					
<b>SUBTOTAL - PERSONNEL SERVICES</b>					
<b>2000 - SUPPLIES</b>					
2100 Office Supplies					
2200 Operating Supplies <sup>3</sup>					
2300 Repairs & Maintenance Supplies					
<b>SUBTOTAL - SUPPLIES</b>					
<b>3000 - 4000 OTHER SERVICES &amp; CHARGES</b>					
3100 Expert & Consultant Services					
3140 Contractual Employment					
3150 Data Processing					
3190 Other Professional Services <sup>4</sup>					
3210 Telephone					
3220 Postage					
3300 Automobile Expense					
3310 Convention & Travel					
3400 Advertising					
3500 Printing & Duplicating					
3600 Insurance					
3700 Public Utility Services					
3800 Repairs & Maintenance					
3900 Rentals – Buildings					
Rentals - Equipment					
4210 Education Expense					
4290 Other Miscellaneous Expenses <sup>5</sup>					
4999 Administrative Costs/Indirect Costs <sup>6</sup>					
<b>SUBTOTAL - OTHER SERVICES &amp; CHARGES</b>					
<b>TOTAL EXPENDITURES</b>					

<sup>1</sup> Identify specific funding sources included under the "Other" column(s) above:	
	\$
	\$
	\$
	\$
<b>Total</b>	<b>\$</b>

<sup>2</sup> Other Employee Benefits - Itemize below:	
	\$
	\$
	\$
	\$
<b>Total</b>	<b>\$</b>

<sup>3</sup> Operating Supplies - Itemize below (Do Not Include Office Supplies):	
	\$
	\$
	\$
	\$
<b>Total</b>	<b>\$</b>

<sup>4</sup> Other Professional Services - Itemize below:	
	\$
	\$
	\$
	\$
<b>Total</b>	<b>\$</b>

<sup>5</sup> Other Miscellaneous Expenses - Itemize below:	
	\$
	\$
	\$
	\$
<b>Total</b>	<b>\$</b>

<sup>6</sup> Administrative Costs/Indirect Costs - Itemize below:	
	\$
	\$
	\$
	\$
<b>Total</b>	<b>\$</b>

<sup>6</sup> Administrative Costs/Indirect Costs: Human Services Department policy places a fifteen percent (15%) cap on reimbursement for agency indirect costs, based on the total contract budget. Restrictions related to federal approved rates and grant sources still apply.

Does the agency have a federally approved rate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, provide the rate.		

Questions about the project budget? Please email [pamela.calderon@seattle.gov](mailto:pamela.calderon@seattle.gov) by Thursday, February 21, 2019 for assistance.

**2019 Food Access Opportunity Fund Request for Proposal  
Proposed Personnel Detail Budget  
July 1, 2019 - December 31, 2020**

Excel versions of the budget templates can be found on the application page of the [HSD Funding Opportunity Webpage](#)

<b>Applicant Agency Name:</b>	
<b>Proposed Program Name:</b>	

Agency's Full-Time Equivalent (FTE) =		hours/week			Amount by Fund Source(s)				
Position Title	Staff Name	FTE	# of Hours Employed	Hourly Rate	Requested HSD Funding	Other Fund Source	Other Fund Source	Other Fund Source	Total Program
<b>Subtotal – Salaries &amp; Wages</b>									
<b>Personnel Benefits:</b>									
FICA									
Pensions/Retirement									
Industrial Insurance									
Health/Dental									
Unemployment Compensation									
Other Employee Benefits									
<b>Subtotal – Personnel Benefits:</b>									
<b>TOTAL PERSONNEL COSTS (SALARIES &amp; BENEFITS):</b>									

## 2019 Food Access Opportunity Fund Request for Proposal

### Fiscal Sponsor Information (if applicable)

An organization may be the fiscal sponsor for your project if it meets the following eligibility requirements:

- ☒ Fiscal sponsor has a Federal Tax ID number/employer identification number (EIN), Washington State Business License Number (UBI), and City of Seattle Business License Number.
- ☒ If Fiscal sponsor is a non-profit, they also must have been granted 501(C)(3) tax exempt status by the United States Internal Revenue Service
- ☒ Fiscal sponsor has a W-9.

Fiscal Sponsor Name:	
Applicant Organization Name:	
Fiscal Sponsor Address:	City, State Zip:
Federal Tax I.D. Number/Employee Identification Number (EIN)	
Washington State Business License Number (UBI)	
City of Seattle Business License Number	
Fiscal Sponsor Signer's Name:	Fiscal Sponsor Signer's Title:
Fiscal Sponsor Signature:	Fiscal Sponsor Signature Date:
Applicant Organization Signer's Name:	Applicant Organization Signer's Title:
Applicant Organization Signature:	Applicant Organization Signature Date:

## 2019 Food Access Opportunity Fund Application Checklist

This checklist is to help ensure your application is complete prior to submission. Please **do not** submit this form with your application. **Completed application packets must be submitted by Wednesday, March 6, at 12:00 p.m., Noon. Late applications will not be accepted.** Please refer to page 5 for submission or delivery options.

### HAVE YOU....

Requirements	Yes	Resources
1. Read, understood, and agreed to HSD's Requirements: <ul style="list-style-type: none"> <li>• 2019 Food Access Opportunity Fund Theory of Change,</li> <li>• Agency Minimum Eligibility Requirements,</li> <li>• Contracting Requirements,</li> <li>• Funding Opportunity Selection Process,</li> <li>• Appeal Process,</li> <li>• Commitment to Funding Culturally Responsive Services,</li> <li>• Guiding Principles, and</li> <li>• Master Agency Service Agreement.</li> </ul>	<input type="checkbox"/>	<a href="#">Funding Opportunities Webpage</a>
2. Completed the four sections of the <u>narrative</u> response? <ul style="list-style-type: none"> <li>• A completed narrative response addresses each of the following (total =100 points) in the Rating Criteria:               <ul style="list-style-type: none"> <li>- Project Description (40 points)</li> <li>- Promotes Racial Equity, Food Justice, and Community-Centered Programming (35 points)</li> <li>- Learning and Accountability (15 points)</li> <li>- Capacity and Budget (10 points)</li> </ul> </li> <li>• Must not exceed four pages, letter-sized (8 ½ x 11) paper, single spaced, double-sided, size 11-point font, with one-inch margins.</li> </ul> <p><b>Note:</b> Page count does not include the application cover sheet, budget forms, timeline or supporting documents, such as a PDF of photos of the project and location.</p>	<input type="checkbox"/>	Page 6-7
3. Completed, signed, and attached the <u>Application Cover Sheet</u> ?	<input type="checkbox"/>	Page 8
4. Completed full Proposed Program and Personnel Detail Budget	<input type="checkbox"/>	Page 9-11
5. Completed Fiscal Sponsor Information (if applicable)	<input type="checkbox"/>	Page 12