# FLAGLER HOSPITAL (FH) 2019 UNIVERSAL RFP –

# THRESHOLD AND SCORING CRITERIA - NEW/EXPANDED PROJECTS

**Project Applicant:**

**Type of Project: □Challenge □Emergency Services Grant (ESG) □TANF**

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**THRESHOLD REVIEW (Completed by FH Staff)**

**Any NO answer in the Threshold Review Section to a FATAL FLAW Item = ineligible to apply per FATAL FLAWS listed in the RFP**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Scoring Factor** | **Description of Scoring Factor** | | **Points Available** | **Yes/No** |
|  | Proposal was submitted to FH by the Tuesday, March 5, 2019 Noon deadline | Ineligible to Apply - RFP clearly stated deadline | | Yes = Continue to next factor  No = Ineligible to apply |  |
|  | Non-Profit Organization with 501(c) 3 status (IRS letter of proof included) | Ineligible to Apply - RFP clearly states this is required for eligibility | | Yes = Continue to next factor No = Ineligible to apply |  |
|  | Organization has been in operation for at least two (2) years | Ineligible to Apply - RFP clearly states this is required for eligibility | | Yes = Continue to next factor  No = Ineligible to apply |  |
|  | Organization is in good standing with the State of Florida | Fatal Flaw - RFP clearly states this is required for eligibility | | Yes = Continue to next factor  No = Ineligible to apply |  |
|  | Organization is NOT listed on the “Excluded Parties List” | Fatal Flaw - RFP clearly states this is required for eligibility | | Yes = Continue to next factor  No = Ineligible to apply |  |
|  | RFP Application **~~Form~~** is signed by the designated agency official | Fatal Flaw - RFP clearly states this is required for eligibility | | Yes = Continue to next factor  No = Ineligible to apply |  |
|  | Proposal is mostly typed - not hand written | Fatal Flaw - RFP clearly states this is required for eligibility | | Yes = Continue to next factor  No = Ineligible to apply |  |
|  | Proposal included one (1) electronic copy | Fatal Flaw - RFP clearly states this is required for eligibility | | Yes = Continue to next factor  No = Ineligible to apply |  |
|  | Proposal submitted follows the order of proposal as outlined in the RFP, Section III | Fatal Flaw - RFP clearly states this is required for eligibility | | Yes = Continue to next factor  No = Ineligible to apply |  |
|  | Proposal includes all required documents as stated in the RFP, Section III | Fatal Flaw - RFP clearly states this is required for eligibility | | Yes = Continue to next factor  No = Ineligible to apply |  |
|  | Proposal does not exceed specified page limits in any section as outlined in the RFP, Section III | Fatal Flaw - RFP clearly states this is required for eligibility | | Yes = Continue to next factor  No = Ineligible to apply |  |
|  | Proposals are submitted in a manner not outlined in the RFP | Fatal Flaw - RFP clearly states this is required for eligibility | | Yes = Continue to next factor  No = Ineligible to apply |  |
| **Eligible to Apply** | | | **□ Yes**  **□ No** | | |

**Name of FH Staff Member Completing Threshold Review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of FH Staff Member Completing Threshold Review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Threshold Review\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Exhibit 1. Scoring Tool**

| **Scoring Factor** | **Scoring Description/Notes** | **Points Available** | **Comments** | **Points Awarded** |
| --- | --- | --- | --- | --- |
| 1. Organization is an active member with the St. Johns County CoC | FH will provide Membership Attendance Record for the past 12 months (January 2018 thru January 2019) | Yes = 1  No = 0 |  |  |
| 1. Applicant has at least one (1) staff member regularly participating on a CoC Committee(s) | FH will provide CoC Committee Attendance tracking for the past 12 months (January 2018 to January 2019) | Yes = 1  No = 0 |  |  |
| 1. Participation in Coordinated Entry Process   *Coordinated Entry Participation- 85% or greater of entries to project from CE referral* | FH will provide CoC Agency entry statistics for the past 12 months (January 2018 to January 2019) | 10 pts.  85-100% = 10  50-84% = 5  0-49% = 0 |  |  |
| 1. Housing First and/or Low Barrier Implementation *(provided in eligibility criteria; process for accepting new clients; process and criteria for exiting clients)* | **FH will post the HUD Housing First tool on the CoC website for applicants to utilize, if they choose, for housing related programs** | 10 pts.  Yes = 10  No = 0 |  |  |
| 1. Timeliness of Reporting   *FY17–18 date of monthly invoice submission (on-time invoices)* | FH will provide CoC Agency submission data for the past 12 months (July 2017 to June 2018) | 10 pts.  0 late invoices = 10  1-3 = 5  3> = 0 |  |  |
| **Proposal Content – Below factors are directly explained in the RFP and are required information/detail for the project area(s)** | | | | |
| 1. **Organization’s Capacity and Experience:** History of addressing the needs of, and providing services to, low income households who are homeless, formerly homeless or at risk of becoming homeless. | **Extensive or high history/experience** as defined as 8+ years  **Some History/experience** as defined as 4 to 7 years  **Minimum or No History/Experience** as defined as less than 3 years | Extensive or high history/experience = 2 points  Some History/experience = 1 point  Minimum or No History/Experience = 0 points |  |  |
| 1. **Organization’s Capacity and Experience:** Experience of operating at least similar projects, including performance outcome(s) from similar programs that show the effects of the service(s) provided | **Extensive or high history/experience** as defined as 8+ years  **Some History/experience** as defined as 4 to 7 years  **Minimum or No History/Experience** as defined as less than 3 years | Extensive or high history/experience = 2 points  Some History/experience = 1 point  Minimum or No History/Experience = 0 points |  |  |
| 1. **Organization’s Capacity and Experience:** Federal, state, and/or local government grant experience and capacity of the organization and person(s) responsible for administering the project and overseeing all compliance requirements | **Extensive or high history/experience** as defined as 8+ years  **Some History/experience** as defined as 4 to 7 years  **Minimum or No History/Experience** as defined as less than 3 years | Extensive or high history/experience = 2 points  Some History/experience = 1 point  Minimum or No History/Experience = 0 points |  |  |
| 1. **Project Description – Overview:** Describes the overall scope of the project including the clients to be served, which services will be provided, how they will be provided, and process for quickly assisting clients into permanent housing | Clearly and in detail describes the overall scope of the project including the clients to be served, which services will be provided and how they will be provided, and process for quickly assisting clients into permanent housing  Describes, but lacks important details, the overall scope of the project including the clients to be served, which services will be provided and how they will be provided, and process for quickly assisting clients into permanent housing  Vaguely or inadequately describes, the overall scope of the project including the clients to be served, which services will be provided and how they will be provided, and process for quickly assisting clients into permanent housing | Clearly describes = 3 points  Describes but lacks = 2 points  Vague or inadequate = 0 points |  |  |
| 1. **Project Description – Client Demographics/Target Populations:** Describes the project’s proposed populations to be served, including identifying targets, and information demonstrating an understanding of the needs of the clients they propose to serve. | Clearly defines the target demographics of the individuals/households to be served with details that demonstrates an understanding of the needs of those they propose to serve  Adequately defines the target demographic, but lacks some detail to demonstrate a full understanding of the needs of those they propose to serve  Vaguely defines the target demographic, does not demonstrate an understanding of the needs of those they propose to serve | Clearly describes = 3 points  Describes but lacks = 2 points  Vague or inadequate = 0 points |  |  |
| 1. **Budget Summary Form and Detailed** **Budget/Plan Narrative:** Provides detail and describes/explains the numbers on the Budget Summary | Detailed, clear and complete; aligns with the information on the Budget Summary **~~Form~~**; presents a feasible project  Adequately provides necessary information and aligns with the Budget Summary **~~Form~~**, but lacks some information needed to determine if project is feasible  Vague, missing key information and/or does not present a feasible project | Detailed, clear and complete = 5 points  Adequately provides necessary information = 2.5 points  Vague, missing key information = 0 points |  |  |
| 1. **Match Narrative and Committed Match:** All funding sources require some percentage of match; proving the ability to provide required match | Detailed, clear and complete indicating the applicant understands and will be able to provide required project match  Demonstrates a basic understands, however, may have difficulty providing necessary match  Vague, missing key information and/or does not demonstrate an understanding and/or have the ability to provide required project match | Detailed, clear and complete = 3 points  Adequately provides necessary information = 1.5 points  Vague, missing key information = 0 points |  |  |
| 1. **Adequate cash flow for project**: All funding will be awarded on a Cost Reimbursement process; therefore Applicant must have adequate cash flow to continue operations while reimbursement is processed. | Applicant has adequate cash flow  Applicant does not have adequate cash flow | Yes = 2 points  No = 0 points |  |  |
| 1. Project proposal describes how the project will help **move the community forward** in achieving HUD and CoC priorities and goals to **effectively end homelessness** in St. Johns County. | All content clearly describes how the proposed project helps move the community forward to effectively ending homelessness by achieving HUD and CoC priorities and goals.  Somewhat describes how the proposed project helps move the community forward to effectively ending homelessness by achieving HUD and CoC priorities and goals  Does not or vaguely describes how the proposed project helps move the community forward to effectively ending homelessness by achieving HUD and CoC priorities and goals | Clear and complete = 5 points  Somewhat provides necessary information = 2.5 points  Vague = 0 points |  |  |
| 1. Proposed Project is innovative, bold and creative thinking with proven, effective practices. | Clearly and in detail described an innovative project utilizing proven and effective practices  Touches on some innovative ideas and effective practices, but lacks detail  Not innovative and/or does not utilize proven effective practices | Clear and detailed = 5 points  Somewhat touches on ideas = 2.5 points  Not innovative = 0 points |  |  |
| 1. Overall proposal Presentation: formatting, content, flow of narratives, adherence to RFP instructions – demonstrates attention to detail and quality | Presented in a detailed, concise organized manner that was easy to understand and review  Lacked attention to detail and overall organization of information making it difficult to locate information needed to complete scoring | Detailed = 1 point  Lacked detail = 0 points |  |  |

**Maximum Points Possible: 65 Points Awarded:**

**Bonus Points**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Scoring Factor** | **Scoring Description/Notes** | **Points Available** | **Comments** | **Points Awarded** |
| **Case Management**  *Narrative provided in Project Description offers process for, and offers, case management focused on extended self-sufficiency and stability* |  | 25 pts.  Yes = 25  No = 0 |  |  |

**Maximum Points Possible: 25 Points Awarded:**

**Reviewer’s Overall Observations/Concerns:**

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**Reviewer’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reviewer’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Reviewed: \_\_\_\_\_\_\_**