



LASSEN COUNTY

Health and Social Services Agency

- HSS Administration**
1445 Paul Bunyan Road
Susanville, CA 96130
(530) 251-8128
- Grant and Loans Division**
1445 Paul Bunyan Road
Susanville, CA 96130
(530) 251-2683
- Behavioral Health**
555 Hospital Lane
Susanville, CA 96130
(530) 251-8108/8112
Chestnut Annex
1400-A & B Chestnut Street
Susanville, CA 96130
(530) 251-8112
- Patients' Rights Advocate**
720 Richmond Road
Susanville, CA 96130
(530) 251-8322
- Public Health**
1445 Paul Bunyan Road
Susanville, CA 96130
(530) 251-8183
- Environmental Health**
1445 Paul Bunyan Road
Susanville, CA 96130
(530) 251-8183
- Community Social Services**
PO Box 1359
Susanville, CA 96130
**LassenWORKS
Business & Career Network**
1616 Chestnut Street
Susanville, CA 96130
(530) 251-8152
Child & Family Services
1445 Paul Bunyan Road
Susanville, CA 96130
(530) 251-8277
**Adult Services
Public Guardian**
720 Richmond Road
Susanville, CA 96130
(530) 251-8158
- HSS Fiscal**
PO Box 1180
Susanville, CA 96130
(530)251-2614

REQUEST FOR PROPOSAL (RFP)

PROVISION OF BEHAVIORAL HEALTH WELLNESS AND ONE-ON-ONE PEER SUPPORT SERVICES

RFP No.:	HSS-2019-05
RFP Issue Date:	December 17, 2019
RFP Submission Date:	January 31, 2020
Issued By:	HSS Administration

REQUEST FOR PROPOSAL

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LASSEN COUNTY, CALIFORNIA



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REQUEST FOR PROPOSAL

PROVISION OF PEER SUPPORT SERVICES

LASSEN COUNTY, CALIFORNIA

RFP No.:	HSS-2019-05
RFP Issue Date:	December 17, 2019
RFP Submission Date:	January 31, 2020
Issued By:	HSS Administration

I. Intent

This Request for Proposal (RFP) announces the intent of the County of Lassen to contract for the provision of culturally and community based behavioral health peer and family support services designed to promote emotional recovery and wellness and to reduce the occurrence of and the stigma associated with mental illness and substance use disorders.

The purpose of the RFP is to seek proposals from qualified individuals or organizations experienced in providing wellness recovery programs/activities and one-on-one peer support to individuals and families.

Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. SAMHSA (2014).

The County may allocate funding to one organization or distribute funding among more than one organization, if a particular organization has specific expertise with one or more of the target populations identified in Section III (Scope of Service) of this RFP.

II. Background Information

The Lassen County Behavioral Health Department (LCBH) of the Health & Social Services Agency strives to create, develop, and expand successful programs for unserved and underserved children, transitional aged youth, adults, and older adults. Specifically, we are seeking services designed and delivered by peers such as those who have experience with behavioral health disorders. Research findings indicate that trained peers are particularly successful in facilitating

recovery and wellness. In addition, we know that peer support enhances engagement among individuals living with mental illness and substance use disorders and their families and communities when services are available in the individual's community and provided in a culturally and linguistically competent manner.

III. Scope of Services

A. Wellness Group Activities

The successful bidder(s) (Organization) will provide an agreed-upon number of opportunities for group wellness activities, at no cost to the client, led by trained peers and designed to strengthen recovery, promote resiliency, and instill hope. Target populations include:

- Individuals with serious mental health disabilities
- Veterans
- Homeless Individuals/Families
- Transitional Age Youth (Lassen High School and Lassen College)
- Middle School Youth (Diamond View School)
- Older Adults
- Children 0-5 and parents
- Foster Youth
- Individuals incarcerated in the jail and juvenile hall
- Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) youth and adults

In recognition of the benefits of active participation and diversity in groups, the bidder shall provide services without regard to diagnosis, disability, ethnicity, religion, or sexual orientation.

The Organization's staff shall take classes in evidence-based practices such as Wellness Recovery Action Plan (WRAP) and facilitating the development of peer-run support groups. The County will reimburse costs only for those trainings that the County approves in advance of the training.

The County shall approve the Organization's wellness group activities and curricula prior to implementing such services. The County will reimburse groups based on a tiered structure as follows:

- 3 to 5 participants
- 6 to 11 participants
- 12 and up

B. One-on-One Peer Support

The organization shall provide trained professional quality peer supports to provide non-clinical, person-centered, strength based, wellness focused, and trauma-informed support while helping to ensure the person's wellness-recovery plan reveals the needs and preferences of the person being served to complete their measurable and personalized goals. Peer Supports serve adults with behavioral health challenges, parents and family members who provide support to family members and children who experience behavioral health challenges.

Peer Specialists support their peers both individually and in small groups. They:

- Use recovery-oriented tools to help their peers address challenges
- Assist others to build their own self-directed wellness plans
- Support peers in their decision-making
- Set up and sustain peer self-help and educational groups
- Offer a sounding board and a shoulder to lean on
- Advocate with individuals for what they need
- Work within integrated health settings
- Support people in crisis
- Share their personal stories of recovery

Specific Qualities Required as a Peer Support Specialist

- Person who has progressed in their own recovery, or has three years of addiction recovery who is actively involved in recovery activities
- Willingness to self-identify
- Willingness to share knowledge and experience of recovery
- Exhibits signs of a spiritual awakening
- Can act as a role model
- Listens and learns from people served
- Create environments that promote recovery
- Works in partnership with the individual and with other agencies
- Promotes trauma-informed care
- Helps to navigate the government system
- Helps individuals to examine personal goals and define in achievable ways
- Motivates change desired by the individual

C. Additional Requirements

The organization shall state the hours of operation per week and also be available for on-call peer support services at the emergency room when needed.

The Executive Director and Board Members of the organization shall attend a County sponsored Non Profit Management Essentials workshop in

Spring 2020.

Employees, volunteers, and board members of the organization are eligible to participate in services; however, the successful bidder may not include them in the participant activity count or receive reimbursement for said services.

IV. Schedule of Activities

The County intends to progress in this procurement in a series of orderly steps. The schedule that follows has been developed in order to provide adequate information for bidders to prepare definitive proposals and for the County to fully consider various factors that may affect its decision. This schedule is subject to change at the discretion of the County.

Scheduled Activity	Proposed Date
Release of Request for Proposals	December 17, 2019
First Bidder's Conference	Monday, January 06, 2020, 2:00 p.m. – 3:00 p.m. Conference call available
Second Bidder's Conference	Wednesday, January 15, 2020, 11:00 a.m.-12:00 p.m. Conference call available
Last day to submit written requests for Technical Assistance	Friday, January 24, 2020, 4:30 p.m.
Proposal Submission Deadline and Opening	Friday, January 31, 2020, 4:30 p.m.
Proposal Review and Selection	Week of February 3, 2020
Post-Review Discussion with Bidders (if necessary)	Week of February 3, 2020
Notification of Selection	Week of February 10, 2020
Board of Supervisors Approval of Award and Contract	Tuesday, February 25, 2020 (approximately)
Approximate Contract Start Date	Contingent upon Board of Supervisor's Approval

A. Bidders' Conferences:

First Bidders' Conference:

Monday, January 06, 2020, 2:00 p.m. – 3:00 p.m.
Lassen County Health & Social Services Agency
336 Alexander Avenue
Susanville, CA

Conference call: (712) 451-0768
Access Code: 892552

Second Bidders' Conference:

Wednesday, January 15, 2020, 11:00 a.m. – 12:00 p.m.
Lassen County Health & Social Services Agency
336 Alexander Avenue
Susanville, CA

Conference call: (712) 451-0768
Access Code: 892552

A written record of questions asked at the Bidders' Conferences with responses by designated County staff will be provided to RFP recipients within five (5) working days of the Bidders' Conferences. The County strongly recommends Bidders' Conference attendance.

B. Written Requests for Technical Assistance:

Requests for technical assistance must be submitted in writing by 4:30 p.m. January 24, 2020 via U.S. Postal Service, email, or fax to:

Lassen County Behavioral Health
Attn: Holly Mackenzie
555 Hospital Ln, Susanville, CA 96130
hmackenzie@co.lassen.ca.us
Fax: 530-251-8487

Responders are encouraged to not wait until the last minute to seek technical assistance.

The questions submitted after the Bidders' Conferences and answers will be provided by the County in writing to all RFP recipients within five (5) days of the January 24, 2020 deadline. Such questions and answers issued by the County shall be sent via email, fax, and/or first class U.S. Postal Service to the last known business address of each individual or organization that received this RFP.

Questions or requests for technical assistance submitted after the deadline of **4:30 p.m. Friday, January 24, 2020**, will not be answered.

The County requires that other county management and employees *not* be contacted by bidders during the RFP process. Failure to comply with this requirement may disqualify those proposals from further consideration. Contact is limited to the County RFP Representative listed above for any and all inquiries.

C. Proposal Opening:

Proposals will be opened publicly at the Lassen County Behavioral Health Office at, **4:30 p.m. on Friday, January 31, 2020**. The only information disclosed at the opening will be the identity of the bidders.

D. Post-Review Discussion with Bidders:

Before making a final determination, bidders who submit proposals determined to be reasonably likely to be selected *may* be asked to meet with the evaluation committee to discuss and clarify elements of their proposal to ensure full understanding of the proposal and responsiveness to the RFP.

During such discussions, the County will not disclose rating information concerning competing bidders.

V. Format of Proposal and Content

Proposals submitted in response to this RFP must be prepared as and include the elements indicated below:

Format: Printed in 12-point Ariel font, paginated, and submitted with pages clipped together, *not* stapled or bound in a folder or notebook.

Proposal Summary (Exhibit A): Providing a clear and concise summary of the proposal, contact information, certifications, and signature.

Completed Proposal Checklist/Table of Contents (Exhibit B): Completed as indicated.

A. Each proposal response must include the following items:

a. Title Page - Title page must show the RFP subject; the vendor's name; the name, address, and telephone number of a contact person; and the date of the proposal.

b. Company Background: The vendor will provide a brief one-page company description, history, number of employees, summary of financial status and number of customer implementations vendor currently supports.

c. Executive Background: The vendor will describe their board and if they are non-profit or for-profit organization. Please provide and organizational chart.

d. Transmittal Letter - Submit a signed letter briefly addressing your understanding of the work to be done, the commitment to do the work detailed within this RFP and a statement explaining why the vendor believes itself to be best qualified to do the required work.

e. Vendor Representative - Include the name and title of the designated individual(s), along with respective telephone number(s) and email addresses, who will be responsible for answering technical and contractual questions regarding the proposal.

B. Describe in detail the services you propose to provide, including:

1. Please describe in detail how your organization will engage individuals with serious mental health disabilities, homeless individuals/families, veterans, transitional age youth (Lassen High School and Lassen College), middle school youth (Diamond View School), older adults, children 0-5 and parents, foster youth, individuals incarcerated in the jail and juvenile hall, LGBTQ populations.
2. Describe the type of wellness activities your organization will provide for the sub-groups described in question one and approximately how many individuals and/or families of each group you will serve? Describe the location the wellness activities will be held? When will the wellness activities be offered? Will any of the wellness activities be offered during the weekends and evenings?
3. Describe how services will meet the cultural and linguistic needs of those being served. (For example, how will your organization provide wellness activities for individuals who only speak a language other than English?
4. Strategies your organization developed for identifying and engaging the community's under-served and unserved population. How will you market/advertise your wellness activities to the community so the community is aware of what you provide?
5. Describe the qualifications of your one-on-one peer supports. Describe how the one-on-one peer support specialist will provide services? Will the peer supports be available to help talk to an individual in crisis when traditional services are closed or after normal business hours?
6. Describe in detail the evidence based practices you plan on using for each wellness activity. Also list the curriculum your organization will be using for each wellness activity.
7. Describe in detail strategies for providing education and training that reduces stigma; cultivates understanding and prevention of co-occurring disorders; and promotes wellness, resiliency, and recovery; for any staff or subcontractors your organization might use. Please state who will deliver

- the education and training to staff and sub-contractors and their qualifications.
8. Describe in detail how data will be collected, analyzed, and provided to the County each month.
 9. Describe the organizations strategy for sustaining program services in the event funding is reduced or eliminated.
 10. Implementation plan and timeline for the services offered.

C. Individual/Organizational Capacity: A brief description of the individual's or organization's history and capacity to provide the services proposed and résumés of proposed paid staff or subcontracted organizations.

Administrative Requirements:

1. Unless otherwise noted, the respondent must document all specified activities and services as directed by LCBH in accordance with the contract and instructions provided through LCBH training.
2. The respondent must develop and maintain written policies and procedures for employees and volunteers who work directly or indirectly with participants.
3. The respondent's policy and procedures must address participant safety and ensure that all activities with participants are conducted in a respectful, non-threatening, nonjudgmental, and confidential manner. The respondent must maintain current policies and procedures on file and make them available for review by LCBH upon request.
4. The respondent's administrative site must post the hours and days of operation at all building entrances.
5. The respondent must maintain documentation of continuing education units (CEUs) for paid staff in their personnel file, and make those available to LCBH for review.
6. The respondent must have written job descriptions for paid staff and volunteers maintained in their personnel files for LCBH review.
7. The respondent must maintain all documents that require participant or staff signatures in the participant's physical record for review by LCBH.

Risk Management:

The respondent will be providing peer services in the community and may have access to confidential medical records. The respondent shall:

1. Describe written policies and program philosophy regarding peer support specialist expectations and rules when peer support are providing services and what training will be provided to assure the appropriate

behavior when interfacing with the community and when having access to protected health information (PHI).

2. Outline the process the respondent will create to monitor and respond to issues between peer supports and LCBH clients and staff.

Evaluation Requirements

1. Outcomes are an important part of all treatment services administered by LCBH. All programs approved through this RFP process will be subject to evaluation by LCBH. All awarded contracts will be subject to LCBH review throughout the course of their contract. By accepting the award under this RFP, respondents agree to comply with the evaluation requirements of LCBH. LCBH will establish a data reporting mechanism and system and awardees must agree to supply all the required data necessary for the evaluation. Successful respondents will also be required to meet all data reporting requirements established by LCBH.
2. While LCBH will create a system to collect all of the contractor's data, the proposal must specify how the respondent plans to submit data to LCBH. Specifically, respondents must indicate that they have the technological capacity as well as the staff capability to use technology related to entering data into a data system that will be designed specifically for this initiative. If applicable, the respondent should provide evidence of prior successful data submissions to LCBH.

Letters of Support: Maximum of four (4).

VI. Format of Budget Template and Narrative

The Budget Template and Narrative (Exhibit C) should briefly describe each of the following components: Personnel, Contracted Services, Office Expenses, Travel/Training, and Other. You may use a different budget format than the template included but please make sure whichever format you use includes everything listed on Exhibit C.

VII. Proposal Submission Guidelines

Bidders must submit five (5) hard copies of their proposal including one (1) with an original signature and one (1) electronic PDF copy. The proposal must be formatted in accordance with the instructions of this RFP. Promotional materials may be attached, but are not necessary and will not be considered as meeting any of the requirements of this RFP.

Proposals must be enclosed in a sealed envelope or package, clearly marked "Lassen County RFP No. HSS-2019-05 – Wellness and One-on-One Peer Support Services" and delivered by **January 31, 2020 4:30 p.m.** to:

Lassen County Behavioral Health
Lassen County RFP No. HSS-2019-05
Attn: Holly Mackenzie
555 Hospital Ln
Susanville, CA 96130

Late or electronically submitted proposals, including those submitted via facsimile, will be disqualified and not considered by the evaluation committee.

Expenses incurred in preparation of the proposal, attendance at bidders' conferences, or any other actions related to responding to this RFP shall be the responsibility of the responder.

All proposals, response inquiries, or correspondence relating to or in reference to this RFP, and all reports, charts, displays, schedules, exhibits, and other documentation submitted by the respondent shall become the property of the County.

VIII. Modification or Withdrawal of Proposals

Revisions of proposals will not be permitted after the deadline for submission of proposals except as provided by Lassen County. Permission to make any revisions must be sought from Lassen County in writing. If Lassen County initiates a revision, it will do so in writing.

IX. Selection Process

The County reserves the sole right to judge the contents of proposals. The selection process will be governed by the following criteria:

- The proposals must adhere to the instructions and format specified in this RFP.
- The evaluation will include a review of all documents and information relating to the respondent's services, organizational structure, capabilities, qualifications, past performance, and costs.
- Respondents may be required to make an oral presentation to the evaluation panel before the final selection is made.

- The County may evaluate any information from any source it deems relevant to the evaluation.

X. Selection Criteria

The selection of a proposal and contract award will be based on the criteria contained in this RFP and as demonstrated in the submitted proposal. Respondents should submit information sufficient for the County to easily evaluate proposals with respect to the selection criteria. The absence of required information may cause the proposal to be deemed non-responsive and may be cause for rejection.

XI. Proposal Review and Evaluation Process

All proposals will be reviewed for completeness as described above in Section VII Proposal Submission Guidelines. Only those proposals deemed to be complete will be submitted to the evaluation panel.

XII. Eligible Respondents

An organization is not considered eligible to apply unless the respondent meets the eligibility conditions to the stated criteria listed at the time the proposal is submitted.

Eligible respondents include public or private non-profit 501(c)(3) entities. All respondents must comply with the criteria listed below under this RFP.

1. Respondent must be established as an appropriate legal entity as described in the paragraph above, under state statutes, and must have the authority and be in good standing to do business in California and to conduct the activities described in the RFP.
2. Respondent must be in good standing with the U.S. Internal Revenue Service.
3. Respondent may not be eligible for contract award if audit reports or financial statements submitted with the proposal identify concerns regarding the future viability of the contractor, material non-compliance, or material weaknesses that are not satisfactorily addressed, as determined by LCBH.

XIII. Suspension and Debarment

A. To be eligible to submit a proposal, a bidder must not be listed as an ineligible person on the U.S. Department of Health and Human Services Office of Inspector General's List of Excluded Individuals/Entities from federal programs or the California Department of Health Care Services Suspended and Ineligible

Provider List for Medi-Cal program services. The Office of Inspector General defines an ineligible person as any individual or entity that is currently excluded, suspended, debarred or otherwise ineligible to participate in the federal health care programs. They are also defined as any individual or entity that has been convicted of a criminal offense related to the provision of health care items/services and who has not been reinstated in the federal health care programs after a period of exclusion, suspension, debarment, or ineligibility. The California Department of Health Care Services defines a suspended individual or entity as those that have:

- (1) been convicted of a felony or misdemeanor involving fraud, abuse of a Medi-Cal program or any patient, or otherwise substantially related to the qualification, functions, or duties of a provider of services,
- (2) been suspended from the federal Medicare or Medicaid programs for any reason,
- (3) lost or surrendered a license, certificate, or approval to provide health care, or
- (4) breached a contractual agreement with the California Department of Health Care Services that explicitly specifies inclusion on their Suspended and Ineligible Provider List as a consequence of the breach. LCBH will not review a proposal submitted by an individual or entity on either list.

B. LCBH plans to use the following links to identify individuals and entities that are not eligible to contract with LCBH: <http://exclusions.oig.hhs.gov/> and <http://files.medi-cal.ca.gov/pubsdoco/Sandllanding.asp>. Each respondent should verify that it is not on either list prior to submitting a proposal. If a respondent is erroneously listed on either sanction list, they will be responsible for correcting the error prior to the submittal of their proposal.

C. LCBH requires that all potential contract entities self-disclose any pending charges or convictions against them or any individual with their organization for violations of criminal law, any sanctions, and any disciplinary actions by any federal or state law enforcement agency, regulatory agency, or licensing agency (including exclusion from Medicare and Medicaid programs).

D. If a contractor and/or individual within the contractor's organization become an Ineligible person after LCBH has executed a contract with the entity/individual, the contractor/individual shall be removed from any responsibility and involvement with the LCBH contracted obligations that are related to federal or state health care programs/funding.

E. Vendor Required Experience

A respondent must have a minimum of three (3) year's experience in training and employment of peer support coaching staff. In their proposals, bidders will need to detail services they have provided that are similar to the services outlined in this RFP without contract failures.

A. Evaluation

Proposals will be evaluated on six (6) elements totaling 200 points.

Proposal Element	Maximum Point Value
Quality of respondent’s plan for performing the services and activities and addressing the questions in Section V.	40
Ability of respondent to perform services as demonstrated by related experience and past performance.	40
Qualifications and characteristics of paid personnel and volunteers, including lived experience and status of recovery, background checks, education and training, and ability to engage the target population.	30
Capacity for internal quality assurance and improvement procedures to monitor and improve quality of services provided, documentation, record keeping, billing, etc.	30
Demonstration of collaboration, innovation, and creativity.	30
Quality of implementation plan and corresponding timeline.	30
TOTAL	200

XIV. Award Process

1. Each apparently qualified proposal will be evaluated by a panel consisting of no less than three or greater than five members. Respondents may be asked to make a presentation to the Evaluation Committee regarding their qualifications and/or proposal.
2. The award of a contract will be based on the quality of proposal and the ability to meet the County’s needs. The County may select to award a single county-wide contract or multiple contracts for specific areas, depending upon the evaluation of the proposals.
3. Each respondent will be notified in writing or by email of the decision regarding its proposal.
4. The successful respondent(s) and the County will enter into contract negotiations.
5. Negotiated contract(s) will be submitted to the Lassen County Board of Supervisors for final approval and award.

It is anticipated that delivery of services under the contract will begin, or soon thereafter. All RFP materials may be made public upon request.

XV. Cancellation

Lassen County reserves the right to reject any or all proposals received as a result of this request, to negotiate with any qualified individual/organization, or to modify or cancel in part or in its entirety the RFP if it is in the best interests of the County to do so.

XVI. Appeal

Respondents will have ten (10) working days after notification of non-award to file an appeal. The appeal must be made in writing and specifically state the grounds for the appeal. Letters of Appeal should be directed to:

Director, Health & Social Services
336 Alexander Avenue
Susanville, CA 96130
Attn: Danielle Sanchez, Administrative Assistant

XVII. List of Exhibits

Exhibit A - Proposal Summary and Statement of Responsibility (Signature Page)
Exhibit B - Proposal Checklist/Table of Contents
Exhibit C - Budget Template

EXHIBIT A
PROPOSAL SUMMARY AND STATEMENT OF RESPONSIBILITY (SIGNATURE PAGE)

County of Lassen
Health and Social Services

RFP No.
Wellness and One-on-One Peer Support
Services

RFP No.:	HSS-2019-05
RFP Issue Date:	December 17, 2019
RFP Submission Deadline:	January 31, 2020

Proposals must be enclosed in a sealed envelope or package, clearly marked "Lassen County RFP No. HSS-2019-05 – Wellness and One-on-One Peer Support Services" and delivered by 4:30 p.m. (Pacific Daylight Time), Friday, January 31, 2020, to: Lassen County Behavioral Health; Lassen County RFP No. HSS-2019-05; Attn: Holly Mackenzie, 555 Hospital Ln Susanville, CA 96130.

Questions regarding this RFP should be directed to:

Holly Mackenzie
(530) 251-8487
hmackenzie@co.lassen.ca.us

This Proposal Summary and Statement of Responsibility (Signature Page) must be included with your submittal in order to validate your proposal. Proposals submitted without this page will be deemed non-responsive.

Firm Authorized Representative

Company Name: _____ Date: _____
Representative: _____ Title: _____
Address: _____
Phone: _____ Fax: _____
Federal Tax ID No.: _____ Email: _____

RFP Contact Information (if different then above)

Contact Person: _____ Title: _____

Email Address: _____

Address: _____

Phone: _____ Fax: _____

Certifications:

1. Do you certify that all statements in the proposal are true? This shall constitute a warranty, the falsity of which shall entitle the County to pursue any remedy authorized by law, and shall include the right, at the option of the County, of declaring any contract made as a result thereof to be void.

YES NO

2. Do you agree to provide the County with any other information the County determines is necessary for accurate determination of your qualifications to provide services?

YES NO

To the best of my knowledge and belief, the information provided in this initial determination of responsibilities is true and correct.

Authorized Representative: _____ (Printed Name)
Signature: _____
Date: _____

EXHIBIT B
PROPOSAL CHECKLIST/TABLE OF CONTENTS

This proposal checklist identifies the various components that must be submitted with your proposal. This form is to be completed and included in the proposal and must be located directly behind Exhibit A.

Follow this sequence in presenting your proposal with the checklist serving as your table of contents.

Proposal Check List/Table of Contents	Page No.
Proposal Summary and Statement of Responsibility (Signature Page), signed by authorized representative (Exhibit A)	
Proposal Check List/Table of Contents (Exhibit B)	
Program Narrative	
Individual/Organization Capacity (including résumés)	
Letters of Support	
Budget Template and Narrative (Exhibit C)	

**EXHIBIT C
BUDGET TEMPLATE AND NARRATIVE**

Applicant

Detail Budget -

Category Item/Service	Quantity (Year 1)	Cost (Year 1)
Personnel		
Contractual Services		
Office Expenses		
Travel & Training		
Other		