Invitation to Submit Applications
FIRST 5 Mendocino invites bids for a consultant and/or agency to conduct strategic planning activities including; 1) meeting preparation, 2) meeting facilitation, 3) defining the strategic planning timeline 4) community input and 5) writing of FIRST 5 Mendocino’s Fiscal Years 2020-2025 strategic plan. The Commission is seeking a short-term (6-12 month), mutually beneficial independent contract relationship with a qualified consultant to assist the Commission in its efforts to prioritize needs and allocate funding for a 5 year strategic plan. FIRST 5 Mendocino has allocated up to $25,000 for this RFP.

Overview of FIRST 5 Mendocino
FIRST 5 Mendocino was formed following the passage of Proposition 10 in 1998. The Prop 10 initiative added a 50-cent-per-pack tax on cigarette sales to fund programs promoting early childhood development for children ages 0-5 and their families. The Commission is charged with the local implementation of the stated goals of Prop 10: to ensure children are learning and ready for school; families are strong and self-sufficient; children are healthy; and systems and services are integrated and accessible. In July 2019, the Commission entered the final year of its 2017-20 strategic plan, which is inclusive of three priority areas: Increasing Family Resilience by Improving Parenting and Reducing Substance Abuse. For a copy of the current Strategic Plan, please click http://www.mendochildren.org/about-first-5-mendocino/.
Scope of Strategic Planning Services and Deliverables
Applications are being accepted to develop the Commission’s next 5-year strategic plan. Below are 3 primary service components and general expectations the Commission has of the FIRST 5 Mendocino Strategic Plan Consultant:

1. Preparation for Strategic Plan Work Group Meetings:
   - Meet with executive director and staff for background on planning process and to gain a thorough understanding of FIRST 5 Mendocino’s statutory requirements to identify local needs and allocate funds to improve the lives of children ages 0-5.
   - Develop meeting materials that will help move the Commission members through major decision points in order to identify priorities and allocate funds for 2020-25.

2. Facilitation of the Strategic Planning Meetings Held During Commission Meetings:
   - Facilitate strategic plan discussions during Commission meetings where the members will reach consensus on the following:
     - priority areas for funding
     - funding levels for each identified priority area
     - organize and facilitate public and committee meetings, focus groups and interviews
     - provide a written report and presentation to the Commission

   Commission meetings are held each month on the fourth Monday of the month, with a few exceptions.

3. Define Strategic Planning Timeline:
   - Assist in defining the strategic planning timeline. The current plan expires June 30, 2020.

4. Gathering Community Input:
   - Meet with Executive Director and staff and assist in developing a plan on how to collect community input to inform the strategic plan.
   - Assist the Commission and staff in gathering community input.

5. Writing of the 2020-25 Strategic Plan:
   - Meet with Commission staff to review Prop 10 statute requirements.
   - Write the FIRST 5 Mendocino 2020-25 Strategic Plan, ensuring that all requirements are included.
Application Instructions and Content Requirements
This section describes the required application format and content. Failure to follow the prescribed format may result in rejection of the application.

A. Proposal Format
The Narrative text sections of the application should be typewritten on standard 8½ X 11 paper, single spaced with one-inch margins on all sides of the paper using 12-point font and a maximum of five pages. Do not staple proposals; binder clip each proposal together.

B. Number of Copies
Applicants must provide one (1) original application with signatures in blue ink by an individual legally authorized to bind the agency/organization, four (4) complete copies of the entire application, and one electronic copy on a flash drive.

C. Outline of Application Content
The content and sequence of the Application is as follows:

1. Application Cover Sheet (Attachment 1)
2. Detailed summary of your qualifications and applicable experience
3. Narrative overview of how you would complete these services
4. Scope of Work (Attachment 2)
5. Proposed Deliverable Budget and Budget Justification
6. Conflict of Interest Statement (Attachment 3)

D. Application Instructions

1. Application Cover Sheet and Certification Form: Complete the Application Cover Sheet (Attachment 1). Original signatures must be in blue ink by an individual legally authorized to bind the agency/organization.

2. Detailed summary of qualifications and applicable experience: Provide a brief history of the individual/agency, including number of years in operation, and demonstrate the Applicant has the qualifications, capability and experience to perform the requirements included in this RFP. Provide a description of the experience and qualifications of the proposed key staff members who will be assigned to this project, including function, level of education, degree and/or license, if appropriate, and a detailed resume for each person.

3. Narrative overview of how the Applicant would complete these services: Describe in detail how the Applicant will meet the desired services in this RFP. Include activities and deliverables the Applicant believes may be accomplished with the resources available. Identify all major tasks, activities and outputs and describe how they will be reached, including the timeframe required.
4. **Scope of Work, including timeline and tasks:** Complete the attached Scope of Work form (Attachment 2).

5. **Proposed Budget and Budget Justification:** Include and clearly detail all costs, payment schedules, line items categories and/or other related costs associated with the application. Please include a budget justification providing clear explanation of costs.

6. **Conflict of Interest Statement:** Complete and submit the Conflict of Interest Statement (Attachment 3).

**Selection Process**
A selection team consisting of FIRST 5 Mendocino Executive Committee members and staff will review the applications prior to interviews with the Applicants during the week of March 2, 2020 to March 6, 2020. A recommendation for award will be voted on at the March 23, 2020 Commission meeting. The recommendation will be based on the best interest of FIRST 5 Mendocino, rather than the lowest cost application. All funding decisions are final; there is no appeal process to the Commission. Applicants who meet the minimum qualifications set out in this RFP will be asked to interview with the selection team. The interview will enable FIRST 5 Mendocino to gather further information on any aspect of the application, to seek additional information and/or references and to review work samples and other relevant materials.

Applicants will be notified in writing of their application status following completion of the review and interview no later than March 15, 2020.

**Application Submission**
Please submit an original, four (4) copies, and an electronic copy (on a flash drive) of your application in an envelope marked: “Proposal – FIRST 5 Mendocino Strategic Plan Consultant Services” addressed to:

Roseanne J. Ibarra  
FIRST 5 Mendocino  
166 East Gobbi Street  
Ukiah, CA 95482

Applications are due at FIRST 5 Mendocino offices by 5:00 p.m. on Monday, February 24, 2020. Email questions to Maritza@mendochildren.org.
Strategic Plan Consultant Services Application Cover Sheet

Individual/Agency Name___________________________________________________________

Contact Person __________________________ Title________________________

Address_______________________________________________________________________

Phone: __________________ E-mail: __________________

RFA Check List:

_____ Application Cover Sheet and Certification Form

_____ Detailed summary of your qualifications and applicable experience

_____ Narrative overview of how you would complete these services

_____ Scope of Work (Attachment 2)

_____ Proposed Budget and Budget Justification

_____ Conflict of Interest Statement

Authorized Representative:
THE APPLICANT CERTIFIES THAT: To the best of my knowledge and belief, data in this application are true and correct. The document has been duly authorized by the governing board of the applying agency.

Name: ______________________________ Title: ______________________
(please print)

Signature: __________________________ Date: __________________

This page must be attached to your application. Submit an original, four (4) copies and an electronic version, on a flash drive, of the application to:
FIRST 5 Mendocino
166 East Gobbi Street
Ukiah, CA 95482
Strategic Plan Consultant Services Application
Scope of Work Form

FY 19/20

Agency Name: ________________________________

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<tr>
<th>Major Category/Task</th>
<th>Activities</th>
<th>Deliverables</th>
<th>Due Date</th>
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Conflicts of Interest Statement

TO: FIRST 5 Mendocino Commission
   166 East Gobbi Street
   Ukiah, CA 95482

SUBJECT: Application in Response to RFP #: 19/20-01

TYPE OF BUSINESS/AGENCY: (CHECK ONE)

__ Public __ Corporation __ Private Nonprofit __ Private for Profit __ Individual Owner
__ Partnership
__ Other – specify: ____________________________

______________________________________________________________________________

Name of Applicant (Legal Entity)

______________________________________________________________________________

Name, Parent Corporation (if applicable)

______________________________________________________________________________

Address of Applicant (Street, City, State, Zip Code)

______________________________________________________________________________

Applicant's Federal Tax Identification Number/Individual’s SSN

______________________________________________________________________________

Contact Person (Please Print) (Name, Title, Phone Number)

______________________________________________________________________________

Name and title of person(s) authorized to sign for agency
APPLICANT’S STATEMENTS

1. Number of years prospective contractor has been in business under present business name, as well as prior or related business names: _____________________________________________

2. Number of years prospective contractor has been licensed: ____________________________

3. Number of years of experience prospective contractor has had in providing required, equivalent, or related services: _____________________________________________

4. List relevant contracts completed in last five years.

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<th>Year</th>
<th>Contracting Agency</th>
<th>Type of Service</th>
<th>Location</th>
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5. List relevant contracts, or other commitments (e.g. consulting arrangements), currently in force.

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6. Provide details of any failure or refusal to complete a contract.

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________
ATTACHMENT 3

7. If not a governmental agency, complete the following:
   a. Does the agency hold a controlling interest in any other organization?
      __Yes  __No
      If yes, list organizations__________________________________________________________
                                                                                       ______________________________________
   b. Is the agency owned or controlled by any other person or organization?
      __Yes  __No
      If yes, list person(s) or organization(s):__________________________________________
                                                                                       ______________________________________
                                                                                       ______________________________________
   c. Financial interest in any other business:__________________________________________
   d. Name of persons with whom the prospective contractor has been associated in business as
      partners or business associates in the last five years:
         Name of Business Associate  Name of Business
         ___________________________________________  ___________________________________________
         ___________________________________________  ___________________________________________
         ___________________________________________  ___________________________________________
         ___________________________________________  ___________________________________________

8. Briefly describe any litigation involving the agency, or principal officers thereof, in connection with any contract.

                                                                                       ______________________________________
                                                                                       ______________________________________
                                                                                       ______________________________________
                                                                                       ______________________________________
9. Is all major equipment necessary to complete this project currently on hand?

__Yes  __No

If no, list all major equipment that needs to be purchased.

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

10. List any commitments or potential commitments, which may impact assets, lines of credit, or guarantor letters, or otherwise affect the applicant’s ability to perform the contract services.

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________
Certification

I certify that all statements in this document, Applicant’s Statements, are true. This certification constitutes a warranty, the falsity of which shall entitle the Commission to pursue any remedy authorized by law, which shall include the right, at the option of the Commission, of declaring any contract made as a result hereof to be void. I agree to provide the Commission with any other information the Commission determines is necessary for the accurate determination of the agency's qualification to provide services.

I certify that the ________________________________ (agency's name) will comply with all requirements specified in the RFP and any contract resulting from this RFP process which are applicable to the services which we wish to provide. I agree to the right of the FIRST 5 Mendocino Commission, County, State, and Federal government(s) to audit the financial and other records of the agency named above.

__________________________________________
Print Name of Applicant or Authorized Agent

__________________________________________
Signature of Applicant or Authorized Agent

__________________________________________
Title of Applicant or Authorized Agent

____________________________
Date

Application packages in response to RFP #: 19/20-01 ARE DUE NO LATER THAN 5:00 P.M on Monday, February 24, 2020, to the Commission Office, located at 166 East Gobbi Street, Ukiah, California 95482.