

REQUEST FOR PROPOSALS

OLDER AMERICANS ACT FUNDS TITLES III-B, III-D, III-E FOR PERIOD JANUARY 1, 2026 - DECEMBER 31, 2026

SUBMISSION DEADLINE:

JULY 2, 2025 5:00 P.M.

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC. d/b/a AGING & DISABILITY RESOURCE CENTER OF BROWARD COUNTY (ADRC) d/b/a AREA AGENCY ON AGING OF BROWARD COUNTY (AAABC)

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I. INTRODUCTION

A. BACKGROUND STATEMENT

The Areawide Council on Aging of Broward County, Inc. d/b/a The Area Agency on Aging of Broward County (AAABC) is a nonprofit organization serving Broward County's older adult residents, age 60 or older. The Areawide Council on Aging, Inc. was incorporated in 1974. The AAABC is part of a State Network which contains a total of 11 Area Agencies on Aging in the State of Florida which each have their own planning and service areas (PSAs). The AAABC is designated as PSA 10 and is the only PSA comprised of one county, Broward County.

Our mission is to plan, develop, coordinate, evaluate programs and provide services for Broward residents, 60 years of age and older. We are the prime advocate for Broward County older adults.

The Area Agency on Aging of Broward County exists to improve the quality of life for all older adults living in Broward County. We do this by collaborating with other organizations and providing exceptional, compassionate leadership in a broad array of programs dedicated to allowing those we serve to continue to live life to their fullest potential.

Our programs are funded by the following through the Florida Department of Elder Affairs and the Areawide Council on Aging of Broward County: Titles III-B, III-C, III-D, III-E, V, and VII of the Reauthorized Older Americans Act; Florida's Community Care for the Elderly and Home Care for the Elderly Acts; Alzheimer's Disease Initiative Legislation; Medicaid; Serving Health Insurance Needs of the Elderly; and Emergency Home Energy Assistance for the Elderly.

The Older Americans Act (OAA), enacted in 1965, marked a pivotal moment in the Federal Government's involvement in providing leadership and services to older adults. The Act facilitated the development of innovative and enhanced programs aimed at supporting older individuals. The Act also created the Administration on Aging which was established as the primary agency responsible for implementing the Act. The legislation mandated each State to designate a unit tasked with overseeing comprehensive and coordinated service systems. This designated unit would receive funds authorized by the Older Americans Act, which are administered through the Administration on Aging.

In Florida, the designated State Unit on Aging is the Department of Elder Affairs (DOEA). In addition, the State is divided into eleven Planning and Service Areas (PSAs), encompassing one or more counties. Within each PSA, an Area Agency on Aging (AAA) has been designated. The responsibilities of the Area Agency on Aging include planning, funding, acting as a catalyst, and advocating for programs that serve older individuals within the service area.

Each Area Agency on Aging is responsible for creating a multi-year Area Plan on Aging as well which is updated annually. The plan identifies the needs of older adults, outlines gaps between needs and services, details existing services, sets priorities, and specifies provided services. Input is gathered from federal, state, and local officials, elderly constituents, service providers, and the private/voluntary sector.

Later on Florida's eleven Area Agencies on Aging were also mandated to become Aging Resource Centers (ARCs) pursuant to §430.2053, Florida Statutes, passed by the State Legislature in 2003. Broward's Area

Agency was one of three, in the state, to be selected initially to serve as a pilot Aging & Disability Resource Center starting in September of 2005.

B. STATEMENT OF NEED

According to the 2024 Broward County Profile of Older Floridians, provided by the Florida Department of Elder Affairs (DOEA), 497,917 older adults sixty and over, are year round Broward County residents. Of that number, 157,948 are seventy-five years of age and older, and 49,882 are eighty-five years of age and older. Seasonal fluctuations may increase these population numbers. Recent needs assessments and census data have determined that many older persons are in need of supportive or intense service assistance. A major goal of the AAABC is to maintain the independence and dignity of Broward County older adults by providing a continuum of home and community based services designed to serve the range of older persons from the independent, to the frail.

C. STATEMENT OF PURPOSE

This RFP is for Older American Act funded Programs. The Florida Department of Elder Affairs has determined that Area Agencies on Aging must competitively bid contracts for OAA Title III Services at least once every six years in accordance with applicable state and/or federal regulations.

To coincide with this regulation, the Area Agency on Aging of Broward County is requesting proposals for the calendar year 2026, as the first of a six-year cycle. Continuation funding, for years two through six, is contingent upon performance, need for the service, and the availability of funds.

Any public agency or private nonprofit agency/organization, incorporated under the laws of Florida, is eligible to apply for Older Americans Act (OAA) Title III funding. Private, profit-making agencies are eligible to apply for OAA Title III, but in accordance with Chapter 287, Florida Statutes, may not receive advance funding for contractual services. A regional or local agency of the state may not be a service provider under an area plan.

Applicants for the Older Americans Act Programs should understand that their general responsibilities include all aspects of accountability, including the completion of all necessary reports and the maintenance of required records.

The Area Agency on Aging of Broward County, under the direction of the Areawide Council on Aging of Broward County, Inc., Council, is requesting proposals for the administration/operation of a variety of Older Americans Act Title III Service Programs including:

1. Part B: Supportive Services

<u>**Priority Supportive Services:**</u> The Older Americans Act requires that an adequate proportion of the amount allocated to a Planning and Service Area for OAA, Title IIIB Supportive services be expended to deliver the following three categories of service:

Access Services: Services such as Transportation, Outreach, Information and Referral, and Case

Management;

In-home Services: Services including Homemaker, Home Health Aide, Home Repair, Companionship, Telephone Reassurance, Chore, Respite, and other supportive services for families of older adults with Alzheimer's disease or related dementia.; and

Legal Assistance: Legal assistance provided is related to income, health care, long term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

Other Supportive Services are found in Section II.B. Service Descriptions.

2. <u>Part D</u>: <u>Evidence-Based Disease Prevention and Health Promotion Services</u> - Include services and activities that have been demonstrated through rigorous evaluation to be effective evidence-based programs to assist older adults in maintaining a healthy lifestyle.

Evidence-Based Disease Prevention and Health Promotion Services are found in Section II.B. Service Descriptions.

3. <u>Part E: National Family Caregiver Support Program Services (NFCSP)</u> – These services allow the development of multifaceted systems of support services to the following individuals: family caregivers; and Grandparents or older individuals, 55 years of age or older, who are relative caregivers of children not more than 18 years old or individuals with disabilities.

<u>Caregiver Support Services (OA3E)</u>: These services are intended to provide direct help to caregivers who provide care for older adults (60 and older). These services assist in the areas of health, nutrition and financial literacy and help caregivers in making decisions and problem solving related to their caregiving roles and responsibilities.

Caregiver Supplemental Services (OA3ES): OA3ES supplemental services are available to older adults aged 60 and older, or grandparents and non-parent relative caregivers, age 55 and older, enrolled in OA3EG (grandparent) caregiver programs. The elders must meet the frailty requirement to be eligible to receive supplemental services under OA3ES.

<u>Grandparent or Non-Parent Relative Support Services (OA3EG)</u>: OA3EG services are for non-parent relative caregivers (55 and older) caring for children under the age of 18 and children aged 18 and older with disabilities designed to help meet their caregiving obligations.

National Family Caregiver Support Program Services (NFCSP): OA3E, OA3ES, and OA3EG are found in Section II.B. Service Descriptions.

II. SCOPE OF WORK

A. GENERAL STATEMENT

The Area Agency on Aging of Broward County has tentatively reserved funding in Titles III-B, III-D and III-E for nine (9) separate Service Programs. These are:

- 1. Focal Point Senior Center Southeast/Southcentral
- 2. Focal Point Senior Center Southwest
- 3. Focal Point Senior Center Northeast
- 4. Focal Point Senior Center Northwest
- 5. Focal Point Senior Center Central One
- 6. Focal Point Senior Center Central Two
- 7. Home Improvement Program
- 8. Senior Citizens Law Program (Legal Assistance)
- 9. Grandparent or Non-Parent Relative Support Services (OA3EG)

Funding levels and areas to be served are indicated by Service Program in Section IV to this Request for Proposals Package.

Proposal respondents may submit responses for one or more of the Service Programs. However, a separate and complete application/response, with all appropriate attachments, must be submitted for each Service Program.

All responses must include a list of proposed services to be provided under the Service Program as well as the anticipated service units.

All Programs are required to support, collaborate, and refer to other Older Americans Act Projects, particularly with the countywide Nutrition Program, and the ADRC Helpline. In addition, they must continue to play an integral role in the continuum of care as it relates to the State Funded Community Care for the Elderly, Home Care for the Elderly and Alzheimer Disease Initiative Acts.

A Focal Point as defined in the Department of Elder Affairs Program and Services Handbook is a Community Focal Point, which is a facility established under the Older Americans Act. Its purpose is to promote the maximum collocation and coordination of services for older individuals, ensuring that they have access to comprehensive resources and support within their community.

B. SERVICES

All services must be provided in accordance with standards delineated in the most current Department of Elder Affairs (DOEA) Programs and Services Handbook.

FOLLOWING IS A LISTING OF SERVICES WHICH CAN BE PROVIDED UNDER THIS RFP:

A Matter of Balance Program/Programa Un Asunto de Equilibrio Adult Dav Care Arthritis Foundation Exercise Program Arthritis Foundation Tai Chi Program (Tai Chi for Arthritis) Caregiver Training/Support Child Day Care Chore Chronic Disease Self-Management Program/Tomando Control de Salud Counseling (Gerontological) Diabetes Self-Management Program/Programa de Manejo Personal de la Diabetes Education/Training Health Support Healthy Eating Every Day Homemaker **HomeMeds** Housing Improvement Legal Assistance Material Aid Outreach Personal Care Powerful Tools for Caregivers Recreation Respite Care (Facility Based) Respite Care (In-Home) Screening/Assessment Specialized Medical Equipment, Services and Supplies Tai Chi/Tai Ji Quan: Moving for Better Balance Transportation Walk with Ease

Additional services may be proposed. A complete listing of OAA Funded Services may be found in the most recent Department of Elder Affairs (DOEA) Programs and Services Handbook, Appendix A (see electronic link).

FUNDING: SERVICE DESCRIPTIONS: SOURCE

ACCESS SERVICES

Title III-B <u>Outreach</u>

Title III-E Outreach is an access service and is a required service or function in title III-B. Outreach

Title III-EG is defined as face to face, one-to-one intervention with older clients initiated by the agency for the purpose of identifying potential clients or caregivers and encouraging their use of existing and available resources.

Unit of Service: One unit of service equals an episode of outreach which is one-on-one, face-to-face contact with an older individual who is not receiving any DOEA funded services.

Title III-B <u>Transportation</u>

Title III-E Transportation is defined as travel to or from community services and resources,

Title III-EG health and medical care, shopping, social activities, or other life sustaining activities.

LSP

Unit of Service (Individual): One unit of service equals a one-way trip, (the single entrance, travel to a destination, and exit from a transportation vehicle).

Unit of Service (Group): One unit of service equals a one-way trip, (the single entrance, travel to a destination, and exit of older adults, regardless of the number of older adults, from a transportation vehicle).

Additional services may be proposed. A complete listing of OAA Funded Services may be found in the most recent Department of Elder Affairs (DOEA) Programs and Services Handbook, Appendix A (see electronic link)

IN-HOME SERVICES

Title III-B Chore

Title III-ES Chore is defined as the performance of routine house or yard tasks, including such jobs as seasonal cleaning; yard work; lifting and moving furniture, appliances or heavy objects; household repairs which do not require a permit or specialist; and household maintenance. Pest control may be included, when not performed as a distinct activity.

Unit of Service: One unit of service equals one worker hour, beginning at the time of arrival and concluding at the time of departure from client contact. Chore service does not include travel time to nor from the client's residence, except as appropriate for performing essential errands (such as picking up materials) as approved by the job order.

Title III-B Homemaker

Homemaker Service is defined as the accomplishment of specific home management duties by a trained homemaker. Duties may include but are not limited to: housekeeping; laundry; cleaning refrigerators; clothing repair; minor home repairs; assistance with budgeting and paying bills; client transportation; meal planning and preparation; shopping assistance; and routine house-hold activities.

Unit of Service: One unit of service equals one worker hour. Travel time can be counted if the homemaker transports the client or performs essential errands for the client as approved by the job order.

Title III-BPersonal Care

LSP

Personal Care is primarily the provision of assistance with eating, dressing, personal hygiene, and other activities of daily living. This service may also include other tasks that are incidental to the care provided. Assistance with meal preparation and housekeeping chores, such as bed making, dusting, and vacuuming are examples of these secondary services.

Personal Care can include accompanying the client to clinics, physician office visits, or trips for the purpose of health care, provided that the client does not require special medical transportation. Personal Care can also include shopping assistance to purchase food, clothing and other items needed for the client's personal care needs.

Unit of Service: One unit of service equals one hour of direct service with a client.

Title III-B Respite Care (In-Home)

Title III-E In-home Respite Care is the provision of relief or rest for a primary caregiver from the constant, continued supervision, and care of a functionally impaired older person by providing care for the person in the home for a specified period.

Unit of Service: One unit of service equals one hour of direct service.

Additional services may be proposed. A complete listing of OAA Funded Services may be found in the most recent Department of Elder Affairs (DOEA) Programs and Services Handbook, Appendix A (see electronic link)

LEGAL ASSISTANCE

Title III-B Legal Assistance

Title III-EG The goal of the Florida Elder Law Program is to build a collaborative and supportive network of key stakeholders in both the aging and legal services networks to ensure accessible, high impact, high quality legal services, which are targeted particularly to older Floridians in greatest economic or social needs.

Unit of Service: One unit of service equals one hour of direct service with or on behalf of a client accumulated daily.

OTHER SERVICES

Title III-B Adult Day Care is a program of therapeutic social and health activities and

Title III-E services provided to elders who have functional impairments. Services are

LSP provided in a protective, community-based environment.

Unit of Service: One unit of service equals one day, which is equal to eight (8) hours. Partial days must be reported in quarter increments, as follows: Up to 2 hours = 0.25 Days 2-4 hours = 0.5 Days 4-6 hours = 0.75 Days 6-8 hours = 1 Day

Title III-D <u>A Matter of Balance Program/Programa Un Asunto de Equilibrio</u> was adapted from Boston University Roybal Center by Maine's Partnership for Healthy Aging. A Matter of Balance uses practical coping strategies to reduce fear of falling and to diminish the risk of falling, including group discussions, mutual problem solving, exercises to improve strength, coordination and balance, and home safety evaluation.

Unit of Service (Group): A Unit of service equals one episode of direct service with a minimum of 8 participants and a maximum of 12 participants in the first session. The same participants would continue through the four-week (2 times weekly) or eight-week (one time weekly) course. One episode equals either a four-week or eight-week course. The entire eight sessions needs to be completed prior to submitting for payment.

Title III-D Arthritis Foundation Exercise Program is a group recreational exercise program designed specifically for people with arthritis and related diseases. The Arthritis Foundation now partners with the Athletics and Fitness Association of America for program fidelity. The program uses gentle activities to help increase joint flexibility and range of motion, maintain muscle strength, and to increase overall stamina. Other reported benefits include increased functional ability, increased self-care behaviors, decreased pain and decreased depression. The exercises learned in the program, however, should not replace therapeutic exercise prescribed for the participant by their therapist.

Unit of Service (Group): One episode of direct service with or on behalf of clients regardless of the numbers of participants for the entire eight-week period.

Title III-B
Title III-ECaregiver Support Group
are led by a trained individual to facilitate caregivers discussing
their common experiences and concerns and develop a mutual support system. Caregiver
support groups are typically held on a regularly scheduled basis and may be conducted in
person, over the telephone, or online. Caregiver support groups do not include caregiver
training, peer-to-peer support groups or other groups primarily aimed at teaching skills or
meeting without a trained facilitator.

Unit of Service (Group): A unit is one episode, which is equal to one hour and can be reported in quarter increments.

Title III-B <u>Caregiver Training</u> is defined as the training of caregivers to improve their knowledge and

Title III-Eperformance of specific skills relating to their caregiving roles and responsibilities. SkillsTitle III-EGmay include activities related to health, nutrition, and financial management; providing
personal care; and communicating with health care providers and other family members.
Caregiver training may be conducted in-person or online through community workshops,
seminars, support groups and other organized local, regional, or statewide events.

Unit of Service (Individual): A unit of service is one hour with a client.

Unit of Service (Group): A unit is one hour with clients, regardless of the number who participates.

Title III-EG <u>Child Day Care</u> services are provided to a minor child, not more than 18 years old, or a child who is an individual with a disability residing with an age 55+ grandparent or other age 55+ related caregiver.

Unit of Service: One hour of actual client attendance at a facility is one unit of child day care service. Actual client attendance is defined as the time between the time of arrival and the time of departure from the facility.

Title III-D Chronic Disease Self-Management Program/Tomando Control de su Salud was

developed by Stanford University; the division has been renamed as the Self-Management Resource Center (SMRC). People with different chronic health problems attend workshops in a community setting. Subjects covered include:

- (1) Techniques to deal with problems such as frustration, fatigue, pain, and isolation;
- (2) Appropriate exercise for maintaining and improving strength, flexibility, and endurance;
- (3) Appropriate use of medication;
- (4) Communicating effectively with family, friends, and health professionals;
- (5) Nutrition; and
- (6) How to evaluate new treatments.

Unit of Service (Group): A unit of service equals one episode of direct service with a minimum of 10 participants and a maximum of 16 participants (minimum 8/maximum 16 in rural and low populated areas) on the first session. The same participants would continue through the 6-week course. One episode equals a 6-week session. The entire (6) six weeks need to be completed prior to submitting request for payment.

Title III-B <u>Counseling (Gerontological)</u> provides emotional support, information, and

Title III-E guidance through a variety of modalities including mutual support groups for older adults who are having mental, emotional, or social adjustment problems that have

arise because of the process of aging.

Unit of Service (Individual): One unit of service equals one hour of direct service with or on behalf of a client accumulated daily.

Unit of Service (Group): One unit of service equals one hour of direct service with or on behalf of clients regardless of the number of participants.

Title III-D Diabetes Self-Management Program/Programa de Manejo Personal de la Diabetes was developed by Stanford University; the division has been renamed as the Self-Management Resource Center (SMRC). Individuals managing Type 2 diabetes make weekly actions plans, share experiences, and help one another create and carry out these plans while they are taught (through workshops) techniques, appropriate exercises, healthy eating, appropriate use of medications, and ways to work more effectively with health care providers.

Unit of Service (Group): A unit of service equals one episode of direct service with a minimum of 10 participants and a maximum of 16 participants (minimum 8/maximum 16 in rural and low populated areas) on the first session. The same participants would continue through the 6-week course. One episode equals a 6-week session. The entire (6) six weeks needs to be completed prior to submitting request for payment.

- Title III-B Education/Training is defined as speaking to groups or distributing materials to
- **Title III-E** individuals at public gatherings about services and opportunities available to them
- **Title III-EG** within their communities; providing formal or informal opportunities for individuals or groups to acquire knowledge, experience, or skills; to increase awareness in such areas as crime or accident prevention; promoting personal enrichment; and to increase or gain skills in a specific craft, trade, job, or occupation. Training individuals or groups in guardianship proceedings of older individuals if other adequate representation is unavailable can also be done; as well as training conducted by memory disorder clinics funded under the Alzheimer's Disease Initiative designated to increase understanding of the disease and facilitate management of persons with Alzheimer's disease by their caregivers and health professionals.

Unit of Service (Individual): One unit of service equals an episode of direct service with a client, regardless of the amount of education/training provided.

Unit of Service (Group): One unit of service equals an episode, regardless of number of persons educated. Examples of one unit of service are:

- (1) One presentation, regardless of number of attendees;
- (2) One training presentation;
- (3) One program-wide distribution of information;
- (4) One article prepared and printed in a newsletter or newspaper;
- (5) One radio or television presentation; or
- (6) One exhibit at a health fair or other public event, whose audience, or attendees are known to include older adults or caregivers.
- **Title III-B** <u>Health Support</u> activities assist persons to secure and utilize necessary medical treatment as well as preventive, emergency, and health maintenance services. Examples of health support activities are:

- (1) Physical activities, including regular exercise programs, weight control emphasis, and activities to reduce mental fatigue, stress, and boredom;
- (2) Special programs, such as hospice or Alzheimer's disease support groups, which focus on caring rather than curing, for the impaired and terminally ill and their families;
- (3) Prevention and assistance activities such as obtaining appointments for treatment, locating health and medical facilities, obtaining therapy;
- (4) Obtaining clinic cards for clients; and
- (5) Arranging hospice service for non-Medicaid or Medicare clients when all other resources have been exhausted.

Unit of Service (Individual): A unit of service equals one hour of direct service with or on behalf of a client accumulated daily.

Unit of Service (Group): One unit of service equals one hour of direct service with or on behalf of clients, regardless of the number of clients participating.

Title III-D <u>Healthy Eating Every Day</u> was designed by The Copper Institute. This program helps individuals establish healthy eating habits. Participants will learn how to identify reason for their poor eating choices, learn management skills and improve their eating habits. Healthy Eating Every Day follows the USDA Nutrition Guidelines.

Unit of Service (Individual): One episode equals the full 14-week course regardless of the number of completers. Direct service with a participant in the entire 14-week course.

Unit of Service (Group): One episode equals the full 14-week course regardless of the number of completers. Direct service with no more than the maximum of 20 participants in the entire 14-week course.

Title III-D HomeMeds previously known as Medication Management Improvement System (MMIS) was adapted from the Vanderbilt University Medication Management Model by the Partners in Care Foundation in California. This intervention was designed to identify, assess and resolve medication problems that are common among frail older adults. The medication errors that are specifically targeted by HomeMeds this MMIS are: unnecessary therapeutic duplication, cardiovascular medication problems, falls, confusion, and inappropriate use of non-steroidal and anti-inflammatory drugs.

Unit of Service (Individual): One hour of direct service with or on behalf of a client.

Title III-BHousing Improvementis defined as providing home repairs, environmental modifications,Title III-ESadaptive alterations, or installing security devices.

Unit of Service: One unit of service equals one worker hour beginning at time of arrival and concluding at time of departure from client contact. Housing Improvement Service does not include travel time to or from the client's residence except as appropriate for performing essential errands (such as picking up materials or dumping debris) as approved by the job order.

Title III-BMaterial Aid is defined as:

- **Title III-ES** (1) Goods or food such as the direct distribution of commodities, surplus food, clothing, smoke detectors, eyeglasses, hearing aids, security devices, etc.;
 - (2) Food item(s) necessary for the health, safety, or welfare. This may include condiments or paper products necessary for food consumption and delivery charges. Alcohol, drug, and tobacco products are excluded;
 - (3) Repair, purchase, delivery, and installation of any household appliance to assist with household tasks necessary for the health, safety, or welfare of the person;
 - (4) The purchase of materials necessary to perform chore or enhanced chore services (refer to chore and enhanced chore services); and
 - (6) The purchase of construction materials necessary to perform housing improvements, alterations, and repairs (refer to housing improvement service).

Unit of Service: One unit of service equals an episode, which is one contact where goods, food, or assistance is given to a client.

Title III-D
Title IIIEPowerful Tools for Caregivers
is an evidence-based education program offering a unique
combination of elements. This is a self-care education program for family caregivers to
improve: self-care behaviors, management of emotions, self-efficacy, and use of community
resources. The program utilizes a train-the-trainer method of dissemination. Powerful Tools
for Caregivers provides individuals strategies to handle unique caregiver challenges.

Unit of Service (Group): One episode equals a complete six-week course regardless of the number of participants.

Title III-BRecreation is defined as participation in or attendance at calendared (with date and time)LSPevents that are directed by a person that meets the provider's qualifications below. The purpose is to offer activities of interest for participants, increase physical and mental stimulation, prevent isolation, and encourage socialization. The type of activities may include games, sports, arts and crafts, theater, trips and other social or physical activities.

Unit of Service: One unit of service equals one hour of recreation activity regardless of the number of participants. Recreation cannot be counted as a separate unit of service if delivered through adult day care services or adult day health care.

Title III-BRespite Care (Facility Based) is the provision of relief or rest for a primary caregiver from
the constant, continued supervision, and care of a functionally impaired older person by
providing care for the older person in an approved facility-based environment for a specified
period of time.

Unit of Service: One hour of actual client attendance at the facility is one unit of facility based respite. Actual client attendance is defined as the time between the client's arrival at the facility and the time of departure from the facility. Time spent in transit to the facility is not counted in the daily attendance.

Title III-BScreening/Assessmentis defined as administering standard assessment instruments for
gathering information about clients to determine need and eligibility for services and

Title III-EG prioritizing them at the time of active enrollment or to reassess currently active clients.

Unit of Service: One unit of service equals one hour of direct service with or on behalf of a client accumulated daily. It can include travel time related to the client. The time may include time spent with caregivers when it is related to the client's situation.

Title III-B Specialized Medical Equipment, Services, and Supplies include the following:

Title III-ES (1) Adaptive devices, controls, appliances, or services that enable clients to increase their ability to perform activities of daily living. This service also includes repairing such items as well as replacement parts; (2) Dentures, walkers, reachers, bedside commodes, telephone amplifiers, touch lamps, adaptive eating equipment, glasses, hearing aids, and other mechanical or non-mechanical, electronic, and non-electronic adaptive devices; (3) Supplies may include items such as adult briefs, bed pads, oxygen, or nutritional supplements; (4) Medical services pay for doctor visits or dental visits; and (5) Pharmaceutical services payment for needed prescriptions.

Unit of Service: One unit of service equals one episode where equipment, services, or supplies are given to a client.

Title III-D Arthritis Foundation Tai Chi Program (Tai Chi for Arthritis)

The Arthritis Foundation Tai Chi Program, (also known as Tai Chi for Arthritis) offered in community settings, has been proven to improve movement, balance, strength, flexibility, and relation. Other benefits associated with this program include decrease in pain and falls. Fidelity and training information is found through the Tai Chi for Health Institute based in Australia.

Title III-D Tai Chi/Tai Ji Quan: Moving for Better Balance (Oregon Research Institute) was developed out of the Oregon Research Institute. This simplified, 8-form version of Tai Chi/Tai Ji Quan, offered in community settings, has been proven to decrease the number of falls and risk of falling in older adults. Other benefits associated with this program include social and mental well-being, balance and daily physical functioning, self-confidence in performing daily activities, personal independence and quality of life and overall health.

Unit of Service (Group): A unit of service equals one episode of direct service with a minimum of 8 participants and a maximum of 15 participants for the first session. The same participants would continue through 12 weeks, 16 weeks, or 24 weeks, whichever is desired by the certified Tai Chi, Moving for Better Balance Instructor. One episode equals the selected number of weeks' session. The entire selected number of weeks of the program needs to be completed prior to submitting payment.

Title III-D Walk with Ease is a program developed by the Arthritis Foundation intended for individuals with arthritis and other ongoing health conditions to increase the level of physical activity. Research supporting this program has shown to reduce disability, pain, fatigue, and stiffness, as well as improve balance, strength, and walking pace. The program also helps build

confidence to be physically active and manage ongoing health conditions.

Unit of Service: One episode of direct service with a client equals the six-week workshop.

A complete listing of OAA Funded Services Definitions may be found in the most recent Department of Elder Affairs (DOEA) Programs and Services Handbook.

C. GOALS/OBJECTIVES, STRATEGIES AND PEFORMANCE MEASURES

Respondents to this RFP are advised that the Florida Department of Elder Affairs (DOEA), and the Area Agency on Aging of Broward County, have developed goals/objectives and client outcome measures which must be employed during the course of the contract.

The AAABC goals and objectives are established to address identified needs and priorities. There are five goals and multiple objectives. Each provider is required to choose a minimum of 2 goals and a total of 5 objectives that relate to the services they are offering to provide. Strategies must be detailed by the provider on how the chosen goals will be attained. Strategies are action steps detailing how the provider will address the social and economic needs of the older adult population and must be measurable and clearly state what the provider plans to do to achieve the objective and outcomes. Words such as "work with" do not provide specific strategies and are to be avoided.

To evaluate the effectiveness of the use of resources in meeting needs the provider should incorporate outcomes/output performance measures for each goal/objective selected. Output is a number and outcomes is a percentage %.

The AAABC Goals, Objectives, and Explanations are included below in the table format template. Each provider must review and select the ones that are most achievable and develop strategies to attain the defined goals and objectives. Additional goals and objectives may be added.

Goals, Objectives, Strategies, and Performance Measure Table

Goal 1: Strengthen and streamline the aging network's capacity, inspiring innovation, integrating best practices, and building efficiencies to respond to the growing and diversifying aging population.

Objective 1.1: Expand the availability, integration, and access to assistive technology for older adults. Explanation: The primary intent of this objective is to increase elder Floridians' ability to independently perform daily activities through a promotion of access to assistive technology for older adults.

Strategies

Outcome/Output Measure

Objective 1.2: Increase the AAA's functional capacity to serve older adults through strategic and meaningful partnerships and collaborations.

Explanation: The primary intent of this objective is to encourage the development of partnerships between AAAs and local actors in the elder services sector which will directly lead to increases in the services that AAAs are able to provide older adults residing in their areas.

Strategies

Outcome/Output Measure

Objective 1.3: Explore new opportunities to reach previously underserved and emerging communities across all programs and services.

Explanation: The primary intent of this objective is for the AAA to detail how it plans to reach populations, across all programs and services, that have been previously identified as underserved or are emerging communities of elders towards whom outreach and targeting activities may not have been previously directed.

Strategies

Objective 1.4: Help older adults achieve better quality of life by ensuring those who seek assistance are seamlessly connected to supportive programs and services.

Explanation: The primary intent of this objective is to address ways the AAA links elders to information and services and provides referrals to resources.

Strategies

Outcome/Output Measures

Objective 1.5: Bring attention and support to caregivers, enabling them to thrive in this fundamental role.

Explanation: The primary intent of this objective is to strengthen caregiver services to meet individual needs.

Strategies

Goal 2: Ensure that Florida is the nation's most dementia and age friendly state by increasing awareness and caregiver support, while enhancing collaboration across the aging network.

Objective 2.1: Directly support communities in becoming dementia friendly.

Explanation: The primary intent of this objective is for the AAA to engage in activities which help to increase their community's support of people living with dementia and their caregivers. The ultimate aim is for people living with dementia to remain in their community, while engaging and thriving, in day to day living.

Strategies

Outcome/Output Measures

Objective 2.2: Increase acceptance across communities by raising concern and building awareness through a commitment to targeted action.

Explanation: The primary intent of this objective is to encourage the AAA to expand education and training opportunities across the spectrum of aging related issues.

Strategies

Outcome/Output Measures

Objective 2.3: Strengthen and enhance information sharing on dementia and aging issues to promote widespread support.

Explanation: The primary intent of this objective is for the AAA to foster increased collaboration with external organizations and stakeholders in order to identify best practices and effective methodologies.

Strategies

Objective 2.4: Increase access to supportive housing with services and increase supports for older adults at risk of experiencing residential insecurity.

Explanation: The primary intent of this objective is the exploration of policies to specifically address shortages of supportive housing options in the AAA's area and encouraging targeting of elders that have been identified as facing residential insecurity.

Strategies

Goal 3: Enhance efforts to maintain and support healthy living, active engagement, and a sense of community for all older Floridians.

Objective 3.1: Advocate with housing service providers, affordable housing developers, homeless programs, and other stakeholders to establish affordable housing options for older adults.

Explanation: The primary intent of this objective is to increase collaboration with other area organizations and stakeholders on the specific subject of elder housing and other associated residential issues.

Strategies

Outcome/Output Measures

Objective 3.2: Promote empowered aging, socialization opportunities, and wellness, including mental health, healthy nutrition, exercise, and prevention activities.

Explanation: The primary intent of this objective is to promote greater integration opportunities for elders in the AAA's service area in an effort to promote increased health, wellness, mental well-being, and satisfaction. Empowered aging is defined as making sure that older persons have the opportunity to learn, discuss, decide, and act on decisions that directly impact their care, concerns, and quality of life.

Strategies

Outcome/Output Measures

Objective 3.3: Strengthen programs that promote uniting seniors and caregivers with community partners, enabling seniors to directly access service providers to meet their immediate needs. Explanation: The primary intent of this objective is to promote seamless access to available services.

Strategies

Goal 4: Advocate for the safety and the physical and mental health of older adults by raising awareness and responding effectively to incidence of abuse, injury, exploitation, violence, and neglect.

Objective 4.1: Increase effectiveness in responding to elder abuse and protecting older adults through expanded outreach, enhanced training, innovative practices, and strategic collaborations. Explanation: The primary intent of this objective is for the AAA to use existing mechanisms to increase public awareness, expand learning opportunities, and work with community stakeholders to both respond to instances of elder abuse and promote increased prevention.

Strategies

Outcome/Output Measures

Objective 4.2: Increase capacity and expertise regarding the Department's ability to lead in efforts to stop abuse, neglect, and exploitation (ANE) of older adults and vulnerable populations. Explanation: The primary intent of this objective is to expand and improve the efficacy of efforts supporting ANE interventions.

Strategies

Outcome/Output Measures

Objective 4.3: Equip older adults, their loved ones, advocates, and stakeholders with information needed to identify and prevent abuse, neglect, and exploitation, and support them in their ability to exercise their full rights.

Explanation: The primary intent of this objective is for the AAA to expand existing education/outreach/awareness efforts such as websites, newsletters, presentations, and/or other community outreach activities to include prevention of abuse, neglect, and exploitation.

Strategies

Objective 4.4: Continue to improve older Floridian's access to legal services which have a direct positive impact on their ability to stay independent in their homes and communities, and most importantly, exercise their legal rights.

Explanation: The primary intent of this objective is to enable the AAA to detail efforts to make legal services more accessible to seniors, particularly those seniors in greatest economic or social need, as well as to improve the breadth and quality of legal services available.

Strategies

Goal 5: Increase Disaster Preparation and Resiliency

Objective 5.1: Strengthen emergency preparedness through comprehensive planning, partnerships, and education.

Explanation: The primary intent of this objective is to highlight the critical importance of the emergency preparedness plan prepared by the AAA.

Strategies

Outcome/Output Measures

Objective 5.2: Ensure communication and collaboration between the Department, emergency partners, and the Aging Network, before, during, and after severe weather, public health, and other emergency events.

Explanation: The primary intent of this objective is to focus attention on the importance of interagency communication and collaboration in disaster preparedness and response activities.

Strategies

Outcome/Output Measures

Objective 5.3: Explore and support efforts to make community disaster shelters more responsive to elder needs in general, with specific emphasis on providing appropriate emergency shelter to elders with dementia related concerns.

Explanation: The primary intent of this objective is to explore ways in which the AAA can support and extend emergency shelter options available to older adults residing within the PSA.

Strategies

Objective 5.4: Collaborate with state-wide and local emergency response authorities to increase levels of elder self-determination to evacuate once notices have been issued.

Explanation: The primary intent of this objective is to initiate or bolster AAA efforts towards increasing levels of voluntary elder evacuation during severe weather or other emergency events.

Strategies

D. CONDITIONS A PROVIDER MUST MEET

- 1. A Provider must be:
 - a. an organization that has the necessary resources and/or strategies to efficiently administer a comprehensive Service Program in this RFP; and a public agency, or any private non-profit agency, or profit-making organization incorporated under the laws of the State of Florida . Private, profit-making agencies are eligible to apply but in accordance with Chapter 287, F.S., may not receive advance funding for contractual services.
- 2. A Provider must demonstrate the ability to:
 - a. carry out a program of community awareness, publicity, education, and outreach to identify clearly to the community the existence and availability of program services;
 - b. anticipate and project the required level of service in each service category, and plan for adequate services to meet client needs;
 - c. develop and perpetuate on-going coordination efforts, and support strategies, with existing Broward County service providers and agencies for information sharing, client assistance, and encouragement of independence of;
 - d. administer the program in a cost-effective manner; and
 - e. survey and solicit client satisfaction regarding services rendered, and make changes accordingly.
- 3. A Provider must:
 - a. demonstrate adequate numbers of qualified trained staff (licensed when applicable) to ensure satisfactory administration of program services in keeping with the requirements of DOEA and the AAABC;
 - b. ensure that the requirement of §430.0402 and Ch. 435, Florida Statutes, regarding background screening for all persons who meet the definition of a direct service provider and who are not exempted from the DOEA level 2 background screening pursuant to §430.0402 (2)-(3), Florida Statues. The provider must also comply with any applicable rules promulgated by the DOEA and the Agency for Health Care Administration (AHCA) regarding implementation of s. §430.0402 and Ch. 435, Florida Statutes;
 - c. assure, where other qualifications are equal, that consideration is given to employing older workers when preparing the minimum training, education, and experience portion of a position description. Service providers are urged to develop the requirements so that older workers may qualify for

employment based on experience rather than formal education or specific training;

- d. make arrangements, whenever possible, to obtain services of qualified multi-lingual persons, or persons capable of overcoming potential cultural barriers;
- e. utilize volunteer staff to the maximum extent possible, in order to compliment and extend service delivery;
- f. demonstrate an understanding that clients may need special assistance in accessing and utilizing services, and/or boarding and departing vehicles because of physical or mental impairments including vision, hearing impairments, frailty, confusion, or other handicapping conditions;
- g. provide all services in accordance with the standards listed in the most recent DOEA Program and Services Handbook and other reasonable standards required by the AAABC;
- h. coordinate a system to prioritize client service, consistent with both the AAABC and DOEA policies, in order to ensure that services are provided to those older persons with the greatest economic or social needs and individuals at risk of institutional placement, with particular attention to low income older individuals, including low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas;
- i. maintain client and other records in order to evaluate service provision and fiscal management; and to provide data, per instructions of the AAABC, for required reports;
- j. comply with the utilization and data entry requirements established by the AAABC and the DOEA regarding the Enterprise Client Information and Resource Tracking System (eCIRTS);
- k. develop staff training, and volunteer recruitment and utilization plans for INCLUSION WITH THE SERVICE PROVIDER APPLICATION RESPONSE TO THIS REQUEST FOR PROPOSALS; and
- . provide fully developed and comprehensive policies and procedures to include service delivery, enrollment of clients, reassessment of clients, service documentation, and timeliness and accuracy of data.
- m. ensure that appropriate procedures are utilized when proposing services that the bidder plans to subcontract including how services will be procured, authorized, overseen and provided.

- 4. All Focal Point Senior Centers must conduct Transportation activities, whether or not formally funded. Transportation Providers must:
 - a. coordinate closely with the Broward County Mass Transit Paratransit Office, as appropriate, regarding the provision of transportation services. Providers also must have the ability to utilize vehicle/drivers to maximum capacity with a minimum of "downtime;"
 - b. demonstrate the ability to recruit and retain drivers with a valid Commercial Driver's License (CDL) or other appropriate driving license; a minimum of one year experience driving similar vehicles, or completion of a pre-service training program; a safe driving record; training in defensive driving techniques, passenger assistance techniques, and the American Red Cross First Aid/CPR or equivalent programs;
 - c. plan to provide services to clients who are mobility impaired, and demonstrate the ability to assist with door to door transportation from home to destination, as well as the ability to handle mobility assistance devices such as canes, walkers, and wheelchairs; and
 - d comply with all provisions of Chapter 427, Florida Statutes, and Rule Chapter 41-2, Florida Administrative Code including insurance and safety requirements, and assume responsibility for:
 - (i) management and supervision of transportation services;
 - (ii) vehicle usage; scheduling of routes, vehicles, and drivers;
 - (iii) vehicle maintenance, parts purchases, and vehicle safety inspections;
 - (iv) communications procedures regarding accidents and emergencies; and
 - (v) complaints procedures, including documentation and resolution.
 - e. maintain a log of trips which they are unable to arrange. This log shall contain, at a minimum, information as to:
 - (i) identifier of the requesting party;
 - (ii) requested destination and/or pick-up location;
 - (iii) date and time of requested trip; and
 - (iv) reason for denial.
 - f. develop policies and procedures to prioritize destination, trip purpose, peak load, vehicle capacity, usage and duration of trip related to purpose.

Transportation services must be scheduled to allow clients maximum opportunity to receive coordinating program services or engage in activities. Consequently, Senior Center arrival and departure times must be spaced at a minimum of four hours, inclusive of meal time. Only emergency situations, or client requests, may modify this minimum time.

Often, clients will be transported from their residences to a Senior Center and returned to their home. Other trips may be scheduled, as needed. These will include, but not be limited to, trips to medical facilities, pharmacies, or shopping expeditions. Special recreational excursions may also be scheduled. Transportation services must be provided on a regular basis throughout the entire geographic sector described in Section IV. All respondents to this Request for Proposals must understand that any reasonable trip destination may be scheduled, as necessary, for any reason, due to client need. In particular, respondents must be prepared to provide emergency unscheduled trips when warranted.

VEHICLE DRIVERS MAY NOT ACCEPT TIPS OR OTHER COMPENSATION FROM CLIENTS UNDER ANY CIRCUMSTANCES.

E. OUTREACH/TARGETING

All providers must conduct Outreach activities, whether or not formally funded. Outreach includes attempts to locate older persons and inform them of available programs and services. The provider will target its outreach efforts, consistent with both the AAABC and the DOEA policies, to those individuals in greatest economic or social needs and individuals at risk of institutional placement, with attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas. **ANTICIPATED OUTREACH EFFORTS MUST BE DESCRIBED IN THE SERVICE PROVIDER APPLICATION**, and will be required to be reported quarterly, or more often as requested by the AAABC.

Providers will be responsible for informing the AAABC of any identified unmet needs and/or underserved areas.

F. CLIENT CONFIDENTIALITY/HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY(HIPAA) REQUIREMENTS

Any information received through client contact, or any other source, is confidential and may not be disclosed without written consent of the individual or legal guardian. Confidential information extends to any data which may publicly identify any client receiving services.

• Health Insurance Portability and Accountability Act Compliance: It is the AAABC policy to ensure compliance with the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule by including compliance requirements in contracts, agreements and purchase orders with providers who will be considered Business Associates under HIPAA regulations with whom the AAABC shares client Protected Health Information (PHI).

A Business Associate is a person or entity that is not a member of the AAABC work force and who, on behalf of the Agency, performs or assists in the performance of a function or activity involving the use of individually identifiable health information. Each provider which contracts with the AAABC and provides Older Americans Act services is a Business Associate as are their employees.

Each provider who enters into a contract with the AAABC, is required to execute a Business Associate Agreement as a part of their contract with the AAABC and must adhere to the Health Insurance Portability and Accountability Act Guidelines as applicable. Inappropriate disclosure of client confidential, Protected Health Information by a provider, will result in the termination of the contract by the AAABC.

In addition, each provider will be required to not use or disclose more than the minimum amount

of protected health information necessary to accomplish the intended purpose of the use, disclosure, or request taking into consideration practical and technological limitation, as provided in 45 Code of Federal Regulations §164.502. providers will be required to implement policies and procedures to ensure minimum disclosure.

 Health Insurance Portability and Accountability Act Awareness Training and Education: All providers will be required to demonstrate their efforts to communicate, build awareness and educate their employees, and/or clients regarding compliance with, and the requirements of the Health Insurance Portability and Accountability Act regulations. Training and education should include, but not be limited to the following elements: (1) Health Care Information Security; (2) Virus Protection; (3) Risk Management; (4) Media Management; (5) Chain of Trust; (6) Security Management; (7) Incident Reporting; and (8) Policies and Procedures Required to Comply with Health Insurance Portability and Accountability Act Rules.

G. SOCIAL SECURITY NUMBER (SSN) DISCLOSURE

In accordance with Title XIX of the Social Security Act, the client must be informed that disclosure of their SSN is voluntary and will be used for referral and screening for Medicaid purposes. The client is not required to provide the SSN, but is encouraged to do so for staff to screen for Medicaid eligibility and referral to the DCF or AAABC for potential services. All clients shall be provided with a written statement that identifies in writing the specific law governing the collection, use, or release of the SSN, including any authorized exceptions to such collection, use or release. This notice is currently included as part of DOEA Form 701B, Comprehensive Assessment.

H. CLIENT ELIGIBILITY CRITERIA

1. <u>Title IIIB</u>, <u>Supportive Services</u>, require that service recipients be 60 years of age or older except for Information, Caregiver Training/Support, and Education/Training services, regardless of income, assets, or ability to pay. Although services are provided at no cost, voluntary contributions are accepted. Priority for services must be targeted to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas.

2. <u>Title IIID, Evidence-Based Disease Prevention and Health Promotion Services</u>

- a. Persons 60 years of age or older.
- b. Services are targeted to persons residing in medically underserved areas; and residing in areas where many older individuals have the greatest economic need for services; low-income older individuals, including low-income minority elders, older individuals with limited English proficiency, and older individuals residing in rural areas.
- c. Restriction: Evidence-based disease prevention and health promotion services shall not include services for which payment may be made under Title VIII and Title XIX of the Social Security Act (42 U.S.C. 1395 et seq.).

3. <u>Title IIIE</u>, <u>National Family Caregiver Support Program Services (NFCSP)</u>

- a. Caregiver Support Services (OA3E) are intended to provide direct help to caregivers who provide care for elder recipients who are 60 and older.
- b. Caregiver Supplemental Services (OA3ES) are available to elders age 60 and older, or grandparents and non-parent relative caregivers, age 55 and older, enrolled in OA3EG

(grandparent) caregiver programs. The elder must meet the frailty requirements to be eligible to receive supplemental services under OA3ES.

- c. Grandparents or Non-Parent Relative Support Services (OA3EG) are available to elder recipients (60 and older), including grandparents and older individuals who are relative caregivers. Services for non-parent relative caregivers (55 and older) caring for children under the age of 18 and children aged 18 and older with disabilities designed to help meet their caregiving obligations.
- 4. <u>Local Services Program Dollars</u> client eligibility criteria follows the Older Americans Act Guidelines. If it becomes necessary to prioritize client access to the Older Americans Act supported programs, priority must be given to Broward residents in greatest economic or social need and individuals at risk of institutional placement, with attention to low-income older individuals, including low-income minority older individuals, older individuals with limited English proficiency and older individuals residing in rural areas. The provider must utilize any Priority Policies developed by the AAABC in selecting clients for whom it will provide services. At the AAABC's discretion a selected OAA Provider may be eligible for Local Service Program Dollars.

Consumers shall not be dually enrolled in an OAA program and a Medicaid capitated long-term care program, except for consumers in need of OAA Legal Assistance services.

I. FACILITIES/LOCATION

All OAA Programs must be housed in Broward County facilities, which provide older persons with the maximum direct access possible to program services.

Program services also may be offered outside of the main provider facility at appropriate community sites. Senior Center Facilities must be physically accessible to all clients regardless of disability. All programs must comply with the provisions of the Americans with Disabilities Act.

J. SCHEDULE OF ACTIVITIES

The Provider's hours of operation must be at least Monday through Friday, except for Holidays, for a minimum of 250 days a year.

Applicants must include a list of "closed" days with their response to the Request for Proposals.

During all days, and hours of operations, transportation services, and some activities, must be available to clients. All services should be scheduled fully and regularly throughout each operating day of the year.

K. ADVISORY COUNCIL (S)/CLIENT INPUT

Providers must have an Advisory Council (s), and/or a well-developed mechanism for receiving the views of program participants. A **DESCRIPTION OF THIS MECHANISM MUST BE PART OF THE SERVICE PROVIDER APPLICATION** and approved by the AAABC. Where a provider has more than one funding source, one Advisory Council, which reflects views of all participants, is acceptable.

Providers must adhere to policies set forth by the AAABC and the DOEA, related to soliciting client input.

L. CONTRIBUTIONS

The provider must assure that Older Americans Act paid staff will neither assess nor collect fees, or copayments, from eligible clients for Older Americans Act funded services. Providers may charge fees, or copayments, for services not paid for with Older Americans Act funds to those persons who are able to pay for the cost of services.

However, contributions may be solicited, with the expressed understanding that no client will be denied service, or in any way discriminated against, for lack of contribution. All contributions received must be used to maintain or expand program services for which the contribution was made under Title III of the Older Americans Act. Contributions cannot be employed to meet match requirements.

The provider must adhere to the policies and procedures for contributions set forth by the Florida Department of Elder Affairs. In addition, the Provider must:

- a. provide each person with a free and voluntary opportunity to contribute to the cost of the service he/she receives.
- b. protect the privacy of each older person with respect to his/her contribution.
- c. establish appropriate internal control procedures to safeguard and account for all contributions. Such procedures should include, but are not limited to: bonding employees and persons who manage or count money; using pre-numbered receipts; frequently depositing cash in a separate account (or being able to identify this amount separately from contract revenues); and periodically, auditing amounts on hand.
- d. account separately and adequately, for contributions received and reported. Grant applications must include the methodology to be used in handling contributions.

M. MEDIA RESPONDENTS

One designated person beyond the Project Director will be assigned the role of media respondent. All media calls/visits must be directed toward these staff members. In the absence of these respondents, media must be referenced to the AAABC, or alternatively be notified that the designated individuals are unavailable.

N. SELECTION OF A PROJECT DIRECTOR

In the event the representative of the provider, responsible for administration of the Program (Project Director), resigns, is terminated, or for other reasons, no longer is responsible for the Older Americans Act contract, the provider will submit at a minimum, the names and credentials of three (3) finalists being considered for the Project Director's vacancy. The Council will review and either approve or disapprove the candidates' credentials within five (5) working days of such notification. Final selection of the Project Director is made by the administering agency from the list approved by Council.

O. INVENTORIES

Providers and subcontractors are required to have written property management standards for equipment (including replacement equipment, whether acquired in whole or in part with federal funds. Federally-owned

equipment shall, at a minimum, meet the following requirements and shall include accurately maintained records with the following information: a description of the equipment, manufacturer's serial number, model number, federal stock number, or other identification number, acquisition date (or date received, if the equipment was furnished by the federal funds), information from which one can calculate the percentage of federal participation in the cost of the equipment, location, use and condition of the equipment and the date the information was reported.

A physical inventory must be taken, and the results reconciled with the property records at least once every two (2) years. A control system must be developed to ensure adequate safeguards to prevent loss, damage, or theft of the property. Adequate maintenance procedures must be developed to keep the property in good condition.

Any new provider, designated as a result of this Request for Proposals Processes, is eligible to receive equipment purchased with Federal or State Funds by a previous provider.

P. REFERENCE MATERIALS

The following reference material are available for review at the AAABC.

• AAABC 2024-2027 Area Plan

Individuals wanting to review this material may do so by making an appointment through the Contact Person (Section IIIA-General Information). Any person requesting copies of documents will be charged in accordance with Florida's public record laws.

The following reference materials can be found at the web links below:

- 2023 Department of Elder Affairs Programs and Services Handbook <u>https://elderaffairs.org/publications-reports/programs-services-handbook/</u>
- Florida Department of Elder Affairs Unit Cost Methodology Part 1: <u>https://youtu.be/gAOykRHE2Uk</u> Part 2: <u>https://youtu.be/yOxdLb8L9uU</u>

Information provided in these documents is the most current. Applicants should understand that both the Program(s) or the most recent copy of the Department of Elder Affairs Programs and Services Handbook constantly undergo revision by DOEA. All Service Providers will be required to follow any future revisions, as well as any new State mandates, policy clearances, and procedures. Providers will be required to accept new provisions as promulgated.

Q. COMPLIANCE

All Service Providers must assure that program services comply with all requirements and minimum standards as set forth in the most current DOEA Programs and Services Handbook, and in accordance with all federal, state, or local laws, rules, regulations, and policies that pertain to Older Americans Act funds.

Additional requirements are set forth in this Request for Proposals. The AAABC may establish other special conditions during the contract year. The provider will be notified, in writing of these special conditions, prior to their implementation date.

R. QUALITY ASSURANCE

To ensure effective and efficient client care through delivery of quality services, each provider will selfmonitor and self-evaluate the quality of service delivery by its own staff. Additionally, the AAABC will conduct independent quality assurance monitoring and performance evaluations of all providers.

The degree of client satisfaction with service quality and staff effectiveness must be evaluated periodically during the contract period. A consumer survey must be conducted, compiled and results evaluated and reported to the AAABC. A provider should conduct an annual client satisfaction survey. At a minimum, a provider should survey 20% of client base to get a representative sample. Anything above 30% is considered a very good response rate. Survey results will be analyzed by the agency and used to develop continuous quality assurance initiatives to ensure improvements to service delivery.

S. TRAINING

All staff providing services require a general pre-service orientation and training specific to the service being provided. A provider shall be responsible for provision of the pre-service and in-service training for all paid and volunteer staff as referenced in the most current DOEA Programs and Services Handbook. Each provider agency shall describe and allocate funds for training in the provider application included in this RFP.

It is also essential if a provider plan to subcontract a service that they meet with the proposed subcontracted service provider to establish necessary protocol and procedures for authorization of services, paperwork and reporting unusual incident reports and general expectations for coordination. Service Providers who have case managers must recognize case managers are the gatekeepers and have responsibility for coordinating and authorizing service to clients.

Training will include, at a minimum, the following topics:

- Overview of the aging process;
- Overview of the aging network;
- Communication techniques with older adults;
- Abuse, neglect, exploitation, and unusual incident reporting;
- Local agency procedures and protocols;
- Client confidentiality; and
- Client grievance procedures.

In-service training hours and topics shall be provided at the discretion of the agencies. Case managers must successfully complete on-line training on the Uniform Client Assessment Form and pass the certification test as well as attend Care Plan training and receive an acceptable score on the post-test provided by the Training Team.

Additionally, Case Managers must have six hours of in-service training per year. All training must document the duration and content of the training attended in the case manager staff records. Topics such as Alzheimer's Disease, Cultural Sensitivity, Caregivers Needs, Dealing with Difficult Clients, Mental Health

and the Older Adults, and on-going DOEA Handbook and Policy Reviews are appropriate. Attendance at the AAABC or DOEA sponsored training is required.

Required training will include, but not be limited to, the intake and screening assessment instruments, care plan development and costing and prioritization scoring instrument. It is essential providers meet with subcontractors to establish necessary protocol and procedures for authorization of services, paperwork and reporting, unusual incident reports and general expectations for service coordination. Service provider agencies must recognize a case manager's responsibility for coordinating and authorizing services.

T. PERSONNEL STANDARDS AND EMPLOYEE BENEFITS

Personnel policies incorporated into agency operating procedures are required and if not already in place must be developed to address at a minimum, the following:

- Employee recruitment and hiring
- Lines of authority and supervision
- Working schedules and hours of operation
- Employee compensation
- Employee fringe benefits
- Employee evaluation and promotion
- Leave
- Confidentiality and privacy
- Employee discipline and termination
- Employee grievance procedures
- Accidents, safety, and unusual incidents
- Travel and transportation policies
- Employee conduct
- Employee pre-and in-service training and staff development

U. CONSUMER GRIEVANCE AND APPREALS

To provide for handling consumer complaints and process appeals regarding denial, reduction, or termination of core services each provider must develop and maintain grievance procedures.

These procedures must provide for informing all consumers of the grievance and appeal process, including prior written notification to the consumer of activities related to the grievance/appeal, and assisting consumers desiring to file a grievance/appeal. Information concerning consumer grievance and appeals procedures can be found in Model OAA Contracts (Appendix C) and in the DOEA Programs and Services Handbook, Appendix D, Grievance-Procedures.

U. AMERICANS WITH DISABILITIES ACT

All providers must operate Service Programs in accord with all provisions and requirements of the Americans with Disabilities Act.

III. GENERAL INFORMATION

A. FOR THE PURPOSES OF THIS RFP THE CONTACT PERSON IS AS FOLLOWS:

Shirley Snipes, Planning Director Area Agency on Aging of Broward County 5300 Hiatus Road Sunrise, Florida 33351 (954) 745-9567 (Phone) (954) 745-9584 (Fax)

B. FUNDING SOURCE

- 1. Federal dollars for each specific Service Program are tentatively set at the amounts specified in Section IV, derived from Older Americans Act Title III-B, Title III-D and Title III-E. The amount of Federal dollars is subject to the availability of funds.
- 2. Federal dollars must be matched locally, with the exception of Title III-D funds. A minimum ten percent (10%) match (cash or in-kind) will be required for Title III-B and Title III-E, as specified in Section IV. The AAABC may provide a percentage of the cash match the dollar amount will be determined during the contract negotiating process.

If an Applicant anticipates a need for cash match assistance from the AAABC, the dollar amount needed should be clearly indicated in the Applicant's proposal on Form III.B. Supporting Budget By Program Activity in the Service Provider Application (see Appendices G2 & G3). The provider's match contribution may be made in the form of cash and/or in-kind resources. By the end of the contract period, matching amounts provided must be in proper proportion to the Title III-B and III-E funds expended. At the end of the contract period, all funds expended must be properly matched.

- 3. General Revenue (State Funding) Local Service Program (LSP) Dollars for the Service Programs are tentatively set at the amounts specified in Section IV. These funds do not have to be matched, and are subject to the availability of funds.
- 4. The total State and Federal Funding (100%) for each Service Program is tentatively set as specified in Section IV. The AAABC reserves the right to change this amount based on the availability of governmental dollars, or other factors. All Respondents to this RFP must accept this condition and plan accordingly.
- 5. When establishing unit rates for this Proposal, consideration must be given to the total State and Federal Funding specified in Section IV as continuation money for Years 2 and 3. Please assume no increase or decrease in funding when determining the unit rates being proposed for Years 2 and 3. Continuation funding for years four through six is contingent upon performance, need for the service, and the availability of funds.

C. TYPE OF CONTRACT

The type of contract will be a unit rate contract. A unit rate is the cost for each unit of work (example, per Hour, per Episode, per Day, per One-Way Trip).

Continuation funding, for years two through six, is contingent upon performance, need for the service, and the availability of funds.

D. METHODS OF COST PRESENTATION/DERIVATION OF UNIT RATE

Allowable and appropriate cost principles should be in accordance with the DOEA Unit Cost Methodology, as well as all applicable State and Federal Statutes and Regulations.

The DOEA Unit Cost Methodology includes the following:

- 1. Service Provider Application Minimum Requirements Appendix G1
- 2. Service Provider Application Formats Appendix G2
- 3. Unit cost Methodology Worksheets Appendix G3

E. TYPE OF PAYMENT

The type of payment will be for services earned, based upon the contracted unit rate of service.

F. REPORTS AND RECORDS

1. The provider must become familiar with and utilize the AAABC and DOEA Enterprise Client Information Resource Tracking System (eCIRTS), for tracking service units, fiscal reporting, program reporting and the maintenance of client information. The AAABC will provide technical assistance when needed. The provider must attend data collection training sessions sponsored by the AAABC and the DOEA.

All Applicants should understand that existing computerized Enterprise Client Information Resource Tracking Systems (eCIRTS) are under progressive development by the DOEA and the AAABC. Data reporting, processing and report compilation may significantly change at any time.

2. The provider must comply with the record keeping and reporting requirements of the current DOEA Programs and Services Handbook and the AAABC. Providers must submit to the AAABC all financial and programmatic reports required by the Older Americans Act, DOEA, and the AAABC. These reports should be accurate and must be submitted in accordance with AAABC deadlines.

G. MONITORING, ASSESSMENT AND EVALUATION

The provider must cooperate fully with the DOEA, Auditor General, and with the AAABC in the conduct of ongoing monitoring activities. The provider will be subject to the monitoring policies and procedures, and other contractual standards defined by the AAABC. The provider must participate when requested to do so, in all evaluations and related activity sponsored by the Administration for Community Living (ACL), DOEA, and the AAABC.

H. PROPOSAL DEADLINES

The following schedule is set for actions related to this Request for Proposals process. The AAABC reserves the right to delay the schedule in the best interest of the AAABC or the State of Florida.

- 1. A Bidders Conference will be held at the Area Agency on Aging of Broward County, 5300 Hiatus Road, Florida, 33351, at 10:00 a.m. (EDT) on Monday, May 19, 2025.
- 2. Deadline to submit Notices of Intent to submit a proposal 5:00 p.m. (EDT) on Friday, May 23, 2025.
- 3. Any addenda to the Request for Proposals will be emailed on or before Monday, June 9, 2025. Correspondence will be sent only to those parties who have submitted a Notice of Intent to Bid or otherwise requested such correspondence in writing.
- 4. Deadline for proposal submission 5:00 p.m. (EDT) on Wednesday, July 2, 2025. PROPOSALS WILL NOT BE ACCEPTED AFTER THIS TIME.
- 5. It is anticipated that contract award notices, identifying the individual (s) or organization (s) to whom the contract will be awarded, will be emailed to persons and groups responding to the Request for Proposals on or about Monday, August 18, 2025.

The anticipated beginning and ending dates of the contract will be January 1, 2026, through December 31, 2026, with a right to renew the contracts with established rates for each year, up to year six. Continuation funding is contingent upon performance, need for the service, and the availability of funds.

Please note: with regard to the Bidders' Conference, attendance by a bidder is not a prerequisite for acceptance of a proposal by the Area Agency on Aging of Broward County.

I. NOTICE OF INTENT TO SUBMIT A PROPOSAL

The summary of the Bidders' Conference, information regarding any addenda to the RFP, and copies of written AAABC responses to questions which result in RFP clarifications or addenda, will be sent **only** to bidders who submitted a notice of intent to submit a proposal, and those persons who requested, in writing, a copy of the RFP and other related information sent out by the AAABC regarding the RFP.

Failure to submit a Notice of Intent to Submit a Proposal or written request for the RFP and other information, does not preclude any individual or organization from submitting a response to the RFP.

J. BIDDERS' CONFERENCE

No verbal inquiries will be accepted prior to the Bidders' Conference scheduled for 10:00 a.m. (EDT), Monday, May 19, 2025, at the AAABC, 5300 Hiatus Road, Sunrise, FL 33351. Questions at the Bidders' Conference will be answered orally, or in writing subsequent to the Conference if the information is not available. Following the Conference, a written Summary of Conference Highlights will be emailed to attendees, and other interested parties who submitted a written request to receive RFP information and materials.

Attendance at the Bidders' Conference is not mandatory and attendance by a bidder is not a prerequisite for acceptance of a proposal by the Area Agency on Aging of Broward County.

All interested parties and potential bidders should endeavor to attend the Bidders' Conference.

K. INQUIRIES

ONLY WRITTEN INQUIRIES WILL BE ADDRESSED CONCERNING THE RFP AND THE PROPOSAL SUBMISSION PROCESS. NO FACSIMILE, , OR PHONE INQUIRIES WILL BE ACCEPTED.

Inquiries should be typewritten, and where possible, questions should include reference to precise pages and section(s) of the RFP Package. All inquiries should be emailed to <u>RFP@adrcbroward.org</u>

No written inquiries will be accepted after 5:00 p.m. (EDT) on Wednesday, May 21, 2025.

L. TRADE SECRETS

The Area Agency on Aging of Broward County is unable to assure the confidentiality of information fitting the definition of "Trade Secrets" pursuant to §812.081, Florida Statutes.

The Area Agency on Aging of Broward County assumes no liability for disclosure or use of unmarked material containing trade secrets or other confidential material and may use or disclose the data for any purpose, and may assume the proposal was not submitted in confidence and therefore is a public record pursuant to Chapter 119, Florida Statutes.

M. ACCEPTANCE OF PROPOSALS

Failure to submit the Request for Proposals to the Area Agency on Aging of Broward County Offices by 5:00 p.m. (EDT), on Wednesday, July 2, 2025, is considered a FATAL FLAW.

An Evaluation Committee, comprised of Area Agency on Aging Board Members, and Staff, as well as Community Advocates, shall review all submitted proposals in accordance with the established timetable. All competing proposals shall be reviewed by the Committee utilizing the OAA Proposal Evaluation Criteria and Rating Scale (Appendix B). The Rating Scale will be used to assess the degree to which the applicant's response meets the proposal criteria. The Area Agency on Aging of Broward County reserves the right to reject any, or all proposals, or waive minor irregularities, when to do so would be in the best interest of the Area Agency on Aging of Broward County and the State of Florida. Minor irregularities (see Florida Administrative Code 60A-1.001(16) for definition) are those which will not have a significant adverse effect on overall competition, cost, or performance.

In the best interests of the Area Agency on Aging of Broward County and/or the Florida Department of Elder Affairs, the AAABC reserves and holds at its discretion the rights:

- 1. To reject any and/or all proposals.
- 2. To issue subsequent Request for Proposals.
- 3. To waive any minor technicalities or irregularities. (Minor irregularities are those which will not have a significant adverse effect on overall competition, cost, or performance) as determined in the sole discretion of AAABC.
- 4. To adjust funding amounts, upward or downward, based upon availability of funds from Title III-B, III-D and III-E of the Older Americans Act, State General Revenue (including Local Service Program Dollars), and the acceptability of the proposals received.
- 5. To request revision, modification or clarification of any unclear portions of the proposals submitted.

N. FORMAL PROTESTS

Any actual or prospective proposer, who desires to file a formal protest to this RFP, as outlined in Item 8 of the General Conditions section on the PUR Form 7033 (see Appendix H1), must accompany that protest with a bond payable to the Florida Department of Elder Affairs in the amount of \$5,000 or one percent (1%) of the Departments estimate of the total volume of the proposed contract, whichever is less.

<u>PUR FORM 7033 (Appendix H1) represents acknowledgment by Applicants of their agreement to abide by all conditions of the proposal and as such, must be signed by an authorized officer representing the applicant organization, and included in the proposal submission.</u>

O. DISASTER

In preparation for the threat of an emergency event, as defined in the State of Florida Comprehensive Emergency Management Plan, the Area Agency on Aging of Broward County or the Florida Department of Elder Affairs may exercise authority over Service Providers in order to implement preparedness activities to improve the safety of older adults persons in the threatened area and to secure provider facilities in order to minimize potential damaging effect of the event.

Similarly, in the event that the President of the United States or the Governor of Florida declares a disaster or state of emergency, the Area Agency on Aging of Broward County or the Florida Department of Elder Affairs may exercise authority over Service Providers in order to implement emergency relief measures. All such actions shall be for the purpose of ensuring the health, safety, and welfare of older adults in the potential, or actual, disaster area.

Applicants must consider how services will be delivered in the event of a disaster or emergency and must prepare a formal Plan of Action containing responses to disaster, terrorism, or other emergency situations. This initial Plan will be submitted to the Area Agency on Aging of Broward County. Any subsequent updates to the Plan will be forwarded, on an annual basis, to the AAABC prior to the onset of the Hurricane Season.

P. COPIES OF PROPOSAL

The Area Agency on Aging of Broward County requires responses through the Submittable Platform and three (3) bound copies of each response to the Request for Proposals be submitted by the Applicant to AAABC, 5300 Hiatus Road, Sunrise, FL 33351. The response must be written front side only and bound in 3-ring loose leaf binders. The envelope or box should be securely sealed, and marked on the outside with the Service Program Number and Name. The applicable Service Program Number and Name is identified in Section IV.

One bound copy of the proposal submitted to the Area Agency on Aging of Broward County must be marked "ORIGINAL" and must contain an original signature of an official of the potential provider agency who is authorized to bind the provider to their proposal.

Q. COST OF PREPARATION

The Area Agency on Aging of Broward County is not liable for any costs incurred by an applicant in responding to this Request for Proposals.

R. MAIL DELIVERY

The Area Agency on Aging of Broward County is not responsible for any missed deadlines resulting from late delivery or omissions by the U.S. Postal Service or courier service. Items sent by the AAABC to the address shown on "Notice of Intent to Respond" or on written requests, shall be deemed delivered.

S. PROPOSAL SELECTION CRITERIA

The criteria, by which the responses to the Request for Proposals will be evaluated and selected, are contained in the 2025 OAA Proposal Evaluation Criteria and Rating Scale (Appendix B). Contracts will be awarded to the proposal(s) ranked highest, and by utilizing the evaluation methodology in the RFP, present the best offer(s) for the services sought.

T. NOTICE OF CONTRACT AWARD

Written notices of the contract award will be posted on the AAABC web site. Selected and non-selected applicants will be notified by email, certified mail, return receipt requested, or hand delivered.

For each service program the selection of a specific agency for contract award (s) by the Areawide Council on Aging Board of Directors shall be final and made in accordance with the established timetable. The Areawide Council on Aging Board of Directors will award the contract based upon the recommendation made by the Evaluation Committee. However, that recommendation must reflect the interests of the AAABC, and older adults of Broward County, and the State of Florida.

U. CONTRACT TERMS AND CONDITIONS

Model OAA Contracts for programs are attached (Appendix C). The model contracts contain all current basic contract terms and conditions. However, the contracts, and their special provisions, and other related requirements, are subject to change based upon subsequent regulations.

All recipients of Older Americans Act Funds must agree to comply with the terms and conditions of the model contracts, as well as subsequent revisions. Once the proposal, submitted by the accepted bidder, has been approved in its entirety, it will be referenced and made part of each contract.

V. CONTRACT RENEWAL

The Area Agency on Aging of Broward County may execute five additional one year contracts with Service Providers who are awarded contracts as a result of this Request for Proposals Processes. Renewal contracts will be contingent upon the performance of the selected provider and the recommendation of the AAABC Staff and approval of the Board of Directors of the Areawide Council on Aging of Broward County, Inc., as well as the availability of Federal Older Americans Act and State General Revenue (including Local Service Program Dollars). For subsequent contracts, continuation funding should be considered when establishing unit rates. Actual funding will be based on the amount of money available through the Older Americans Act, and State General Revenue (including Local Service Program Dollars), at the time the contract is due for renewal.

Should renewal contracts be given, the AAABC reserves the right to request that the Service Provider submit annual updates to the Unit Cost Methodology Worksheets and/or the entire Service Provider Application prior to issuing annual contracts.

W. APPEALS PROCESS

The Area Agency on Aging of Broward County has an existing Appeals Policy in the event of an appeal. Notices of Intent to Appeal the Award must be submitted to:

Charlotte Mather-Taylor, Chief Executive Officer Area Agency on Aging of Broward County 5300 Hiatus Road Sunrise, Florida 33351

Notice of Intent to Appeal must be hand delivered or sent certified mail, return receipt requested. The envelope should be marked "Notice of Intent to Appeal". Notices of Intent to Appeal must be submitted by 5:00 p.m. (EDT) August 6, 2025. A formal written protest must be filed by Monday, August 18, 2025, 10 days after date of the Notice of Protest is filed. The formal written protest must state, with particularity, the facts and law upon which the protest is based. Any entity who files a formal protest of the AAABC's RFP Intent to Award decision shall be required to post, at the time of filing the formal written protest, a bond in the amount equal to one percent of the estimated contract amount, pursuant to Sec. 287.042 F.S.

If, in the sole determination of the Area Agency on Aging of Broward County, a disputed contract may result in an interruption of services to older adults, the AAABC reserves the right to contract with a provider of choice on an interim basis to maintain the delivery of services until the appeal is resolved. A copy of the AAABC Hearing Procedures is attached (Appendix A).

X. TERMINATION OF A SUCCESSFUL APPLICANT

Termination of a successful Applicant, within six months of contract initiation, will result in the following action by the AAABC in the best interests of the older adults of Broward County:

The number two bid choice will be offered the opportunity to contract for the service provision or the service will be subject to a second RFP process. If there is no alternate qualified bidder or acceptable response to a second Request for Proposals, the AAABC will seek a waiver from the Florida Department of Elder Affairs to administer the Program directly.

Y. CONFLICT OF INTEREST

Providers must agree to adhere to the policy, regarding conflict of interest issues, as stipulated in the Areawide Council on Aging of Broward County, Inc., Model OAA Contracts (Appendix C), Paragraph 30.

Z. SPECIAL REQUIREMENTS

- 1. Provider must bear the cost of:
 - a. recruitment of any personnel prior to January 1, 2026.
 - b. any pre-service training prior to January 1, 2026.
- 2. Providers must maintain an office in Broward County staffed during the hours of operation of service. The Programs' hours of operation must be at least Monday through Friday, except for Holidays, for a minimum of 250 days a year.
- 3. The Florida Department of Elder Affairs web based data collection system (eCIRTS) is operational through the AAABC. The provider must:
 - a. participate in supporting the computer system through the grant.
 - b. budget funds for computer services.
 - c. adhere to the Florida Department of Elder Affairs/Area Agency on Aging of Broward County procedures and standards when purchasing Information Technology Resources (ITR) as part of this contract. An ITR worksheet is required for any computer related item costing \$1,000.00 or more, including data processing hardware, software services, supplies, maintenance, training, personnel, and facilities. The provider must secure prior written approval through the contract manager from the AAABC for purchase of any ITR. The provider will not be reimbursed for any purchases made prior to this written approval on the ITR worksheet.
 - d. as defined in Chapter 44-4.070, Florida Administrative Code, the provider, among other requirements, must anticipate and prepare for the loss of information processing capabilities. The routine backing up of data and software is required to recover from losses or outages of the computer system. Data and software essential to the continued operation of agency functions must be backed up. The security controls over the backup resources shall be as stringent as the protection required of the primary resources.

FOCAL POINT SENIOR CENTER - SOUTHCENTRAL/SOUTHEAST

GEOGRAPHIC AREA: SOUTHEAST/SOUTHCENTRAL SECTOR OF BROWARD COUNTY includes the cities of Miramar, Dania, West Park, Pembroke Park, and Hallandale, parts of Hollywood and Pembroke Pines, and any unincorporated areas east of 441, north of the Dade County line, south of State Road 84.

PROPOSED SERVICES WILL BE SPECIFIED BY THE APPLICANT INCORPORATING THE MINIMUM REQUIREMENTS LISTED UNDER EACH FUNDING CATEGORY.

Refer to listing of Services & funding sources contained on pages <u>9 -18</u> in the RFP **FUNDING SOURCE: OLDER AMERICANS ACT TITLES III-B, III-D, AND III-E**

SERVICES TO BE PROVIDED	MINIMUM FUNDING LEVEL (ONLY IF SPECIFIED)		
III-B FUND Total Older Americans Act Federal Funding III-B (90% Required Local Match (10%)*)* \$558,000 - \$450,000 \$62,000 - \$50,000		
ACCESS SERVICES – III-B –	MINIMUM REQUIRED		
**AT LEAST 55% OF IIIB FUNDING	TO BE PROPOSED BY APPLICANT		
IN-HOME SERVICES – III-B –	- MINIMUM REQUIRED		
**AT LEAST 5% OF IIIB FUNDING	TO BE PROPOSED BY APPLICANT		
LEGAL ASSISTANCE – III-B – N	NO MINIMUM REQUIRED		
OTHER SERVICES – III-B – NO	O MINIMUM REQUIRED		
III-D FUND	DING		
Total Older Americans Act Federal Funding III-D (1009	%) \$33,334		
OTHER SERVIC	ES – III-D		
III-E FUND	ING		
Total Older Americans Act Federal Funding III-E (90%			
Required Local Match (10%)	\$3,300		
Caregiver Training and Support – Individual	***100% OF III-E FUNDING		
Caregiver Training and Support - Group	-		
Caregiver Training and Support - Stoup	TO BE PROPOSED BY APPLICANT		
OTHER SERVICES – III-E – I	***OTHER SERVICES – III-E – MINIMUM REQUIRED		
GENERAL REVENUE (STATE FUNDING) - LOCAL SERVICE PROGRAM (LSP) GENERAL REVENUE (STATE FUNDING) - LOCAL SERVICE PROGRAM (LSP) ** \$126,550			

** At the time of the preparation of this RFP, the General Revenue (State Funding) - Local Service Program (LSP) is uncertain. Therefore, the contract may be amended after award.

FOCAL POINT SENIOR CENTER - SOUTHWEST

GEOGRAPHIC AREA: SOUTHWEST SECTOR OF BROWARD COUNTY includes the cities of Davie, Cooper City, Southwest Ranches, Weston, and Pembroke Pines, parts of Hollywood, and any unincorporated areas west of 441, north of the Dade County line, south of State Road 84.

PROPOSED SERVICES WILL BE SPECIFIED BY THE APPLICANT INCORPORATING THE MINIMUM REQUIREMENTS LISTED UNDER EACH FUNDING CATEGORY.

Please refer to listing of Services & funding sources contained on pages <u>9 -18</u> in the RFP

FUNDING SOURCE: OLDER AMERICANS ACT TITLES III-B AND III-E

SERVICES TO BE PROVIDED	MINIMUM FUNDING LEVE (ONLY IF SPECIFIED)	UNITS OF SERVICE		
	III-B FUNDING			
Total Older Americans Act Federal Fur		\$414,000 - \$360,000		
Required Local Match (10%)*		\$46,000 - \$40,000		
	CES – III-B – MINIMUM REQU			
		TO BE PROPOSED		
**AT LEAST 5% OF	III-B FUNDING			
		BY APPLICANT		
	CES – III-B – MINIMUM REQU			
**AT LEAST 40% OF	III-B FUNDING	TO BE PROPOSED		
		BY APPLICANT		
LEGAL ASSISTAN	<u>CE – III-B – NO MINIMUM REC</u>	QUIRED		
OTHER SERVICE	S – III-B – NO MINIMUM REQI	UIRED		
	III-E FUNDING			
Total Older Americans Act Federal Fu		\$90,000		
Required Local Match (10%)	(0070)	\$10,000		
	CES – III-E – MINIMUM REQUI			
Caregiver Training and				
	***MINIMUM 3% OF III-E	TO BE PROPOSED BY		
Support – Individual and/or	FUNDING	APPLICANT		
Group				
GENERAL REVENUE (STATE				
GENERAL REVENUE (STATE FUNDI	GENERAL REVENUE (STATE FUNDING) - LOCAL SERVICE PROGRAM (LSP) ** \$216,155			
** At the time of the preparation of this RFP, the General Revenue (State Funding) - Local				

Service Program (LSP) is uncertain. Therefore, the contract may be amended after award.

FOCAL POINT SENIOR CENTER - NORTHEAST

GEOGRAPHIC AREA: NORTHEAST SECTOR OF BROWARD COUNTY includes the cities of Pompano Beach, Deerfield Beach, Sea Ranch Lakes, Lauderdale-by-the-Sea, Lighthouse Point and Hillsboro Beach, parts of Oakland Park, and any unincorporated areas located east of the Florida Turnpike, south of the Palm Beach County line, and north of Commercial Boulevard.

PROPOSED SERVICES WILL BE SPECIFIED BY THE APPLICANT INCORPORATING THE MINIMUM REQUIREMENTS LISTED UNDER EACH FUNDING CATEGORY.

Please refer to listing of Services & funding sources contained on pages <u>9 -18</u> in the RFP

FUNDING SOURCE: OLDER AMERICANS ACT TITLES III-B AND III-E

SERVICES TO BE PROVIDED	MINIMUM FUNDING LEVEL (ONLY IF SPECIFIED)	UNITS OF SERVICE
	III-B FUNDING	
Total Older Americans Act Federal Fu		\$247,500 - \$180,000
Required Local Match (10%)*		\$27,500 - \$20,000
ACCESS SERV	<u> /ICES – III-B – MINIMUM REQUIR</u>	ED
**AT LEAST 15% OF	III-B FUNDING	TO BE PROPOSED BY APPLICANT
IN-HOME SERV	ICES – III-B - MINIUMUM REQUI	RED
		TO BE PROPOSED BY
**AT LEAST 5% OF	III-B FUNDING	APPLICANT
		-
LEGAL ASSISTAN	<u>NCE – III-B – NO MINIMUM REQU</u>	IRED
OTHER SERVICES – III-B – NO MINIMUM REQUIRED		
	III-E FUNDING	
Total Older Americans Act Federal Fur	nding III-E (90%)	\$5,400
Required Local Match (10%)		\$600
	ICES – III-E – MINIMUM REQUIRE	
		ED
Caregiver Training and	***100% OF III-E	FUNDING
Support – Individual and/or		
Group	TO BE PROPOSED B	
	E FUNDING) - LOCAL SERVICE F	
GENERAL REVENUE (STATE FUNDI	NG) - LOCAL SERVICE PROGRA	M (LSP) ** \$118,380

** At the time of the preparation of this RFP, the General Revenue (State Funding) - Local Service Program (LSP) is uncertain. Therefore, the contract may be amended after award.

FOCAL POINT SENIOR CENTER - NORTHWEST

GEOGRAPHIC AREA: NORTHWEST SECTOR OF BROWARD COUNTY includes the cities of Coral Springs, Coconut Creek, Margate, and Parkland, parts of Lauderhill, Lauderdale Lakes, North Lauderdale, Tamarac, and any unincorporated areas located west of the Florida Turnpike, south of the Palm Beach County line, and north of Commercial Boulevard.

PROPOSED SERVICES WILL BE SPECIFIED BY THE APPLICANT INCORPORATING THE MINIMUM REQUIREMENTS LISTED UNDER EACH FUNDING CATEGORY.

Please refer to listing of Services & funding sources contained on pages <u>9 -18</u> in the RFP

FUNDING SOURCE: OLDER AMERICANS ACT TITLES III-B AND III-E

SERVICES TO BE PROVIDED	MINIMUM FUNDING LEVEL (ONLY IF SPECIFIED)	UNITS OF SERVICE	
Total Older Americans Act Federal Fi Required Local Match (10%)*	III-B FUNDING unding III-B (90%)* RVICES – III-B – MINIMUM REQU	\$247,500 - \$180,000 \$27,500 - \$20,000	
**AT LEAST 15% OF		TO BE PROPOSED BY APPLICANT	
IN-HOME SEF	RVICES – III-B – MINIMUM REQU	JIRED	
**AT LEAST 5% OF	III-B FUNDING	TO BE PROPOSED BY APPLICANT	
LEGAL ASSIST	ANCE – III-B – NO MINIMUM REC	QUIRED	
OTHER SERVICES – III-B – NO MINIMUM REQUIRED			
Total Older Americans Act Federal For Required Local Match (10%)	Ç ()	\$5,400 \$600	
	OTHER SERVICES – III-E – MINIMUM REQUIRED		
Caregiver Training and Support – Individual and/or Group	*** 100% OF III-E TO BE PROPOSED		
GENERAL REVENUE (STAT GENERAL REVENUE (STATE FUND	TE FUNDING) - LOCAL SERVIC I DING) - LOCAL SERVICE PROGF		
* At the time of the preparation of this RFP, the General Revenue (State Funding) - Local			

Service Program (LSP) is uncertain. Therefore, the contract may be amended after award.

FOCAL POINT SENIOR CENTER – CENTRAL ONE

GEOGRAPHIC AREA: CENTRAL ONE SECTOR includes cities and unincorporated areas from State Road 84 north up to Commercial Blvd.

PROPOSED SERVICES WILL BE SPECIFIED BY THE APPLICANT INCORPORATING THE MINIMUM REQUIREMENTS LISTED UNDER EACH FUNDING CATEGORY.

Please refer to listing of Services & funding sources contained on pages <u>9 -18</u> in the RFP

FUNDING SOURCE: OLDER AMERICANS ACT TITLES III-B AND III-E

SERVICES TO BE PROVIDED	MINIMUM FUNDING LEVEL (ONLY IF SPECIFIED)	UNITS OF SERVICE
	III-B FUNDING	
Total Older Americans Act Federal Funding I	III-B (90%)*	\$81,000 - \$63,000
Required Local Match (10%)*		\$9,000 - \$7,000
ACCESS SERVIC	ES – III-B – MINIMUM REQUIRE	D
**AT LEAST 25% OF III	-B FUNDING	TO BE PROPOSED BY APPLICANT
IN-HOME SERVIC	ES – III-B – MINIMUM REQUIRE	D
**AT LEAST 5% OF III-	B FUNDING	TO BE PROPOSED BY APPLICANT
LEGAL ASSISTANC	E – III-B – NO MINIMUM REQUIF	RED
OTHER SERVICES	S – III-B – NO MINIMUM REQUIR	ED
	III-E FUNDING	
Total Older Americans Act Federal Funding I	III-E (90%)	\$67,000
Required Local Match (10%)		\$7,444
***OTHER SERVIC	CES – III-E – MINIMUM REQUIRE	D
Caregiver Training and	***MINIMUM 3% OF III-E	FUNDING
Support – Individual and/or Group	TO BE PROPOSED BY AF	

FOCAL POINT SENIOR CENTER – CENTRAL TWO

GEOGRAPHIC AREA: CENTRAL ONE SECTOR includes cities and unincorporated areas from State Road 84 north up to Commercial Blvd.

PROPOSED SERVICES WILL BE SPECIFIED BY THE APPLICANT INCORPORATING THE MINIMUM REQUIREMENTS LISTED UNDER EACH FUNDING CATEGORY.

Please refer to listing of Services & funding sources contained on pages <u>9 - 18</u> in the RFP

FUNDING SOURCE: OLDER AMERICANS ACT TITLES III-B AND III-E

SERVICES TO BE PROVIDED	MINIMUM FUNDING LEVEL (ONLY IF SPECIFIED)	UNITS OF SERVICE
	III-B FUNDING	
Total Older Americans Act Federal Fundir Required Local Match (10%)*	ng III-B (90%)*	\$81,000 – 63,000 \$9,000 - \$7,000
ACCESS SERV	/ICES – III-B – MINIMUM REQUIF	RED
**AT LEAST 25% OF	III-B FUNDING	TO BE PROPOSED BY APPLICANT
IN-HOME SERVICES – III-B – MINIMUM REQUIRED		
**AT LEAST 5% OF I	II-B FUNDING	TO BE PROPOSED BY APPLICANT
LEGAL ASSISTANCE – III-B – NO MINIMUM REQUIRED		
OTHER SERVIC	ES – III-B – NO MINIMUM REQU	IRED
	III-E FUNDING	
Total Older Americans Act Federal Fundir	ng III-E (90%)	\$67,000
Required Local Match (10%)		\$7,444
***OTHER SER	VICES – III-E – MINIMUM REQUI	RED
Caregiver Training and Support – Individual and/or Group	***MINIMUM 3% OF III-E FUNDING	TO BE PROPOSED BY APPLICANT

HOME IMPROVEMENT PROGRAM

GEOGRAPHIC AREA: BROWARD COUNTY

PROPOSED SERVICES WILL BE SPECIFIED BY THE APPLICANT INCORPORATING THE MINIMUM REQUIREMENTS LISTED UNDER EACH FUNDING CATEGORY.

Please refer to listing of Services & funding sources contained on pages <u>9 - 18</u> in the RFP

FUNDING SOURCE: OLDER AMERICANS ACT TITLES III-B AND III-ES

	CES – III-ES – NO MINIMUM REC			
Required Local Match (10%)		\$11,000		
Total Older Americans Act Federal	Funding III-ES (90%)	\$99,000		
	III-ES FUNDING			
OTHER SERV	ICES – III-B – NO MINIMUM REQI	UIRED		
LEGAL ASSIST	ANCE – III-B – NO MINIMUM REC	QUIRED		
**AT LEAST 25% O		TO BE PROPOSED BY APPLICANT		
IN-HOME SE	RVICES – III-B – MINIMUM REQU	IRED		
	/ICES – III-B – NO MINIMUM REG			
Total Older Americans Act Federal Required Local Match (10%)*	Funding III-B (90%)"	\$292,988 - \$150,950 \$32,554 - \$16,772		
	III-B FUNDING			
SERVICES TO BE PROVIDED	MINIMUM FUNDING LEVEL (ONLY IF SPECIFIED)	UNITS OF SERVICE		

Service Program (LSP) is uncertain. Therefore, the contract may be amended after award.

SENIOR CITIZENS LAW PROGRAM

GEOGRAPHIC AREA: BROWARD COUNTY

PROPOSED SERVICES WILL BE SPECIFIED BY THE APPLICANT INCORPORATING THE MINIMUM REQUIREMENTS LISTED UNDER EACH FUNDING CATEGORY.

Please refer to listing of Services & funding sources contained on pages <u>9 -18</u> in the RFP

FUNDING SOURCE: OLDER AMERICANS ACT TITLES III-B AND III-ES

SERVICES TO BE PROVIDED	MINIMUM FUNDING LEVEL (ONLY IF SPECIFIED)	UNITS OF SERVICE
	III-B FUNDING	
Total Older Americans Act Federal F	Funding III-B (90%)*	\$275,623 - \$116,761
Required Local Match (10%)*		\$30,625 - \$12,973
ACCESS SERV	ICES – III-B – NO MINIMUM REQ	UIRED
IN-HOME SERV	ICES – III-B – NO MINIMUM REC	UIRED
LEGAL ASSISTANCE – III-B – MINIMUM REQUIRED		
**AT LEAST 15% OI	F III-B FUNDING	TO BE PROPOSED BY APPLICANT
OTHER SERVI	CES – III-B – NO MINIMUM REQI	JIRED
	III-ES FUNDING	
Total Older Americans Act Federal F	Funding III-ES (90%)	\$31,500
Required Local Match (10%)		\$3,500
OTHER SERVI	CES III-ES – NO MINIMUM REQU	JIRED

NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM

GEOGRAPHIC AREA: BROWARD COUNTY

PROPOSED SERVICES WILL BE SPECIFIED BY THE APPLICANT INCORPORATING THE MINIMUM REQUIREMENTS LISTED UNDER EACH FUNDING CATEGORY.

Please refer to listing of Services & funding sources contained on pages <u>9 - 18</u> in the RFP

FUNDING SOURCE: OLDER AMERICANS ACT TITLES III-EG

SERVICES TO BE PROVIDED	MINIMUM FUNDING LEVEL (ONLY IF SPECIFIED)	UNITS OF SERVICE	
	III-EG FUNDING		
Total Older Americans Act Federal	Funding III-EG (90%)*	\$99,000	
Required Local Match (10%)*		\$11,000	
OTHER SERVICES – III–EG – NO MINIMUM REQUIRED			

V. BIDDERS' INSTRUCTIONS

SERVICE PROVIDER APPLICATION

Proposals must include a complete Service Provider Application (SPA).

The instructions are included in

- Appendix G1, DOEA Service Provider Application Minimum Requirements
- Appendix G2, and the required items/formats are in Appendix G2, DOEA Service Provider Application Formats.

A completed SPA will include a response to

- Program Module
- Contract Module (includes Appendix G3)
- Capability Organizational Items (New Applicant)

There is not a page limit assigned to the Service Provider Application.

ESSENTIAL FORMS (located in Appendix):

The following signed and/or completed Forms must be enclosed with the bidder's response to the RFP:

- Statement of Non-Involvement
- Statement of Acceptance in Involvement of Special Activities
- Acceptance of Contract Terms and Conditions
- PUR State Form 7033 Acknowledgment completed and signed

PLEASE PLACE THE ESSENTIAL FORMS AT THE TOP (OR FRONT) OF YOUR PROPOSAL PACKAGE SO THAT THEY CAN BE EASILY LOCATED.

VI. EVALUATION CRITERIA AND RATING SCALE / FATAL FLAW CHECKLIST

The evaluation criteria and rating scale (Appendix B) are used to review and rank applications. The three (3) review categories are as follows:

Program Module Section: <u>64</u> Total Points Contract Module Section: <u>20</u> Total Points Organizational Capability Items Section: <u>52</u> Total Points

Fatal Flaw Checklist (Appendix B)

The criteria listed below must be fully met in order for the proposal to be considered for further evaluation. Failure to receive a "YES" response on any item may result in an automatic rejection of the proposal.

	CRITERIA	Yes	No
1.	Was the proposal entered by the time and date specified in the RFP?		
2.	Does the proposal include a signed statement certifying that the bidder had no prior involvement with the AAABC by performing a feasibility study concerning the scope of work contained in this RFP; by participating in the drafting of this RFP; or developing a program similar to the ones contained in this RFP?		
3.	Does the proposal contain a signed statement that the bidder agrees to all contract terms and conditions including agreeing to provide continuous and adequate liability insurance coverage during the term of the contract?		
4.	Does the proposal contain a signed PUR 7033 Form acknowledging and agreeing to the terms and conditions outlined in the bid document?		
5.	Does the proposal contain a signed statement or commitment that 10% match is secure.		