



# **FY2020–2022 ANNUAL CONTRACTS**

## **REQUEST FOR PROPOSALS**

### **PART I**

General Requirements

And

Application Information

Issued February 21, 2019

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**PART I - GENERAL REQUIREMENTS FOR ALL SERVICE PROGRAMS  
AND  
APPLICATION INFORMATION**

Service programs for older adults provided with state and/or federal funds awarded by Region IV Area Agency on Aging must comply with all established general program requirements. Each service program must adhere to the definition and minimum standards to be eligible to receive reimbursement of allowable expenses.

- I. APPLICATION** - Organizations proposing to deliver services through the Region IV Area Agency on Aging (AAA) under a Multi-Year Plan must follow designated application and bidding procedures. The Area Agency on Aging provides funding for annualized fixed-sum contracts. All contracts shall be awarded for a three-year period. The annual contract dollar amounts available in **Fiscal Year 2020** by service category for a competitive bidding process are:

Adult Day Care	\$ 196,000
Congregate Meals	\$ 400,000
Creating Confident Caregivers® *	\$ 18,000
Home Delivered Meals	\$ 565,000
Legal Assistance	\$ 25,000
Powerful Tools for Caregivers *	\$ 10,000
Respite-Chore	\$ 50,000
Transportation (see Transportation Supplement page 13)	\$ 60,000
*These courses are required to be facilitated by instructors certified by the course developers. See Minimum Service Standards.	

- A. INFORMATION SUBMISSION**— The application must be completed by organizations proposing to enter into a contract for the delivery of services utilizing Title III of the Older Americans Act and/or state funding. Applicants must submit a detailed plan for the proposed project including a program narrative and budget that accurately reflect service delivery activities and the amount of funds requested. The proposer must also submit signed compliance documents and statutory assurances which will govern program operations.

In addition to submitting the above required information, proposers may be asked to submit additional information by the AAA during the RFP process or at any time during the fiscal year.

- B. ELIGIBLE APPLICANTS FOR FUNDING** - Non-profit or for-profit organization who offer services which meet the minimum standards and serve the Michigan counties of Berrien, Cass, and Van Buren are eligible applicants.
- C. ELIGIBLE SERVICES THROUGH THE COMPETITIVE BIDDING PROCESS** - The types of services to be purchased through the competitive bidding process are announced in this official Request for Proposals (RFP). Minimum service standards have been established for each type of service. **Compliance with these standards is mandatory.**
- D. QUESTIONS & CLARIFICATIONS DURING THE BIDDING PROCESS** - Because the bidding process is competitive, questions raised by prospective proposers, as well as answers by the AAA, will be posted on the AAA website ([www.areaagencyonaging.org](http://www.areaagencyonaging.org)), under the "Doing business with us" menu tab and subheading of "Request for Proposals".
- E. POPULATION TO BE SERVED** - Services shall be provided only to persons 60 years of age and older unless otherwise allowed under eligibility criteria for a specific program.

Services must be made available to elderly residents of Berrien, Cass, and Van Buren counties regardless of race, color, religion, gender, national origin, sexual orientation, or income. "Elderly residents" include those residents or occupants of facilities (either permanent, temporary, or transitional) located within the above mentioned three counties.

**F. TARGETING OF PARTICIPANTS**

1. Substantial emphasis must be given to serving eligible persons with the greatest social and/or economic need, with particular attention to low income and minority individuals. "Substantial emphasis" is regarded as an effort to serve a greater percentage of older persons with economic and/or social needs than their relative percentage to the total elderly population within the geographic service area.

The AAA requires provider to provide detail about how they intend to fulfill these requirements. This effort is called "targeting". Contractors will consider both the poverty guidelines and Census data for the proposed service area.

For purpose of this application, the following guidelines are in effect related to poverty status:

<u>Size of Family</u>	<u>100% Poverty</u>
1	\$12,490
2	\$16,910
3	\$21,330
4	\$25,750

Note: For each additional person, add \$4,420.

**Minority** – For planning and reporting purposes, persons age 60 and over who are members of the following racial/ethnic categories are to be considered as belonging to a minority group; African American, Hispanic, Asian/Pacific Islander, Native American Indian/Alaskan/Hawaiian, or Multi Racial.

**Poverty/Minority** – Persons aged 60 and over meeting the poverty definitions listed above, and who are members of the above listed minority categories.

**Frail/Person with Disability** – Consider a person age 60 and over if he/she needs assistance to use public transportation, or have a physical/mental disability, including Alzheimer's disease or a neurological or organic brain disorder, restricting their ability to perform individually/live independently, or aged 80 and over.

2. Participants shall not be denied or limited services because of their income or financial resources. Where program resources are insufficient to meet the demand for services, each service program shall establish and utilize written procedures for prioritizing clients waiting to receive services, based on social, functional and economic needs.

Indicating factors include:

Social Need – isolated, living alone, age 75 or over, minority group member, non-English speaking, etc.

Functional Need – Persons with disabilities (as defined by the Rehabilitative Act of 1973 or the Americans with Disabilities Act) who have limitations in activities of daily living, mental or physical inability to perform specific tasks, acute and/or chronic health conditions, etc.

Economic Need – eligibility for income assistance programs, self-declared income at or below 125% of the poverty threshold, etc.

3. Each contractor must maintain a written list of persons who seek service from a priority service category (Access, In-Home, or Legal Assistance) but cannot be served at that time. Such a list must include the date service is first sought, the service being sought and the county. The contractor must determine whether the person seeking service is likely to be eligible for the service requested before being placed on a waiting list.

Individuals on waiting lists for services for which cost sharing is allowable, may be afforded the opportunity to acquire services on a 100% cost share basis until they can be served by the funded program.

4. Elderly members of Native American tribes and organizations in greatest economic and/or social need within the program service area are to receive services comparable to those received by non-Native American elders. Contractors within a geographic area in which a reservation is located must demonstrate a substantial emphasis on serving Native American elders from that area.

## **II. SELECTION PROCESS**

The selection process will be conducted in a manner that provides for free and open competitive bidding on all services to be provided in the region. **The AAA reserves the right to accept or reject any or all proposals. Preference will be given to providers who can serve the three counties comprising the AAA service area, except for transportation which may be provided on a county basis (see Transportation Supplement).** Awards shall be made to the responding proposer whose proposal is most advantageous to the AAA with all factors considered, including cost and coordination. For administrative efficiency, contract awards less than \$10,000 are discouraged except where categorical funding dictates. Established timetables will be strictly adhered to. **Proposals received after the published due dates will not be considered eligible for funding.**

### **Timeline:**

February 21, 2019	Official Request for Proposals (RFP) Announced
March 22, 2019	Applicant proposal due to AAA by 3:00pm
March 25 – 27, 2019	Review of applicant proposals by Review Committee
April 1, 2019	Advisory Council review and recommendations
April 15, 2019	Contract award approvals by Board of Directors
April 22, 2019	Notification of contract awards and denials
May-September, 2019	Negotiations and final preparation of contracts
October 1, 2019	Implement FY2020 contracts

- A. **PROPOSAL REVIEW PROCESS** - All competing full proposals received will be reviewed and evaluated by a committee comprised of AAA staff and Advisory Council members. This committee will use the following Proposal Review Criteria as the basis for making recommendations for funding to the full Advisory Council. The entire Advisory Council will then review these recommendations and make final recommendations to the AAA Board of Directors. Refer to the Application Timetable above for specific meeting dates. The AAA may, at its discretion, request that proposers be available to present their application in person to AAA staff, Review Committee, Advisory Council, and/or the Board of Directors.
- B. **PROPOSAL REVIEW CRITERIA** – Applications for funding are reviewed and rated according to their responsiveness to the following Proposal Review Criteria:
  1. **Objectives/Program Plan**
    - a. Response to AAA goals and mission
    - b. Ability to serve the three-county service area (transportation n/a)
    - c. Response to general requirements and minimum service standards for all service programs; including, but not limited to:
      - 1) Targeting
      - 2) Program Income/Contributions/Cost Sharing

- 3) Confidentiality and Client Satisfaction
  - 4) Coordination, Publicity, Alternate Funding
  - 5) Staff and Volunteers, Training
  - d. Administrative structure
  - e. Innovation
- 2. **Access/Quality Control**
  - a. Ability to design and implement an evaluation process with measurable outcomes
  - b. Coordination with other services
  - c. Client eligibility
  - d. Response to client needs
- 3. **Organizational Capability**
  - a. Experience in managing programs relative to the service proposed
  - b. Organizational stability
  - c. Fiscal responsibility
    - 1) Unit Cost
    - 2) Ability to generate program income
    - 3) Fiscal management procedures
  - d. Past performance for current contractors - Contract performance as noted in programmatic and fiscal site assessments and monthly reports
- 4. **Technical Considerations** - Clarity and completeness of application
- D. **POLICY WAIVERS** - All policies and procedures of the AAA shall be strictly adhered to except in those cases where waivers are specifically allowed under Aging and Adult Services Agency (AASA) rules and regulations. In such cases a written request for the waiver, including the rationale for such a request, must be submitted to the AAA for approval. Approval must be given prior to any change in operations.
 

Waiver requests pertaining to Operating Standards for Service Programs should be submitted by the proposer as part of the application process, or during the contract renewal process (when appropriate). Consideration of and recommendations regarding such requests will be determined as part of the proposal review process. Waiver requests submitted to the AAA mid-year will be subject to approval by the AAA Board of Directors.
- E. **CONTRACTING AUTHORITY** - In order to implement services under a three-year plan, the AAA requires complete application packages from proposers of service at the beginning of the three-year planning cycle. At any time during the contract or the RFP process, the AAA may, at its discretion, require proposers to submit any materials or information requested. Annual submission and approval of information may include but is not limited to:
  - 1. **Changes** - Summary of anticipated program changes
  - 2. **Detail** - Program plan
  - 3. **Additional** - Any additional information not requested in the original proposal or contract, or information the AAA requests
- F. **NOTICE OF AWARD** – All applicants will be notified in writing of funding approval or denial within seven (7) calendar days of the AAA Board of Directors decision. Successful applicants will be sent a Multi-Year Annual Contract which must be signed and returned prior to release of any funds.
- G. **APPEALS** - Those applicants whose proposals are denied by the AAA have the right to appeal their denial. Written intent to appeal must be sent to the AAA within ten (10) days from official notice of the decision.
- H. **CONTRACT NEGOTIATIONS** - Final negotiation of contracts, authorized by the AAA Board of Directors, will be conducted by the AAA staff after Board selections have been announced but prior to actual project start-up on **October 1, 2019**, when funding conditions, if any, such as unit cost, client service levels, budget concerns, and related program concerns as specified in the notice of awards, are negotiated.

### III. FUNDING INFORMATION

- A. FUNDING SOURCES** - Both state and federal monies are available through the AAA and follow the same administration process. Title III and State monies are to provide for direct aging service costs and not intended to stabilize organizations or provide for their solvency.

Title III is the principal federal source of funds for planning and services for older persons established through the Older Americans Act as follows: Title III-B, supportive service programs; Title III-C, congregate meal services provided at nutrition sites and for meals delivered to the homebound elderly; Title III-D, health promotion and disease prevention services; Title III-E, the National Family Caregiver Support program that provides funds for caregivers; and Title VII/EAP funds programs for the prevention of elder abuse, neglect and exploitation.

State funds provide funding for adult day care, home delivered and congregate meals, in-home supportive services, and long-term care ombudsman/advocacy.

- B. FUNDING AVAILABILITY** – AAA is proceeding with this Request for Proposal with the presumption of funding availability from both federal and state sources and have set service category amounts at **Fiscal Year 2019** levels as that is the most current information available at this writing. There is uncertainty about Congressional reductions the potential for less funding may exist. When actual funding amounts are known, appropriate adjustments will be made. Insufficient funding in a category may result in a category not being funded.

- C. MATCHING REQUIREMENT** - The funding philosophy of aging-service programs assumes some local resources are available for local programs. Therefore, all funding is on a percentage basis, with both federal and state monies requiring a match.

A portion of local funds must be used and designated as matching funds. The minimum match requested is 10% of total project service costs, which includes local match. To compute match:

Example - Annual Contract

\$10,000 request with a 10% match

- a. \$10,000 divided by .90 = \$11,111 (sum of awards and match)
- b. \$11,111 times .10 = \$1,111 (10% match amount)

Documentation that match is being provided is submitted as a component of the financial reporting for reimbursement. Technical assistance regarding reporting requirements will be provided to successful applicants prior to the beginning of the fiscal year. Definitions of matching sources are provided in the specific application instructions.

**D. CONTRIBUTIONS, PROGRAM INCOME, AND COST SHARING**

1. Program participants are offered a confidential and voluntary opportunity to contribute toward the costs of providing the service received. No one may be denied service for failing to make a donation.
2. Cost sharing principles shall be developed and implemented by Adult Day Services as described in the Adult Day Services Minimum Service Standards. Private pay or locally funded fee-for-service programs must be separate and distinct from grant funded programs.
3. Except for program income, no paid or volunteer staff person of any service program may solicit contributions from program participants, offer for sale any type of merchandise or service, or seek to encourage the acceptance of any particular belief or philosophy by any program participant.
4. Each program must have in place a written procedure for handling all donations/contributions, upon receipt, which includes at a minimum:
  - a. Daily counting and recording of all receipts by two unrelated individuals;
  - b. Provisions for sealing, written acknowledgement and transporting of receipts to either deposit in a financial institution or secure storage until a deposit can be arranged; and

- c. Reconciliation of deposit records and collection records by someone other than the depositor or counter(s).

- E. **REIMBURSEMENT** - The methodology used for reimbursement will be either a fixed unit cost reimbursement or line item reimbursement. The majority of services provided will be reimbursed using a fixed unit cost.

If the service is being reimbursed at a fixed unit cost, the contract will allow for mutual review and possible re-negotiation of the unit rate at the mid-year point with all factors, including program income, considered.

**Contractors must establish a clear audit trail for both methods of reimbursement.**

#### IV. REPORTING SYSTEM

- A. **FINANCIAL** – Contractors will receive payment for services on a monthly or quarterly basis through a unit-cost reimbursement method. A billing report is due within ten (10) days following the last day of each month/quarter. Matching resources provided by service providers will be reported as part of the process. An advance for specific expenditures approved by the AAA may be available upon request. The advance must be reconciled to the total expenditures at the end of the fiscal year.

- B. **PROGRAMMATIC** – Contractors will report programmatic activities through the monthly or quarterly report and participation in NAPIS. Reimbursement is contingent on the receipt of required reports including Monthly/Quarterly Billing Reports, NAPIS (National Aging Program Information System) registrations and/or demographic data summaries.

1. **Billing Reports** -- A monthly or quarterly report is due within ten (10) days following the last day of each reporting period and in the format prescribed by AAA. The report format to be used will vary based on the methodology used for reimbursement.

AAA programmatic reports and the application package request information about units of service and unduplicated (UD) client counts. Definitions for a unit of service vary for the different service categories and are stated as part of the service standards.

The unduplicated client count refers to the counting of a person receiving a service only one time within the fiscal year. A client is counted as unduplicated the first time he/she receives a particular service and is not counted again as UD for the entire fiscal year.

Since only new clients are reported in the UD count, it is common for the planned number of units of service to be greater than the planned number of UD clients.

If a service provider remains under subcontract for more than one year, the entire UD count is started over at the beginning of the new fiscal year.

Service providers must keep track of reported units of service and UD clients for each service category within their filing system. Verification of reported programmatic activity is a part of the AAA's on-site monitoring.

2. **NAPIS** - The National Aging Program Information System (NAPIS) is the client registration system utilized to report data to the state and federal government. Cluster 1, 2, and 4 are registered services that require detailed client (recipient or caregiver) profiles utilizing the NAPIS Client Registration Form for each client. Cluster 3 services are non-registered services that require total units and total unduplicated clients including client characteristics.

Cluster 1 - Home Delivered Meals

Cluster 2 - Congregate Meals

Cluster 3 – Disease Prevention/Health Promotion, Legal Assistance, Transportation

Cluster 4 - Adult Day, Respite Chore, Caregiver Training



**V. ON-SITE MONITORING**

AAA staff will conduct both programmatic and fiscal assessments at the offices of the service provider. Both program assessment and fiscal assessment tools will be sent to the contractor at least thirty days before the assessment dates mutually established during the first year and shall be returned one week prior to the respective on-site visit dates to allow for identification of issues to be discussed. Staff will also discuss at the programmatic assessment such things as agency developments, staff changes, program changes, and opportunities for training. The fiscal assessment will consist of reviewing documentation of expenditures, match, and insurance coverage.

Annual contractors may be designated as low-risk for non-compliance and be subject to a minimum of one programmatic and one fiscal on-site assessment during the three-year contracting period provided they meet the following criteria:

- a) The contractor was contracted for the same service(s) during the prior three-year contracting period;
- b) The annual assessment(s) conducted during the prior three-year contracting period resulted in no findings; and,
- c) There are no current concerns based on monthly reporting, consumer feedback, or other communications.

**VI. ADDITIONAL STANDARDS**

- A. CONFIDENTIALITY** - Each service program must have written procedures to protect the confidentiality of information about older adults collected in the conduct of its responsibilities. The procedures must ensure that no information about an older adult, or obtained from an older person by a service provider is disclosed in a form that identifies the person without the informed consent of that person or of his or her legal representative. However, disclosure may be allowed by court order, or for program monitoring by authorized federal, state or local agencies, which are also bound to protect the confidentiality of client information. All client information shall be maintained in a controlled access environment. It is the responsibility of each contractor to determine if they are a covered entity with regard to HIPAA regulations.
- B. REFERRAL AND COORDINATION PROCEDURES** - Each contractor shall establish working relationships with other community agencies for referrals and resource coordination to ensure that participants have maximum possible choice. Each contractor shall be able to demonstrate linkages with agencies providing access services.
- C. SERVICES PUBLICIZED** - Each contractor must publicize the service(s) in order to facilitate access by all older adults.
- D. MARKETING RESPONSIBILITIES** – Each contractor receiving funding through AAA will cooperate in publicity and promotional efforts by the following:
  - a. Display the AAA decal on entrances at all locations.
  - b. Include the AAA name in all press materials, announcements, notifications, course advertisements, etc. that promote funded services.
  - c. Provide consumer impact stories for use by the AAA.
  - d. Promote the partnership with AAA through other activities that benefit both parties.
- E. OLDER ADULTS AT RISK** - Each contractor shall have a written procedure in place to bring to the attention of appropriate officials for follow-up, conditions or circumstances that place the older adult, or the household of the older adult, in imminent danger (e.g., situations of abuse or neglect).
- F. DISASTER RESPONSE** - Each service program must have established written emergency protocols for weather emergencies and responding to a disaster.
- G. INSURANCE COVERAGE** - Each contractor shall have sufficient insurance to indemnify loss of federal, state and local resources, due to casualty, fraud, or employee theft. All buildings, equipment, supplies and other property purchased in whole or in part with funds awarded are to be covered with sufficient insurance to reimburse the program for the fair market value of the asset at the time of loss. The following insurances are required for each program:
  1. Worker's compensation

2. Unemployment
3. Property and theft coverage (including employee theft)
4. Fidelity bonding (for persons handling cash)
5. No-fault vehicle insurance (for agency owned vehicles)
6. General liability and hazard insurance (including facilities coverage)

The following insurances are recommended for additional agency protection:

1. Insurance to protect the program from claims against program drivers and/or passengers
2. Professional liability (both individual and corporate)
3. Umbrella liability
4. Errors and Omissions Insurance for Board members
5. Special multi-peril.

- H. VOLUNTEERS** - Each contractor that utilizes volunteers shall have a written procedure governing the recruiting, training, and supervising of volunteers consistent with the procedure utilized for paid staff. Volunteers shall receive a written position description, orientation training and a yearly performance evaluation, as appropriate.
- I. STAFFING** - Each contractor shall employ competent and qualified personnel sufficient to provide services pursuant to the contractual agreement. Each contractor shall be able to demonstrate an organizational structure including established lines of authority. Each contractor must conduct, prior to employment or engagement, a criminal background review through the Michigan State Police for all paid and volunteer staff. An individual with a record of a felony conviction may be considered for employment at the discretion of the contractor. The safety and security of program clients must be paramount in such considerations.
- J. STAFF IDENTIFICATION** - Every contracted service staff person, paid or volunteer, who enters a participant's home must display proper identification which may be either an agency picture card, or, a Michigan driver's license coupled with some other form of agency identification.
- K. ORIENTATION AND TRAINING PARTICIPATION** - New contracted service staff must receive orientation training that includes, at a minimum, introduction to the service, the aging network, maintenance of records and files (as appropriate), the aging process, ethics and emergency procedures. Issues addressed under the aging process may include, though are not limited to, cultural diversity, dementia, cognitive impairment, mental illness, abuse and exploitation.

Contracted service staff are encouraged to participate in relevant AAA sponsored or approved in-service training workshops, as appropriate and feasible. Records that detail dates of training, attendance, and topics covered are to be maintained, as well as noted in employee and volunteer files. Training expenses are allowable costs against grant funds. Each service program should budget an adequate amount to address its respective training needs.

**L. COMPLAINT RESOLUTION AND APPEALS**

1. **Complaints** - Each contractor must have a written procedure in place to address complaints, from individual recipients of services under the contract, which provides for protection from retaliation against the complainant.
2. **Appeals** - Each contractor must also have a written appeals procedure for use by recipients with unresolved complaints, individuals determined to be ineligible for services, or by recipients who have services terminated. Persons denied service and recipients of service who have services terminated or who have unresolved complaints must be notified of their right to appeal such decisions and the procedure to be followed for appealing such decisions.

Each contractor must provide written notification to each client, at the time service is initiated, of her/his right to comment about service provision and to appeal termination of services.

3. **Complaints of Discrimination** - Each contractor must provide written notice to each client, at the time service is initiated that complaints of discrimination may be filed with the U.S. Department of Health and Human Services, Office of Civil Rights, or the Michigan Department of Civil Rights.
- M. SERVICE TERMINATION PROCEDURE** - Each contractor must establish a written service termination procedure appropriate to the service category that includes formal written notification of the termination of services and documentation in client files. The written notification must state the reason for the termination, the effective date, and advise about the right to appeal. Reasons for termination may include, but are not limited to the following:
1. The client's decision to stop receiving services.
  2. Reassessment that determines a client to be ineligible.
  3. Improvement in the client's condition so they no longer are in need of services.
  4. A change in the client's circumstances which makes them eligible for services paid for from other sources.
  5. An increase in the availability of support from friends and/or family.
  6. Permanent institutionalization of client in either an acute care or long term care facility. If institutionalization is temporary, services need not be terminated.
  7. The contractor becomes unable to continue to serve the client and referral to another organization is not possible.
- N. CIVIL RIGHTS COMPLIANCE** - Contractors must not discriminate against any employee or applicant for employment or recipient of service because of race, color, religion, national origin, age, sex, sexual orientation, height, weight, or marital status. Each contractor must clearly post signs at offices and locations where contracted services are provided, in English, and other languages as may be appropriate, indicating non-discrimination in hiring, employment practices and provision of services.
- O. EQUAL EMPLOYMENT** - Each contractor must comply with equal employment opportunity and affirmative action principles.
- P. UNIVERSAL PRECAUTIONS** - Each contractor must evaluate the occupational exposure of employees to blood or other potentially hazardous materials that may result from performance of the employee's duties and establish appropriate universal precautions. Each contractor with employees who may experience occupational exposure must develop an exposure control plan which complies with Federal regulations implementing the Occupational Safety and Health Act.
- Q. DRUG FREE WORKPLACE** - Each contractor must agree to provide drug-free workplaces as a precondition to receiving a federal grant. Each contractor must operate in compliance with the Drug-Free Workplace Act of 1988.
- R. AMERICANS WITH DISABILITIES ACT** - Each contractor must operate in compliance with the Americans with Disabilities Act.
- S. WORKPLACE SAFETY** - Each contractor must operate in compliance with the Michigan Occupational Safety and Health Act (MOISHA). Information regarding compliance can be found at [www.michigan.gov](http://www.michigan.gov).

## TRANSPORTATION SUPPLEMENT

Region IV Area Agency on Aging has long been aware of the critical need for transportation services in its service area, as well as nationally. Needs are anticipated to increase due to a wide array of factors, including the aging of the population and the associated increase in medical related trips. The rural nature of the area compounds this problem as many communities were determined to be medically-underserved, thus residents must travel longer distances to get medical care.

The population representing the most frail and transportation-dependent group is the 80+ age group, and it is expected to continue its trend of increasing as a percentage of the total population. However, funding remains static and challenges all of us to seek new ways to stretch limited dollars.

**FY2020** transportation bids for the **\$60,000** available will be structured as follows:

**\$5,000** – To be awarded in conjunction with the nutrition provider to encourage congregate meal participation.

**\$55,000** – Targeted to county needs, the number of contracts not to exceed three, with one per county. Based on the age 80+ population distribution, targeted amounts are as follows:

**Berrien County - \$31,000**  
**Cass County - \$10,500**  
**Van Buren County - \$13,500**

Applicants for transportation services are strongly encouraged to collaborate with other entities providing transportation services in the preparation of their proposal.

Highest consideration will be given to proposals that address critical needs facing the region and other factors, including:

- the ability to serve low income/minority populations;
- the ability to serve the 80+ year-old population;
- the ability to leverage other resources for the purpose of transportation services;
- the ability to cross county and/or state boundaries;
- the ability to provide door-to-door rather than curb-to-curb service;
- cost efficiencies in design that allow the greatest number of persons possible to receive service.
- evidence of collaboration with other providers

Proposals should include the following information:

1. Pertinent information describing the lead agency/organization and fiduciary capabilities.
2. Listing and information about subcontractors as part of a formal request for approval for subcontracting.
3. Total number of vehicles to be used in the proposed program, and number of which are lift-equipped, by subcontractor and total.
4. Number of volunteers to be used in the proposed program, and number of volunteer vehicles utilized, by subcontractor and total.
5. Average number of riders per trip for each vehicle type (bus, van, volunteer vehicle) by subcontractor and total.
6. Transportation-specific training that will be offered.
7. Overall transportation budget.
8. Evidence of coordination and collaboration with other providers. Possible areas to coordinate include: volunteer recruitment, volunteer training, staff training, purchasing vehicles, purchasing insurance, contracting for maintenance, centralized dispatch, and long-distance trips (e.g., Ann Arbor or Battle Creek).
9. Plan for evaluating the effectiveness of the proposed senior transportation program.