

CITY OF SOMERVILLE
MASSACHUSETTS
MAYOR'S OFFICE OF STRATEGIC PLANNING AND COMMUNITY DEVELOPMENT



2020-2021
REQUEST FOR PROPOSAL
COMMUNITY DEVELOPMENT BLOCK GRANT FUNDING FOR PUBLIC SERVICES
BID NUMBER # 20-PS1 CD

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LEGAL NOTICE

City of Somerville

Mayor's Office of Strategic Planning and Community
Development (OSPCD)

invites sealed proposals for the 2020-2021 HUD Action Plan for the:

Community Development Block Grant Program

Emergency Solutions Grant Program

Community Development Block Grant Program:

Proposals must be for programs that provide Public Services to low- and moderate-income residents of the City of Somerville.

RFP # 20-PS1 CD

Emergency Solutions Grant Program:

Proposals must address the needs of homeless individuals and families in the City of Somerville. Funds for the Emergency Solutions Grant are provided by the federal Stewart B. McKinney Homeless Assistance Act.

RFP # 20-ESG1 CD

Request for Proposals will be available at **8:30 A.M. Monday, January 27, 2020** at

somervillema.gov/departments/ospcd/administration
or may be picked up at Somerville City Hall, OSPCD, 93
Highland Avenue, Third Floor, Somerville, MA 02143

Proposers should submit an electronic PDF file to
OSPCD@somervillema.gov and hard copies of proposal to
address provided above no later than:

11:00 A.M. Thursday, February 27, 2020 for Community
Development Block Grant

1:00 P.M. Thursday, February 27, 2020 for Emergency
Solutions Grant

For information and proposal please contact
Nalani Brown, Program Compliance Officer
NBrown@somervillema.gov

George Proakis
Executive Director
617- 625-6600, x 2500

A. BACKGROUND INFORMATION

The City of Somerville is seeking proposals from nonprofit agencies and organizations for public service programs to be funded through the U.S. Department of Housing and Urban Development (HUD) Community Development Block Grant (CDBG) Program. Fifteen percent (15%) of the City's total CDBG Entitlement Grant is committed to the provision of direct social services to meet the needs of the low- and moderate- income families. The CDBG Program, including these public service grants, is administered through the Mayor's Office of Strategic Planning and Community Development (OSPCD).

TIMELINE

| | |
|--|--|
| RFP Issued | Monday, January 27, 2020 |
| Deadline for Submitting Questions to RFP | Thursday, February 20, 2020 |
| Proposals Due | Thursday, February 27, 2020 - 11:00 A.M. |
| Anticipated Contract Award | Thursday, June 4, 2020 |
| Services Commence | Wednesday, July 1, 2020 |
| Contract Completion Date | Wednesday, June 30, 2021 |

B. ELIGIBILITY, EVALUATION AND AWARD

1. Minimum Eligibility Criteria:

HUD requires that any public service program funded with CDBG funds must (1) be a new service or show a quantifiable increase in the level of service provided above that provided during the previous twelve months (24 CFR 570.201(e)) , and (2) provide a benefit to low- and moderate- income families (24 CFR 570.200(2)). The City of Somerville requires that the program serve Somerville residents.

2. Selection Criteria:

Proposals are urged to address the following considerations in completing the required Section 1: Program Description:

- Recent or proposed adaptations of the Proposer's services to better serve Somerville's changing population,
- Recent or proposed innovations and/or improvements in the Proposer's service model,
- Clear identification of emerging public service needs consistent with the City's Proposed 5-year Consolidated Plan (see **Attachment A**),
- Funding match(es) from other sources,
- Collaboration with other non-profits in planning and service delivery,
- Justification for continued funding (addressing Minimum Eligibility Criteria **particularly Low Moderate Income (LMI) clientele eligibility**), and
- Contributions towards SomerPromise and Somerville Children's Cabinet, if applicable.
- Contributions towards Well Being of Somerville Report recommendations, if applicable. The Well Being of Somerville Report can be found at <https://www.somervillema.gov/sites/default/files/wellbeing-of-somerville-report-2017.pdf>

3. Selection Procedure:

Grants are exempt from the Chapter 30B selection procedures. Proposals shall be reviewed by the CDBG Advisory Committee. In addition to the Minimum Eligibility Criteria and Selection Criteria listed above, the Committee will take into account census data, human service provider statistics and results of the public meetings.

The Advisory Committee will evaluate applications based on the following rating system (75 points possible):

- | | |
|---|-----------|
| • Experience managing federally funded projects | 5 points |
| • Agency capacity – financial and staffing | 10 points |
| • Activity need and Consolidated Plan priority, number served | 20 points |
| • Benefits to Special Needs and Low and Moderate Income (LMI) persons | 20 points |
| • Project budget, leverage of other funds, partnerships with other agencies | 10 points |
| • Activity management and completion within one (1) year | 10 points |

The Committee will make recommendations to the Mayor’s office and final funding decisions will be made jointly by the Mayor’s office and the Committee.

4. Execution Grant Agreement:

Successful Proposers must execute a Public Service Grant Agreement within 30 days of award with the City of Somerville in substantially the same form, including Appendices, as the sample Grant Agreement included in Attachment C of this RFP. Please note that funding is typically for one year only, although the City may extend the term of the grant in appropriate cases.

5. Grant Agreement Reporting Requirements:

Awarded proposers will be required CDBG Requirements including the submission of Quarterly Progress Reports. See Attachment D for reference.

C. INSTRUCTIONS

Please fill out the Agency Information page (Attachment A), Program Description, Financial Planning Projection/Price Proposal. In addition include the following as Section III to your proposal: Total agency operating budget, Listing of Board of Directors & Affiliation, Organizational Chart, Job Descriptions, and Staff listing by Affirmative Action categories. For Section IV submit the agency’s Authorization Vote of the Board/Certificate of Authority, copy of agency’s Financial Policies and Procedures and financial Audit. Section V (For New Proposers ONLY) – Submit the agency’s Articles of Organization and Affirmative Action Plan. For To assist the Advisory Committee please submit your proposal with each section labeled and organized in the following order: Section I, Section II, Section III, Section IV, or Section V and in the following order:

Submit Four (4) Copies Section I, Section II, And Section III

SECTION I

- Cover Page
- Program Description (not to exceed 9 pages)

SECTION II

- Financial Planning Projections/Price Proposal (not to exceed 2 pages)

SECTION III

- Total agency operating budget
- Listing of Board of Directors & affiliation
- Organizational Chart
- Job Descriptions
- Staff listing by Affirmative Action categories

Submit One (1) Copy of Section IV And Section V

SECTION IV

Documents to be Provided for All Proposers

- Authorization Vote of the Board
- Financial Policies and Procedures
- Audit

SECTION V

Documents to be Provided by New Proposers

- Articles of Organization
- Affirmative Action Plan

SUBMISSION:

An electronic PDF AND Hardcopies of proposal must be submitted to the Office of Strategic Planning and Community Development (OSPCD) by Thursday, February 27, 2020 by 11:00 A.M.

Electronic PDF proposal should be emailed to: OSPCD@somervillema.gov

Four (4) hardcopies of proposal should be mailed or delivered in clearly marked Envelope or Box which includes: Proposer Agency Name and Address and "RFP CDBG 2020" to:

Office of Strategic Planning and Community Development (OSPCD)
Attention: Nalani Brown
City of Somerville
93 Highland Ave, 3rd Floor
Somerville, MA 02143

City of Somerville Hours of Operation:

- Monday – Wednesday: 8:30 a.m. and 4:30 p.m.
- Thursday: 8:30 a.m. to 7:30 p.m.
- Friday: 8:30 a.m. to 12:30 p.m.

It is the sole responsibility of the proposer to ensure that the proposal arrives on time at the designated place. Late proposals will not be considered and will be rejected and returned

Questions:

For more information regarding this Request for Proposals or the ESG Program please contact Nalani Brown, OSPCD at NBrown@somervillema.gov or (617) 625-6600 x2542. Deadline for submitting questions regarding this RFP is Thursday, February 20, 2020.

SECTION I:
A. COVER PAGE

1. Agency Name:
2. Name of Project:
3. Address:
4. Contact Person (Name/Title):
5. Telephone Number:
6. Agency Type (Check One):

Email Address:

Fax Number:

Municipal ☐
Consortium or Collaborative ☐
List Members

Private Non-Profit ☐
Private for Profit ☐

7. Federal I.D. # _____ DUNS # _____
8. Each applicant should specify which subcategory best describes the proposed project:

Senior Services ☐
Handicapped Services ☐
Legal Services ☐
Immigrant/Newcomer Serv. ☐
Mental Health Services ☐
Health Services ☐
Domestic Violence Services ☐

Employment Training ☐
Crime Awareness ☐
Child Care Services ☐
After School Program ☐
Youth Services ☐
Substance Abuse Svc ☐
Other (please specify) _____

9. Describe the population with whom you expect to work and estimate the number of people to be served by this project:

10. Client eligibility criteria used:

☐ An activity which benefits a limited clientele, at least 51% of whom are low-or moderate-income persons (24 CFR 570.208(2)(i))

☐ Activities that exclusively serve a group of persons in any one or a combination of the following categories may be presumed to benefit persons, 51 percent of whom are low-and-moderate-income: abused children, battered spouses, elderly persons, adults' meeting the Bureau of the Census' Current Population Reports definition of "severely disabled", homeless persons, illiterate adults, persons living with AIDS (24 CFR 570.208(a)(2)(A))

11. Total Funding Requested in this proposal:

Submitted by:

Date:

Print Name

Signature

SECTION I.

B. PROGRAM DESCRIPTION

(Please limit your response to one page per subsection. Not to exceed a total of 9 pages)

1. **If you were not awarded CDBG funds in the past year**, please provide a brief history of the agency; list its goals, objectives, and accomplishments in the past year.
2. **If you are requesting renewed funding for a program**, justify why you should receive CDBG funds and how your program addresses the City's 5 Year Consolidated Plan (2018-2022) (see **Attachment A**), indicate the increased numbers you will serve, detail the improved strategies to encourage self-sufficiency among continuing clients, identify your techniques to discourage recurring need for services.
3. Describe the target Somerville population served by this program, specifying age, sex, racial and ethnic characteristics, disability, income, and residency by Somerville neighborhood. **Indicate the client eligibility criteria you will use (51% documented Low/Moderate Income or presumed LMI group).**
4. Indicate the service model you will use to meet the needs of the population to be served and describe the level of service you will provide.
5. Contrast your model with other local agencies or programs that serve this population. Describe how and with whom your agency will work (public and private agencies) to provide the proposed service.
6. List the objectives of the program serving low and moderate income clients. For each objective specify the number of clients to be served, type of services and schedule.
7. Describe how you will measure and report progress on the program objectives. Identify quantitative and qualitative measures. For example, how do you collect client data? How do you measure the impact of programs? Complete **Program Impact Form (page 8)**.
8. If this is continued funding, please use the attached **Program Impact Form (page 8)** to give a progress report on the current fiscal year's objectives to date. If objectives are not being achieved, or are being changed, please explain.
9. If your proposed project is in a category that aligns with current SomerPromise priorities describe how your program will coordinate with SomerPromise to advance a shared mission (see Attachment F). Please specify which focus area your program supports and how the program measures progress toward improving access and equity by closing opportunity gaps. Your agency's involvement with SomerPromise will depend on what SomerPromise is currently working on.
10. If your proposed project is in response to a recommendation or observation found in the Well Being of Somerville Report please specify which focus area your program supports and how your program plans to improve the health and wellness of the population you plan to serve (see Attachment F).

SECTION I.
C. PROGRAM IMPACT FORM

Questions 7 and 8

Sub Recipient (Agency Name):

Program:

| NEED STATEMENT | PROGRAM GOALS | NUMBERS ASSISTED | | HUD FY18 PROGRAM IMPACT | OUTCOMES ST (short term) LT (long term) |
|---|---|---|--|---|--|
| <i>Description of Need to be Addressed</i> | | <i>Documented primary clients (PC) Secondary clients (SC)</i> | | <i>Direct products of program activities</i> | <i>Benefits that result from the program</i> |
| Describe the history of the problem you're addressing and how your program solves this issue. | Please list your program's goals to address this issue. If you are in a SomerPromise or Well Being of Somerville related service area, please indicate which focus area(s) your goals support. _____ | Number of direct service clients completing Client Information Form. Number of secondary clients effected _____ | | <p>What progress did your agency/clients and/or programs make during the fiscal year. <i>For Example:</i> <i>Your program worked with 163 families to provide assistance in eviction prevention. Please make sure to include how this was accomplished. Or 27 children participated in the tutoring program and grade point average increased.</i></p> <p>Please make sure to include how this was accomplished. _____</p> | <p>How does your program affect either your client's well-being or the community's? For Example: Preventing evictions reduces strain on State Funding. (ST) Maintain family stability. (LT) Or Children with better study habits will go to college. (ST) They will receive better jobs. (LT)</p> |
| DESCRIBE METHODOLOGY FOR MEASURING OUTCOME: (You need to measure at least one outcome) | | | | | |
| Indicator 1: _____ Each indicator represents how you record and collect all data for program | | | | | |

SECTION II. FINANCIAL PLANNING PROJECTIONS

11. Submit the program budget form below. Line items specific to your agency's project can be added to the form. In addition, attach your agencies budget separately.

PROGRAM BUDGET FORM:

| July 1, 2020 – June 30, 2021 | | | |
|------------------------------|----------------------------------|----------------------|--|
| | <u>CDBG Project Expenses</u> | <u>Program Funds</u> | <u>Matching Funds & Source</u> |
| Administrative | | | |
| Salary | | | |
| Fringe | | | |
| Other Program | | | |
| Administrative Expenses | | | |
| <i>Subtotal</i> | | | |
| | | | |
| Direct Services | | | |
| Staff Salary | | | |
| Fringe | | | |
| Rent | | | |
| Utilities | | | |
| Other (specify) | | | |
| <i>Subtotal</i> | | | |
| | | | |
| Total | | | |

- Specify matching funds for this project from other funding sources, indicate whether these funds are restricted to this project and state the dates of the matching funding cycle. _____
 - Please describe in narrative form, the specific use of CDBG funds requested. _____
 - Note
 - o Providers may request a nominal fee that is appropriate for the low income population served. The fee for low income participants is not considered Program income or applicable credit.
 - o Fees to non-low income participants would be considered Program income as an applicable credit.
 - o Solicitation of donations must be a generic request and cannot be directed to specific participants.
12. Summarize your agency's three (3) year funding strategy and identify clearly how you propose to minimize dependence on CDBG funding by including the sources of funding that your agency has applied for and/or received from 2019 through 2020. If you have a long-range plan for your agency (more than 3 years), please note this and include a summary.

SECTION III. MISCELLANEOUS INFORMATION

12. Job descriptions or unit of service descriptions of all positions for which funding is requested; including salaries and qualifications.
13. Total agency operating budget.
14. Board of Directors & Affiliation: A list of names, addresses and affiliations for board members and a brief narrative of the Board's function.
15. Agency's Organizational Chart
16. Staff list by CDBG Affirmative Action categories.

SECTION IV. DOCUMENTS TO BE PROVIDED BY ALL PROPOSERS *(1 copy)*

17. Authorization Vote of the Board: Vote of the Board of Directors authorizing submission of this proposal.
18. Financial Policies and Procedures: Copy of Financial Policies and Procedures. Example can be provided upon request.
19. Audit: If you received \$25,000 or more in CDBG and or Emergency Solutions Grant Funds during HUD FY19, provide an agency audit for the most recently completed fiscal year.

SECTION V. DOCUMENTS TO BE PROVIDED BY NEW PROPOSERS ONLY *(1 copy)*

20. Articles of Organization and license where applicable.
21. Agency's Affirmative Action Plan.

ATTACHMENT A

CDBG PROPOSER CHECKLIST

Please ensure all documents listed on this checklist are included with your agency's proposal. Failure to do so may subject the proposer to disqualification.

- _____ Cover Page
- _____ Program Description
- _____ Program Impact Form
- _____ Financial Planning Projections: Program Budget Form
- _____ Agency Operating Budget
- _____ Board of Directors & Affiliation
- _____ Agency's Organizational Chart
- _____ Jobs/ Unit of Service Descriptions
- _____ Staff List by CDBG Affirmative Action Categories
- _____ Authorization Vote of the Board
- _____ Financial Policies and Procedures
- _____ Audit
- _____ Articles of Organization and License(s) (*New Proposers only*)
- _____ Agency's Affirmative Action Plan (*New Proposers only*)
- _____ Acknowledgement of Addenda (*Applicable ONLY if an addenda is issued*)

ATTACHMENT B

5-YEAR CONSOLIDATED PLAN 2018-2022 OBJECTIVE, PRIORITY NEEDS, GOALS AND STRATEGIES RELEVANT TO PUBLIC SERVICES

OBJECTIVE:

- Provide activities to enable low and moderate income residents with the opportunities and resources to improve and expand their standard of living as the City's economy continues to grow

PRIORITY NEEDS:

- Enhancing the Quality of the Urban Environment
- Building Communities of Opportunity
- Addressing the Needs of At Risk Population

GOALS:

- Stabilize and Revitalize Diverse Neighborhoods
- Create and Preserve Affordable Housing
- Family Stabilization and Job Readiness
- Reduce and End Homelessness

STRATEGIES:

Move individuals and families from poverty toward self-sufficiency and ending the cycle of poverty

- Provide education and training to maximize income
- Provide personal skills and support systems necessary to secure safe and affordable housing
- Provide quality child care
- Provide opportunities to fulfill education and employment goals
- Provide access to physical and mental health services
- Provide financial literacy to save for future needs
- Provide nutritious food and basic necessities to build strong stable families

Prevent and address homelessness prevention activities for at risk populations

- Provide safety net planning for individuals and families experiencing domestic violence
- Provide outreach to and provide emergency shelter, transitional housing and social services to alleviate and prevent homelessness
- Provide appropriate services for low income seniors living on fixed incomes
- Provide programming to meet the needs of people with disabilities

ATTACHMENT C

|  City of Somerville: Standard Contract Form (Grant Services Agreement) | | | | |
|---|--|-------------------------|---|-------------------------|
| CONTRACT NAME: FILL IN CONTRACT TITLE | | | | |
| This Grant Agreement, numbered _____, is made by and between the City of Somerville, a municipal corporation organized and existing under the laws of the Commonwealth of Massachusetts, acting by and through the Mayor's Office of Strategic Planning and Community Development ("OSPCD"), with an address of 93 Highland Avenue, Somerville, Massachusetts, acting by and through its Purchasing Department ("City" or "Grantor") and the Grantee defined as follows, ("Grantee" or "Vendor"): | | | | |
| Grantee Name: | | | | |
| Grantee Address: | | | | |
| Grantee Contact Name, Email, & Tel./Fax #: | | | | |
| Contract Amount: | \$@@@@@ | | | |
| Purchase Order #: | Purchase Order Amount: | | | |
| Contract Term: | ####/## through ####/## | | | |
| Term of Grant: | The term of this Grant Agreement shall commence on ####/## and shall end on ####/## ("Term"). The Grantee shall complete the provision of Goods and/or the performance of Services prior to the end of the Contract term (the "Completion Date"). The term of this Contract may be extended at the sole discretion of the City, through written notice to the Grantee. | | | |
| Grant Recitals: | WHEREAS, the City has entered into an agreement (the "Grant Agreement") with ***INSERT FUNDING SOURCE*** (the "Funding Source") to fund a portion of the cost of the Project with ***INSERT FUND TYPE*** funds; WHEREAS, Chapter 30B:1(a) states "This chapter shall apply to every contract for the procurement of supplies, services or real property and for disposing of supplies or real property by a governmental body as defined herein"; and WHEREAS, Chapter 30B:2 defines "services" as follows: "Services", the furnishing of labor, time, or effort by a contractor, not involving the furnishing of a specific end product other than reports. This term shall not include employment agreements, collective bargaining agreements, or grant agreements"; and WHEREAS, this Agreement meets the definition of "grant agreement" in Chapter 30B:2: namely, "an agreement between a governmental body and an individual or nonprofit entity the purpose of which is to carry out a public purpose of support or stimulation instead of procuring supplies or services for the benefit or use of the governmental body." | | | |
| Procurement Type: | Procurement Type: | | | |
| Contracting Department: | <table border="1"> <tr> <td>Pick Dept.</td> <td>Project Manager:</td> </tr> </table> | Pick Dept. | Project Manager: | |
| Pick Dept. | Project Manager: | | | |
| Scope of Work (Goods / Services): | The Vendor shall provide the Goods and/or Services, as described within the attached Appendix A (Scope of Work) , made part hereof. | | | |
| Grant Amount Compensation: | The City agrees to pay the Vendor a total not to exceed \$@@@@@ for Goods and/or Services rendered and accepted in accordance with the Contract Documents. Rates, units, charges, and frequencies are specified in the attached Appendix B made part hereof. | | | |
| Funding Source: | <table border="1"> <tr> <td>(Select Funding Source)</td> <td>CFDA Numbers: (Select CFDA Number)</td> </tr> </table> | (Select Funding Source) | CFDA Numbers: (Select CFDA Number) | |
| (Select Funding Source) | CFDA Numbers: (Select CFDA Number) | | | |
| CDBG National Objectives: | (Select CDBG National Objective) | | | |
| Vendor Certifications: | Under the pains and penalties of perjury, the Vendor agrees to perform this Contract and provide the Goods and/or Services in accordance with the City of Somerville's Standard Contract General Conditions as set forth within the attached hereto, made part hereof. Vendor is in full compliance with all laws of the Commonwealth of Massachusetts relating to taxes and to contributions and payments in lieu of taxes. The Vendor certifies that it has provided the City with an accurate tax identification number (TIN). In the event that the City is notified by the IRS for an incorrect TIN provided by the Vendor, the Vendor is responsible for penalties. TIN: <input type="text"/> DUNS Number: <input type="text"/> This Contract has been duly executed and delivered on behalf of the Vendor by its: Officer (President, Vice President, Treasurer, Secretary) General Partner, Trustee, other: _____; in full compliance with the authority granted by its organizational documents and its votes or resolutions, which authority has not been amended, modified, or rescinded as of the date hereof. | | | |
| Applicable Wage Rates: | <table border="1"> <tr> <td>(Select Wage Rates)</td> <td>Is Grantee a WBE/MBE?</td> <td>(Select if WMBE or N/A)</td> </tr> </table> | (Select Wage Rates) | Is Grantee a WBE/MBE? | (Select if WMBE or N/A) |
| (Select Wage Rates) | Is Grantee a WBE/MBE? | (Select if WMBE or N/A) | | |

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| | |
|--|---|
| Appendix C: Forms (Check if Applicable; If Unchecked, Not Applicable) | |
| <input type="checkbox"/> Certificate of Authority <input type="checkbox"/> Evidence of Insurance <input type="checkbox"/> Bid Package Documents <input type="checkbox"/> Certificate of Good Standing <input type="checkbox"/> Grant Trust Disclosure Form <input type="checkbox"/> Campaign Contribution Disclosure Form <input type="checkbox"/> Vulnerable Road Users Ordinance <input type="checkbox"/> General Conditions for Federally Funded Contracts | <input type="checkbox"/> Prevailing Wages <input type="checkbox"/> Federal Davis Bacon Wages <input type="checkbox"/> Somerville Living Wage Ordinance <input type="checkbox"/> Grant Progress Report <input type="checkbox"/> Section 3 Clause <input type="checkbox"/> Other Contract Requirements |
| IN WITNESS WHEREOF, the City and the Grantee have executed this Contract as a sealed instrument on <div style="display: flex; justify-content: space-around; width: 100%;"> this, the Pick Day of Pick Month Pick Year </div> | |
| VENDOR | |
| | Date Signed: |
| <input checked="" type="checkbox"/> | Print Title: |
| Grantee Signature (Duly Authorized): | Print Name: |
| CITY | |
| City Auditor's Encumbrance Statement | |
| I hereby certify that the total contract amount is \$ and that an unencumbered balance of \$ is available for the current fiscal year of this contract. I further certify that a sum of \$ is hereby encumbered against the appropriate account for the purposes of this contract and as funds become available, I will encumber additional sums as are required under this contract. | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Edward Bean, City Auditor | Joseph A. Curtatone, Mayor |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| George Proakis, Executive Director OSPCD | Approved as to form: Francis X. Wright, Jr., City Solicitor |
| | |
| | |

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APPENDIX A

Scope of Work

1. CDBG funds will be utilized to fund the following public service activity(s):

Activity Description:

Task 1 – Provide _____ services to benefit low/moderate income residents.

National Objective:

Limited Clientele

An Activity which benefits a limited clientele, at least 51 percent of whose family income does not exceed low-moderate-income limit. Income will be calculated based on Section 8, Part 5 definition of income. Failure to meet the required income documentation would result in the City's investment of CDBG funds in this activity to not meet the national objective. Failure to meet the national objective may result in corrective actions up to and including the Grantee being required to repay CDBG funds.

Source: 24 CFR 570.208(a)(2)(i)(B) and (C).

Or

Presumed Benefit

Activities that exclusively serve a group of persons in any one or a combination of the following categories may be presumed to benefit persons, 51 percent of whom are low-and-moderate-income: abused children, battered spouses, elderly persons, adults' meeting the Bureau of the Census' Current Population Reports definition of "severely disabled", homeless persons, illiterate adults, persons living with AIDS... (24 CFR 570.208(a)(2)(A))

2. Projected Outcomes

- a.
- b.
- c.

3. Reporting

4. Budget

Appendix B
Cost Details

Timetable for Advances of Grant Funds:

- ☐ **Service rate(s): Per Details Below**
- ☐ **Supply rate(s): Per Details Below**
- ☐ **Number of payments: Per Details Below**
- ☐ **Payment upon completion of deliverables: Per Details**
- ☐ **Fixed fee: Per Details Below**
- ☐ **Other: Per Details Below**

The Grantee shall periodically submit invoices to the City, for which compensation is due under this Contract and requesting payment for goods received or services rendered by the Grantee during the period covered by the invoice. The invoice must agree to the rates/payment schedule as indicated in this contract and must include the applicable Purchase Order number. The invoice shall include the following information: grantee name, grantee remit address, invoice date, invoice number, itemized listing of goods, services, labor, and expenses and indicating the total amount due.

General Contract Terms and Conditions
(for federally funded contracts)

OVERALL COMPLIANCE

1. Grantee shall comply with all provisions of the Housing and Community Development Act of 1974 and regulations issued pursuant thereto, the Community Development Block Grant (CDBG) Entitlement Program Regulations, 24 CFR 570 et seq. and instructions issued by the Funding source, and with all federal, state and local laws applicable to this contract.
2. Grantee shall comply with U.S. Office of Management and Budget (OMB) Circular A-102. Grantee hereby consents to jurisdiction of the federal court.
3. Grantee shall permit the City, HUD, the Comptroller General of the United States, or any of their duly authorized representatives, to have access to any books, documents, papers, and records of the Grantee relating to this contract.

AFFIRMATIVE ACTION FOR HANDICAPPED WORKERS

4. Grantee shall not discriminate against any employee or applicant for employment because of physical or mental handicap in regard to any position for which the employee or applicant for employment is qualified. The Grantee agrees to take affirmative action to employ, advance in employment and otherwise treat qualified handicapped individuals without discrimination based upon their physical or mental handicap in all employment practices.
5. The Grantee agrees to comply with all rules, regulations and relevant orders issued pursuant to the Rehabilitation Act of 1973. In the event of the Grantee's noncompliance with the requirements of this clause, actions for noncompliance may be taken in accordance with the rules, regulations and orders issued pursuant to the Rehabilitation Act. The Grantee shall notify all those with whom it has contracted that the sub grantee is bound by the terms of the Rehabilitation Act of 1973, and is committed to take affirmative action to employ and advance in employment physically and mentally handicapped individuals.

ENVIRONMENTAL PROTECTION

6. National Environmental Policy Act: The Grantee shall cooperate and assist the City in complying with the HUD Environmental Review Procedures (24 CFR Part 58).
7. Clean Air Act: If this contract is in excess of \$100,000.00, Grantee shall comply with the Clean Air Act of 1970.

HISTORIC PRESERVATION

8. Grantee shall comply with all federal laws and regulations governing historic preservation, the Historic Districts Act of the Commonwealth of Massachusetts (G.L. Ch. 40C) and the City of Somerville Historic District Ordinance.

WORK HOURS AND SAFETY STANDARDS

9. In construction contracts in excess of \$2,000 and other contracts in excess of \$2,500, the Grantee shall comply with Sections 103 and 107 of the Contract Work Hours Safety Standards Act (40 U.S.C. 327-330.)

CONFLICT OF INTEREST

10. Grantee shall comply with all federal and state conflict of interest statutes and regulations.

NONDISCRIMINATION UNDER TITLE VI OF THE CIVIL RIGHTS ACT OF 1964

11. Grantee shall comply with the requirements of Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and HUD regulations thereto. In the sale, lease or other transfer of land acquired, cleared or improved with assistance provided under this contract, the Grantee shall cause or require a covenant running with the land to be inserted in the deed or lease for such transfer, prohibiting discrimination upon the basis of race, color, religion, sex or national origin, in the sale, lease, or rental, or in the use or occupancy of such land or any improvements erected or to be erected thereon, and providing that the Grantee, the City of Somerville and the United States are beneficiaries of and entitled to enforce such covenant. The Grantee, in undertaking its obligation in carrying out the Project assisted hereunder, agrees to take such measures as are necessary to enforce such covenant and shall not discriminate.

COPYRIGHTS AND PATENTS

12. Copyrights: The Grantee agrees that where any activity performed under this contract results in a book or other copyrightable material the Grantee is free to copyright the work, but the City and HUD reserve a royalty-free, non-exclusive and irrevocable license to reproduce, publish, or otherwise use, and to authorize others to use the work for government purposes.

13. Patents: The Grantee agrees that if activities performed under this contract produce any patentable items, patent rights, processes, or inventions, such fact shall be promptly and fully reported to the City and HUD, and absent an agreement to the contrary, HUD shall determine whether protection of such invention or discovery shall be sought and how the rights in the invention or discovery, including the rights under any patent issued thereon shall be allocated and administered in order to protect the public interest.

UNIFORM ADMINISTRATIVE REQUIREMENTS

The following uniform administrative requirements set forth in 24 CFR 570.502 are applicable to grantees which fall within the definition of “subrecipient” set for in 24 CFR 570.500:

14. Subrecipients which are Government Agencies: subrecipients which are governmental Agencies shall comply with the requirements and standards of OMB Circular No. A-87, “Cost Principles for State, Local, and Indian Tribal Governments”; OMB Circular A-128, “Audits of State and Local Governments” (implemented at 24 CFR part 44); and with the following sections of 24 CFR part 85, “Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments” or the related CDBG provisions, as specified in this paragraph: (1) Section 85.3, “Definitions”; (2) Section 85.6, “Exceptions”; (3) Section 85.12, “Special grant or subgrant conditions for ‘high risk’ grantees”; (4) Section 85.20, “Standards for financial management systems”, except paragraph (a); (5) Section 85.21, “Payment”, except as modified by §570.513; (6) Section 85.22, “Allowable Costs”; (7) Section 85.26, “Non –federal

audits”; (8) Section 85.32, “Equipment”, except in all cases in which the equipment is sold, the proceeds shall be program income; (9) Section 85.3, “Supplies”; (10) Section 85.34, “Copyrights”; (11) Section 85.35, “Subawards to debarred and suspended parties”; (12) Section 85.36, “Procurement”, except paragraph (a); (13) Section 85.37 “Subgrants”; (14) Section 85.40, “Monitoring and Reporting Program Performance”, except paragraphs (b) through (d) and paragraph (f); (15) Section 85.41, “Financial Reporting”, except paragraphs (a), (b), and (e); (16) Section 85.42 “Retention and Access Requirements for Your Records”, except that the period shall be four years; Section 85.43, “Enforcement”; (18) Section 85.44 “Termination for Convenience”, (19) Section 85.51, “Later Disallowances and Adjustments” and (20) Section 85.52, “Collection of Amounts Due”.

15. Subrecipients, except Subrecipients who are Governmental Agencies: subrecipients, except subrecipients who are governmental entities shall comply with the requirement and standards of OMB Circular No. A-122, “Cost Principles for Nonprofit Organizations”, or OMB Circular No. A-21, “Cost Principles for Educational Institutions”, as applicable, and OMB Circular A-133, “Audits of Institutions of Higher Education and Other Nonprofit Institutions” (as set forth in 24 CFR part 45). Audits shall be conducted annually. Such subrecipients shall also comply with the following provisions of the Uniform Administrative Requirements of OMB Circular A-110 (implemented at 24 CFR part 84, “Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals, and other Nonprofit Organizations”) or the related CDBG provision as specified in this paragraph:

- (1) Subpart A – “General”;
- (2) Subpart B – “Pre-Award Requirements” except for §84.12, “Forms for Applying for Federal Assistance”;
- (3) Subpart C – “Post-Award Requirements”, except for
 - (i) Section 84.22, “Payment Requirements”, Grantee shall follow the standards of §85.20(b)(7) and §85.21 in making payments to subrecipients;
 - (ii) Section 84.23, “Cost Sharing and Matching”;
 - (iii) Section 84.24, “Program Income”. In lieu of §84.24m CDBG subrecipients shall follow §570.504;
 - (iv) Section 84.25, “Revision of Budget and Program Plans”;
 - (v) Section 84.32, “Real Property”. In lieu of §85.32, CDBG Subrecipients shall follow §570.505;
 - (vi) Section 84.24(g), “Equipment”. In lieu of disposition provisions of §84.34(g), the following applies: (A) In all cases in which equipment is sold, the proceeds shall be program income (prorated to reflect the extent to which CDBG funds were used to acquire the equipment); and (B) Equipment not needed by the subrecipient for CDBG activities shall be transferred to the recipient for the CDBG program or shall be retained after compensating the recipient;
 - (vii) Section 84.51 (b), (c), (d), (e), (f), (g), and (h), “Monitoring and Reporting Program Performance”;
 - (viii) Section 84.52, “Financial Reporting”;
 - (ix) Section 84.53(b), “Retention and Access Requirements for Records”. Section 84.53(b) applies with the following exceptions: (A) the retention period reference in §84.53(b) pertaining to individual CDBG activities shall be four years; and (B) the retention period starts from the date of submission of the annual

- performance and evaluation report, as prescribed in 24 CFR 91.520, in which the specific activity is reported on for the final time rather than from the date of submission of the final expenditure report for the award;
- (x) Section 84.61, "Termination". In lieu of the provisions of §84.61, CDBG subrecipients shall comply with §570.503(b)(7)
- (4) Subpart D - "After-the-Award Requirements", except for §84.71, "Closeout Procedures".

REAL PROPERTY ACQUIRED WITH CDBG FUNDS

- 16. In accordance with 24 CFR 570.503, "subrecipients", as defined in §570.500, shall ensure that real property acquired with CDBG funds (including funds provided to the subrecipient in the form of a loan) in excess of \$25,000 is either
 - (i) Used to meet one of the national objectives in §570.208 (formerly §570.901) until five years after expiration of the agreement or for such longer period of time as determined to be appropriate by the recipient; or
 - (ii) If not used in accordance with the foregoing paragraph, the subrecipient shall pay to the recipient an amount equal to the current market value of the property less any portion of the value attributable to expenditures of non-CDBG funds for the acquisition or, or improvement to, the property, which shall be program income to the recipient, provided however that no payment is required after the period of time specified in the foregoing paragraph.

COMPLIANCE WITH SUBPART K – OTHER PROGRAM REQUIREMENTS

All grantees, including "subrecipients" as defined in 24 CFR 570.500, shall comply with applicable program requirements set forth in Subpart K, 24 CFR 570.600, including the following:

Public Law 88-352, which is title VI of the Civil Rights Act; Public Law 90-284, affirmatively furthering Fair Housing; and Executive Order 11063, as amended, dealing with equal opportunity in housing. Section 109 of Title I of the Housing and Development Act of 1974 (the "Act") requiring that no person in the United States shall, on the ground of race, color, national origin, religion, sex, age or disability, be denied the benefits of or subject to discrimination under any program or activity receiving federal financial assistance under the Act.

The Labor Standards in Section 110(a) of the Act, including compliance with the Contract Work Hours and Safety Standards Act (40 U.S.C. 327). Environmental Standards set forth at 24 CFR Part 58, except that subrecipient does not assume the recipient's environmental responsibilities described at 24 CFR 570.604, nor is the subrecipient responsible for initiating the review process under the provisions of 24 CFR Part 52.

The National Flood Insurance Program, the Flood Disaster Protection Act of 1973 (42 U.S.C. 4106), and regulations at 44 CFR Parts 59 through 79.

Residential Anti-displacement regulations at 24 CFR Part 42, Subpart B; relocation assistance regulations at 49 CFR Part 29; and regulations governing acquisition of real property for an assisted activity at 49 CFR Part 24, Subpart B.

Equal employment opportunities as set forth in Executive Order 11246, as amended by subsequent Executive Orders; equal protection of the laws for faith-based and community organizations as set forth in Executive Order 13279; and contracting opportunities set forth in Section 3 of the Housing and Urban Development Act of 1968 and implementing regulations.

The Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4821-4846); the Residential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851-4856), and implementing regulations at 24 CFR Part 35, Subparts A through R, except that only Subparts A, B, J, K, and R apply to the CDBG Program. *In addition, as required by 24 CFR, 35.145, all lead-based paint activities shall also comply with the National Environmental Review Policy Act of 1969 (42 U.S.C. 4321), and the Toxic Substances Control Act, Title IV (15 U.S.C. 2860) and other environmental laws and authorities.*

Use of debarred, suspended, or ineligible contractors or subrecipients, as set forth in 24 CFR Part 5.

Uniform Administrative Requirements and Cost Principles. The City, as “recipient” and all “subrecipients” as both terms are defined in 24CFR 570.500, and other grantees receiving federal funds to which the following policies, guidelines, and requirements are applicable, shall comply with 24 CFR Part 85 and OMB Circulars A-87, A-110 (implemented at 24 CFR Part 84), A-122, A-133 (implemented at 24 CFR Part 45), and A-128 (implemented at 24 CFR Part 44), as applicable, as they related to the acceptance and use of federal funds.

INSURANCE REQUIREMENTS

The Grantee shall maintain in full force and effect during the duration of this Agreement the following insurance:

GENERAL LIABILITY, in primary amount not less than:

| | |
|----------------------|----------------|
| <u>\$ 250,000.00</u> | per occurrence |
| <u>\$ 750,000.00</u> | aggregate |

WORKER’S COMPENSATION, statutory coverage pursuant to M.G.L. Chapter 152.

ATTACHMENT D

**APPENDIX D
COMMUNITY DEVELOPMENT BLOCK GRANT QUARTERLY PROGRESS REPORT**

PROJECT TITLE: _____ CONTRACT # _____ DATE: _____

CONTRACTING AGENCY: _____ TELEPHONE: _____

ADDRESS: _____

REPORT COMPILED BY: _____

PROJECT LOCATION (If applicable): _____ QUARTER 1 ☐ 2 ☐ 3 ☐ 4 ☐

This report covers months _____ thru _____

I. Service Delivery Information

A. Units of Service

Record the number of units of service provided. Your scope of services in your contract specifies the units of service you should use. Examples of units of service: number of infant/toddlers enrolled; training hrs. for staff & attendance; training for parents & attendance; etc.

Unit of Service 1st Month 2nd Month 3rd Month Total

| | | | | |
|-------|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

Explanation of above program statistics:

B. Clients Served

Record the number of individual clients served. Do not count a client more than one each month, even if they were seen more than once.

1st Month 2nd Month 3rd Month Total

New Clients

(unduplicated) _____ _____ _____ _____ **new clients**

Continuing

Clients _____ _____ _____

Explanation of above program statistics:

C. New Clients Population Breakdown Data on new clients reported this quarter (total number of new clients) **Individuals**

| | | | |
|-----------------------|---------------------------------|---|--|
| How many | | How many | |
| _____ Low income only | _____ White | _____ Amer Ind/Alask Nat | |
| _____ Very low income | _____ Black | _____ Asian & White | |
| _____ Total low & | _____ Asian | _____ Black/African American & White | |
| _____ Very low income | _____ American Indian | _____ Amer Ind/Alaskan Native & Blk/Afr | |
| | | _____ Amer | |
| | _____ Hawaiian/Pacific Islander | _____ Balance/Other Multi-racial | |

_____ Female Head of Household

_____ Hispanic

II. Budget Data

Total Project Budget:

Other Project Support

\$ _____

Source _____

\$ _____ Amount

Block Grant Contract Amount

\$ _____

Block Grant Funds

Requisitioned to Date

thru this quarter

\$ _____

TOTAL _____

BLOCK GRANT EXPENDITURE SUMMARY (FOR SOMERVILLE SHARE) THROUGH THIS QUARTER

| LINE ITEM (Expense Category) | AMOUNT BUDGETED | AMOUNT EXPENDED | UNEXPENDED BALANCE |
|------------------------------------|--------------------|--------------------|-----------------------|
| Salaries | _____ | _____ | _____ |
| Fringe | _____ | _____ | _____ |
| Supplies | _____ | _____ | _____ |
| Rents | _____ | _____ | _____ |
| Other * (please specify) | _____ | _____ | _____ |
| TOTAL | \$ _____ | \$ _____ | \$ _____ |

III. Nominal Program Fees (Nominal program fees refers to nominal amounts collected from low income population for services provided. Solicitation of donations must be a generic request and cannot be directed to specific clients. Fees should be expended before CDBG funds)

List fees received this quarter. Please specify.

1. _____ \$ _____
2. _____ \$ _____
3. _____ \$ _____
4. _____ \$ _____

List how these monies were expended. Please be specific.

What amount of these program fees were expended this quarter?

IV. Supplemental Funding For Agency

Describe efforts to secure additional support through fundraising and proposal writing. Indicate whether monies were received or decisions are pending.

V. In-Kind Grantee-Agency Collaboration

Volunteer Contributions: (# of volunteers, volunteer hours/quarter, etc.)

Technical assistance received by Agency from:

Collaborative Planning/Programming for Agency Conducted With:

VI. Project Narrative

On a separate sheet, briefly relate the program's progress towards achieving the goals and objectives in the Agreement's Scope of Services. Explain any obstacles or problems encountered. Describe planned or enacted resolutions to these problems.

VII. Outreach/Public Information

A. Attach to this Quarterly Report all (1) publications, newsletters, pamphlets, brochures, etc., (2) media releases (newspaper articles, advertisements and public service announcements), and (3) mailings (questionnaires, notifications, advocacy campaigns) appropriate to this project this quarter. _____

B. List any workshops or training sessions conducted during this quarter for this project.

| Date | Topic | # Participants |
|------|-------|----------------|
|------|-------|----------------|

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

VIII. Staff Development for This Project

List any staff meetings conducted, in-house training offered, staff participation in outside conferences, courses, workshops, etc.

Participants

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

IX. Personnel Data Checklist

Please include the following items:

A. Current list of employees (percent of minority, female, low income, Somerville residents/ as on page 1

B. List of new hires this quarter
(percentages as above)

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |

Reports are due on the 15th of October, January, April and July. Please notify CDBG monitor prior to the above dates if you are unable to file reports on time.

ATTACHMENT E

CLIENT INFORMATION

Proposers who receive grants will have to gather the following information required by U.S. Department of Housing & Urban Development, will have to keep individual client information in strict confidence and will be required to use composite data on client information to fill out progress reports and submit it on a quarterly basis to SPCD.

Name: _____ Address: _____

1. Total number of members in your household: _____
2. Please circle the household and check the income in which the combined gross annual income of your household falls: (Includes all sources of income as checked above)

Example: If the combined income of a 4-person household is \$45,000, circle (4) members, check (x) less than \$59,250

| # in Household | Extreme Low Income | Very Low Income | Low Income | Mod Income |
|----------------|---|---|---------------------------------------|---------------------------------------|
| 1 member | <input type="checkbox"/> Less than 24,900 | <input type="checkbox"/> Less than 41,500 | <input type="checkbox"/> Over 62,450 | <input type="checkbox"/> Over 62,451 |
| 2 members | <input type="checkbox"/> Less than 28,450 | <input type="checkbox"/> Less than 47,400 | <input type="checkbox"/> Over 71,400 | <input type="checkbox"/> Over 71,401 |
| 3 members | <input type="checkbox"/> Less than 32,000 | <input type="checkbox"/> Less than 53,350 | <input type="checkbox"/> Over 80,300 | <input type="checkbox"/> Over 80,301 |
| 4 members | <input type="checkbox"/> Less than 35,550 | <input type="checkbox"/> Less than 59,250 | <input type="checkbox"/> Over 89,200 | <input type="checkbox"/> Over 89,201 |
| 5 members | <input type="checkbox"/> Less than 38,400 | <input type="checkbox"/> Less than 64,000 | <input type="checkbox"/> Over 96,350 | <input type="checkbox"/> Over 96,351 |
| 6 members | <input type="checkbox"/> Less than 41,250 | <input type="checkbox"/> Less than 68,750 | <input type="checkbox"/> Over 103,500 | <input type="checkbox"/> Over 103,501 |
| 7 members | <input type="checkbox"/> Less than 44,100 | <input type="checkbox"/> Less than 73,500 | <input type="checkbox"/> Over 110,650 | <input type="checkbox"/> Over 110,651 |
| 8 members | <input type="checkbox"/> Less than 46,950 | <input type="checkbox"/> Less than 78,250 | <input type="checkbox"/> Over 117,750 | <input type="checkbox"/> Over 117,751 |

3. Race Categories:

Single race

- ☐ White
☐ Black
☐ Asian
☐ American Indian/Alaskan Native
☐ Native Hawaiian/Pacific Islander

Multi-Race

- ☐ American Indian/Alaskan Native & White
☐ Asian & White
☐ Black/African American & White
☐ American Indian/Alaskan & Black/African American
☐ Balance/Other Multi-racial

- a. White: All persons having origins in any of the original people in Europe, North Africa, or the Middle East
- b. Black: All persons having origins in any of the Black racial groups of Africa
- c. Asian or Pacific Islander: All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Island. This area includes for example, China, Japan, Korea, the Philippine Islands and Samoa.
- d. American Indian or Alaskan Indian: All persons having origins in any of the original peoples of North America, and maintaining cultural identification through tribal affiliations or community recognition.
- e. Native Hawaiian/other Pacific Islander: All persons having origins in the Pacific Islands (i.e. Philippines Islands) and Hawaii

4. Additional Information

_____ Ethnicity Hispanic is an ethnicity category spread across all the races. Those who are White, Black, Asian, Pacific Islander, American Indian or a multi-race may also be counted as being Hispanic. All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin.

_____ Female Head of Household

Client signature _____ date _____

SAMPLE ELIGIBILITY

Further Explanation on Completion of CDBG Beneficiary Information

Household Income

Area denoting income must correspond with the numbers of members in a household.

Example: If the combined income of a 4-person household is \$33,000, circle (4) members, under “very low income” check (x) less than \$35,550

Race

1. White:
All persons having origins in any of the original people in Europe, North Africa, or the Middle East
2. Black:
All persons having origins in any of the Black racial groups of Africa
3. Asian or Pacific Islander:
All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Island. This area includes for example, China, Japan, Korea, the Philippine Islands and Samoa.
4. American Indian or Alaskan Indian:
All persons having origins in any of the original peoples of North America, and maintaining cultural identification through tribal affiliations or community recognition.
5. Native Hawaiian/other Pacific Islander:
All persons having origins in the Pacific Islands (i.e. Philippines Islands) and Hawaii

Ethnicity

1. Hispanic is an ethnicity category spread across all the races. Those who are White, Black, Asian, Pacific Islander, American Indian, or a multi-race may also be counted as being Hispanic. All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin.

ATTACHMENT F

SOMERPROMISE OVERVIEW

Purpose of SomerPromise

The Somerville Promise Alliance (SomerPromise) is a community-wide effort that focuses on aligning and mobilizing resources to address the academic, social and environmental factors that affect student success. We are committed to equity and excellence in children's lives during and out of school, from cradle to career.

About the Somerville Children's Cabinet

The Somerville Children's Cabinet was formed in 2017 with the support of the By All Means initiative of the Education Redesign Lab at Harvard Graduate School of Education. The Cabinet shares the aim of the By All Means Initiative, to develop comprehensive child wellbeing and education systems that help eliminate the link between children's socioeconomic status and achievement, and is guided by the 6 conditions of Collective Impact:

A Common Agenda

Our vision is to create a stable, cross-sector network that supports positive outcomes for children, youth, and families in Somerville.

Shared Measurement

Data analysts with Somerville Public Schools and the City's SomerStat department inform evidence-driven approaches to our work. Work around common sets of measurement is beginning in key areas.

Mutually Reinforcing Activities

The Somerville Children's Cabinet's mission is to improve collaboration and communication between a cross sector network of School, City, and Community partners in order to mobilize and align the resources that optimize positive life outcomes for children and youth in our city.

Continuous Communication

The entire Cabinet meets monthly and is informed by separate meetings of the Out of School Time Taskforce, Early Childhood Advisory Council, the Somerville Education Foundation, the City Council and the School Committee. Subcommittees to support specific projects are formed as needed.

Backbone Organization

The SomerPromise initiative of the City's Health and Human Services Department provides backbone support to the Cabinet.

Equity as a Priority

The Cabinet aims to be explicit about using an equity lens both internally as we strategize, and externally as we operationalize our work.

The current areas of focus of the cabinet are equitable access to quality Early Childhood Education and Care and Out of School Time programming.

Building Community

Means Growing Great People, from Cradle to Career

