

# Gainesville Community Counseling Center Proposal

*Pricing is sealed*

## CONTACT INFORMATION

Company

Gainesville Community Counseling Center

Email

[larry@gainesvillecounselingcenter.com](mailto:larry@gainesvillecounselingcenter.com)

Contact

Larry Green

Address

3850 NW 83rd St

Suite 201

Gainesville, FL 32606

Phone

(352) 448-9120

Website

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Submission Date

Jun 28, 2023 7:30 AM

## ADDENDA CONFIRMATION

Addendum #1

*Confirmed Jun 27, 2023 7:19 AM by Larry Green*

Addendum #2

*Confirmed Jun 27, 2023 7:22 AM by Larry Green*

Addendum #3

*Confirmed Jun 27, 2023 7:22 AM by Larry Green*

## QUESTIONNAIRE

**1. Provide your Employer Identification Number (EIN)\***

Pass  Fail

Do not include dashes

*Maximum response length: 9 characters*

813811018

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

**2. Provide physical address in Alachua County\***

Pass  Fail

3850 NW 83rd St, Suite 201, Gainesville, FL 32606

*Please Note: Responses to this question may be publicly displayed after the due date has passed.*

**3. Provide a mailing address\***

Pass  Fail

Maximum response length: 200 characters

3850 NW 83rd St, Suite 201, Gainesville, FL 32606

*Please Note: Responses to this question may be publicly displayed after the due date has passed.*

**4. Does your agency have a 501(c)(3) status?\***

Pass  Fail

If yes, provide your certification in the question below, Failure to provide required documentation may deem your proposal non-responsive.

Yes

*Please Note: Responses to this question may be publicly displayed after the due date has passed.*

**5. Upload your agency's IRS 501(c)(3) designation\***

Pass  Fail

 [irsdeterminationletter.pdf](#)

**6. Responsible Agent Designation\***

Pass  Fail

The Consultant shall designate a responsible agent and alternate as necessary, for all dealings, communications, or notices or contracts between the County and the Consultant by completing and returning this Responsible Agent Form. Any notice or communication to or from the responsible agent shall be deemed to be a communication to the Consultant.

RESPONSIBLE AGENT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NO.: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ALTERNATE RESPONSIBLE AGENT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NO: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

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*Please Note: Responses to this question may be publicly displayed after the due date has passed.*

**7. Project Name:\***

Pass  Fail

Collaborative Hub for Non-Profits

**8. Amount of funds being requested\***

Pass  Fail

Maximum of \$50,000

*Maximum response length: 7 characters*

50,000

*Please Note: Responses to this question may be publicly displayed after the due date has passed.*

**9. Does your proposed project benefit residents of Alachua County living at or below 150% Federal Poverty Level?\***

Yes

Pass  Fail

*Please Note: Responses to this question may be publicly displayed after the due date has passed.*

**10. Does your proposed project fit into one of the BoCC's approved funding category?\***

Pass  Fail

Quality Healthcare

*Please Note: Responses to this question may be publicly displayed after the due date has passed.*

**11. Has your agency been operational, providing proposed program service(s) in the funding category at least one full year prior to the date of application?\***

Yes

Pass  Fail

*Please Note: Responses to this question may be publicly displayed after the due date has passed.*

**12. Please describe the proposed project, and quantify the anticipated benefits to residents of Alachua County living at or below 150% Federal Poverty Level:\***

*Maximum response length: 2500 characters*

Pass  Fail

The GCCC "Not For Profit Hub" is a collaboration with local existing non-profits, newly established non-profits, and individuals/groups who are exploring and developing plans for working on issues related to social determinants of health. The "hub" provides opportunities for office rental, access to meeting and training space, access to collaboration with and mentorship by other non-profits organizations and leaders. The primary emphasis of the "hub" is to provide space for various groups/organizations to work collaboratively to address social determinants of health factors impacting those who live at or below 150% of the federal poverty level. By working collaboratively and collectively, we are able to maximize our impact, provide more cost effective services, and are able to provide a more comprehensive approach to the variety of issues and needs impacting the effected community. Consequently, our work will address many of the categories identified by the BOCC as areas of concern. Residents living at or below 150% of the poverty line will experience easier access to care, streamlined information about available resources, free workshops related to social determinants of health, and will have direct participation in developing the needs assessment and action plan.

Our current collaborators are the Pride Center, Unspoken Treasure Society, the Gainesville Community Counseling Center, Theatre Connect, TRANScending Adolescence, Camp Silver, ReEntry Project, Rural Women's Health Project, and the Human Rights Coalition of Alachua County. These organizations work with various populations living at or below the identified poverty level. Those populations include a wide spectrum of races, genders, cultures, ethnicities, sexual orientations and gender identities, and ages. Additionally, these organizations address a wide-spectrum of social determinants of health.

Anticipated benefits:

7 free workshops (live and streamed): 1500 people

Access to updated resources list (available online)

Access to updated information about social determinants of health (available online)

Simplified access to needed services (as a result of co-locating services/agencies and intentional collaboration)

Needs Assessment and Action Plan with achievable goals

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**13. Please describe how your project will enhance effectiveness and/or efficiency of your agency's service delivery:\***

Maximum response length: 2500 characters

Pass  Fail

One of the many challenges in the non-profit world is the tendency to work in a silo and to focus solely on your particular project or plan. While this can be beneficial in some cases, this often results in needless competition for financial resources and an unnecessary territorial approach in which non-profits often duplicate services, fail to identify the needs of the community, and minimize the potential positive impact their work could have on the larger community. Enhanced effectiveness and efficiency are two of the most common reasons for collaboration, and a third is the broader systems change. Examples of efficiency are the lower overhead costs involved with this shared space model of colocating as many collaborators as possible into one location, along with providing a central location for meeting space and training events. Effectiveness is enhanced by building "people power" in identifying and addressing social determinants of need. The result is a stronger group of organizations that are able to advance their stated missions and common objectives more effectively. Addressing broader systems change harnesses the combined efforts and experience of key organizations which are providing services to the effected population. This approach allows the collaborating organizations to consider different solutions to a problem in pursuit of social and systems change, and to position our activities and efforts relative to and in conjunction with other players. The "hub" will reduce overhead costs for organizations, increase access to care for the effected community, and will result in a comprehensive needs assessment and action plan for addressing social determinants of health. The needs assessment and action plan will be presented to the county at the conclusion of the year long process, with a strong hope that the county will utilize it to create long-lasting, systemic changes addressing a variety of social determinants of health.

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**14. List all the budget items for which grant funds will be used and the dollar amount anticipated for each:\***

Pass  Fail

If your budget has more than five line items, you have the option to download and fill the SPACE Budget Template provided, and upload in the next question.

Maximum response length: 2500 characters

Rent: \$35,000

Internet: \$5000

Training Room Equipment (Projectors, Tables, and Chairs): \$5,000

Supplies: \$5000

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

**15. Upload SPACE Budget Template**

Pass  Fail

 [budget.pdf](#)

**16. Describe the timeline and anticipated milestone dates for the project:\***

Pass  Fail

Maximum response length: 2500 characters

September, 2023: Existing collaborating organizations begin meeting and conceptualizing the process; additional collaborators can be identified; workshops planned and organized

October, 2023: Hub Participants will begin creating a needs assessment survey to disseminate to the larger community

November, 2023: Local organizations will be invited to participate in training sessions at the "hub"

December, 2023: Needs assessment will be finalized and published online

January, 2024: Workshops on various social determinants of health begin (finance, housing, health, mental health, sexuality, etc.);

Needs assessment rolled out formally

February, 2024: Workshops continue; Needs assessment continues

March, 2024: Workshops continue; Needs assessment continues

April, 2024: Workshops continue, Needs assessment continues

May, 2024: Workshops continue; Needs assessment closes

June - Aug, 2024: Workshops continue; Needs assessment input is evaluated, summary and action plan prepared

September: Workshops continue; Results of Needs assessment published along with action plan

October: Results presented to Board of County Commissioners

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

**17. Describe measurable outcomes for the project:\***

Pass  Fail

Maximum response length: 2500 characters

1. The major measurable outcome will be the community assessment and action plan. The assessment will focus on particular social determinants of health which have been identified as areas of concern by the Board of County Commissioners. This assessment will result in the production of a summary report along with an action plan with achievable goals.
2. Participating organizations in the "hub" will complete a needs assessment for their particular organization which will help the "hub" know how best to assist each organization in fulfilling its mission. Organizations will provide a post-assessment identifying whether or not their needs were met through the "hub"
3. Participating organizations will be asked to evaluate the effectiveness of the "hub" in reducing overhead costs, increasing efficiency, and increasing effectiveness of their work.
4. Workshop participants will evaluate each workshop to identify helpfulness, usefulness, and describe the potential impact the workshop might have on their quality of life. It is expected that participants will evaluate each workshop as "very helpful".

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**18. Upload any supplemental documentation that is relevant to your project.**

No response submitted

**19. Acknowledge that you have reviewed all Addendum(s) issued with this solicitation.\***

Pass  Fail

Confirmed

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

**20. Conflict of Interest\***

Pass  Fail

The bidder certifies that to the best of his knowledge or belief, no elected/appointed official or employee of the County is financially interested, directly or indirectly, in the purchase of the goods or services specified on this order. ( Select yes, if there is no conflict of interest)

Confirmed

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

**21. Drug Free Workplace\***

Pass  Fail

In accordance with §287.087, Florida Statute

Do you certify that you meet the following:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.

2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.

3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).

4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 1893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.

5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.

6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

Yes

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

## 22. Corporate Resolution Granting Signature\*

Pass  Fail

The response must be submitted by an officer of the business who is legally authorized to enter into a contractual relationship in the name of the bidder. An authorized representative who is not an officer may sign the proposal, but must attach or upon request provide a corporate resolution granting authorization to the representative to execute on behalf of the business. Are you authorized to submit this RFA?

Confirmed

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**23. By submitting this application, we acknowledge that we are aware that the information contained in this funding application is public record. We further certify that this Request for Funding is consistent with our organization's mission, Articles of Incorporation and Bylaws, and that this application for funding was authorized by the agency's Board of Directors.\***

Confirmed

Pass  Fail

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