



Northwest Montana Human Resources, Inc. dba Community Action Partnership of Northwest Montana (CAPNM)

REQUEST FOR PROPOSALS

(Services to include group facilitation involving agency staff and Board members during a 1.5-day strategic planning session October 2022)

I GENERAL INFORMATION

A. Agency Overview

Community Action Partnership of Northwest Montana (CAPNM) serves Flathead, Lake, Sanders and Lincoln County. CAPNM is a Community Action Agency that provides opportunities for citizens to become self-sufficient. CAPNM is a private, nonprofit corporation. The agency is an anti-poverty network that works to improve lives and strengthen communities. It is governed by a 12-member volunteer Board of Directors representing the private sector, public sector and low-income sectors of our service area. Administrative offices and all records are located in Kalispell (214 Main Street). Mission delivery information and detailed agency information can be found at <http://www.capnm.net>.

B. Project Background. Every three (3) years, as a federal best practice for all community action agencies, CAPNM's Board and staff mutually conduct a multi-year strategic planning process. The CAPNM Board of Directors have set-aside **October 13 8:00 am- 5:00 pm and October 14 8:00 am- noon** to conduct the major portions of this next strategic plan.

C. Scope of Work. CAPNM is looking for a qualified and experienced group and/or meeting facilitator to help plan, design, schedule and then facilitate a 1.5-day strategic planning process on October 13 and 14. CAPNM staff (approximately 15 managers) and Board (approximately 12 members) will have completed, prior to the retreat, a Strengths/Weaknesses/Opportunities/Threats (SWOT) Analysis, an all staff survey, statistical analysis of geographic trends, and related studies and/or reports to fully inform Board and staff coming into the Retreat. The Retreat will be held in Kalispell during normal business hours.

Our desire is to complete this phase of the strategic planning process with a clearer and more focused direction; improved group interaction and planning performance; better decision-making; a high level of participant buy-in; increased accountability, and greater staff/Board collaboration as a result of a facilitated retreat.

D. Purpose. This Request for Proposals (RFP) is to contract with a qualified proposer for the performance of all agreed to tasks, timelines and outcomes within the specified scope of work and budget.

E. Who May Respond. CAPNM is only interested in proposers who have extensive large group and strategic planning facilitation with a focus and emphasis on clarifying opposing views and reaching agreement (need not be consensus). Professional facilitators who adhere to the International Association of Facilitators (IAF) Statement of Values and Code of Ethics will be given preference. Preference will also be given to an IAF Certified Professional Facilitator (CPF) or who possess like accreditations.

F. Instructions on Proposal Submissions

1. Closing Submission Date is **May 10th 2022, 5:00PM**

2. Inquires

Inquires concerning this RPP should be directed to Cassidy Kipp Deputy Director at 406-752-6565.

3. Conditions of Qualifications

All cost incurred in the preparation of a proposal responding to this RFP will be the responsibility of the Proposer and will not be reimbursed by CAPNM.

4. Instructions to Prospective Proposers

Your electronic proposal should be addressed as follows and emailed electronically if possible to:

Name: Cassidy Kipp
Address: ckipp@capnwmmt.org
Memo Line: RFQ for Strategic Planning
Entity: Community Action Partnership of NW MT., P.O. Box 8300,
Kalispell, MT 59904-1300

A full RFP submission shall consist of:

- Attachment A1 and A2, Qualifications Component.
- Attachment B, Proposer Specifications and Budget
- Attachment C, conflict of interest form.

It is the responsibility of the Offeror to ensure that the proposal is received by CAPNM by the date and time specified above.

G. Right to Reject

CAPNM reserves the right to reject any and all proposals received in the response to this RFP. A negotiated contract for the accepted proposal will be based upon the factors described in this RFP.

H. Preferential Hiring: Small, Local, Woman Owned Enterprises and/or Minority-Owned Businesses

Priority will be made by CAPNM to utilize small, local and minority owned businesses.

An Offeror qualifies as a small business firm, if it meets the definition of "small business" as established by the Small Business Administration (13 CFR 121.201).

I. Timeline for Review. This general timeline is our intended decision-making process:

Issuance of RFP	- March 21 st , 2022
Question/Inquiry Period	- April 10 th - May 10 th 2022
Submission Deadline	- May 10 th , 2022
Review Period	- May 10 th - 30 th 2022
Interview (if needed)	- June 1 st - 5 th 2022
Decision Date	- June 6 th 2022

J. Scoring/Evaluation. All submissions will be reviewed and scored against a standardized rating point system. See Attachment D.

ATTACHMENT A1:
PROPOSER/CONTRACTOR INFORMATION SHEET
For Community Action Partnership of Northwest Montana – Administration Department

COMPANY NAME (legal) _____

NAME OF OWNER _____

ADDRESS _____
STREET CITY STATE ZIP

MAILING ADDRESS _____
STREET CITY STATE ZIP

DAY PHONE# _____ EVENING PHONE # _____

EMAIL: _____

SIGNED NON-COLLUSION CERTIFICATION

Non-Collusion certification

The prices and/or cost data proposed have been arrived at independently, without consultation, communication, or agreement with any other proposer or competitor for the purpose of restricting competition.

Unless otherwise required by law, the prices and/or cost data which have been submitted have not been knowingly disclosed by the proposer directly or indirectly to any other proposer or to any competitor prior to the award of the contract.

No attempt will be made by the proposer to induce any other person or firm to submit or not submit a proposal for the purpose of restricting competition.

(PROPOSER) Signed _____ Date _____

FINANCIAL CERTIFICATION

I certify that my company has revenues in reserve to cover any anticipated work under this agreement for the desired contract period.

Company Name _____

Owner Print Name _____

Owner Signature _____

Date _____

ATTACHMENT A2:
PROPOSER/CONTRACTOR QUALIFICATIONS SHEET
For Community Action Partnership of Northwest Montana – Administration Department

1. Description of Past Facilitation Jobs (within past 18 months): PLEASE PRINT CLEARLY

Name of Customer	Number of Attendees	Telephone
a. _____	_____	_____
b. _____	_____	_____
c. _____	_____	_____
d. _____	_____	_____

2. List of Professional Work References: (3 other than CAPNM staff)

Name of Customer	Address	Telephone
a. _____	_____	_____
b. _____	_____	_____
c. _____	_____	_____

3. Description of Experience and Training (along with documentation of specific training received by each employee as it relates to the proposal tasks).

Employee Name	Certifications	Trainings
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Minority Status Claimed as:

Minority Business Enterprise (Yes No) A Woman owned Enterprise (Yes No) (please circle one)

A Small Business- grosses under \$2,000,000 per year. (Yes No) (Please circle one)

Signature of Contractor	Position/Title	Date
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ATTACHMENT B:
PROPOSER/CONTRACTOR SPECIFICATIONS/SCOPE OF WORK/BUDGET
OCTOBER 13- 14 2022

A. Work Plan (please answer on separate sheet).

1. Given what you've read, prepare a "sample" outline of how a "typical" 1.5-day strategic planning retreat might flow (approximately 12 hours with working lunch and maybe second day breakfast).
2. Given what you've read, provide a series of "guiding" questions that will help lead to effective prioritization and decision-making.
3. Project Deliverables (including timeframes and formats, etc.). Given what you've read, provide examples of what kind of representative agreements you would hope for from this facilitated retreat.
4. Project Management Approach (including assigned staff roles and responsibilities)

B. Budget. The proposal must identify the total cost for service:

TOTAL \$

C. Timeframe

1. The completion date is set forth in this RFP is October 13- 14 2022 in Kalispell, Montana. Final report due 30 days after.

D. Payment

1. Payment will be made for completed work within thirty (30) calendar days from the date the original, itemized work order(s)/invoice is received at CAPNM.
2. The Contractor will sign and date the original billing form.
3. No payment will be made until all requested corrections have been made and the Contractor has provided CAPNM of such, verifying that he/she has made the necessary corrections.

State any limitations to your work or availability (describe here):

Company Name _____

Owner Signature _____

Date _____

APPENDIX C:

CERTIFICATION OF NO CONFLICT OF INTEREST WITH CAPNM STAFF OR BOARD

Article I -- Purpose

1. The purpose of this conflict of interest policy is to protect CAPNM's interests when it is contemplating entering into a transaction or arrangement that might benefit the private interests of an employee or director or the relative of a CAPNM employee or director.
2. This policy is intended to supplement, but not replace, any applicable state and federal laws governing conflicts of interest applicable to nonprofit and charitable organizations.

Article II -- Definitions

1. **Interested person** -- Any employee, director, principal officer, or member of a committee with governing board delegated powers, who has a direct or indirect financial interest, as defined below, is an interested person.
2. **Financial interest** -- A person has a financial interest if the person has, directly or indirectly, through business, investment, or family:
 - a. An ownership or investment interest in any entity with which CAPNM has a transaction or arrangement,
 - b. A compensation arrangement with CAPNM or with any entity or individual with which CAPNM has a transaction or arrangement, or
 - c. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which CAPNM is negotiating a transaction or arrangement.

Compensation includes direct and indirect remuneration as well as gifts or favors that are not insubstantial.

A financial interest is not necessarily a conflict of interest. A person who has a financial interest may have a conflict of interest only if the CAPNM Executive Director, Board or Executive Committee decides that a conflict of interest exists, in accordance with this policy.

Article III -- Procedures

1. **Duty to Disclose** -- In connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the Executive Director, Board or Executive Committee.
2. **Recusal of Self** -- Any interested party may recuse himself or herself at any time from involvement in any decision or discussion in which the person believes he or she has or may have a conflict of interest, without going through the process for determining whether a conflict of interest exists.
3. **Determining Whether a Conflict of Interest Exists** -- The Executive Staff, Board or Executive Committee members shall decide if a conflict of interest exists.

If a more advantageous transaction or arrangement is not reasonably possible under circumstances not producing a conflict of interest, the Executive Staff, Board or Executive Committee shall determine by a majority vote of the disinterested directors whether the transaction or arrangement is in CAPNM's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination, it shall make its decision as to whether to enter into the transaction or arrangement.

Violations of the Conflicts of Interest Policy

- a. If the Executive Staff, Board or Executive Committee has reasonable cause to believe an interested party has failed to disclose actual or possible conflicts of interest, it shall inform the person of the basis for such belief and afford the person an opportunity to explain the alleged failure to disclose.
- b. If, after hearing the person's response and after making further investigation as warranted by the circumstances, the Executive Staff, Board or Executive Committee determines the person has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

Affirmation:

I affirm the following:

I have read and understand this copy of the CAPNM Conflict of Interest Policy. _____ (initial)

I agree to comply with the policy. _____ (initial)

Disclosures:

- a. Do you have a financial interest (current or potential), including a compensation arrangement, as defined in the Conflict of Interest policy with any CAPNM employee or director? Yes No
If yes, please describe it:

- b. In the past, have you had a financial interest, including a compensation arrangement, as defined in the Conflict of Interest policy with any CAPNM employee or director? Yes No
If yes, please describe it, including when

Signature of Subcontractor _____ Date: _____

Printed Name: _____ Name of Business: _____

ATTACHMENT D:

**FY 2022 CAPNM FACILITATION CONTRACTOR SELECTION PROCESS –
EVALUATION SCORING SHEET**

PROPOSER NAME: _____ **REVIEWER:** _____

Evaluation

Evaluation of each proposal will be based on the following criteria:

<u>Factors</u>	<u>Point Range</u>	<u>Awarded</u>
1. Evidence of adequate background, training and expertise in required tasks (A2)		
a. past facilitation work	0-10	___
b. references of current/immediately past organizations	0-5	___
c. staff facilitation experience/training	0-5	___
d. evidence of specialized training	0-5	___
3. Evidence of organizational/staff ability and capacity to perform all required tasks (A3A)		
a. adequacy of sample retreat outline	0-5	___
b. adequacy of sample guiding questions	0-5	___
c. adequacy of sample outcomes/project deliverables	0-5	___
d. adequacy of sample project management approach	0-5	___
5. Organization, size, and structure of Offeror's firm. (Considering size in relation to required tasks)		
a. Adequate size of the firm	0-5	___
b. Local/Minority/Small business	0-5	___
c. No conflict of interest	0-5	___
6. Price Proposal (A3B)	0-20	___
MAXIMUM POINTS	80	___

DISCUSSION/COMMENTS:

END OF RFP DOCUMENT