

# **REQUEST FOR PROPOSALS**

**PROJECTS TO PROVIDE  
TRANSITIONAL LIVING SERVICES  
TO INDIVIDUALS WITH  
TRAUMATIC SPINAL CORD INJURIES  
OR  
TRAUMATIC BRAIN INJURIES**

**The Mississippi Department of Rehabilitation Services, Traumatic Brain Injury and Spinal Cord Injuries (TBI/SCI) Trust Fund Program is requesting proposals for programs to provide Transitional Living Services to individuals who have severe disabilities from spinal cord injuries or traumatic brain injuries in any or all areas of Mississippi. These programs should place emphasis on spinal cord injury survivors, although traumatic brain injury survivors could also be served.**

**The Mississippi Department of Rehabilitation Services reserves the right to reject any and all proposals.**

**RFP Issue Date: March 3, 2014**

**RFP Due Date: April 7, 2014**

**Award Notification: Approximately June 1, 2014**

**Contract Term: July 1, 2014 – June 30, 2015**

**Total Allocation: Not to exceed \$100,000.00**

**If more than one grant is awarded,  
each project will receive a portion of the total allocation.**

## GENERAL INFORMATION

### I. Purpose

The Mississippi Department of Rehabilitation Services (MDRS), Traumatic Brain Injury/Spinal Cord Injury (TBI/SCI) Trust Fund Program, invites nonprofit (public and private) and for-profit organizations to submit proposals for programs to provide Transitional Living Services to individuals who have severe disabilities from spinal cord injuries or traumatic brain injuries. These programs should place emphasis on spinal cord injury survivors, although traumatic brain injury survivors could also be served.

### II. Goals

The TBI/SCI Trust Fund Program seeks to establish one-year innovative projects promoting transitional living services for individuals with traumatic spinal cord or brain injuries, with emphasis on spinal cord injury survivors. These projects should assist individuals in achieving their maximum levels of independence in activities of daily living and community reintegration. Projects may be home based or facility based. However, in order to be optimally effective, transitional services must address each consumer's reintegration into his personal residence and the local community. If a project is housed in a facility away from the consumer's local community, a component of the project must involve services based in the home and, where applicable, in the local community. Projects may also include components for family members or other caregivers.

Projects may provide, but are not limited to activities which address the following areas: increasing/accommodating physical functioning; home and community reintegration activities; socialization; recreational activities; pre-vocational activities; and adjustment to disability by the consumer and family members.

### III. Performance Specifications

Projects must focus on accomplishing one or more of the following core service activities:

Core Service #1: Grantee will offer trainings to survivors, family members and caregivers focusing on functional transitional skills, not behavioral or cognitive. Such non-medical activities of daily living would include grocery shopping, cooking, dining at local restaurants and accessing transportation in the community.

Core Service #2: Grantee will offer pre-vocational assessment and education for survivors who wish to return to their previous employment, pursue new employment options or prepare for employment in the future. Such services would include career exploration, job search skills, interview techniques, resume development and job site evaluation.

### **III. Authority**

Funding for this purpose is authorized under the Spinal Cord and Head Injury Trust Fund as established by MS Code Section 37-33-251.

### **IV. Submission of Proposals**

All proposals must be mailed (postmarked) by **April 4, 2014** or hand delivered to the Mississippi Department of Rehabilitation Services, TBI/SCI Trust Fund Program, by **4:00 pm on April 7, 2014**.

**A signed original and fifteen (15) copies of the completed proposal must be submitted to the following address:**

MS Department of Rehabilitation Services  
Office of Special Disability Programs  
Attention: Allison Lowther, TBI/SCI Trust Fund Coordinator  
P.O. Box 1698  
Jackson, MS 39215-1698  
Telephone: 601-853- 5397  
Building Location:  
1281 Hwy. 51 North  
Madison, MS 39110

### **V. Funding**

A maximum of \$100,000 will be awarded for one or more innovative projects that provide Transitional Living Services to individuals who have severe disabilities from spinal cord injuries or traumatic brain injuries.

### **VI. Population**

Projects must address Transitional Living issues related to traumatic spinal cord injuries or traumatic brain injuries as defined below:

Spinal Cord Injury – An acute, traumatic insult to the spinal cord, not of a degenerative or congenital nature, but caused by an external trauma resulting in any degree of motor or sensory deficit.

Traumatic Brain Injury – An insult to the skull, brain, or its coverings, after birth resulting from external trauma which produces an altered state of consciousness or anatomic, motor, sensory or cognitive/behavioral deficits. This excludes any birth trauma.

Projects may be located in and provide services to any or all areas of the state of Mississippi. Geographical areas to be covered should be specified in the proposal. The projected number of individuals to be served or reached by the project should also be included.

## **VII. MS Department of Rehabilitation Services Responsibilities**

The Mississippi Department of Rehabilitation Services, in coordination with the TBI/SCI Trust Fund Advisory Council, will monitor compliance with contract requirements, provide technical assistance, and evaluate project effectiveness. Site visits will be performed by MDRS.

## **VIII. Grantee's Responsibilities**

Grantee(s) will be responsible for complying with the grant agreement, which includes the submission of a monthly written report and a project-end written report within thirty days following each time period. Reports must include financial and programmatic information.

## **PROPOSAL REQUIREMENTS**

All proposals must be typed in 10-point font or larger and must be double-spaced. The program narrative (Section IV- Services and Operational Plan and Section V- Evaluation Plan) **must not exceed ten (10) pages**. Proposals should be concise and contain only information pertinent to the proposed project. Do not expand narrative to meet the ten (10) page limit; longer narratives will not receive preference over short, concise plans.

### **I. Cover sheet**

Required cover sheet form enclosed.

### **II. Agency Background**

Provide a brief description of your agency or organization including the type of services or programs you provide.

### **III. Program Budget**

Applicants must complete the attached budget summary form and prepare a budget narrative. Be specific in explaining how the funds will be used to achieve the project's objectives.

Although no matching funds are required, applicants should indicate if other funds are to be utilized for the project. Applicants must identify specific sources and extent of all supporting funds.

Any operating expenses must be cost allocated according to the amount of time spent on the project.

Personnel expenses will only be considered for providing the direct core services and objectives that are defined in the performance specifications. (See page 2 of this RFP) Personnel salaries for management activities related to the proposed program(s) are excluded.

Indirect Costs are strongly discouraged and must be no more than ten percent (10%) of total budget. Examples are utilities, rent, internet and telephone.

### **IV. Services and Operation**

Describe the need for the project and population to be served. Identify goals, objectives, and activities, including a timeline showing when the activity will be performed and the person responsible for each activity. Indicate an approximate number of individuals who will receive services from this project. Indicate if there are plans to continue this project after the one year grant period, and describe how the continuation will be funded. Indicate if the project could be duplicated in other areas of the state, and describe potential duplication sites, if possible.

### **V. Evaluation Plan**

Describe how the project will be evaluated. How will you determine if goals and objectives have been met? Survivors and their families or other representative should be involved in the evaluations(s) as much as possible. **Forms used to document attainment of goals and objectives must be included.**

### **VI. Appendix**

Appendices, which are critical to the explanation of the project, may be included; however, they should be concise and limited to a maximum of ten (10) pages.

## PROPOSAL EVALUATION AND SELECTION PROCESS

### I. Initial Review

Each proposal received or postmarked by the due date and time will be reviewed to assure compliance with the RFP specifications. A RFP Review Committee will evaluate all proposals deemed in compliance. Recommendations for funding will be presented to the full Advisory Council. Final Recommendations will be forwarded to the Executive Director of the Mississippi Department of Rehabilitation Services, who has final approval. Grantee(s) will be notified of awards on or about June 1, 2014.

### II. Evaluation

Each member of the RFP Review Committee will evaluate the proposals based on the following point system:

#### A. Services and Operational Plan (80 points)

1. Need for project  
Does project address a significant need?
2. Impact of project  
Does the project impact a significant portion of the population?
3. Establishment of attainable goals and objectives  
Is project reasonable in relation to funds, staff, and time frame?
4. Development of implementation plan  
Is there a logical step-by-step plan that will lead to attainment of the goals and objectives?
5. Plans for continuation  
Does the project have the potential for continuing after the one-year funding period?

#### B. Budget (10 points)

1. Are Personnel Expenses for providing direct core services?
2. Are Indirect Costs 10% or less of the total budget?
3. Are costs reasonable in relation to project plans?
4. Are costs well-defined?

#### C. Evaluation Plan (10 points)

1. Are criteria to evaluate the project stated in measurable terms?
2. Are survivors, their families and representatives involved in the evaluation process?

**TRAUMATIC BRAIN INJURY/SPINAL CORD INJURY  
TRUST FUND  
Proposal for Transitional Living Services Projects**

**Application Cover Sheet**

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

EMAIL Address: \_\_\_\_\_

Employer ID Number: \_\_\_\_\_

Telephone: \_\_\_\_\_

Signature of Authorized Representative: \_\_\_\_\_

Name (typed or printed): \_\_\_\_\_

Date: \_\_\_\_\_

Title of Project: \_\_\_\_\_

Brief Description of the Project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total Project Budget: \_\_\_\_\_

**Total Funds Requested:** \_\_\_\_\_

## Budget Summary

Requested Funds	Core Service (1)	Core Service (2)	Other Funds (Specify)	Total Funds
<b>Personnel Expenses (Direct Services Only)</b>				
<b>Operating Expenses</b>				
<b>Indirect Costs (if any) - Not to exceed 10% of total budget (List)</b>				
<b>TOTALS</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>