Delegate Agency Solicitation #65256,1 (RFP)

DFSS: Senior Services: Caregiver Supports Program RFP

Specification Number:1347279

Required for use by: DEPARTMENT OF FAMILY AND SUPPORT SERVICES

Bid/Proposal Submittal Date and Time: 12:00 PM Central Time, 08-JUL-2026

Deadline for Questions: 05:00 PM Central Time, 16-JUN-2026
Buyer: BLACK, JILLIAN
Email Address: jillian.black@cityofchicago.org
Phone Number:
Pre-Solicitation Conference Date and Time: 10:00 AM Central Time, 12-JUN-2026
Pre-Solicitation Conference Location: https://us02web.zoom.us/webinar/register/WN_Hglm08PlSNeVPtaqNidHLg
Site Visit Date & Time: N/A
Site Visit Location: N/A

Please submit your response to:

http://www.cityofchicago.org/eProcurement
iSupplier vendor portal registration is required.
Allow 3 business days to complete registration.

BRANDON JOHNSON **MAYOR**	**Angela Green** **Commissioner**

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1 Header Information

1.1 General Information

Title	**DFSS: Senior Services: Caregiver Supports Program RFP**
Description	**DFSS: Senior Services: Caregiver Supports Program RFP**
Amendment Date	**26-JUN-2026 14:27:39**
Amendment Description	**Modified RFP text; answers to questions received since the publication of the RFP. Further details can be found in ATTACHMENT 02: Amendment 1.**

Preview Date	**26-JUN-2026 14:27:40**	Open Date	**26-JUN-2026 14:27:40**
Close Date	**12:00 PM Central Time, 08-JUL-2026**	Award Date	**Not Specified**
Time Zone	**Central Time**	Buyer	**BLACK, JILLIAN**
Quote Style	**Blind**	Email	**jillian.black@cityofchicago.org**
Event	**Delegate Agency**	Outcome	**Delegate Agency Blanket Agreement**

1.2 Terms

Effective Start Date	**Not Specified**	Effective End Date	**Not Specified**
Ship-To Address	**050-2005 FAMILY AND SUPPORT SERVICES 1615 W. CHICAGO AVE. 2ND FL. Chicago, IL 60622 United States**	Bill-To Address	**050-2005 FAMILY AND SUPPORT SERVICES 1615 W. CHICAGO AVE. 2ND FL. Chicago, IL 60622 United States**
Payment Terms	**IMMEDIATE**	Carrier	
FOB		Freight Terms	
Currency	**USD (US Dollar)**	Price Precision	**Any**
Total Agreement Amount (USD)	**Not Specified**	Minimum Release Amount (USD)	**Not Specified**

1.3 Requirements

Contact Information
First Name ..... Provide your answer below
Last Name ..... Provide your answer below
Telephone

Contact Information
..... Provide your answer below
E-mail Address ..... Provide your answer below
Contact Type ..... Provide your answer below
Organization Information
Legal Organization Name ..... Provide your answer below
Address ..... Provide your answer below
City ..... Provide your answer below
State

Organization Information
..... Provide your answer below
Zip ..... Provide your answer below
Telephone Number ..... Provide your answer below
Federal Employer Identification Number ..... Provide your answer below
UEI Number ..... Provide your answer below
Head of Agency Name ..... Provide your answer below
Head of Agency Title .....

Organization Information
Provide your answer below
Head of Agency Contact Telephone ..... Provide your answer below
Head of Agency E-Mail Contact ..... Provide your answer below
Chief Finance Officer Name ..... Provide your answer below
Chief Finance Officer Title ..... Provide your answer below
Chief Finance Officer Telephone ..... Provide your answer below
Chief Finance Officer E-mail ..... Provide your answer below

Organization Information

Website Address

.....

Provide your answer below

Year Org. Established

.....

Provide your answer below

Attesting Uploads

Did you attach proof of current liability insurance?

.....

Circle one from the response values below:

No
Yes

Did you attach your current board member list?

.....

Circle one from the response values below:

No
Yes

Did you attach proof of your current SAM/Unique Identity ID number?

.....

Circle one from the response values below:

No
Yes

Did you attach your current certificate of good standing from the State of Illinois?

.....

Circle one from the response values below:

No
Yes

Did you attach your current bylaws and articles of incorporation?

.....

Circle one from the response values below:

No
Yes

Did you attach your most recent financial statement or audit?

.....

Circle one from the response values below:

No
Yes

Attesting Uploads
Did you attach your IRS determination letter? ..... Circle one from the response values below: No Yes
I attest that I uploaded my budget using the provided City of Chicago template document. ..... Circle one from the response values below: No Yes
Geographic Area(s) Served
Please provide the street number for your site address ..... Provide your answer below
Please identify the street direction associated with your site street address. ..... Provide your answer below
Please provide the street name. ..... Provide your answer below
Please provide the city. ..... Provide your answer below
Please provide site zip-code. ..... Provide your answer below

Geographic Area(s) Served
In which ward is this site located? ..... Provide your answer below
Please provide any additional wards outside of your corporate or site locations your organization provide services? ..... Provide your answer below
Program Information
Please provide the title of your proposed program. ..... Provide your answer below
Requested grant amount (annual) ..... Provide your answer below
Number of participants to be served ..... Provide your answer below
I attest that I have read the RFP. ..... Circle one from the response values below: No Yes
Community Involvement
Please describe the target population your agency would serve through this program (e.g., age, gender,

Community Involvement
ethnicity, income level, household type, and other defining characteristics). What are the strengths and assets of your intended target population, as well as the challenges they face and their critical needs? Please provide examples and evidence in your description. ..... Provide your answer below
Please describe how your organization has developed specific capabilities and/or infrastructure to better serve your intended target population (e.g. language skills, specialist staff, cultural competencies, trainings). Please include how your organization solicits feedback from clients and community and incorporates that feedback into service delivery. ..... Provide your answer below
Please describe how your agency is working to be more inclusive in your internal operations. Please discuss how your leadership reflects and / or directly engages with the populations you serve and meets local needs. ..... Provide your answer below
Organizational Capacity
What essential positions and personnel will you devote to carry out this work for the Caregiver Support Services Program? Please describe staffing patterns and relevant staff positions and their qualifications, and how this will be sufficient to serve the number of clients proposed. Please make sure to cover the following areas: program staff, program oversight, and general management. What is your strategy for filling these positions for your proposed program in a timely manner, including a timeline to execute your plan? What percentage of your relevant staff time will be dedicated and are there at least two FTE allocated to this program? If your agency sub-contracts of fulfill any of the program, please describe who you will be sub-contracting with, timeframe, and your plan. Please upload any relevant resumes and/or job descriptions and staffing chart. ..... Provide your answer below
Please demonstrate your organization's ability to ensure adequate fiscal monitoring and expenditure. Please describe how your organization monitors program expenditures and ensures appropriate fiscal controls and records are in place. .....

Organizational Capacity
Provide your answer below
How does your agency collect and securely store data? Please describe your data collection and management practices (e.g. surveys, data share agreements), highlighting how you keep data secure, where you store data, your ability to enter data in a timely manner, and your process for data quality assurance. ..... Provide your answer below
Please describe your Human Resources policies and procedures, including hiring practices and your ability to fill essential positions in a timely manner. What is your background check process? What are your discrimination and harassment policies? What is your employee grievance policy and procedure? What is your plan for the personnel for this RFP? Do they need to be hired? If so, where will you recruit and advertise? ..... Provide your answer below
What specific capabilities do you have to serve people with dementia and their caregivers? How does your agency provide ongoing training for new and existing staff that prepares them to provide required services and that current staff continues to develop and improve their skills. How will you make services accessible to participants? ..... Provide your answer below
Strength of Proposed Program
What are the specific services and program activities you are proposing to provide? How do they address both the required core elements (TCARE assessments, support groups [which includes memory cafe], training and education, outreach, memory or caregiver kits, and gap filling) in the Program Requirements section of the RFP [pages 9-15], and help achieve the outcome goals in the RFP [page 20]. Please address community based location, staffing, frequency of programming and programming activities. [If applicable: walk us through the journey of someone entering the program and how they will be served from enrollment to completion.] ..... Provide your answer below

Strength of Proposed Program
What is / are the evidence base and / or best practices that demonstrate the effectiveness of your proposed program model? This could include but is not limited to studies / evaluations of your own program, of similar programs, or well-recognized best practices in the field (e.g., studies, primary or secondary research, experimental or non-experimental). ..... Provide your answer below
Please describe how you will identify, recruit, and retain clients from the target population. Please speak to 1) how will you identify potential clients, 2) what are the specifics of your recruitment strategy, and 3) what features of the proposed program or strategies are designed to retain participants through program completion? ..... Provide your answer below
In what ways will your agency partner or coordinate with other agencies (i.e the aging network, senior centers, referrals for other benefits) to expand or improve services available to the target population in a client-centered, comprehensive way? Please give specific examples. ..... Provide your answer below
What Region(s) do you propose serving and why do you feel your agency is best equipped and best suited to service this area? How will your agency specifically address and serve the needs of the population of this area? Please provide examples. ..... Provide your answer below
Please provide a description of an example memory cafe session and please provide a description of the proposed contents of the Memory and Caregiver kits. How will your agency address early-stage, middle-stage, and late-stage dementia needs. ..... Provide your answer below

Strength of Proposed Program
Performance Management and Outcomes
Please provide program-level data over the last 12 months demonstrating your performance toward reaching the goals outlined in the 'Performance Measures' section of this RFP. Please provide context on your level of performance. If this is a new program model for your agency and/or you are a new applicant, please provide program-level data demonstrating performance for a similar program. ..... Provide your answer below
Please describe how you leverage data to identify areas for improvement - tell us about a specific time your agency made a programmatic or organizational change based on data you collected. Describe briefly (a) the data used to identify the problem, (b) what steps your agency took to make the improvement, and (c) the impact of these changes. ..... Provide your answer below
Please describe your agency's ability to show that you are meeting the needs of all older adults and family caregiver populations within your program target area. How does your agency track performance on program outcomes? If your data identifies disparities, what are those disparities and how are you addressing them? ..... Provide your answer below
Reasonable Costs, Budget Justification, and Leverage of Funds
Please describe your cash-flow and capacity to expend funds prior to reimbursement. Please describe how you would voucher and document expenditures for gap-filling services specifically. How do you plan to purchase the memory and caregiver kits in advance to distribute to participants? ..... Provide your answer below
Please list the additional funding that you will use to support this program, including the source and anticipated amounts (federal agency, state agency, private, in-kind contributions, etc.).

Reasonable Costs, Budget Justification, and Leverage of Funds
..... Provide your answer below
Why do you consider your program costs to be reasonable, given the nature of services provided and requirements for this program? (If desired, you are welcome to explain any key budgeting decisions you faced and the rationale for inclusion in your program costs). ..... Provide your answer below
City of Chicago Compliance Acknowledgement
Do you acknowledge the Compliance with Laws, Statutes, Ordinances and Executive Orders for the City of Chicago? ..... Circle one from the response values below: No Yes
Conflict of Interest Questionnaire
Did you complete and attach the Conflict of Interest Questionnaire? ..... Circle one from the response values below: No Yes

1.4 Attachments

Name	Data Type	Description
ATTACHMENT 01: RFP	File	
ATTACHMENT 02: Amendment 1	File	

1.5 Response Rules

- ☐ Solicitation is restricted to invited suppliers
- ☒ Suppliers are allowed to respond to selected lines
- ☒ Suppliers are allowed to provide multiple responses
- ☐ Buyer may close the solicitation before the Close Date
- ☐ Buyer may manually extend the solicitation while it is open

2 Price Schedule

2.1 Line Information

Display Rank As **No indicator displayed**
Ranking **Price Only**
Cost Factors **None**

Line	Item, Rev / Job	Target Quantity	Unit	Unit Price	Amount
1 0005 - Personnel		1	USD		
2 0044 - Fringe Benefits		1	USD		
3 0100 - Operating/Technical		1	USD		
4 0140 - Professional and Technical Services		1	USD		
5 0200 - Travel		1	USD		
6 0300 - Materials and Supplies		1	USD		
7 0400 - Equipment		1	USD		
8 0801 - Indirect		1	USD		
9 0999 - Other		1	USD		

2.2 Line Details

2.2.1 Line 1 0005 - Personnel

Category **94855.DA.**
Shopping Category **Not Specified**
Minimum Release Amount (USD) **Not Specified**
Estimated Total Amount (USD) **Not Specified**
Start Price (USD) **Not Specified**
Target Price (USD) **Not Specified**

2.2.2 Line 2 0044 - Fringe Benefits

Category **94855.DA.**
Shopping Category **Not Specified**
Minimum Release Amount (USD) **Not Specified**
Estimated Total Amount (USD) **Not Specified**
Start Price (USD) **Not Specified**
Target Price (USD) **Not Specified**

2.2.3 Line 3 0100 - Operating/Technical

Category **94855.DA.**
Shopping Category **Not Specified**
Minimum Release Amount (USD) **Not Specified**
Estimated Total Amount (USD) **Not Specified**
Start Price (USD) **Not Specified**
Target Price (USD) **Not Specified**

2.2.4 Line 4 0140 - Professional and Technical Services

Category **94855.DA.**
Shopping Category **Not Specified**
Minimum Release Amount (USD) **Not Specified**
Estimated Total Amount (USD) **Not Specified**
Start Price (USD) **Not Specified**
Target Price (USD) **Not Specified**

2.2.5 Line 5 0200 - Travel

Category	**94855.DA.**	Start Price (USD)	**Not Specified**
Shopping Category	**Not Specified**	Target Price (USD)	**Not Specified**
Minimum Release Amount (USD)	**Not Specified**		
Estimated Total Amount (USD)	**Not Specified**		

2.2.6 Line 6 0300 - Materials and Supplies

Category	**94855.DA.**	Start Price (USD)	**Not Specified**
Shopping Category	**Not Specified**	Target Price (USD)	**Not Specified**
Minimum Release Amount (USD)	**Not Specified**		
Estimated Total Amount (USD)	**Not Specified**		

2.2.7 Line 7 0400 - Equipment

Category	**94855.DA.**	Start Price (USD)	**Not Specified**
Shopping Category	**Not Specified**	Target Price (USD)	**Not Specified**
Minimum Release Amount (USD)	**Not Specified**		
Estimated Total Amount (USD)	**Not Specified**		

2.2.8 Line 8 0801 - Indirect

Category	**94855.DA.**	Start Price (USD)	**Not Specified**
Shopping Category	**Not Specified**	Target Price (USD)	**Not Specified**
Minimum Release Amount (USD)	**Not Specified**		
Estimated Total Amount (USD)	**Not Specified**		

2.2.9 Line 9 0999 - Other

Category	**94855.DA.**	Start Price (USD)	**Not Specified**
Shopping Category	**Not Specified**	Target Price (USD)	**Not Specified**
Minimum Release Amount (USD)	**Not Specified**		
Estimated Total Amount (USD)	**Not Specified**		

CITY OF CHICAGO

REQUEST FOR PROPOSALS (RFP) FOR
Caregiver Support Services
RFQ# 65256

ISSUED BY:
CITY OF CHICAGO DEPARTMENT OF FAMILY AND SUPPORT SERVICES

All proposals must be submitted via the eProcurement system.
http://www.cityofchicago.org/eprocurement
Questions concerning the RFP should be directed to:

Stacy Subida
Supervisor of Family and Support Services
Department of Family and Support Services
1615 W. Chicago Ave, 3rd Floor West
Chicago, Illinois 60622
312-743-7272
Stacy.Subida@cityofchicago.org

BRANDON JOHNSON
MAYOR

ANGELA GREEN, MSW
COMMISSIONER

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Section 1 - Purpose of RFP and Scope of Services

The Department of Family and Support Services (DFSS) seeks proposals from community organizations who have experience providing assessments, case management, outreach, counseling, support groups, memory cafes, memory / caregiver kits, training & education (including Stressbusting for Family Caregivers), and / or gap-filling services for caregivers of any age who provide informal care to an older adult 60 years of age or older or to an individual with Alzheimer's Disease or a related dementia. Family or informal caregivers include parents, friends, neighbors, and / or children who assist care recipients with basic mobility, personal care, financial management, complex medical tasks, and more (AARP, 2025). Today 63 million adults, or almost one-quarter of all Americans adults, are family caregivers who have provided care to adults or children with a medical condition or disability every year (NAC, 2026). The Caregiver Support Services RFP aims to help caregivers of any age access services, support, and assistance with managing and navigating the challenges of caring for an older adult or an individual under 60 with Alzheimer's Disease or a related dementia.

Respondents may include, but are not limited to, for-profit or non-profit organizations, universities, hospitals, health care providers, faith-based organizations, and / or organizations that support older adults and / or their caregivers. DFSS seeks to provide citywide Caregiver Support Services through two (2) regional Delegate Agencies. The selected Respondent(s) will be expected to work with the designated Caregiver Resource Centers at DFSS Regional Senior Centers to promote the program.

A. Organizational background

Department Mission and Priorities

As the City of Chicago's primary social services funder and administrator, the Department of Family and Support Services (DFSS) manages a comprehensive, client-oriented human service delivery system that employs a holistic approach to improving the quality of life for our most vulnerable residents. DFSS administers resources and provides assistance and support to a network of over 350 community-based organizations. The DFSS mission is:

Working with community partners, we connect Chicago residents and families to resources that build stability, support their well-being, and empower them to thrive.

DFSS' priorities are to:

- **Deliver** and support high quality, innovative, and comprehensive services that empower clients to thrive
- **Collaborate** with community partners, sister agencies, and public officials on programs and policies that improve Chicagoans' lives and advance systemic change
- **Inform** the public of resources available to them through DFSS and its community partners
- **Steward** DFSS' resources responsibly and effectively

For more information about services and opportunities offered through DFSS, please visit www.cityofchicago.org/fss

Commitment to Outcomes

DFSS' Commitment to Outcomes represents a transition to a more results-oriented and data-driven approach to delivering services – one that moves the department beyond measuring *how many* people receive services, to focus on how Chicagoans *leave better off* after receiving services. In order to achieve betters results for Chicagoans, DFSS seeks to clearly describe, measure, and report on outcomes; use

these outcomes to support decision-making; and drive greater collaboration within DFSS as well as between DFSS and the delegate agencies we fund. For more information on DFSS's commitment to outcomes, please visit: https://www.chicago.gov/city/en/depts/fss/supp_info/department-strategic-framework.html

Division Priorities

The Senior Services Division is one of seven program areas within DFSS. The Senior Services Division is also designated as the local Area Agency on Aging (AAA) for the City of Chicago. As the AAA, DFSS coordinates and funds services for older adults, prioritizing those in greatest economic and social need those who live alone, and those at risk for institutional placement. Working in collaboration with aging network partners, the Senior Services Division's efforts are guided by:

1) Supporting older persons to live independently in their own communities and homes for as long as possible.
2) Ensuring that those who reside in institutions are treated with dignity and care; and,
3) Guaranteeing that older persons have access to accurate information to participate in public policy.

Together with our service providers, we provide vital information and assistance, congregate and home delivered meal services, senior centers, fitness classes, caregiver support services, in-home services, employment training and volunteer opportunities, elder rights programs, health promotion and access to benefits. We continually innovate and advocate for our residents so they may continue to thrive as they age in place. We value integrity and respect as well as promoting social engagement among the elderly as an antidote to dependence, social isolation, and withdrawal.

For more information on the DFSS strategic framework, visit www.cityofchicago.org/fss.

B. Program description

Goals of this RFP

The goals of Caregiver Support Services are to:

- alleviate caregiver stress and social isolation,
- empower caregivers to solve or cope with problems caring for care recipient,
- improve the caregiver's health and wellness,
- increase awareness about the essential value of caregiving and caregiver support services
- increase caregiver's confidence to continue to provide person-centered care for care recipient,
- identify resources and social services to support the caregiver and care recipient
- and delay premature institutionalization of the care recipient.

Funded by the Title III-E of the Older American's Act, Caregiver Support Services includes the following service categories to be included in the RFP application:

- *Outreach* to identify potential individual caregivers and encourage their use of existing services and benefits.
- *TCARE Assessment (Case Management)* to identify caregivers at risk for burnout, develop a care plan, connect them to the right services, and measure the impact of their programs;
- *Individual and Family Counseling* sessions with mental health professionals who provide counseling on a wide range of issues such as grief, isolation, transition, and depression or anxiety;

- *Support Groups* to provide emotional and peer support; including *Memory Cafés to provide* monthly gatherings where both caregivers and care recipients (experiencing memory loss) jointly attend to participate in engaging activities led by a facilitator
- *Training and Education* to increase the caregiver's knowledge, skills, abilities and strategies to cope with caring for a loved one
    - Including facilitating *Stressbusting for Family Caregivers,* an evidence-based program that provides support to family caregivers of persons with dementia
    - *[optional] Savvy Caregiver,* an interactive 6-week training series designed to support family caregivers.
- *Gap-Filling Services*, which include goods and services which complement the care provided by an informal caregiver when all other resources for such goods/services have been exhausted.
    - *Memory / Caregiver Kits* to support caregivers and care recipients experiencing dementia with activities and sensory supports.

Theories of Change

Social isolation, loneliness, stress, depression, quality of life, and finances are outcomes that can be impacted by family caregiving (RAISE Act, 2022). Caregivers report they experience positive emotions often coexist with feelings of isolation, stress, or strain. Half of caregivers report that their role as a caregiver gives them a sense of purpose or meaning in life. (Caregiving In the U.S., 2025). They Recognize, Assist, Include, Support & Engage (RAISE) Family Caregivers Act became law in 2018 to develop and support a national family caregiving Strategy. In 2022, the Raise Advisory Council and the Advisory council to Support Grandparents Raising Grandchildren published the national family caregiver strategy report focusing on six goals: 1) Increasing awareness and outreach, 2) Advancing partnership and Engagement 3) Strengthening services and supports 4) Ensure financial and workplace security and, 5) Expanding data, research, and evidence-based practices (RAISE Act, 2022).

The impact of Caregiver Support Services includes reduced risk of caregiver burden, burnout, and the intent to place the care recipient in a long-term care facility. Training, counseling, and peer support can often improve outcomes for family caregivers. Services can enhance the caregiver's physical and emotional well-being including memory improvement, reduction of social isolation, depression, and anxiety. It can also help the caregiver balance life duties and reduce financial burden. The DFSS Caregiver Support Services RFP will provide funds to up to two (2) delegates to meet the needs of caregivers in the City of Chicago. The selected Respondent(s) will use the funds to support overall program costs focused on the target population and to cover temporary costs to meet the needs of caring for the older adult.

Best Practices

The selected Respondent(s) will be expected to deliver interventions in a variety of formats under the remaining Title III-E categories listed above including in-person, telephone and online to suit caregiver needs and schedules. Interventions should be evidence-based or best practice, where applicable. Creative ideas are also welcome and must incorporate the ability to measure participant impact based on the goals of the program. DFSS recommends the following resources for Respondents to review evidence-based and best practice interventions that could be used in the application:

a. The Ben Rose Institute on Aging, in partnership with Family Caregiver Alliance, and the Gerontological Society on Aging have launched Best Practice Caregiving: https://benrose.org/best-practice-caregiving

This is a free searchable database of proven best practice caregiver support programs. Many of the programs are geared to caring for a person with dementia. Family caregiver programs for those caring for people with other chronic conditions are also included by using the filter feature.

b. Family Caregiver Alliance: National Center on Caregiving: www.caregiver.org
c. Memory Cafe Alliance Training: https://dfamerica.org/courses/mca-training_/

Programs that have been required by national and state plans and that are currently operating within our planning service area and as part of our Caregiver Portfolio include TCARE, Savvy Caregiver, and Stress Busting for Family Caregivers. Respondents may use existing programs where they already have access to trained professionals or address a combination of programs that will be used in their application. In as much detail as possible, the application should include the Respondent's plan for incorporating best practice and evidence-based programs, including as applicable, the hiring and training of staff, volunteers, in-kind and third-party contractors, implementation of the program city-wide and ongoing support the Respondent plans to offer to improve retention program deliverers and caregivers attending programs.

Current State and Priorities for Improvement

The Illinois General Assembly (Family Care Act) recognizes Family Caregivers, those providing informal care and serving without compensation, as the mainstay of the long-term care system in this country. Care provided by these informal caregivers is the most crucial factor in avoiding or postponing institutionalization of the State's residents (IGA, 2023). It is the intent of the General Assembly to establish multi-faceted family caregiver support programs to assist unpaid family caregivers and grandparents or other older individuals who are informal providers of in-home and community care to older individuals or children.

According to AARP (2025), an estimated 63 million people are a part of the national Caregiving landscape, a nearly 45% increase since 2015. Of these 63 million caregivers, 59 million care for an adult with a complex medical condition or disability-representing almost one-quarter of all adults in the U.S. Today, roughly one in four American adults (24%) is a family caregiver. In addition, 59 million caregivers report caring for adults ages 18 and older, and 4 million report caring for a child under age 18 with an illness or disability (AARP 2025). According to AARP (2025), approximately 23% of Illinois adults—about 2.22 million people—are family caregivers providing unpaid care, with 34% of voters 40+ having caregiving experience. These caregivers provide an estimated $21 billion in unpaid care annually.

More than 2 million (2,224,000) adults in Illinois provide care to a family member or friend with complex medical conditions or disabilities —nearly one quarter (23%) of adults across the state**.**
Caregiving for a family member with a disability can wear out even the strongest caregiver. It is important for caregivers to take care of their health and not ignore signs of illness. A caregiver can reduce stress by delegating tasks to others as well as having a well-balanced life including exercise, socialization and utilizing respite care (Centers for Disease Control (CDC), 2025). One in four family caregivers experience seven or more days a month of poor physical health. Four in ten caregivers (40%) experience high emotional stress while caregiving. One quarter (24%) have difficulty taking care of their own health as they focus on the needs of care recipients. Nearly three in ten (27%) feel alone while caregiving (AARP, 2025). Caregiving can also lead to increased risk for mental health problems such as stress, anxiety or depression.

The Illinois Department on Aging (IDOA) estimates there are over 400,000 caregivers in Chicago with approximately 70,000 falling between the ages of 60 to 74 and 20,000 falling between the ages of 75-84. Approximately 30% of family caregivers juggle work, caring for children while also caring for older adults. Research shows that caregivers tend to be women with caregiver responsibilities that negatively impact their work hours, wages and earning potential sometimes resulting in them prematurely leaving the workforce. Potential loss of wages and employment, along with caregiving expenses and responsibilities (daily grooming, wound care, coordinating appointments, and providing transportation) can lead to stress and burnout negatively impacting the caregiver's health and ability to care for their loved ones. Leaving the older adult at risk for homelessness, abuse and/or premature placement into a nursing home. While some report that caregiving is an act of love, the challenges inherit with caregiving can become overwhelming without assistance and support particularly when caring for a loved with Alzheimer's or other Dementias. Behavioral changes like day and nighttime wandering, agitation and emotional outbursts along with memory loss can lead to depressive and physical health issues for caregivers as well as feelings of isolation and loss.

Balancing multiple caregiving roles and responsibilities can not only take a toll mentally and physically but financially as well. With at-home care, there can be competing work demands, a reduction in paid work hours related to care, additional financial demands related to costs associated with caregiving all contributing to financial pressures.

Equally significant to providing meaningful supports are taking into consideration the innovations in caregiving which forecast positive changes for all caregivers. Long-distance caregivers can participate by remote technology in medical, financial and legal meetings helping overcome communication geographical barriers ensuring that they can effectively advocate on behalf of their loved ones (AARP, 2020).

2025 Survey results

DFSS administers a client feedback survey to all Caregiver Support program recipients. The survey tool distributed by DFSS aims to collect feedback on client satisfaction of services and gaps in client needs. The 2025 survey results are outlined below.

Of the 227 respondents that completed the Caregiver Support Services survey in 2025, approximately 65% of the participants reported that they received gap-filling services, 31% attended a support group or memory cafe, and 20% received training and education services. Participants received a combination of in-person, virtual, or hybrid model services with 30% virtual, 41% in-person, and 11% hybrid. Participants reported a high level of satisfaction of services received (96.3%), timeliness (92.73%), and felt they were treated with dignity and respect (94.23%) and felt safe to talk about issues in their group (93.02%). Approximately 88.89% of participants felt that programs are readily accessible and 82.05% of participants were satisfied with the times available for support. DFSS will continue to implement consistent data collection tools as part of the Caregiver Support Services program.

Target Population

A "caregiver" means an adult family member or another individual of any age providing in-home and community care to an older adult 60 years of age or older or a care recipient with Alzheimer's Disease or a related dementia under 60. A care recipient may be considered a "person with dementia" which may include an individual with undiagnosed memory loss, or diagnosed with Mild Cognitive Impairment (MCI), Alzheimer's disease, Parkinson's dementia, vascular dementia, frontotemporal dementia, primary progressive aphasia or other related conditions.

Caregivers must be prioritized based on the Older Americans Act Title III priorities which states preference for older persons with greatest economic or social need. Older Americans' Act funding dictates that respondents pay particular attention to serving caregivers in low-income, minority communities and traditionally underserved communities with limited English proficiency, and services are needed throughout the city. Planning considerations should include cultural adaptations to caregiver interventions where needed. Inclusion of citizens from a local community in planning and adaptations or improvements to the caregiver program is encouraged.

Special populations

The selected Respondent(s) must provide services for caregivers including those with limited English proficiency and must have access to staff with language skills that reflect the needs of the participants served within the community and / or translation services. The selected Respondent(s) must make reasonable accommodations for caregivers with disabilities, including managing dementia and memory loss symptoms, vision, or hearing impairment, American Sign Language interpretation, and / or TDD/TTY phone number or other telecommunication devices for the deaf and accessible facilities for individuals with physical disabilities.

In addition, the selected Respondent(s) are expected to provide programming sensitive to local needs (i.e., languages, communication styles, including nonverbal cues, cultural traditions, and religious / spiritual concerns) and other social, psychological, and historical factors.

Respondents will be required to provide services to qualifying clients regardless of their duration of residence or citizenship status. Respondents should pay particular attention to serving participants in low-income, minority communities and traditionally underserved communities and those with limited English proficiency. Planning considerations should include cultural adaptations. Inclusion of residents from a local community in planning and adaptations or improvements to the program is encouraged.

Program Requirements

The selected Respondent(s) will be responsible for the program management including outreach, assessment, program implementation, retention and data collection on the impact of program. Individual interventions could be delivered by the respondent or sub-contracted to third party providers or a combination. Respondents should include best practice and evidence-based interventions, an outreach plan including outreach to specific caregivers in the regional area, and a training and implementation plan for supervising and supporting group leaders. Models can include paid, volunteer and / or in-kind professional and lay persons.

Overall, the Respondent(s) should aim to serve at least 450 caregivers for each regional application for the full fiscal year, for a total of 900 caregivers served citywide (regions 1 & 2) annually.

Intake

DFSS Information & Assistance (I & A) is the lead contact to receive intake calls and refer caregivers to the selected Respondent(s). The selected Respondent(s), at minimum, must be available to accept referrals during DFSS working hours, 9:00am to 5:00 pm Monday through Friday, every week of the year except New Year's Day, Martin Luther King Day, President's Day, Lincoln's Birthday, Pulaski Day, Memorial Day, Juneteenth, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving and Christmas. Other holidays must be requested at least 30 days in advance, in writing to of the DFSS and shall not be closed for more than four consecutive days. The selected Respondent(s) are responsible for contacting the caregiver within 72 hours of receipt of referral to determine the level of services. The

selected Respondents may take direct referrals; however, a record of direct referrals should be forwarded to DFSS so I & A can assess participants' needs for other services. Respondent(s) should have a developed standard application process to support program enrollment once the referral is received.

1. Service Categories

The selected Respondent(s) will be required to offer all of the following service categories through the Caregiver Support Services Program. Target numbers are provided for each category and the selected Respondent(s) should aim to reach as many caregivers as possible, as the funds allow. Unduplicated numbers include caregivers attending a program for the first time. Caregivers may attend more than one program in more than one category. The selected Respondent(s) may utilize a combination of paid staff, sub-contractors, in-kind and volunteers to fulfill each service category component of the Caregiver Support Services program.

i. Outreach

The Respondent(s) must conduct ongoing outreach activities to ensure participation and retention in the program. Outreach efforts may include, but are not limited to community presentations, brochures, flyers, and / or social media. DFSS and the selected Respondent(s) will work collaboratively to create the marketing language, materials, and outreach strategies for the Caregiver Support Services program. The selected Respondent(s) must include the DFSS I & A phone number on outreach materials. Program promotion through the various news and public information media is subject to approval by the Public Information Officer - Senior Services and must credit DFSS and Funder as a source of funds supporting Caregiver Support Services program. DFSS will work in collaboration to finalize marketing strategies at the start of the program and to distribute marketing material to promote the program efficiently throughout its duration.

DFSS seeks delegate agencies with the capacity to increase the number of caregivers participating in Caregiver Support Services programs to ensure that caregivers are being supported. The Respondent(s) will be expected to conduct outreach, identify, recruit, and retain caregivers in the program. Examples may include but are not limited to in-person or virtual informational webinars, mailing flyers to community-based organizations, or marketing efforts during National Family Caregiver Month in November. It is recommended that the selected Respondent(s) offer programming on several platforms in order to leverage more options depending on the caregiver's internet or device accessibility, including low-tech options such as phone or conference calls and high-tech options including video conferencing.

Considerations should be made to use language that people with memory loss and caregivers understand. For example, some people do not identify with "caregiver" or "care partner" as a label, and consider themselves spouses, partners, daughters, sons, grandchildren, or friends of the person with memory loss. Activities may include conducting search and find activities which seek out and identify hard-to-reach caregivers, informing persons of benefits and services available, encouraging caregivers to participate in programs, assisting caregivers in gaining access to needed services, conducting follow-up activities with caregivers or agencies to determine whether services have been received and identified need met following formal referrals, coaching, providing client advocacy to secure benefits, arranging for and providing community presentations which link caregivers and the public at large to services and benefits.

In the RFP application, Respondents should include details of their organization's current outreach methods including previous efforts, if any, to the population(s) of focus as well as planned efforts to

identify and recruit potential participants and specific groups of caregivers. For example, how the respondent may work with other community-based providers in the area being served, such as libraries, faith-based settings, and health and social care providers. The selected Respondent(s) will be expected to work with the Caregiver Resource Centers at DFSS Regional and Satellite Senior Centers to promote the program.

Respondents should consider retention efforts. Retention issues may be impacted by normal caregiving duties and challenges, and consideration should be given to alternative times and meeting types in order to meet caregiver needs (e.g., after work hours, weekends). Alternatively, lack of caregiver engagement could be caused by a lack of interest in program activities.

Units of Service: The unit of service for outreach is a one-on-one (1:1) contact initiated by an agency or organization for the purpose of identifying potential clients (or their caregivers) and encouraging use of existing services and benefits. Outreach to groups is not counted. Outreach does not include program publicity.

Costs/Rate: The annual budget for outreach (including purchase of promotional materials) is: $15,000 per region, or $30,000 total for all regions. The outreach category may be utilized as a line-item budget.

Target: The target is 150 unduplicated clients and 150 units per region.

ii. Tailored Caregiver Assessment and Referral (TCARE) Assessment (Case Management)

The selected Respondent(s) will be required to utilize the TCARE assessment tool to help caregivers utilize services that might give them the most long-term impact in the most meaningful way. TCARE is an evidence-based, web-based system that assesses the family caregiver's social determinants of health, identifying risk factors related to stress and depression, and creating tailored care plans that can enhance the caregiver's role (NCOA, 2023). The assessment evaluates the level of stress and burden levels of the caregiver. Every caregiver dyad participating in caregiver support services should have a TCARE assessment conducted, and a care plan created. Comprehensive assessments should identify the need and determine the reason for services. When applicable, the selected Respondent(s) should encourage participants to access the online screener link at: https://caregiver.tcare.ai/screener/app/chicagodfss/h51UViRC6SxALPy2TLDTXbZ5. In general, assessments should be completed in-person. Virtual options (telephone and web-based tools such as Microsoft Teams, Skype, Zoom) can be provided as an alternative in extenuating circumstances.

The selected Respondent(s) may also count any case management units when assisting caregivers in obtaining access to services and resources that are available within their communities. This ensures that the individuals receive the services needed by establishing adequate follow-up procedures. The selected Respondent(s) must inform the caregiver of public or private programs and services available, including those that may meet the needs identified. They may make referrals, when appropriate, back to DFSS for other Senior Services' programs. The selected respondent(s) may refer clients back to I & A as appropriate so that other DFSS services can be arranged for the caregiver and care receiver. Delegate agencies are encouraged to utilize the Chi311 App to submit referrals. Email service requests can be sent to aging@cityofchicago.org or by phone at 312-744-4016.

Units of Service: The unit of service measurement is one (1) assessment and / or any subsequent one-to-one contact when the selected Respondent(s) are assisting participants in obtaining access to

services. The unit includes time spent in direct interaction with the caregiver(s) and should include travel, paperwork, planning, and administrative duties. Each client will be fully assessed once during a fiscal year or more frequently, based on client need. Selected respondent(s) are also required to conduct quarterly follow-up calls and 6-month reassessments, either of which may warrant a full reassessment if the client's need have changed.

Costs/Rates: The annual budget for assessment is: $93,165 per region or $186,331 citywide. The case management category may be utilized as a line-item budget.

Target: The target is 450 unduplicated caregivers per region and 675 units, or 900 clients citywide.

iii. Individual / Family Counseling

Counseling or "Caregiver Coaching" is a short-term, direct interaction between a counselor professional and an informal caregiver. Counseling is provided to caregivers to assist them in the areas of emotional support, health, nutrition, financial literacy and in making decisions and solving problems relating to their caregiver roles . The interaction can be in-person or virtual (telephone or web-based tools such as Microsoft Teams, Skype, Zoom). If in-person is not available, virtual options must be offered.

Units of Service: The unit of service is one (1) hour session per participant with a cap of four sessions. The unit includes time spent in direct interaction with the caregiver(s) and should include travel, paperwork, planning, and administrative duties. In instances where additional counseling is required beyond the four sessions, it will require submittal of a "Request to Utilize Additional Services" form and written approval of the DFSS Program Manager for two additional sessions (six total) depending on funding availability. Selected Respondent(s) may utilize a combination of direct paid staff or sub-contractors to fulfill counseling services.

Costs/Rates: The annual budget for counseling is: $15,000 per region or $30,000 citywide. The counseling category may be utilized as a line-item budget.

Target: The target is *450* unduplicated caregivers per region and 675 units, or 900 clients and 1350 units citywide.

iv. Support Groups

The purpose of Support Groups is to provide a safe environment where caregivers can support their peers by exchanging thoughts, ideas, concerns, and coping strategies. The selected Respondent(s) are responsible for managing a support group program which includes training and supervising paid, volunteer, in-kind and / or a combination of support group leaders. The group leaders should coordinate, schedule, and facilitate support groups in their local areas including outreach to recruit participants, schedule guest speakers, and distribute information with the selected Respondent(s)' support. The selected Respondent(s) must offer in-person and virtual support group sessions throughout the region. If in-person is not accessible to the caregiver, virtual options must be offered. Virtual options (telephone and web-based tools such as Microsoft Teams, Skype, Zoom) can be provided as a hybrid option in extenuating circumstances. DFSS does not permit the use of Artificial Intelligence (AI). Support Group sessions cannot be recorded to maintain confidentiality.

The selected Respondent(s) are also responsible for tracking member participation by collecting relevant attendee demographics, attendance sheets, and contact information to be submitted to DFSS as requested.

a. Memory Café (Specialized Support Groups)

Memory Cafés are monthly social group gatherings where both caregivers and care recipients (experiencing memory loss) jointly attend to participate in activities and positive social interactions with peers within a safe, supportive and engaging environment. Memory Cafés are intended to be a social program for both the person with memory loss and caregiver together. The program is not intended to be a drop-off or respite program. Rather, they offer a space for caregivers and care recipients to support their peers. Memory cafes are typically facilitated by a volunteer or professional who can help coordinate discussion and activities. Cafes will be held at DFSS senior centers and may expand to other locations including but not limited to libraries, community centers, restaurants, and houses of worship. Cafes should reflect needs, interests, language, and culture of the local community areas. Selected delegate agencies can use funding to create new memory café opportunities within their identified service region and can also use funding to help expand, strengthen and support programming activities at existing memory cafés. Given that Memory cafés may be volunteer lead and may be operationalized with limited budgets, selected delegate agencies may use funding to expand and enhance the quality of programming activities that may be provided.

Programming should be comprised of interactive activities that may include but are not limited to: sing-a-longs, musical instruments, art therapy, crafts, massage therapy, events, storytelling, poetry, pet therapy, tai chi, chair yoga, aromatherapy, virtual travel logs, and games. DFSS expects at minimum monthly programming for up to two (2) hours per session to be offered. Each café has flexibility of day of week or time of day the session will occur.

Units of Service: The unit of services is one (1) session per participant. Caregivers and care recipients each receive one unit of service for every session attended. Each memory café will be expected to conduct at least one session monthly. It is recommended that a session be minimally two hours. Administrative activities (e.g., setup, transportation, paperwork) would be completed outside of the two-hour session. The unit includes time spent in direct interaction with the caregiver(s) and should include travel, paperwork, planning, and administrative duties.

Costs/Rates: The annual budget for support groups including Memory Cafes is: $53,384 per region or $106,768 citywide. The support group service category will be reimbursed as a unit rate at $106 per unit. A portion of the funds may be allocated for rental space, food or refreshment purchase, staffing, entertainment, speakers, instructors, or supplies. The following purchases are not allowable: cash assistance, gift cards, travel expenses, mortgage or rental assistance, co-payments or deductibles towards items covered under programs or public benefits, legal fees.

Target: The target is 100 unduplicated caregivers per region and 500 units or 200 unduplicated caregivers and 1000 units citywide. The target for Support Groups is 50 unduplicated caregivers per region and 250 units (total citywide). The target for Memory Cafes is to serve at least 50 unduplicated individuals (caregivers and people with dementia) and 250 units citywide. Both caregivers and care recipients will be counted as participants, individually. Multiple caregivers are permitted to attend. Each region will operate at least one memory café site.

Region	Clients (Caregivers)	Care Recipients	Units
Region 1	50	50	500
Region 2	50	50	500
TOTAL	100	100	1000

v. Gap-Filling Services

Gap-Filling Services may be provided to purchase a limited supply of goods / services which complement the care provided by caregivers when all other resources for goods / services have been exhausted. The selected Respondent(s) must adhere to an approval process and document how the money was used. Purchases must be made in accordance with allowable purchases set by DFSS and within Illinois Department on Aging (IDOA) services allowable under the Older Americans' Act. Gap-Filling can provide up to $400 of appropriate goods or service each fiscal year. In instances where funds required exceed this amount or fall outside all listed expenses below, it will require submittal of a "Request to Utilize Additional Services" form and written approval of the DFSS Program Manager and funding availability. Selected Respondent(s) may utilize a combination of direct paid staff, sub-contractors, in-kind and volunteers to fulfill gap-filling services.

a. Allowable purchases include support items for the care receiver or the caregiver:
    i. Medical supplies and equipment not covered by Medicare, Medicaid or other insurance. Requests for medical supplies should receive physician verification when possible. Requests for prescription medication (including copays) must receive physician verification when possible.
    ii. Adaptive clothing, furniture, glasses, aids, etc.
    iii. Adaptive safety devices such as emergency home response and assistive technology
    iv. Emergency transportation
    v. Nutrition (including monthly food boxes or groceries)
    vi. Other as agreed
b. The following purchases are not allowable under gap-filling:
    i. Cash assistance or gift cards
    ii. Travel expenses
    iii. Mortgage or rental assistance
    iv. Automobile payments
    v. Sporting or Recreational assistance
    vi. Co-payments or deductibles towards items covered under other programs or public benefits
    vii. Legal fees

In order to be eligible for Gap-Filling services, family caregivers must be providing in-home and community care to older individuals who meet the following definition of "frail" as outlined in subparagraph (A)(i) or (B) of 102(28) of the Older Americans Act. The term "frail" means that the older individual is determined to be functionally impaired because the individual is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing or supervision or due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual.

Units of Service: One unit of service equals (1) incident of gap-filling assistance. This includes an TCARE assessment of needs, identification of resources, purchasing an item or coordinating purchase, coordinating the delivery of items and verifiable documentation of expenses.

Costs / Rates: The annual budget for Gap-Filling is: $53,200 per region, or $106,400 citywide. Delegate Agencies are encouraged to utilize tax-exemption to purchase items, if applicable. Qualified organizations, as determined by the Illinois Department of Revenue (IDOR) are exempt for paying sales taxes in Illinois. The exception allows an organization to buy items tax-free. Information can be found at www.tax.illinois/gov

Target: The target for Gap-Filling Services is 150 unduplicated caregivers per region (300 citywide)

Gap-Filling Reimbursement Process

The selected Respondent(s) are responsible for paying the costs of gap-filling services and invoicing DFSS. DFSS will reimburse for the exact cost of the item / service purchased for the care recipient. Fiscal procedures to account for every expenditure and receipt of supplemental gap-filling payments are required. The selected Respondent(s) must document expenditures and follow up to determine if the item / service has been received. In order to meet a demand for commonly purchased gap-filling items, the agency needs to have their own vouchering process.

a. Memory / Caregiver Kits

The selected Respondent(s) may use Alzheimer's Disease and Related Dementia (ADRD) gap-filling funds to distribute Memory & Caregiver kits to support caregivers and care recipients experiencing dementia with activities and sensory needs. The memory kits should be directed towards individuals from the middle (moderate) to late stages of dementia. DFSS will consider nationwide models and encourages the inclusion of culturally appropriate materials. Memory kits can include but are not limited to: cards, puzzles, fabric, feathers, and instruments. Caregiver kits should be directed towards the person providing care to the person with dementia and can include items such as: journals, pens, hand sanitizer, or hand lotion. In instances where items fall outside the allowable purchase, it will require written approval of the DFSS Program Manager and funding availability.

Units of Service: One unit of service equals (1) kit per caregiver or care recipient. This includes identification of resources, purchasing an item or coordinating purchase, coordinating the delivery of items and verifiable documentation of expenses. Delegate Agencies are encouraged to utilize tax-exemption to purchase items, if applicable. Qualified organizations, as determined by the Illinois Department of Revenue (IDOR) are exempt for paying sales taxes in Illinois. The exception allows an organization to buy items tax-free. Information can be found at www.tax.illinois/gov

Cost / Rates: The annual budget for memory / caregiver kits is: $12,500 per region or $25,000 citywide.

Target: The target for distribution of memory / caregiver kits is 75 caregivers and 75 care recipients (total 150) per region (300 citywide)

vi. Training and Education

Caregiver Training and Education offers educational opportunities for caregivers to increase the knowledge, skills, and abilities to cope with caring for a loved one. These sessions can be through webinar, in-person lectures, classes, workshops, evidence-based programming, or conferences. Such sessions are a useful way to conduct outreach which promotes the selected Respondent's more intensive caregiver programs.

Topics can include but are not limited to:

- Personal Care training
- Health and Wellness education
- Technology assistance
- Financial planning
- Advocacy
- Long-Term Care supports & services
- Legal Services
- Self-Care

Evidence-Based ADRD Training and Education

The selected Respondent(s) will be trained as Master Trainers and required to administer in-person and/ or hybrid Stressbusting for Family Caregivers program. As Master Trainers, the selected Respondent(s) may directly facilitate the program or select a train-the-trainer model for volunteers. The Stress-Busting Program is an evidence-based program that provides support to family caregivers of persons with dementia. Caregivers will learn about stress and its effects, practice stress management techniques, and develop problem solving skills. The program is proven to improve the quality of life of family caregivers who are providing care to an older adult and help caregivers manage their stress and cope better with their lives. Selected Respondent(s) must conduct at least two sessions (18 classes total). Each session consists of nine (9) weekly classes.

Units of Service: The unit of service is one (1) session per participant. The unit includes time spent in direct interaction with the caregiver(s) and should include travel, paperwork, planning, and administrative duties.

Costs/Rates: The annual budget for education and training is: $25,000 per region, or $50,000 citywide. The training and education category may be utilized as a line-item budget. The annual budget for ADRD Training and Education (Stressbusting for Family Caregivers) is: $30,000 per region, or $60,000 citywide. The ADRD Training and Education service category will be reimbursed as a unit rate at $150 per unit.

Target: The target for Training and Education Services is 175 caregivers and 250 units per region, or 350 caregivers and 500 units citywide. The target for ADRD Training and Education is 23 clients and 200 units, or 46 caregivers and 400 units citywide.

Vii. Other activities as agreed upon with DFSS and the selected delegate.

Emergency Preparedness and Contingency Planning

Special emphasis should be placed on developing contingency plans for any emergencies that require a change in service delivery. This can include, but is not limited to public health crises, winter storms, tornados, and heat waves. Sometimes it will be necessary to transition in-person interventions to other delivery methods if and when local officials deem in-person programs unsafe. Other methods should remain in place until local officials deem in-person programs are safe again. The selected Respondent should develop policies and procedures to include sections on training, personal protective equipment (PPE), health screenings, temperature checks and contract tracing. Policies and procedures must be in accordance with Centers for Disease Control and Prevention (CDC), Illinois Department of Public Health (IDPH), and Federal Emergency Management guidance. Emergency plans must be submitted in writing or electronically to DFSS. The selected Respondent must notify DFSS

Program Manager within 24 hours should the emergency plan go into effect.

The selected Respondent must have a backup plan for emergencies and other conditions which may prevent the scheduled service. The plan must address potential problems within and beyond the control of the selected Respondent. Respondents must be able to demonstrate a backup plan and continuity of services in the event of weather emergencies or other types of emergencies.

2. Staff Qualifications and Requirements

The selected Respondent(s) are required to assign and maintain for the duration of the Services, at minimum two (2) staff of qualified personnel to perform the services. The selected Respondent(s) will retain and make available to the City, State and Federal agencies governing funds provided under this Agreement, proof of certification or expertise including, but not limited to, licenses, resumes and job descriptions.

Staff may include management and supervisory staff, support staff, and / or volunteers unless sub-contracted to a third-party provider. The funds are expected to cover at least 2 FTE employees dedicated to the success of the program. It is allowable for employees to have other roles within the organization, as appropriate, and as it does not impede on their dedicated time to the Caregiver Support Services Program. Other roles are expected to be complementary to this program. Funding may be used to hire an additional FTE (3 total) or may be utilized for sub-contracting purposes. It is expected that the program leads will be knowledgeable about dementia, its symptoms, communication skills, managing behaviors, and caregiver support skills. It is not expected that staff will assist with personal care as this program model is social in nature. It is desired, but not required, that program leads have formal education such as degrees in social services, gerontology, nursing, social work, psychology, public health, or related degrees. In the absence of professional education, current or former familial or lived experience may be substituted.

- **Program Coordinator/Director**: The Respondent should identify a Program Coordinator/Director who will be the main contact to DFSS and will manage program operations.
    - The Program Coordinator/Director will be responsible for supervising program staff and volunteers and have overall accountability for service delivery. The position may not be vacant at any time during the contract period.
    - It is preferred that this staff have a Master's degree in a social science field: Social Work, Gerontology, Psychology, Counseling, Psychiatric Nursing or Rehabilitation Counseling
    - At minimum, this staff have at least one year related social service, counseling and administrative experience.

- **Mental Health Clinician / Case Manager(s**): The Respondent should identify a Mental Health clinician / Case Manager (under a clinician's supervision) to administer comprehensive assessments, provide therapeutic counseling, create plans of care, and identify and educate caregivers about additional resources.
    - It is preferred that this staff have a Master's degree in a social science field: Social Work, Gerontology, Psychology, Counseling, Activities Professional, Psychiatric Nursing or Rehabilitation Counseling. In the absence of professional education, current or former familial or lived experience may be substituted.
    - The clinician must be licensed, registered or certified by the State of Illinois to possess that license, registration or certification.

- At minimum, the case manager must have at least one year related social service, counseling and administrative experience.

Background Check Requirements

The selected Respondent will comply with all applicable Federal, State, and local laws, ordinances, policies, procedures, regulations, rules, requirements, and executive orders relating to background checks, fingerprinting, and screening procedures to ensure children and seniors safety. In connection with the Services, the selected Respondent will not permit any adult, whether a member of the Respondent's staff or otherwise, to be involved with the Services or to have direct contact with seniors if any applicable legal requirements would prohibit such adult from having such involvement or contact.

Background checks are an allowable cost if it is included in the agency's initial budget that is submitted to DFSS and an allowable expense by the grantor.

Adults 18 and older, whether they are staff, volunteers, consultants, subcontractors, operators, individuals in family homes, or individuals used to replace or supplement staff who may have direct or indirect contact with seniors or access to their confidential information will need to complete a background check.

Delegate agencies are required to administer the following types of background checks for the individuals listed above:

- a fingerprint criminal background check that searches both FBI and state databases.
- a search of the Illinois Sex Offender Registry.
- a search of the Adult Protective Services (APS) Registry, if delivering services in a senior's home.

In addition to having records of completed checks available during DFSS monitoring visits, delegate agencies also need to have written policies on background checks that should include:

1) An appeal process for individuals who dispute the findings of their background check.
2) A policy to address comingling of services if your service location includes programing that serves seniors and children.
3) A policy on conditional employment while an employee awaits results of their background check; and
4) A list of offenses that will disqualify a candidate from being hired or volunteering.

Failure to prove evidence of a background check completion may result in default and possible termination of your agreement with DFSS. Delegate agencies also have an affirmative duty to timely report to DFSS any incident.

The Respondent is required to obtain Criminal Background Checks which include an electronic fingerprint check, check exclusionary list websites (the United States Dept. of Health and Human Services Office of Inspector General Exclusionary list, the Illinois Sex Offender Registry, the Illinois Dept. of Corrections Sex Offender Search Engine, the Illinois Dept. of Corrections Inmate Search Engine, the Illinois Dept. of Corrections Wanted Fugitive Search Engine, the National Sex Offender Public Registry) and the Adult Protective Services (APS) Registry on each employee with direct participant contact. All documentation pertaining to the results of the background checks must be maintained by the Respondent.

3. Client Contributions

The selected Respondent may not charge for any caregiver support services provided under the Title III-E grant agreement. However, pursuant to the OAA, all clients must be provided the opportunity to contribute or donate to the cost of their services. Contributions are strictly voluntary, and no client will be refused service for not contributing. DFSS reserves the right to review the letter requesting such contributions, to be distributed by the selected Respondent to all caregiving clients. The selected Respondent must collect, record, and report contributions received to DFSS Senior Services Division on a monthly basis. All donations must be used to expand services. The amount of client contributions collected may be deducted from the monthly invoice submitted to DFSS. Suggested contributions may range from $2.00 to $15.00 per service unit.

The selected Respondent(s) are encouraged to collect project income (client contributions) to defray program costs where appropriate, subject to 2 CFR200.307. Project Income must be expended based upon the application, with any changes of expenditures to be approved by DFSS Senior Services. Excess project income must expand services of the provider under this part and supplement (not supplant) funds received under the OAA. The provider must maintain proof for DFSS Senior Services that the project income was used to expand services.

All project income must be expended within the fiscal year in which it was earned. All contributions (project income, local cash and in-kind), must meet all the following criteria:

- Are verifiable from the Respondent's records;
- Are not included as contributions for any other federally assisted project or program;
- Are necessary and reasonable for proper and efficient accomplishment of project or program objectives;
- Are allowable under the applicable cost principles;
- Are provided for in the approved budget; and
- Are documented in the same manner as Title III funds.

Source: IDOA AAA Policies and Addendum

4. Cross-service-area Coordination

DFSS is interested in new strategies to improve coordination across service delivery silos to better support families. As such, DFSS reserves the right to convene and implement cross-service-area collaboration efforts with delegate agencies to better serve high-need populations.

<u>Service Coordination</u>

DFSS recognizes that many of the clients we serve have needs beyond the scope of what we fund delegates to provide. DFSS is interested in supporting strategies to improve coordination across service delivery silos to improve outcomes for these clients. Through engagement with current delegates across our divisions and tests within our Community Service Centers, we have identified some coordination practices that we encourage delegates to incorporate as appropriate. These practices include:

- Systematically identifying clients who struggle to independently access other resources they need and providing a higher level of coordination support to those clients;
- Using warm handoff strategies when making referrals, such as making a specific action plan for the client's next steps to follow through on the referral, assisting clients in calling service providers to schedule an appointment, or accompanying clients to intake appointments; and
- Working proactively with service providers after referrals to help clients overcome barriers to

engagement and retention.

DFSS recognizes that these strategies may often fall outside of the core responsibilities of program staff, and successful implementation may require sustained attention from supervisors and organizational leaders. DFSS reserves the right to convene delegate agencies to provide additional support in implementing service coordination efforts.

Client Files

The selected Respondent must maintain a confidential file on each caregiver. Client files must be kept in a secure, locked space. Case notes must be in the file along with supporting documents required by DFSS Senior Services, including AgingIS and TCARE, as provided by IDOA. Individual case records must be kept that document the presenting problems, action plan, record of treatment and progress for each client. The selected Respondent(s) must ensure that the client's information is accurate, complete, current and maintained separately from other agency files. Support Groups, Memory Cafes, and Training and Education sessions must include documented sign-in sheets or attendance records. Gap-filling or memory/caregiver kit files must include copies of receipts. Files will be made available to the DFSS upon request to support planning and/or funding decisions.

The selected Respondent(s) can select to keep case notes and files electronically. The selected Respondent(s) must implement policies and procedures to ensure privacy and confidentially of client record for both paper file and electronic databases.

The provider may be required to utilize a DFSS approved client tracking system or as otherwise specified by DFSS.

Client Complaints and Grievances

The selected Respondent(s) must supply all caregivers with a mechanism for filing complaints or grievances with regards to the provider's service delivery. Clients must also be given a mechanism for comments and suggestions on service delivery improvements. DFSS reserves the right to create such a mechanism, to be distributed by the selected Respondent(s) or administered by DFSS to all caregiving clients.

A complaint log must be kept, recording the name of the client, date, reason for dissatisfaction and steps taken to rectify situation by the selected Respondent. All complaints, including those that are voiced in-person or over the phone, must be recorded in the client complaint log.

Program Evaluation and Satisfaction Surveys

The provider must have procedures for evaluating and reporting the caregiver's satisfaction with the delivery of service as well as their satisfaction of the outcomes of the service. The selected Respondent(s) must administer a survey measuring client/family satisfaction developed with the approval of DFSS and report the results of the survey and receive feedback on services provided on a quarterly basis. Results of those surveys must be shared with DFSS Senior Services quarterly. Survey results are due quarterly in January, April, July and October. The feedback solicited should be incorporated into service delivery.

Reports, Invoices and Meetings

The selected Respondent(s) must use a DFSS approved computerized client tracking system (e.g., AgingIS) to provide required data and reports to Senior Services monthly on the 5th of the month for the clients served in the preceding month. The selected Respondent(s) will keep track of units of service

provided, unduplicated counts of persons served and other demographic data necessary for planning and evaluation of the program. Both program and financial reports are required of all funded providers.

DFSS requires that providers have a program and fiscal reporting system that will ensure the provision of accurate and timely reports. Service providers must maintain reporting information in such a manner to permit authorized persons to review report information upon request. Reports must be submitted on time to allow time to prepare our own reports and to reimburse service providers. Incorrect or late submissions may result in delays in reimbursement or contract action.

Senior Services reviews reports submitted by providers to determine that resources have been expended according to approved budgets, that the request for funds is correct and is consistent with the approved award, to monitor and assess program activity and identify any significant operational problems that should be corrected and to identify the need for technical assistance to address inadequate fiscal knowledge, or excessive administrative costs.

Quarterly meetings, or as otherwise scheduled, will be held with the agency to discuss program operations and progress. Attendance is mandatory and is not subject to reimbursement.

C. Performance measures

To track progress toward achieving the outcome goals of this program and assess success, DFSS will monitor a set of performance indicators that may include, but are not limited to:

- 80% of caregivers who participate in Caregiver Support Services RFP Programs feel a reduction in stress levels
- 80% of caregivers have learned one or more new strategies or techniques to cope with caregiving problems
- 80% self-report improved health knowledge or improved health indicators from before intervention, as applicable
- 80% of caregivers feel an increase in confidence to continue to provide care for care recipient
- 80% of caregivers feel more aware of caregiving supports available to them

The target of 80% for each performance measure is a goal to be worked towards. Program evaluation questions should include basic questions to collect the above information at the end of each program activity or annually, whichever comes first. For example, program evaluations should be collected at the end of a four-week or six-week intervention, not every week. For monthly support groups, annual evaluations are sufficient unless feedback is sought from a special event, speaker topic or data is being collected for another specific purpose. This information can be compared to the Assessment data to determine if any improvements were achieved. The selected Respondent(s) will provide quarterly reports of aggregate progress towards these goals for each category of Title III-E programming.

To monitor and recognize intermediate progress toward the above performance indicators, DFSS also intends to track output metrics that may include, but are not limited to, and will be modified to match the selected RFP application:

- 450 participants and 675 TCARE assessments in each region will be conducted annually.
- 33 participants and 125 units of counseling services per region will be provided annually.
- 150 participants and 150 units of outreach services per region will be provided annually.
- 50 participants and 250 units of support groups services per region will be provided annually.

    - 50 memory café participants and 250 units of memory café services per region will be provided annually.
- 175 participants and 250 units of training and education services per region will be provided annually.
    - 22 Stressbusting participants and 200 units of service per region will be provided annually.
- 150 participants and 150 units of caregiver or memory kits per region will be provided annually.
- 150 clients and 150 units of gap-filling services per region will be provided annually.

In addition to the performance indicators and output metrics listed above, DFSS encourages Respondents to propose additional indicators and metrics, including those that demonstrate early success and are indicative of participants' progress.

D. Contract management and data reporting requirements

As part of DFSS' commitment to become more outcomes-oriented, Senior Services seeks to actively and regularly collaborate (such as periodic meetings) with delegate agencies to review program performance, learn what works, and develop strategies to improve program quality throughout the term of the contract. Reliable and relevant data is necessary to ensure compliance, inform trends to be monitored, evaluate program results and performance, and adjust program delivery and policy to drive improved results. As such, DFSS reserves the right to request/collect other key data and metrics from delegate agencies, including client-level demographic, performance, and service data, and set expectations for what this collaboration, including key performance objectives, will look like in any resulting contract. Participant data will be collected in monthly reports as in the number of total program participants, number of returning participants, and number of new participants.

Upon contract award, delegate agencies will be expected to collect and report client-level demographic, performance, and service data as stated in any resulting contract. These reports must be submitted in AgingIS, TCARE, or a format specified by DFSS and by the deadlines established by DFSS. Selected Respondent(s) must collect demographic data in order for DFSS to continue monitoring how Chicago citizens are best served. Data collected must include: name, address, date of birth, phone number, ethnicity, race, gender and whether participants fall above or below the poverty line. Whether caregivers and care receivers live alone must also be collected. These reports must be submitted in a format specified by DFSS and by the deadlines established by DFSS.

Delegate agencies must implement policies and procedures to ensure privacy and confidentiality of client records for both paper files and electronic databases. Delegate agencies must have the ability to submit reports electronically to DFSS. The City's Information Security and Information Technology Policies are located at https://www.cityofchicago.org/city/en/depts/doit/supp_info/is-and-it-policies.html.

Insurance

Respondent, if selected, shall register with the City's online insurance certificate portal using the designated email registration link provided below. Respondent shall provide a current and valid email address for both the contractor and the contractor's insurance agent or provider. The Selected Respondent is responsible for ensuring the submission of a certificate of insurance (COI) through the City's online insurance certificate portal prior to award of a contract.

A Respondent selected for contract negotiation and award who fails to fulfill the requirement to register and submit a COI through the City's online insurance certificate portal may be deemed nonresponsive and the City may choose to instead engage a different Respondent for contract negotiation. If a Respondent is unable to register and submit the COI through the City's online insurance certificate portal and instead submits a printed insurance certificate prior to contract award, the City may accept a paper COI provided that written justification is provided explaining the Respondent's good faith efforts to comply with the terms of this section and the reasons why the submission could not be completed. Instructions for registering and submitting COIs are available at the following URL: http://www.cityofchicago.org/COI

E. Application Guidance for Respondents

This RFP seeks respondents that can serve targeted Caregiver Services Regions. See Map 1. for more information. Awards will be made to two regions. Multiple applications by the same agency for the same region will not be considered. The same agency may apply for more than one region, and one budget should be provided for each region. Respondents will be required to coordinate with DFSS Regional Senior Centers and Satellite Senior Centers within each Caregiver Service Region.

Applications will be scored based on multiple criteria, including anticipated numbers served, best practice activities, creativity, demonstrated reflection of community needs, recruitment and outreach capacity including a recruitment and retention plan, implementation plan, and an impact and evaluation plan. DFSS can provide, if needed, information and support with respect to impact and evaluation.

As a citywide program, the Caregiver Support Services program aims to reach caregivers and older adults across the City of Chicago. Respondents are encouraged to collaborate in order to allow agencies to sub-contract and expand an organization's network to deliver programming.

Map 1. Caregiver Regions

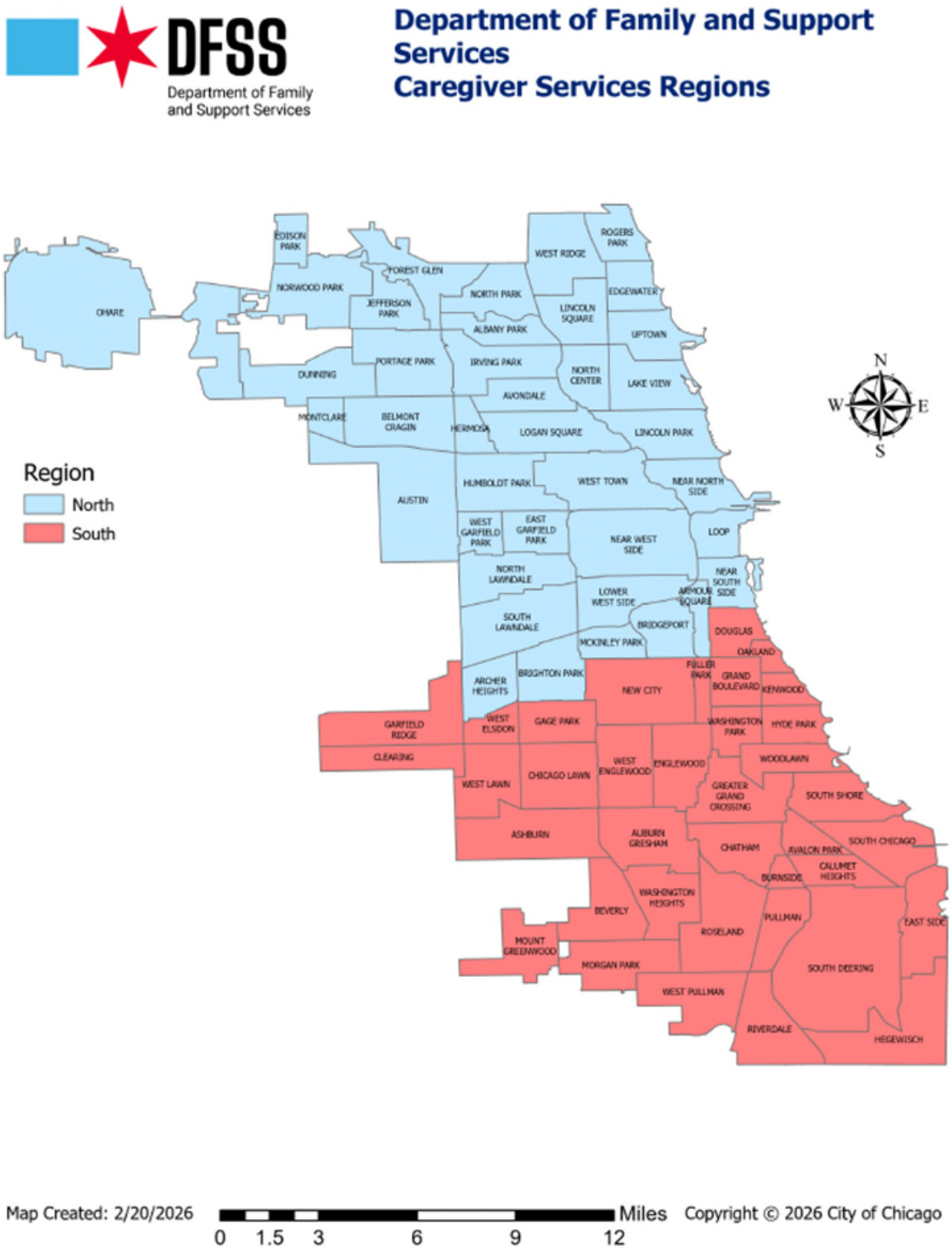

Table 1.

Region	Community Area		
Region 1 (North) 40 communities	1 – Rogers Park 2 – West Ridge 3 - Uptown 4 – Lincoln Square 5 - North Center 6 - Lake View 7 - Lincoln Park 8 - Near North Side 9 - Edison Park 10 - Norwood Park 11 - Jefferson Park 12 - Forest Glen 13 - North Park 14 - Albany Park 15 - Portage Park	16 - Irving Park 17 - Dunning 18 - Montclare 19 - Belmont Cragin 20 - Hermosa 21 - Avondale 22 - Logan Square 23 - Humboldt Park 24 - West Town 25 - Austin 26 - West Garfield Park 27 - East Garfield Park 28 - Near West Side 29 - North Lawndale 30 - South Lawndale	31 - Lower West Side 32 - The Loop 33 - Near South Side 34 - Armour Square 57 - Archer Heights 58 - Brighton Park 59 - McKinley Park 60 – Bridgeport 76 - O'Hare 77 - Edgewater
Region 2 (South) 37 communities	35 - Douglas 36 - Oakland 37 - Fuller Park 38 - Grand Boulevard 39 - Kenwood 40 - Washington Park 41 - Hyde Park 42 - Woodlawn 43 - South Shore 44 - Chatham 45 - Avalon Park 46 - South Chicago 47 - Burnside 48 - Calumet Heights 49 - Roseland 50 - Pullman	51 - South Deering 52 - East Side 53 - West Pullman 54 - Riverdale 55 - Hegewisch 56 - Garfield Ridge 61 - New City 62 - West Elsdon 63 - Gage Park 64 - Clearing 65 - West Lawn 66 - Chicago Lawn 67 - West Englewood 68 - Englewood 69 - Greater Grand Crossing	70 – Ashburn 71 - Auburn Gresham 72 - Beverly 73 - Washington Heights 74 - Mount Greenwood 75 - Morgan Park

F. Anticipated term of contract and funding source

The term of contract(s) executed under this RFP will be from **October 1, 2026 - September 30, 2029**. Based on need, availability of funds and contractor performance, DFSS may extend this term for up to two (2) additional periods, with each extension not to exceed one year. Continued support will be dependent upon the Respondent's performance and the continued availability of funding. DFSS anticipates up to two delegate agencies will be awarded as follows:
$297,249 per region per year depending on the size of their proposed program, or up to $594,499 annually citywide. This contract will operate on a reimbursement basis only. No advances will be given.

This initiative is administered by the DFSS through Older Americans Act State, Federal, and Alzheimer's Disease or Related Demetia GRF funds granted through the Illinois Department on Aging (IDOA). Consequently, all guidelines and requirements of the DFSS, the City, the Department of Health and Human Services, Older Americans Act and the Illinois Department of Aging and any applicable federal regulations must be met. Additionally, all delegate agencies must comply with the Single Audit Act if applicable. Should a Respondent's contract be terminated or relinquished for any reason, DFSS reserves the right to return to the pool of respondents generated from this RFP to select another qualified respondent.

G. Prior year statistics for this program

Applications received: 5
Projects funded: 3
Range of funding: $624,129 (citywide) / $208,063 per region
Total funding: $624,189 (citywide) / $208,063 per region

For further information about these and the other opportunities offered through the Department of Family and Support Services, please visit the DFSS website: www.cityofchicago.org/fss

H. References

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The Recognize, Assist, Include, Support and Engage (RAISE) Act Family Caregiving Advisory Council (2022). *National Strategy to Support Family Caregivers.* Retrieved from https://acl.gov/sites/default/files/RAISE_SGRG/NatlStrategyToSupportFamilyCaregivers-2.pdf

Section 2 – Eligibility, Evaluation and Selection Procedures

A. Eligible respondents

This is a competitive process open to all entities: non-profit, for-profit, faith-based, private and public, all units of government and sister agencies. Respondents may apply as a single agency or in partnership with multiple agencies, where one agency serves as the lead agency for the partnership and other agencies serve as subcontractors of the lead agency. Subcontracted agencies must demonstrate competence to implement programmatic elements whereas lead agencies must also demonstrate financial strength and ability to comply with all administrative requirements outlined in the RFP.

Administrative costs will be capped at 15% percent per application or at an organization's federally approved indirect rate, if applicable, per application.

Respondents who are current DFSS delegates whose existing contract(s) with DFSS are not in good standing will not be considered. Agencies not eligible include those that have had a City contract terminated for default; are currently debarred and/or have been issued a final determination by a City, State or Federal agency for performance of a criminal act, abridgement of human rights or illegal/fraudulent practices.

Funding is subject to the availability and appropriation of funds. In addition, Respondents should be aware that the City will make payments for services on a reimbursement basis. Payment will be made 30 days after voucher approval. Respondents must be able to proceed with program operations upon award notification.

B. Evaluation process

Each eligible proposal will be evaluated on the strengths of the proposal and the responsiveness to the selection criteria. DFSS reserves the right to consult with other city departments during the evaluation process. Successful Respondents must be ready to proceed with the proposed program within a reasonable period of time upon contracting.

Failure to submit a complete proposal and/or to respond fully to all requirements will cause the proposal to be deemed unresponsive and, therefore, subject to rejection. The Commissioner upon review of recommended agency(ies) may reject, deny or recommend agencies that have applied for grants based on previous performance and/or area need.

The Department of Family and Support Services (DFSS) reserves the right to ensure that all mandated services are available citywide and provided in a linguistically and culturally appropriate manner.

C. Selection criteria and basis of award

SELECTION CRITERIA	POINTS
Community Involvement • The Respondent demonstrates a clear understanding of the target population including their strengths, assets, needs and challenges. • The Respondent has expertise working with the target population and has relevant capabilities and / or infrastructure needed to serve the target population. The Respondent demonstrates client and community engagement activities that solicit feedback and inform service delivery. • The Respondent demonstrates a commitment to meet local needs. The Respondent's leadership reflects and / or engages the people of the communities it serves.	**15**
Organizational Capacity • The Respondent has qualified staff responsible for program oversight and management. They provide a timeline for program execution and if sub-contracting, include a plan for utilizing subcontractors. • The Respondent has adequate systems and processes to support monitoring program expenditures and fiscal controls. • The Respondent has secure data collection and management process • The Respondent has adequate Human Resources capacity to hire and manage staff • The Respondent demonstrates relevant capabilities in serving persons with dementia and their family caregivers. They provide a description on staff development	**30**
Strength of proposed program • The Respondent clearly defines services to be provided (directly or through partnerships/linkage agreements with other agencies) that are appropriate to addressing needs of and achieving desired outcomes for the target population. The Respondent includes the core elements (TCARE Assessments, Support Groups/Memory Cafes, Training and Education, Outreach, Memory / Caregiver kits, and Gap-filling). • The Respondent's proposed program is supported by a strong national or local evidence base and/or aligns with best practices for the relevant field • The Respondent has an effective approach to identifying, recruiting and retaining program participants • The Respondent has partnerships or coordinates with other agencies to expand or improve services in a client-centered, comprehensive way • The Respondent proposes why they are best equipped to service their proposed the region(s) • The Respondent proposes a plan for the Memory Cafe and Memory and Caregiver Kits	**25**
Performance management and outcomes	**15**

• The Respondent demonstrates evidence of strong past performance against desired outcome goals and performance metrics and/or other notable accomplishments in providing services to the target population • The Respondent has the relevant systems and processes needed to track and report performance on program outcomes and impact • The Respondent has experience using data to inform/improve its services or practices. The Respondent describes the ability to track performance on program outcomes and address disparities. The Respondent demonstrates how they use data in their program delivery.	
Reasonable costs, budget justification, and leverage of funds • The Respondent has the fiscal capacity to implement the proposed program • The Respondent leverages other funds and in-kind contributions to support total program and administrative cost (e.g., state, federal, foundation, corporate, individual donations) • The Respondent demonstrates reasonable implementation costs and funding requests relative to its financial and human resources. The proposed budget supports the proposed scope of work or work plan.	**15**

Basis of Award

Awards will be granted to the selected delegate agencies per region. Respondents seeking funding for more than one region are required to apply for each region separately and include a distinct budget for each region. DFSS may consider additional factors in selection to ensure systems-level needs are met: geographic region, service area, language, capacity to serve older adults and their caregivers, and ability to serve specific sub-populations. Specifically, DFSS will make recommendations for contract awards by region balancing program location and target population. Multiple applications by the same agency for the same region will NOT be considered.

DFSS reserves the right to seek clarification of information submitted in response to this Application and / or to request additional information during the evaluation process and make site visits and / or require Respondents to make an oral presentation or be interviewed by the review subcommittee, if necessary. Failure to submit a complete proposal and / or to respond fully to all requirements will cause the proposal to be deemed unresponsive, and therefore, subject to rejection.

Selections will not be final until the City and the respondent have fully negotiated and executed a contract. The City assumes no liability for costs incurred in responding to this RFP or for costs incurred by the respondent in anticipation of a fully executed contract. Receipt of a final application does not commit the department to award a grant to pay any costs incurred in the preparation of an application.

For further information about these and the other opportunities offered through the Department of Family and Support Services, please visit the DFSS website: www.cityofchicago.org/fss

Section 3 - RFP and Submission Information

A. Pre-proposal webinar

A Pre-Proposal Webinar will be held on **June 12, 2026, 10:00 p.m. – 12:00 p.m.** Attendance is not mandatory but is advised.

Please register prior to the webinar's start using this link:
https://us02web.zoom.us/webinar/register/WN_Hglm08PlSNeVPtaqNidHLg

A link to the completed Webinar will be available on-line at the DFSS website after the time and date listed above for those who cannot attend at the live scheduled time. Please register prior to the Webinar's start.

B. The e-Procurement system

To complete an application for this RFP, RESPONDENTS will need to set up an account in the new eProcurement/iSupplier system.

Registration in iSupplier is the first step to ensuring your agency's ability to conduct business with the City of Chicago and DFSS. ***Please allow five to seven days for your registration to be processed.***

The Department of Procurement Services (DPS) manages the iSupplier registration process. All delegate agencies are required to register in the **iSupplier portal** at www.cityofchicago.org/eProcurement. All vendors must have a Federal Employer Identification Number (FEIN) and an IRS W9 for registration and confirmation of vendor business information.

1. **New Vendors –** Must register at www.cityofchicago.org/eProcurement
2. **Existing Vendors –** Must request an iSupplier invitation via email. Include your **Complete Company Name** and **City of Chicago Vendor/Supplier Number (found on the front page of your contract)** in your email to **customersupport@cityofchicago.org .** You will then receive a response from DPS so you can complete the registration process. Please check your junk email folder if you have made a request and not heard back as many agencies have reported responses going their junk folder.

To receive training about all aspects of the eProcurement system register using the link below and include the name of the agency which you will represent. Training will review eProcurement functions such as iSupplier registration and overview, responding to RFPs, creating invoices and reviewing / tracking payments.

For further eProcurement help use the following contacts:

- **Questions on Registration:** customersupport@cityofchicago.org
- **Questions on eProcurement for Delegate Agencies including:** CustomerSupport@cityofchicago.org or contact the eProcurement hotline at 312-744-4357 (HELP)
- **Online Training Materials:** https://www.cityofchicago.org/city/en/depts/dps/isupplier/online-training-materials.html

If you are having difficulty registering additional people, please refer to this handout https://www.cityofchicago.org/content/dam/city/depts/dps/isupplier/training/Vendor_Create_New_Address_and_Contact.pdf

Here is a link to all additional technical assistance videos and handouts.
https://www.cityofchicago.org/city/en/depts/dps/isupplier/online-training-materials.html

Additionally, Respondents may e-mail CustomerSupport@cityofchicago.org to receive more specific advice and troubleshooting.

Respondents must submit an application for the request for proposal via eProcurement.

For this application, all answers to application questions are limited to 4,000 characters, including spaces and punctuation.

C. For respondents wishing to submit more than one application to a RFP

Organizations submitting more than one proposal may do so by **submitting each proposal under a separate, unique registered account user with online bidding responsibilities within the organization's iSupplier account, using their individual login information.**

If you are having difficulty registering additional people, please refer to this handout
https://www.cityofchicago.org/content/dam/city/depts/dps/isupplier/training/Vendor_Create_New_Address_and_Contact.pdf

Here is a link to all additional technical assistance videos and handouts.
https://www.cityofchicago.org/city/en/depts/dps/isupplier/online-training-materials.html
Additionally, Respondents may e-mail CustomerSupport@cityofchicago.org to receive more specific advice and troubleshooting.

D. Contact person information

Respondents are strongly encouraged to submit all questions and comments related to the RFP via e-mail.

For answers to program-related questions please contact:
Stacy Subida, Supervisor, Senior Services, Department of Family & Support Services
Phone: 312-743-7272
Email: Stacy.Subida@cityofchicago.org

Questions regarding the technical aspects of responding to this RFP may be directed to:
Jillian Black, Procurement Proposal Coordinator

Email: Jillian.Black@cityofchicago.org

or

OBM: CustomerSupport@cityofchicago.org or 312-744-4357 (HELP)

Section 4 - Legal and Submittal Requirements

A description of the following required forms has been included for your information. ***Please note that most of these forms will be completed prior to grant agreement execution but are not necessary for the completion of this proposal.*** A complete list of what forms will be required at the time of contracting is listed at the end of this section.

A. City of Chicago Economic Disclosure Statement (EDS)

Respondents are required to execute the **Economic Disclosure Statement** annually through its on-line EDS system. Its completion will be required for those Respondents who are awarded contracts as part of the contracting process.

More information about the on-line EDS system can be found at:
https://webapps.cityofchicago.org/EDSWeb/appmanager/OnlineEDS/desktop

B. Disclosure of Litigation and Economic Issues

Legal Actions: Respondent must provide a listing and brief description of all material legal actions, together with any fines and penalties, for the past five (5) years in which (i) Respondent or any division, subsidiary or parent company of Respondent, or (ii) any officer, director, member, partner, etc., of Respondent if Respondent is a business entity other than a corporation, has been:

- A debtor in bankruptcy; or
- A defendant in a legal action for deficient performance under a contract or in violation of a statute or related to service reliability; or
- A Respondent in an administrative action for deficient performance on a project or in violation of a statute or related to service reliability; or
- A defendant in any criminal action; or
- A named insured of an insurance policy for which the insurer has paid a claim related to deficient performance under a contract or in violation of a statute or related to service reliability; or
- A principal of a bond for which a surety has provided contract performance or compensation to an obligee of the bond due to deficient performance under a contract or in violation of a statute or related to service reliability; or
- A defendant or Respondent in a governmental inquiry or action regarding accuracy of preparation of financial statements or disclosure documents.

Any Respondent having any recent, current or potential litigation, bankruptcy or court action and/or any current or pending investigation, audit, receivership, financial insolvency, merger, acquisition, or any other fiscal or legal circumstance which may affect their ability currently, or in the future, to successfully operate the requested program, must attach a letter to their proposals outlining the circumstances of these issues. Respondent letters should be included in a sealed envelope, directed to Commissioner Lisa Morrison Butler. Failure to disclose relevant information may result in a Respondent being determined ineligible or, if after selection, in termination of a contract.

C. Grant Agreement Obligations

By entering into a grant agreement with the City, the successful respondent is obliged to accept and implement any recommended technical assistance. The grant agreement will describe the payment methodology. DFSS anticipates that payment will be conditioned on the Respondent's performance in accordance with the terms of its grant agreement.

D. Funding Authority

This initiative is administered by the DFSS through Older Americans Act State, Federal, and Alzheimer's Disease or Related Demetia GRF funds granted through the Illinois Department on Aging (IDOA). Consequently, all guidelines and requirements of the DFSS, the City, the Department of Health and Human

Services, Older Americans Act and the Illinois Department of Aging and any applicable federal regulations must be met. Additionally, all delegate agencies must comply with the Single Audit Act if applicable.

E. Insurance Requirements

Contractor must provide and maintain at Contractor's own expense, during the term of the Agreement and during the time period following expiration if Contractor is required to return and perform any work, services, or operations, the insurance coverages and requirements specified below, insuring all work, services, or operations related to the Agreement.

A. INSURANCE REQUIRED FROM CONTRACTOR

1) Workers Compensation and Employers Liability

Workers Compensation Insurance, as prescribed by applicable law covering all employees who are to provide a service under this Agreement and Employers Liability coverage with limits of not less than $1,000,000 each accident; $1,000,000 disease-policy limit and $1,000,000 disease-each employee, or the full per occurrence limits of the policy, whichever is greater.

The contractor may use a combination of primary and excess/umbrella policy/policies to satisfy the limits of liability required herein. The excess/umbrella policy/policies must provide the same coverages/follow form as the underlying policy/policies.

2) Commercial General Liability

Commercial General Liability Insurance or equivalent must be maintained with limits of not less than $1,000,000 per occurrence and $2,000,000 aggregate for bodily injury, personal injury, and property damage liability. Coverages must include but not be limited to, the following: all premises and operations, products/completed operations (for a minimum of two (2) years following project completion), explosion, collapse, underground, separation of insureds, defense, contractual liability (not to include endorsement CG 21 39 or equivalent), no exclusion for damage to work performed by Subcontractors, any limitation of coverage for designated premises or project is not permitted (not to include endorsement CG 21 44 or equivalent) and any endorsement modifying or deleting the exception to the Employer's Liability exclusion is not permitted. Where the general aggregate limit applies, the general aggregate must apply per project/location and once per policy period if applicable, or Contractor may obtain separate insurance to provide the required limits which will not be subject to depletion because of claims arising out of any other work or activity of Contractor. If a general aggregate applies to products/completed operations, the general aggregate limits must apply per project and once per policy period.

The City must be provided additional insured status with respect to liability arising out of Contractor's work, services or operations and completed operations performed on behalf of the City. Such additional insured coverage must be provided on ISO form CG 2010 10 01 and CG 2037 10 01 or on an endorsement form at least as broad for ongoing operations and completed operations. The City's additional insured status must apply to liability and defense of suits arising out of Contractor's acts or omissions, whether such liability is attributable to the Contactor or to the City. The full policy limits and scope of protection also will apply to the City as an additional insured, even if they exceed the City's minimum limits required herein. A copy of the physical "Additional Insured" endorsement must accompany the Certificate of Insurance when submitted. Contractor's liability insurance must be primary without right of contribution by any other insurance or self-insurance maintained by or available to the City.

Contractor may use a combination of primary and excess/umbrella policy/policies to satisfy the limits of liability required herein. The excess/umbrella policy/policies must provide the same coverages/follow form as the underlying policy/policies.

3) Automobile Liability

A Business Auto Policy covering any motor vehicles (owned, non-owned and hired) which are used in connection with work, services, or operations to be performed, must be maintained by the Contractor. Limits of not less than $1,000,000 per accident for bodily injury and property damage and covering the ownership, maintenance, or use of any auto whether owned, leased, non-owned or hired used in the performance of the work or services. The City is to be added as an additional insured on a primary, non-contributory basis. A copy of the physical "Additional Insured" endorsement must accompany the Certificate of Insurance when submitted.

Contractor may use a combination of primary and excess/umbrella policy/policies to satisfy the limits of liability required herein. The excess/umbrella policy/policies must provide the same coverages/follow form as the underlying policy/policies.

4) Umbrella or Excess

Umbrella or Excess Liability Insurance must be maintained with limits of not less than $2,000,000 per occurrence, or the full per occurrence limits of the policy, whichever is greater. The policy/policies must provide the same coverages/follow form as the underlying Commercial General Liability, Automobile Liability, Employers Liability and Completed Operations coverage required herein and expressly provide that the excess or umbrella policy/policies will drop down over reduced and/or exhausted aggregate limit, if any, of the underlying insurance. The Excess/Umbrella policy/policies must be primary without the right of contribution by any other insurance or self-insurance maintained by or available to the City.

Contractors may use a combination of primary and excess/umbrella policies to satisfy the limits of liability required under in Workers' Compensation, Employer's Liability, Commercial General Liability, and Automobile Liability.

5) Sexual Abuse or Molestation (SAM) Liability

Where the CGL policy referenced above is not endorsed to include affirmative coverage for sexual abuse or molestation, Contractor shall obtain and maintain a policy covering Sexual Abuse and Molestation for all employees for the actual or threatened abuse or molestation of any person in the care, custody, or control of any insured, including negligent employment, investigation, and supervision. The policy shall provide coverage for both defense and indemnity with liability limits of not less than $1,000,000 per occurrence or claim with a $2,000,000 aggregate limit.

The City and other entities as required by the City must be provided additional insured status on the CGL and SAM policies with respect to liability arising out of Contractor's work, services or operations performed on behalf of the City. The City's additional insured status must apply to liability and defense of suits arising out of Contractor's acts or omissions. The full policy limits and scope of protection also will apply to the City as an additional insured, even if they exceed the City's minimum limits required herein. Contractor's liability insurance must be primary without the right of contribution by any other insurance or self-insurance maintained by or available to the City.

Contractor's may use a combination of primary and excess/umbrella policy/policies to satisfy the limits of liability required herein. The excess/umbrella policy/policies must provide the same coverages/follow form as the underlying policy/policies.

Insurance coverages that begin with "when," "if," or "where," are considered conditional, and it is the Contractor's responsibility to obtain the applicable coverage when performing such work, service, or operation as described in the conditional coverage paragraph(s). If it is determined that a conditional coverage is not initially applicable, it is the Contractor's continuing responsibility to update the insurance coverage as needed. If at any time, the Contractor or City determines that a conditional coverage is applicable, the Contractor shall not perform the work, service, or operation in connection with the contract until evidence of all applicable insurance coverage is provided to the City.

6) Professional Liability (when applicable)

When any professional consultants perform work, services, or operations in connection with this Agreement, Professional Liability Insurance covering acts, errors, or omissions must be maintained with limits of not less than $1,000,000 per claim. When policies are renewed or replaced, the policy retroactive date must coincide with, or precede start of work on the Agreement. A claims-made policy which is not renewed or replaced must have an extended reporting period of two (2) years.

7) Valuable Papers (when applicable)

When any plans, designs, drawings, specifications, media, data, records, reports, and other documents are produced or used under this Agreement, Valuable Papers Insurance must be maintained in an amount to insure against any loss whatsoever and must have limits sufficient to pay for the re-creation and reconstruction of such records.

8) Blanket Crime (when applicable)

Crime Insurance or equivalent covering all persons handling funds under this Agreement, against loss by employee dishonesty, forgery or alteration, funds transfer fraud, robbery, theft, destruction or disappearance, computer fraud, credit card forgery, and other related crime risks. The policy limit shall be written to cover losses in the amount of the maximum monies collected or received and in the possession of Contractor at any given time under this Agreement.

9) Property

Contractor is responsible for all loss or damage to City property at full replacement cost as a result of the Agreement.

Contractor is responsible for all loss or damage to personal property (including materials, equipment, tools and supplies) owned or used by Contractor.

10) Medical Professional Liability (when applicable)

Medical Professional Liability Insurance must be maintained or cause to be maintained, covering acts, errors, or omissions related to the supplying of or failure to supply medical services or health care services by healthcare professionals with limits of not less than $5,000,000. When policies are renewed or replaced, the policy retroactive date must coincide with, or precede commencement of medical services under this Contract. A claims-made policy which is not renewed or replaced must have an extended reporting period of two (2) years.

B. Additional Requirements

Evidence of Insurance. Contractor must furnish the City of Chicago, Certificates of Insurance (COI) and additional insured endorsement, or other evidence of insurance, to be in force on the date of this Agreement, and renewal COIs and endorsement, or such similar evidence, if the coverages have an expiration or renewal date occurring during the term of this Agreement. The Contractor must submit evidence of insurance prior to execution of Agreement. The receipt of any COI does not constitute agreement by the City that the insurance requirements in the Agreement have been fully met or that the insurance policies indicated on the COI are in compliance with all requirements of the Agreement. The failure of the City to obtain, nor the City's receipt of, or failure to object to a non-complying insurance certificate, endorsement or other insurance evidence from Contractor, its insurance broker(s) and/or insurer(s) will not be construed as a waiver by the City of any of the required insurance provisions. Contractor must advise all insurers of the Agreement provisions regarding insurance. The City in no way warrants that the insurance required herein is sufficient to protect the Contractor for liabilities which may arise from or relate to the Agreement. The City reserves the right to obtain complete, certified copies of any required insurance policies at any time.

Failure to Maintain Insurance. Failure of the Contractor to comply with required coverage and terms and conditions outlined herein will not limit Contractor's liability or responsibility nor does it relieve Contractor of the obligation to provide insurance as specified in this Agreement. Nonfulfillment of the insurance conditions may constitute a violation of the Agreement, and the City retains the right to suspend this Agreement until proper evidence of insurance is provided, or the Agreement may be terminated.

Notice of Material Change, Cancellation or Non-Renewal. Consistent with State law, Contractor must provide for sixty (60) days prior written notice to be given to the City in the event coverage is substantially changed, canceled or non-renewed and ten (10) days prior written notice for non-payment of premium. See 215 ILCS 5/143.16 and 143.17(a). A copy of the physical endorsements must accompany the Certificate of Insurance for General Liability, Automobile Liability and Workers Compensation in order to comply with the insurance requirements.

Deductibles and Self-Insured Retentions. Any deductibles or self-insured retentions on referenced insurance coverages must be borne by Contractor.

Waiver of Subrogation. Contractor hereby waives its rights and its insurer(s)' rights of, and agrees to require their insurers to waive their rights of, subrogation against the City under all required insurance herein for any loss arising from or relating to this Agreement. The Contractor agrees to obtain any endorsement that may be necessary to affect this waiver of subrogation, but this provision applies regardless of whether the City receives a waiver of subrogation endorsement for Contractor's insurer(s).

Contractors Insurance Primary. All insurance required of Contractor under this Agreement shall be endorsed to state that Contractor's insurance policy is primary and not contributory with any insurance carrier by the City.

Acceptability of Insurers. Insurance is to be placed with insurers authorized to conduct business in the state with a current A.M. Best rating of no less than A-, Class VIII, unless otherwise approved by the City.

No Limitation as to Contractor's Liabilities. The coverages and limits furnished by the Contractor in no way limit the Contractor's liabilities and responsibilities specified within the Agreement or by law.

No Contribution by the City. Any insurance or self-insurance programs maintained by the City do not

contribute with insurance provided by Contractor under this Agreement.

Insurance not Limited by Indemnification. The required insurance to be carried is not limited by any limitations expressed in the indemnification language in this Agreement or any limitation placed on the indemnity in this Agreement given as a matter of law.

Insurance and Limits Maintained. If Contractor maintains higher limits and/or broader coverage than the minimums shown herein, the City requires and shall be entitled the higher limits and/or broader coverage maintained by Contractor. Any available insurance proceeds in excess of the specified minimum limits of insurance and coverage shall be available to the City.

Joint Venture or Limited Liability Company. If Contractor is a joint venture or limited liability company, the insurance policies must name the joint venture or limited liability company as a named insured.

Other Insurance obtained by Contractor. If Contractor desires additional coverages, the Contractor will be responsible for the acquisition and cost.

Insurance required of Subcontractors. Contractor shall name the Subcontractor(s) as a named insured(s) under Contractor's insurance or Contractor will require each Subcontractor(s) to provide and maintain Commercial General Liability, Commercial Automobile Liability, Worker's Compensation, Employers Liability and Professional Liability Insurance, and when applicable Excess/Umbrella Liability Insurance with coverage at least as broad as in outlined in Section A, Insurance Required. The limits of coverage will be determined by Contractor. Contractor shall determine if Subcontractor(s) must also provide any additional coverage or other coverage outlined in Section A, Insurance Required. The Contractor is responsible for ensuring that each Subcontractor has named the City of Chicago as an additional insured where required, as well as specifically naming the City of Chicago as an additional insured on any endorsement form at least as broad and acceptable to the City. The Contractor is also responsible for ensuring that each Subcontractor has complied with the required coverage and terms and conditions outlined in this Section B, Additional Requirements. When requested by the City, the Contractor must provide to the City Certificates of Insurance and additional insured endorsements or other evidence of insurance. The City reserves the right to obtain complete, certified copies of any required insurance policies at any time. Failure of the Subcontractor(s) to comply with required coverage and terms and conditions outlined herein will not limit Contractor's liability or responsibility.

City's Right to Modify. Notwithstanding any provisions in the Agreement to the contrary, the City, Department of Finance, Risk Management Division maintains the right to modify, delete, alter or change these requirements.

F. Indemnity

The successful Respondent will be required to indemnify City of Chicago for any losses or damages arising from the delivery of services under the grant agreement that will be awarded. The City may require the successful Respondent to provide assurances of performance, including, but not limited to, performance bonds or letters of credit on which the City may draw in the event of default or other loss incurred by the City by reason of the Respondent's delivery or non-delivery of services under the grant agreement.

G. False statements

i. 1-21-010 False Statements.

Any person who knowingly makes a false statement of material fact to the city in violation of any statute, ordinance or regulation, or who knowingly falsifies any statement of material fact made in connection

with an proposal, report, affidavit, oath, or attestation, including a statement of material fact made in connection with a bid, proposal, contract or economic disclosure statement or affidavit, is liable to the city for a civil penalty of not less than $500.00 and not more than $1,000.00, plus up to three times the amount of damages which the city sustains because of the person's violation of this section. A person who violates this section shall also be liable for the city's litigation and collection costs and attorney's fees.

The penalties imposed by this section shall be in addition to any other penalty provided for in the municipal code. (Added Coun. J. 12-15-04, p. 39915, § 1)

ii. 1-21-020 Aiding and Abetting.

Any person who aids, abets, incites, compels or coerces the doing of any act prohibited by this chapter shall be liable to the city for the same penalties for the violation. (Added Coun. J. 12-15-04, p. 39915, § 1)

iii. 1-21-030 Enforcement.

In addition to any other means authorized by law, the corporation counsel may enforce this chapter by instituting an action with the department of administrative hearings. (Added Coun. J. 12-15-04, p. 39915, § 1)

H. Labor Peace Agreement Ordinance (MCC 2-50-045)

All respondents must agree to comply with the requirements of Section 2-50-045, *Essential service contracts*, of the Municipal Code of Chicago, as provided below in part:

(a) *Definitions.* For purposes of this section, the following definitions shall apply:

"Commissioner" means the Commissioner of Family and Support Services, or the Commissioner's designee.

"Contract" means an agreement entered into between the City, through the Department of Family and Support Services, and a Contractor to perform Essential Services.

"Contractor" means a person, as defined by Section 1-4-090(e), contracting directly with the City through the Department of Family and Support Services to perform Essential Services, where the Contractor has 20 or more employees. "Contractor" does not include hospitals licensed pursuant to the Illinois Hospital Licensing Act, 210 ILCS 85, or any hospital affiliate as defined by the Illinois Hospital Licensing Act, 210 ILCS 85/10.8(b), or any hospital licensed pursuant to the University of Illinois Hospital Act, 110 ILCS 330.

"Employee" means those employees directly performing Essential Services under a Contract. The term "Employee" excludes employees who work for the Contractor, but do not provide Essential Services under the Contract, management or supervisory or other employees who do not enjoy a right to engage in strikes, work stoppages, or other concerted activities.

"Essential Services" means health and social services.

"Labor Peace Agreement" means an agreement between a Contractor and a labor organization that:

(i) prohibits the labor organization and its members from engaging in work stoppages, boycotts, or any other activity that may interfere or hinder the performance of a Contract for the duration of the Contract; and

(ii) contains a means of resolving disputes between the Contractor and the labor organization.

(b) *Terms of Contracts.*

(1) The Commissioner, in the interest of preventing a disruption of Essential Services and protecting the City's financial and proprietary interest in the provision of such Essential Services, shall ensure that all Contracts that are entered into after the effective date of this section shall require:

(A) written notice be provided by the Contractor to the Commissioner administering the Contract, or the Commissioner's designee, within 72 hours of when the Contractor:

(i) becomes aware of any threatened, imminent, or actual strike, work stoppage, or other concerted activity that may interfere or hinder the work performed by Employees;

(ii) is informed that Employees seek to be represented by a labor organization, join a labor organization, or otherwise elect to self-organize for the purpose of engaging in concerted activity;

(iii) receives a notice or announcement from a labor organization that it represents or seeks to represent the Employees; or

(iv) enters into a Labor Peace Agreement, Collective Bargaining Agreement, or the expiration or breach of any such agreement.

(B) that the Contractor shall not prohibit, retaliate, or otherwise coerce Employees with respect to rights guaranteed by the First Amendment of the United States Constitution or any other rights afforded by federal or state laws.

(2) Within 90 days of subsection (b)(1)(A)(ii) or subsection (b)(1)(A)(iii) occurring, that the Contractor enter into a Labor Peace Agreement with the labor organization.

(c) The provisions of subsection (b) shall be material terms of any Contract entered into by the City, the breach of which by a Contractor shall be grounds to terminate or decline to renew the Contract.

(d) A Contractor is in compliance with this Section 2-50-045 if (1) the Contractor remains in compliance with subsection (b), or (2) the Contractor and the Employees have a collective bargaining agreement with a labor organization, or (3) no labor organization represents or seeks to represent the Employees.

I. Compliance with laws, statutes, ordinances and executive orders

Grant awards will not be final until the City and the respondent have fully negotiated and executed a grant agreement. All payments under grant agreements are subject to annual appropriation and availability of funds. The City assumes no liability for costs incurred in responding to this RFP or for costs incurred by the

respondent in anticipation of a grant agreement. As a condition of a grant award, Respondents must comply with the following and with each provision of the grant agreement:

i. Conflict of Interest Clause: No member of the governing body of the City of Chicago or other unit of government and no other officer, employee, or agent of the City of Chicago or other government unit who exercises any functions or responsibilities in connection with the carrying out of the project shall have any personal interest, direct or indirect, in the grant agreement.

The respondent covenants that he/she presently has no interest, and shall not acquire any interest, direct, or indirect, in the project to which the grant agreement pertains which would conflict in any manner or degree with the performance of his/her work hereunder. The respondent further covenants that in the performance of the grant agreement no person having any such interest shall be employed.

ii. Governmental Ethics Ordinance, Chapter 2-156: All Respondents agree to comply with the Governmental Ethics Ordinance, Chapter 2-156 which includes the following provisions: a) a representation by the respondent that he/she has not procured the grant agreement in violation of this order; and b) a provision that any grant agreement which the respondent has negotiated, entered into, or performed in violation of any of the provisions of this Ordinance shall be voidable by the City.

iii. Successful Respondents shall establish procedures and policies to promote a Drug-free Workplace. The successful respondent shall notify employees of its policy for maintaining a drug-free workplace, and the penalties that may be imposed for drug abuse violations occurring in the workplace. The successful respondent shall notify the City if any of its employees are convicted of a criminal offense in the workplace no later than ten days after such conviction.

iv. Business Relationships with Elected Officials - Pursuant to Section 2-156-030(b) of the Municipal Code of Chicago, as amended (the "Municipal Code") it is illegal for any elected official of the City, or any person acting at the direction of such official, to contact, either orally or in writing, any other City official or employee with respect to any matter involving any person with whom the elected official has a business relationship, or to participate in any discussion in any City Council committee hearing or in any City Council meeting or to vote on any matter involving the person with whom an elected official has a business relationship. Violation of Section 2-156-030(b) by any elected official with respect to the grant agreement shall be grounds for termination of the grant agreement. The term business relationship is defined as set forth in Section 2-156-080 of the Municipal Code.

Section 2-156-080 defines a " business relationship" as any contractual or other private business dealing of an official, or his or her spouse or domestic partner, or of any entity in which an official or his or her spouse or domestic partner has a financial interest, with a person or entity which entitles an official to compensation or payment in the amount of $2,500 or more in a calendar year; provided, however, a financial interest shall not include: (i) any ownership through purchase at fair market value or inheritance of less than one percent of the share of a corporation, or any corporate subsidiary, parent or affiliate thereof, regardless of the value of or dividends on such shares, if such shares are registered on a securities exchange pursuant to the Securities Exchange Act of 1934, as amended; (ii) the authorized compensation paid to an official or employee for his office or employment; (iii) any economic benefit provided equally to all residents of the City; (iv) a time or demand deposit in a financial institution; or (v) an endowment or insurance policy or annuity contract purchased from an insurance company. A "contractual or other private business dealing" shall not include any employment relationship of an official's spouse or domestic

partner with an entity when such spouse or domestic partner has no discretion concerning or input relating to the relationship between that entity and the City.

v. Compliance with Federal, State of Illinois and City of Chicago regulations, ordinances, policies, procedures, rules, executive orders and requirements, including Disclosure of Ownership Interests Ordinance (Chapter 2-154 of the Municipal Code); the State of Illinois - Certification Affidavit Statute (Illinois Criminal Code); State Tax Delinquencies (65ILCS 5/11-42.1-1); Governmental Ethics Ordinance (Chapter 2-156 of the Municipal Code); Office of the Inspector General Ordinance (Chapter 2-56 of the Municipal Code); Child Support Arrearage Ordinance (Section 2-92-380 of the Municipal Code); and Landscape Ordinance (Chapters 32 and 194A of the Municipal Code).

vi. If selected for grant award, Respondents are required to (a) execute the Economic Disclosure Statement and Affidavit, and (b) indemnify the City as described in the grant agreement between the City and the successful Respondents.

vii. Prohibition on Certain Contributions, Mayoral Executive Order 2011-4. Neither you nor any person or entity who directly or indirectly has an ownership or beneficial interest in you of more than 7.5% ("Owners"), spouses and domestic partners of such Owners, your Subcontractors, any person or entity who directly or indirectly has an ownership or beneficial interest in any Subcontractor of more than 7.5% ("Sub-owners") and spouses and domestic partners of such Sub-owners (you and all the other preceding classes of persons and entities are together, the "Identified Parties"), shall make a contribution of any amount to the Mayor of the City of Chicago (the "Mayor") or to his political fundraising committee during (i) the bid or other solicitation process for the grant agreement or Other Contract, including while the grant agreement or Other Contract is executory, (ii) the term of the grant agreement or any Other Contract between City and you, and/or (iii) any period in which an extension of the grant agreement or Other Contract with the City is being sought or negotiated.

You represent and warrant that since the date of public advertisement of the specification, request for qualifications, request for proposals or request for information (or any combination of those requests) or, if not competitively procured, from the date the City approached you or the date you approached the City, as applicable, regarding the formulation of the grant agreement, no Identified Parties have made a contribution of any amount to the Mayor or to his political fundraising committee.

You shall not: (a) coerce, compel or intimidate your employees to make a contribution of any amount to the Mayor or to the Mayor's political fundraising committee; (b) reimburse your employees for a contribution of any amount made to the Mayor or to the Mayor's political fundraising committee; or (c) bundle or solicit others to bundle contributions to the Mayor or to his political fundraising committee.

The Identified Parties must not engage in any conduct whatsoever designed to intentionally violate this provision or Mayoral Executive Order No. 2011-4 or to entice, direct or solicit others to intentionally violate this provision or Mayoral Executive Order No. 2011-4.

Violation of, non-compliance with, misrepresentation with respect to, or breach of any covenant or warranty under this provision or violation of Mayoral Executive Order No. 2011-4 constitutes a breach and default under the grant agreement, and under any Other Contract for which no opportunity to cure will be granted. Such breach and default entitles the City to all remedies (including without limitation

termination for default) under the grant agreement, under any Other Contract, at law and in equity. This provision amends any Other Contract and supersedes any inconsistent provision contained therein.

If you violate this provision or Mayoral Executive Order No. 2011-4 prior to award of the Agreement resulting from this specification, the Commissioner may reject your bid.

For purposes of this provision: "Other Contract" means any agreement entered into between you and the City that is (i) formed under the authority of Municipal Code Ch. 2-92; (ii) for the purchase, sale or lease of real or personal property; or (iii) for materials, supplies, equipment or services which are approved and/or authorized by the City Council.

"Contribution" means a "political contribution" as defined in Municipal Code Ch. 2-156, as amended.

"Political fundraising committee" means a "political fundraising committee" as defined in Municipal Code Ch. 2-156, as amended.

viii. (a) The City is subject to the June 24, 2011 “City of Chicago Hiring Plan” (the “2011 City Hiring Plan”) entered in Shakman v. Democratic Organization of Cook County, Case No 69 C 2145 (United States District Court for the Northern District of Illinois). Among other things, the 2011 City Hiring Plan prohibits the City from hiring persons as governmental employees in non-exempt positions on the basis of political reasons or factors.

(b) You are aware that City policy prohibits City employees from directing any individual to apply for a position with you, either as an employee or as a subcontractor, and from directing you to hire an individual as an employee or as a subcontractor. Accordingly, you must follow your own hiring and contracting procedures, without being influenced by City employees. Any and all personnel provided by you under the grant agreement are employees or subcontractors of you, not employees of the City of Chicago. The grant agreement is not intended to and does not constitute, create, give R.I.S.E to, or otherwise recognize an employer-employee relationship of any kind between the City and any personnel provided by you.

(c) You will not condition, base, or knowingly prejudice or affect any term or aspect of the employment of any personnel provided under the grant agreement, or offer employment to any individual to provide services under the grant agreement, based upon or because of any political reason or factor, including, without limitation, any individual's political affiliation, membership in a political organization or party, political support or activity, political financial contributions, promises of such political support, activity or financial contributions, or such individual's political sponsorship or recommendation. For purposes of the grant agreement, a political organization or party is an identifiable group or entity that has as its primary purpose the support of or opposition to candidates for elected public office. Individual political activities are the activities of individual persons in support of or in opposition to political organizations or parties or candidates for elected public office.

(d) In the event of any communication to you by a City employee or City official in violation of paragraph (b) above, or advocating a violation of paragraph (c) above, you will, as soon as is reasonably practicable, report such communication to the Hiring Oversight Section of the City's Office of the Inspector General (“IGO Hiring Oversight”), and also to the head of the Department. You will also cooperate with any inquiries by IGO Hiring Oversight related to this Agreement.

DEPARTMENT OF FAMILY AND SUPPORT SERVICES

JUNE 26, 2026

AMENDMENT NO. 1

REQUEST FOR PROPOSALS

FOR

DFSS: SENIOR SERVICES:

CAREGIVER SUPPORT SERVICES

RFQ # **65256**

THE FOLLOWING REVISIONS/CHANGES WILL BE INCORPORATED IN THE ABOVE REFERENCED RFP DOCUMENT. ALL OTHER PROVISIONS AND REQUIREMENTS AS ORIGINALLY SET FORTH REMAIN IN FULL FORCE AND ARE BINDING.

SECTION I: Modified RFP text:

1. **The following has been modified in the *Program Requirements - 1. Service Category ii. Tailored Caregiver Assessment and Referral (TCARE) Assessment (Case Management)* section:**

   The original question/statement: Cost/Rates: The annual budget for assessment is $93,165 per region or $186,331 citywide (page 11).

   Has been changed to: The annual budget for assessment is **$70,665 per region or $141,331** citywide (page 11).

2. **The following has been modified in the *F. Anticipated term of contract and funding source* section:**

   The original question/statement: $297,249 per region per year depending on the size of the proposed program, or up to $594,499 annually citywide (page 24)

   Has been changed to: $274,749 per region per year depending on the size of the proposed program, or, up to **$549,499 annually citywide** (page 24)

SECTION II: Questions and Answers to the RFP.
Questions and answers received since RFP #65256 was published on June 11, 2026.

1. **Will we have the PPT after the webinar?**
   The RFP webinar can be viewed on the DFSS YouTube page:
   https://youtu.be/kItdDxIXSYM?si=Z2ty0oW2zU6294pZ

2. **Can we propose serving some communities in another region while primarily serving one of two regions?**
   Awards will be made to two regions. Multiple applications by the same agency for the same region will not be considered. Awards will be granted to the selected delegate agency per region. Respondents seeking funding for more than one region are required to apply for each region separately and include a distinct budget for each region (page 28).

3. **If we apply for both regions, we just need to submit one application but with two budgets for each region?**
   Awards will be made to two regions. Multiple applications by the same agency for the same region will not be considered. Awards will be granted to the selected delegate agency per region. Respondents seeking funding for more than one region are required to apply for each region separately and include a distinct budget for each region (page 28).

4. **What is the link for the slides or will this be emailed to us?**
   The RFP webinar can be viewed on the DFSS YouTube page:
   https://youtu.be/kItdDxIXSYM?si=Z2ty0oW2zU6294pZ

5. **Is the TCARE assessment license provided by DFSS? If so, how many licenses are provided? Or, does the cost for the licenses come out of the TCARE assessment and case management line-item budget?**
   In the previous contracts, DFSS provided at least three licenses per agency. The cost for licenses are provided and paid for directly by DFSS. This expense does not come out of the delegate agency budget.

6. **It is noted that in general, the TCARE assessment should be conducted in person. In our experience, caregivers find it challenging to make time for in-person support for a number of reasons such as limited time, transportation concerns, and finances. Is there a limit to the number of assessments conducted via telephone or virtually?**
   When possible, assessments should be conducted in person to assess the home environment. Virtual options (telephone and web-based tools such as Microsoft Teams, Skype, Zoom) can be provided. There is no limit to assessments conducted via telephone or virtually (page 10).

7. **Are the annual region targets that are noted in the RFP the required "must-reach" numbers or do they represent the top of the range for each target?**
   Target numbers are provided for each category and the selected respondent(s) should aim to reach the annual target to support as many caregivers as possible, as the funds allow (page 20).

   To monitor and recognize intermediate progress toward the above performance indicators, DFSS also intends to track output metrics that may include, but are not limited to, and will be modified to match the selected RFP application:

   - 450 participants and 675 TCARE assessments in each region will be conducted annually.
   - 33 participants and 125 units of counseling services per region will be provided annually.
   - 150 participants and 150 units of outreach services per region will be provided annually.
   - 50 participants and 250 units of support groups services per region will be provided annually.
   - 50 memory café participants and 250 units of memory café services per region will be provided annually.
   - 175 participants and 250 units of training and education services per region will be provided annually.
   - 22 Stressbusting participants and 200 units of service per region will be provided annually.

- 150 participants and 150 units of caregiver or memory kits per region will be provided annually.
- 150 clients and 150 units of gap-filling services per region will be provided annually.

8. **For individual or family counseling/caregiver coaching, the program requirements state 450 caregivers and 675 units; but performance measures state 33 caregivers and 125 units. Can you please clarify how to interpret these accurately?** 450 participants and 675 TCARE assessments in each region will be conducted annually. The target for individual or family counseling / caregiver coaching is 33 unduplicated caregivers per region and 125 units, or 65 clients and 250 units citywide (page 11).

9. **Is this grant intended to serve only caregivers of individuals with dementia or cognitive impairments, or does it also support caregivers of older adults with other care needs?** A "caregiver" means an adult family member or another individual of any age providing in-home and community care to an older adult 60 years of age **or** older or a care recipient with Alzheimer's Disease or a related dementia under 60. (page 7, 8)

10. Are applicants required to provide services across all program categories (Memory Cafés, counseling, support groups, gap-filling services, and training), or may organizations choose to offer services in one or more areas? If organizations may select specific categories, is there a minimum number of service areas that must be included?

The selected Respondent(s) will be required to offer all of the following service categories through the Caregiver Support Services Program. The selected Respondent(s) may utilize a combination of paid staff, sub-contractors, in-kind and volunteers to fulfill each service category component of the Caregiver Support Services program (page 9).

Funded by the Title III-E of the Older American's Act, Caregiver Support Services includes the following service categories to be included in the RFP application:

- **Outreach** to identify potential individual caregivers and encourage their use of existing services and benefits.
- **TCARE Assessment (Case Management)** to identify caregivers at risk for burnout, develop a care plan, connect them to the right services, and measure the impact of their programs;
- **Individual and Family Counseling** sessions with mental health professionals who provide counseling on a wide range of issues such as grief, isolation, transition, and depression or anxiety;
- **Support Groups** to provide emotional and peer support; including Memory Cafés to provide monthly gatherings where both caregivers and care recipients (experiencing memory loss) jointly attend to participate in engaging activities led by a facilitator
- **Training and Education** to increase the caregiver's knowledge, skills, abilities and strategies to cope with caring for a loved one

    - Including facilitating Stressbusting for Family Caregivers, an evidence-based program that provides support to family caregivers of persons with dementia
    - [optional] Savvy Caregiver, an interactive 6-week training series designed to support family caregivers.
- **Gap-Filling Services**, which include goods and services which complement the care provided by an informal caregiver when all other resources for such goods/services have been exhausted.
    - Memory / Caregiver Kits to support caregivers and care recipients experiencing dementia with activities and sensory supports (pages 4, 5)

11. As an organization that primarily serves immigrant communities, would we be permitted to focus our services exclusively on immigrant populations across the designated regions, or is it mandatory to serve all communities, including the broader mainstream population?

Caregivers must be prioritized based on the Older American Act Title III priorities which states preference for older persons with greatest economic or social need. Older Americans' Act funding dictates that respondents pay particular attention to serving caregivers in low-income, minority communities and traditionally underserved communities with limited English proficiency, and services are needed throughout the city. Planning considerations should include cultural adaptations to caregiver interventions where needed. Inclusion of citizens from a local community in planning and adaptations or improvements to the caregiver program is encouraged. The selected Respondent(s) must provide services for caregivers including those with limited English proficiency and must have access to staff with language skills that reflect the needs of participants served within the community and / or translation services. The selected Respondent(s) must make reasonable accommodations for caregivers with disabilities, including managing dementia and memory loss symptoms, vision, or hearing impairment, American Sign Language interpretation, and / or TDD/TTY phone number or other telecommunication devices for the deaf and accessible facilities for individuals with physical disabilities. In addition, the selected Respondent(s) are expected to provide programming sensitive to local needs (i.e. languages, communication styles, including nonverbal cues, cultural traditions, and religious / spiritual concerns) and other social, psychological, and historical factors. Respondents will be required to provide services to qualifying clients regardless of their duration of residence or citizenship status. Respondents should pay particular attention to serving participants in low-income, minority communities and traditionally underserved communities and those with limited English proficiency. Planning considerations should include cultural adaptations. Inclusion of residents from a local community in planning and adaptations or improvements to the program is encouraged (page 7, 8).