



Office of Violence Prevention (OVP)

Domestic, Sexual & Gender-Based Violence Prevention Initiative (DSG)

REQUEST FOR PROPOSALS

Strengthening Referral Pathways Between the City of Boston and Community-Based Domestic and Sexual Violence Organizations

January 2026

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RFP Timeline

January 30 2026	RFP available online at https://www.boston.gov/bid-listings RFP will also be disseminated via e-mail to relevant networks
February 13 th 2026	Questions due in writing by 5:00 PM EST via email to: RFR@bphc.org Subject – <i>Referral Pathways Between the CoB and Community-Based DV/SV Orgs</i>
February 18 th 2026	Responses to questions available for viewing on https://www.boston.gov/bid-listings by 4:00 PM (Make sure to filter by department: Boston Public Health Commission)
February 23 rd 2026	RFP due by 11:59 PM EST via email to: RFR@bphc.org Subject Line – <i>Referral Pathways Between the CoB and Community-Based DV/SV Orgs</i> NO EXCEPTIONS TO THIS DEADLINE
March 2 nd 2026	Eligible candidates will be notified of a Zoom interview by 5:00 PM EST
March 20 th 2026	Notification of Decision: Selected candidate will be notified by or before 5:00PM EST of the award however, BPHC has the discretion to extend this date without notice.

Overview

The Boston Public Health Commission (BPHC) is the local public health department for the City of Boston. BPHC's mission is to protect, preserve, and promote the health and well-being of all Boston residents, particularly those most impacted by systemic inequities.

The Domestic, Sexual & Gender-Based Violence Prevention Initiative (DSG), housed within BPHC's Office of Violence Prevention, leads the City's public health-oriented approach to preventing and responding to domestic violence, sexual violence, and other forms of gender-based violence. DSG works to create an inclusive, trauma-informed, and equitable environment that fosters a collective response to violence prevention by advancing survivor-centered and data-driven priorities across systems. DSG approaches violence prevention through a public health lens that recognizes the interconnectedness of all forms of violence, and the need for coordinated, data-informed, and community-driven solutions.

A critical component of this work is strengthening clear, survivor-centered referral pathways and partnerships between City of Boston staff and culturally responsive, community-based DV/SV organizations to support survivors. Through this Request for Proposals (RFP), DSG seeks to establish and fund referral partnerships with trusted community-based domestic and sexual violence (DV/SV) organizations, particularly those serving BIPOC, LGBTQ+, immigrant, and other historically underserved communities. These partnerships will strengthen coordination between City departments and DV/SV providers, improve survivor access to confidential and culturally responsive services, and enhance system-level response and accountability.

All service contracts awarded by the Boston Public Health Commission may be subject to the following City of Boston's living wage ordinance. This ordinance requires that all employees working on sizable city contracts earn an hourly wage that is enough for a family of four to live at or above the federal poverty level. This wage amount, called the living wage, is recalculated every year. For more information, visit <https://www.boston.gov/workerempowerment/living-wage-division>.

As part of BPHC's efforts to have an equitable procurement process, BPHC will consider and encourage underrepresented businesses that include: Minority-owned Business Enterprises (MBE), Women-owned Business Enterprises (WBE), Veteran-owned Business Enterprises (VBE), Service-disabled Veteran-owned Business Enterprises (SDVOBE), Disability-owned Business Enterprise (DOBE), Lesbian Gay Bisexual Transgender Business Enterprises (LGBTBE), and local businesses to apply to this RFP.

This is a grant funded project.

Scope of Work

The goal of this initiative is to strengthen and formalize referral relationships between City departments and trusted community-based domestic and sexual violence service providers to improve survivor access to confidential, culturally responsive, and trauma-informed support.

DSG seeks to contract with one to two community-based DV/SV organizations to serve as formal referral partners. Selected organizations will collaborate with DSG and participating City departments to implement survivor-centered referral workflows, provide direct survivor support, and contribute to a coordinated, data-informed referral system.

During the planning and early implementation phase (anticipated March–May 2026), DSG will work collaboratively with selected community-based organizations to establish referral partnerships and define referral workflows, confidentiality protocols, and program expectations. This phase will include coordination with BPHC's and City of Boston's Legal Department regarding confidentiality requirements related to sensitive DV/SV information.

During the pilot and implementation phase (June–September 2026), referral partnerships will be launched and tested across selected BPHC and City departments. Ongoing monitoring, data collection, and partner feedback will inform continuous improvement of referral processes, training needs, and survivor supports.

Specific Activities:

Partner organizations funded through this opportunity will be expected to engage in the following activities, in close coordination with the DSG team:

- Participation in referral workflow development and pilot implementation, including providing practice-based input to ensure workflows are survivor-centered and feasible
- Engage City departments particularly priority City of Boston and BPHC programs (e.g., Mayor's Office of Women's Advancement, Mayor's Office of Immigrant Advancement, Mayor's Office of Housing, Homeless Services Bureau, Recovery Services Bureau, Child Adolescent Family Health Bureau)—to review and refine referral workflows
- Ensure survivor choice, autonomy, and confidentiality remain central throughout the referral process and service interactions
- Partner organizations will use funds to directly support survivors' social determinants of health needs, based on survivor-identified priorities and emergent needs. While the exact number of survivors receiving direct supports cannot be predetermined, partner organizations are expected to support a minimum of approximately [10–15] survivors over the project period, with the understanding that needs, frequency, and type of support will vary widely. This estimate is intended for planning purposes only and should not limit responsiveness to survivor social determinants of health needs including but not limited to:
 - Emergency hotel stays, housing and utility related costs
 - Food or essential needs assistance (e.g. gift cards)
 - Transportation to court, medical, or support services

- Legal supports (e.g. restraining orders, court accompaniment, immigration-related assistance, medical advocacy)
- Partner organizations will support DSG in delivering trainings to non-domestic/sexual violence-specific City staff and departments. Trainings may include: Trauma-informed response to DV/SV, basic DV/SV safety planning, how and when to make referrals through the partnership network, confidentiality and empowerment-based advocacy.
 - DSG team will lead all training logistical coordination and overall facilitation of trainings.
 - Partner organizations should plan to support approximately 4-5 DSG-led training events, reaching an estimate of 40-50 City of Boston Staff. These estimates are intended for planning purposes and may vary based on City needs and attendance.
 - delivery of existing DSG training curriculum, including sharing practice-based expertise, contextual examples, and participating in co-facilitation as appropriate
 - Partner organizations will be asked to support delivery of existing DSG training curriculum, including sharing practice-based expertise, contextual examples, and participating in co-facilitation as appropriate
 - Partner organizations will not be expected to develop new curricula or independently lead trainings beyond the scope of the referral partnership.
- Participation in coordination meetings and trainings, as needed via email or phone to support referrals and coordination
- Submit monthly programmatic and data reports, as outlined by DSG (e.g. number of referrals received, types of supports provided, high-level outcomes where appropriate)
- End-of-year summary of activities, challenges, and lessons learned
- Submit regular invoices in accordance with BPHC contracting and fiscal requirements.

Allowable Costs:

Sub-awarded funds may be used for the following allowable costs, provided they are reasonable, necessary, and directly related to the implementation of the referral partnership:

- Personnel costs (i.e salaries and fringe for staff supporting referral coordination, survivor support, training and reporting)
- Survivor support and emergency assistance (i.e emergency housing stabilization, food, transportation, other social determinant of health needs)
- Data tracking, reporting, and administrative costs directly tied to program monitoring and required deliverables, including the purchase, licensing, or enhancement of case management systems, referral tracking tools, or data management software needed to support this work
- Training related costs (i.e staff time supporting City department training)
- Interpretation, translation, and language access services

Time Period (Estimated)	Anticipated Activities
March – May 2026	<ul style="list-style-type: none"> • Setting up contract • Orientation Meeting with DSG Team • Coordinate with BPHC / City of Boston Legal Department to clarify confidentiality and referral protocols <p>Co-develop referral workflows, including:</p> <ul style="list-style-type: none"> • Neighborhood-based referral zones • Opt-in, survivor-centered cross-referral protocols • Clear expectations for confidentiality and informed consent

	<p>Establish program monitoring and reporting expectations, including monthly reporting on:</p> <ul style="list-style-type: none"> • Number of referrals received • Basic demographic information of persons referred • Types of services and social determinants of health (SDOH) supports provided • Referral outcomes, as appropriate and allowable
June –September 2026	<ul style="list-style-type: none"> • Finalize referral system protocols and launch a pilot phase • Support DSG in delivering trainings to non-GBV-specific City staff and departments • Partner organization will produce summary report with pilot data, challenges, opportunities for future work, lessons learned, etc.

Minimum Qualifications

Proposers must possess the following qualifications for each role and assignment as indicated:

- Status as a nonprofit organization (501(c)(3) or equivalent nonprofit designation). Can have a fiscal sponsor.
- Demonstrated familiarity with the City of Boston's neighborhoods and the needs, strengths, and lived experiences of Boston residents
- Organizational experience providing domestic and/or sexual violence services
- Demonstrated cultural and linguistic responsiveness, particularly with BIPOC, LGBTQ+, immigrant, and underserved communities
- Experience collaborating with government agencies or systems partners
- Capacity to maintain confidential records and comply with relevant confidentiality laws and protocols
- Ability to collect and report basic program and referral data
- **Bilingual/bicultural applicants strongly encouraged to apply.** To learn more about the City of Boston's equitable procurement policy and how to become certified as a minority-, woman-, or veteran-owned small business, please visit: <https://www.boston.gov/get-your-business-certified>

Proposal Requirements

DSG values clarity, equity, and accessibility in the proposal process. Applicants are encouraged to respond concisely and thoughtfully; longer responses will not be scored more favorably than clear, focused ones. Proposals should include:

1. **Organization Overview - Suggested length:** 150–250 words total - Describe your organization's mission, core programs, and the communities and neighborhoods you serve. Please include how your organization supports survivors of domestic and/or sexual violence.
2. **Experience working with diverse communities - Suggested length:** 200–300 words total - Describe your organization's experience working with underserved survivor communities (e.g., BIPOC, LGBTQ+, immigrant, limited-English-proficient, undocumented, or other marginalized populations). How does your organization approach culturally responsive, survivor-centered services?
3. **Past experience with referral partnerships or cross-system collaboration - Suggested length:** 400–500 words total - Describe one past or current referral partnership or cross-system collaboration (formal or informal) your organization has participated in (e.g., with a City agency, healthcare provider, school, housing provider, or another system partner).
 - Based on your experience, what are the three most critical factors for ensuring successful, survivor-centered referral partnerships? Applicants are not expected to design new referral

systems or preform project work as part of this proposal. Please include your organization's policy and procedures related to confidentiality and survivor consent.

4. **Data Collection - Suggested length:** 300-500 words total- How does your organization currently approach tracking referrals, services, or client data (e.g., spreadsheets, case management systems, databases, or other methods)? If selected, how would your organization build, adapt, or strengthen data tracking and reporting capacity to meet DSG's reporting expectations? (Funding may be used to support case management or data systems.) *DSG recognizes that organizations may be at different stages of data infrastructure development.*
5. **Provide a proposed budget** (up to **\$45,000**) and brief budget narrative describing how funds will be used to support referral coordination, survivor support, data tracking, training participation, and related allowable costs.
6. **Reference or Letter of Support.** Required attachment. Provide one reference or letter of support from a partner organization, funder, or system collaborator familiar with your organization's DV/SV work and collaborative approach.

Period of Performance and Location

The effective date of providing the required product and services shall be from date of contract execution through **September 30th 2026**. The contract timeline may be adjusted and extended depending on funding availability and the project needs, subject to the same terms and conditions for each renewal period. BPHC reserves the right to cancel this RFP.

Location: On-site or Remote (via Zoom, phone, e-mail, etc.) or pending changes in public health guidance.

BPHC will fund up to 2 entities up to \$45,000 per entity.

Selected vendor will be required to enter into the BPHC's Agreement and complete required form (this includes a CORI) prior to the start day of the contract. The contract(s) resulting from this RFP shall be in effect when all necessary contract documentation is fully executed by BPHC and awarded vendor(s).

Submission Instructions

Submit proposal by **February 23rd 2026, 11:59 PM EST** via email to RFR@bphc.org

Subject Line – *Referral Pathways Between the CoB and Community-Based DV/SV Orgs*

NO EXCEPTIONS TO THIS DEADLINE