

Lake Cumberland Area Development District, Inc.

P.O. Box 1570, Russell Springs, Kentucky 42642-1570

WAYLON WRIGHT
Executive Director

MAYOR EDDIE THOMAS
Chairman

Ph: (270) 866-4200
FAX: (270) 866-2044
TDD: 1-800-648-6056

REQUEST FOR PROPOSAL

Seeking Additional Home Modifier for the Older Adults Home Modification Program

The Lake Cumberland Area Development District (LCADD) is releasing this Request for Proposals (RFP) to retain the services of an additional Home Modifier for the Older Adults Home Modification Program (OAHMP). The Home Modifier will perform minor home repairs and modifications for low-income senior clients through the end of the current grant period, September 30th, 2025. At this time, LCADD is seeking a Home Modifier that can primarily serve McCreary and Wayne Counties.

Interested applicants can download the full Request for Proposal (RFP) submission packet on LCADD's website at www.lcadd.org. Submission packets can also be sent via email by contacting paige.coe@lcadd.org. Lastly, paper copies of the submission packet can be picked up at LCADD's office located at 2384 Lakeway Drive, Russell Springs, KY, 42642.

All Requests for Proposals (RFP) must be received by December 31st, 2024 at 4:00PM Central.
Proposals can be submitted by:

- **Mail:** Address to Lake Cumberland ADD, Attn: Paige Coe, PO Box 1570, Russell Springs KY 42642.
- **Email:** Send to paige.coe@lcadd.org with subject "OAHMP Proposal."
- **In Person or Courier Delivery:** Our address is 2384 Lakeway Dr, Russell Springs KY, 42642.

Proposals will be evaluated based on criteria that includes but is not limited to the individual's proximity to the OAHMP's service area, particularly McCreary and Wayne Counties; years of home modification experience; and ability to produce proof of insurance and any applicable state or local licenses, if necessary. LCADD reserves the right to reject any and all responses.

The Lake Cumberland Area Development District is an Equal Opportunity Employer (EOE).



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Web-Site Address - <https://lcadd.org>
Equal Opportunity Provider



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POSITION TITLE: Home Modifier

POSITION DESCRIPTION:

The Home Modifier will be responsible for completing approved home modifications as ordered by the Program Manager. The Home Modifier will work closely with the Program Manager to identify modification products and methods to best meet the client's needs while remaining within the program's scope of work and budgetary limitations.

The Home Modifier will complete the ordered modifications in a timely manner. Upon completion, the Program Manager will review the home to ensure satisfaction of program requirements. Once approved, the Program Manager will authorize release of funds. If the Program Manager has any concerns after the work order is inspected, the Home Modifier will be asked to address those issues before the Program Manager can approve the unit.

The type of minor modifications and repairs that the Home Modifier may be asked to perform include, but are not limited to: exterior lighting, building access ramps, installing railings and grab bars, repairing uneven flooring and walkways, tub-cuts for ease of entry, installation of comfort-height toilets, drywall patching, and more.

REQUIREMENTS & QUALIFICATIONS:

Applicant must be experienced in performing home modifications and repairs. Applicant must also be able to dedicate sufficient time to complete each project in a timely manner as agreed upon by the Program Manager and Home Modifier at time of client assignment.

Other requirements include:

- Home Modifier must participate in an onboarding process designed by LCADD Program and Administrative Staff before performing work on client homes. Onboarding will familiarize the Home Modifier with key program personnel, procedures, and policies.

- Home Modifier must be licensed, bonded, and insured – as applicable – in accordance with state and local requirements.
- Home Modifiers who will perform work on mobile and manufactured homes must be familiar with and follow state licensing requirements, if applicable.
- Home Modifiers must provide a one-year warranty period for all completed modifications.

ABOUT THE OAHMP:

The Lake Cumberland Area Development District received a \$740,000 grant from the Department of Housing and Urban Development (HUD) in 2021 to work with local Home Modifiers to provide low-cost, high-impact home modifications and repairs to low-income seniors in the 10-county Lake Cumberland region. These services are provided at no cost to eligible clients with program services paid fully through the grant funding received.

The OAHMP model relies upon the expertise of a licensed Occupational Therapist (OT) who serves as the Program Manager. The Program Manager/OT ensures that each home modification will adequately address the client's specific goals and needs to promote their full participation in daily life activities. The Program Manager/OT is trained to evaluate clients' functional abilities and their home environment to then use their knowledge of low-cost, high-impact environmental modifications and adaptive equipment to optimize a client's home environment for independence and safety.

Home modifications and repairs are carried out by Home Modifiers retained by the program to deliver services within the program area. The Program Manager works closely with the Home Modifiers to assign clients, create work orders, and provide final inspections upon job completion.

The OAHMP is also supported by an in-house Administrative Assistant at the Lake Cumberland Area Development District. The Administrative Assistant handles program marketing, client enrollment, customer service, grant reporting, invoicing and disbursement of payments, and other related administrative tasks.



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Request for Proposal

Older Adult Home Modification Program (OAHMP)

Declaration by Requester					
By signing below, I certify that all information provided herein is accurate and complete. If any of the information provided requires updating or has changed for any reason, I will immediately report the new information in writing LCAAAIL. I agree to abide by all applicable laws, regulations and international guidelines concerning health and personal information data sharing and disclosure. I furthermore declare full-understanding of the nature of this position which may include unintended exposure to COVID-19.					
Job Title : Home Modifier					
Current Job Title:					
Requester Details					
Requester's Full Name:					
Address:		Cell Phone #:			
City:		State:		Postal Code:	
Email:					
Contractor License Number (If available):					
Contractor Insurance Information (If available):					
Affiliated Organization(s):					
Requester Professional Details (If no information, indicate with N/A.)					
Special training/certificates regarding structural modifications:					



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Other Certificates: (Please list certifications and attach the copied documents.)

Please list any prior projects related to this position: (Please list applicable dates, project descriptions, outcomes, etc.)

How many years' experience do you have in housing and disability-related projects?
(Please list years and separate by project history.)



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Experience in product evaluation and selection for home modification projects:
(Please list experience(s) and separate by each experience.)

Experience working with other contractors (Includes, but not limit to, handy-worker, installation specialist, construction contractors and self-employed professionals): (Please be specific.)

Experience in project leading and organization:



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Experience in State and/or Federally funded projects?

Additional Information:

Significant travel is required within the ADDs 10-county area. Are you willing to commit to this?	
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Do you desire an hourly fee or per project flat fee? (Mileage is included)	
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Do you already own products (tools, etc.) to complete potential projects?	
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Is there any other information that you'd like to share?



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Authorization: (Please refer to the Declaration on Page 1.)

Signature: _____

Date: _____



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