

COUNTY OF ORANGE
Request for Qualifications for
On-Call Public Health Nurse

Introduction:

The County of Orange (“County”), by and through its Department of Health (“OCDOH”), seeks proposals from qualified, experienced offerors to serve as an on-call/after-hours public health nurse in the OCDOH’s Public Health Nursing Division (“PHN Division”).

Scope, Specifications and Qualifications:

1. Scope of Services. OCDOH is seeking a registered professional nurse (“RN”) to provide on-call nursing support services to its PHN Division as assigned by OCDOH including, but not limited to, the following (collectively, the “Services”):

(a) Assist OCDOH supervising public health nurses with after-hours (Monday – Friday, 5:01 p.m. through 8:59 a.m.) and weekend (5:01 p.m. Friday – 8:59 a.m. Monday) calls related to Rabies Post Exposure Prophylaxis (“PEP”) recommendations, communicable diseases, and home care patient issues.

(b) Review and process, using the Progres Software Health System, clinical documentation completed by OCDOH nursing staff pertaining to patients receiving services. Included in this review will be recommendations for changes, additions, and/or revisions to each individual clinician to ensure that documentation meets all requirements for standards of care, agency policies, and reimbursement, and communication with individual nurses to review required documentation as needed to improve deficiencies.

All Services will be provided on an on-call basis. The Services will be provided between the hours of 5:01 p.m. and 8:59 a.m. on certain designated weeks (Monday – Friday) and weekends (Friday – Monday) during the Contract Term (as that term is defined below) as directed by the PHN Division. The actual number of weeks and weekends during which the successful offeror will provide Services during the Contract Term is dependent upon the need of the PHN Division and, as such, cannot be stated at the time this RFQ is issued.

2. Minimum Qualifications. The successful offeror (“Consultant”) will possess the following qualifications:

- (a) Valid licensure as an RN in the State of New York; *
- (b) Current registration as an RN in the State of New York; *
- (c) Bachelor of Science in Nursing; *
- (d) Verifiable, satisfactory experience in public health and home health care; and
- (e) Verifiable, satisfactory supervisory experience in both public health and home health care.

(f) Proficiency in using the designated homecare EMR software system, which is currently the Progres Software Health System. **Please Note** that the software system utilized by OCDOH may change during the Contract Term (as that term is defined below), and Consultant will be required to take any and all steps necessary to become proficient in the new system within a reasonable timeframe.

*** A copy of a valid New York State RN license must be included in any submission offered in response to this RFQ.** During the Contract Term, Consultant must provide proof of the continued validity of such license to OCDOH immediately upon request. **A copy of a current RN registration certificate issued by the New York State Education Department must also be included with any submission offered in response to this RFQ.** During the Contract Term, Consultant must provide proof of continued registration to OCDOH immediately upon request. **Proof of award of Bachelor of Science Degree in Nursing must be included in any submission offered in response to this RFQ.**

Term

1. The County anticipates that the term of a contract awarded pursuant to this RFQ ("Contract") will be for one (1) year ("Contract Term"). The County reserves the right to extend the Contract for up to three (3) additional periods of one (1) year each at its sole option and under the same terms and conditions of this RFQ and the initial contract, unless alternate terms are specified in this RFQ and/or the contract for renewals/extensions (each, a "Renewal Term").

2. Upon expiration of the Contract Term or any Renewal Term, the Contract may be extended unilaterally by the County for an additional period of up to two (2) months upon the same terms and conditions as the initial contract including, but not limited to, quantities (prorated for such extension), prices, and delivery requirements. With the concurrence of the Consultant, the aforementioned extension may be for a period of up to three (3) months in lieu of the up to two (2) month period.

Pricing

For the satisfactory provision of Services, the County will pay Consultant as follows:

1. For Services provided between the hours of 5:01 p.m. and 8:59 a.m., regardless of day of the week, Consultant will receive a flat rate of Fifty-two and 50/100 (\$52.50) Dollars for the period commencing upon receipt of a phone call and ending two (2) hours thereafter ("First Two Hour Period"). Consultant must field all calls received during the First Two Hour Period to earn the aforementioned flat rate. After expiration of the First Two Hour Period, if any subsequent calls are received while Consultant is on-call, Consultant will be compensated at a flat rate Fifty-two and 50/100 (\$52.50) Dollars for each two (2)-hour period during which a call or calls are received (each, a "Subsequent Two Hour Period"). For clarification purposes, if Consultant does not perform Services after the expiration of the First Two Hour Period, or a Subsequent Two Hour Period, as applicable for the remainder of Consultant's on-call period, the Consultant is not entitled to further compensation.

2. For Services, other than those pertaining to calls as referenced in Section 1 above, provided between the hours of 9:00 a.m. and 5:00 p.m., Saturday and Sunday, County will pay Consultant at the rate of Thirty-five and 00/100 (\$35.00) Dollars per hour.

General Information

1. Pay to Play. Please be advised that this solicitation is subject to Orange County Local Law No. 13 of 2013, as amended, known as the "Pay-to-Play Law". Pay-to-Play Forms will be made available with this RFP. All Pay-to-Play Forms should be submitted with your Proposal, and will be required if you are awarded a contract. The Pay-to-Play Forms are required from the Vendor/Consultant (unless exempted by the law) prior to execution of a contract by the County.
2. Procurement Lobbying Law Restricted Period for Communications. Pursuant to New York State Finance Law §139-j and §139-k, this solicitation includes and imposes certain restrictions on communications between the County and an offeror during the procurement process. An offeror is restricted from contacting other than designated staff from the earliest notice of intent to solicit offers through final award and approval of the procurement contract by the County Executive ("Restricted Period") unless it is a contact that is included among certain statutory exceptions set forth in State Finance Law §139-j(3)(a). County employees are required to obtain certain information when contacted during the Restricted Period. The designated staff contact for this RFQ is Mary Marsh, Director of Patient Services, telephone number (845) 291-2330. Offerors responding to this RFQ must familiarize themselves with these State Finance Law requirements and will be expected to affirm that they understand and agree to comply on the Qualification Form.
3. Form of Contract. Consultant will execute a Contract in the same form as the template attached to this RFQ in the timeframe, if any, indicated in this RFQ.
4. Insurance Requirements. During the Contract Term, or longer if required, and except as otherwise provided herein, Consultant shall maintain, at its expense, liability insurance policies of the types and minimum coverages specified in the attached contract template. Certificates of insurance evidencing Consultant's compliance with these requirements shall be required prior to execution of a Contract by the County. Notwithstanding the foregoing, with in lieu Workers' Compensation and Disability Benefits insurance coverage, Consultant may submit a Certificate of Attestation of Exemption, Form CE-200 waiver form.

Submission of Qualifications.

1. A statement of qualifications, experience and references must be submitted to the attention of Mary Marsh, Director of Patient Services with the subject line "RFQ for Public Health Nurse" via facsimile to (845) 291-2380, or via email to mmarsh@orangecountygov.com. Submissions will be accepted on a continuous basis.
2. Unless otherwise noted below, one (1) signed original (as applicable to the document type) of each of the following items must be submitted in response to this RFQ:
 - a) **Completed and signed** Qualification Form.
 - b) **Qualifications and Experience:** Provide a brief history of offeror's experience in providing the Services sought in this RFQ, a current resume/C.V., and copy of all applicable certifications, licenses, etc. required to perform the Services in the State of New York, including a valid New

York State RN license and proof of current registration with the New York State Education Department. Each offeror must also provide verifiable proof of proficiency in the areas of public health and home health care, together with verifiable proof of supervisory experience in both areas.

- c) **References:** Provide the names and contact information for at least two (2) clients wherein the Services sought in this RFQ have been satisfactorily provided by offeror. References from New York government entities and agencies are preferred, but not required.
- d) Completed and signed **Disclosure of Non-Responsibility Determination** (copy of instruction page not required).
- e) Completed **Supplier Application Packet** (required prior to contract if offeror has not contracted with the County in the last twelve (12) months under its current name and identification number).
- f) Completed and signed **Pay-to-Play Forms**

Basis of Award

1. The award of any Contract pursuant to this RFQ may be made to the highest scoring offeror based upon the evaluation criteria and procedure described below. A score of 1 means the submission does not meet requirements/expectations; 2 means the submission minimally meets requirements/expectations; 3 means the submission meets requirements/expectations; 4 means the submission partially exceeds requirements/expectations; and 5 means the submission exceeds requirements/expectations. The evaluation criteria are as follows:

Qualifications & Experience	1-5
References	1-5

2. A submission in response to this RFQ implies an offeror’s acceptance of the evaluation criteria and acknowledgment that subjective judgments must be made in selecting a submission. The County reserves the rights to: waive any informality or reject any or all submissions, with or without advertising for new submissions, if deemed to be in the best interest of the County. The award of any Contract pursuant to this RFP may be made to the responsive, responsible Offeror whose proposal is determined to be in the best interest of the County and in accordance with New York General Municipal Law §104-b, taking into consideration the above-referenced criteria.

Questions. Questions can be submitted in writing to Mary Marsh, Director of Patient Services via email at mmarsh@orangecountygov.com or via facsimile to (845) 291-2380

QUALIFICATION FORM

Request for Qualifications for On-Call Public Health Nurse

Business Name:

Business Address:

Contact Person:

Name: _____ Phone: _____

Title: _____ Fax: _____

Email: _____

Does this business have a minority, women's, disadvantaged, or small business status? Yes No

If yes, please list the designation(s) and the certifying entity(ties): _____

The undersigned proposes to furnish and deliver the services described in the Request for Qualifications for On-Call Public Health Nurse and the responding submission to the County of Orange, at the pricing set forth in the Request for Qualifications. The individual offering this submission on behalf of his/her business entity, certifies by his/her signature below that:

- he/she understands and has complied with the requirements of State Finance Law Sections 139-j and 139-k and will continue to do so throughout the restricted period;
- he/she has read and understood the full Request for Qualifications cited above; and
- he/she is duly authorized to submit the proposal on behalf of the business entity noted above.

By: _____ Date: _____

Name: _____ Title: _____