

DESCHUTES COUNTY HEALTH SERVICES DEPARTMENT

REQUEST FOR QUALIFIED POOL FOR

MEDIATION SERVICES

SEPTEMBER 15, 2017

Deschutes County, a political subdivision of the State of Oregon, acting by and through the Deschutes County Health Services Department, Behavioral Health Divisions (DCHS), is releasing this competitive solicitation to secure one or more contractors to provide Mediation Services to Deschutes County residents mandated to mediate in contested divorce and custody cases. Candidates shall meet the minimum standards and qualify as Court Connected Domestic Relations Mediator per Oregon Chief Justice Rule 05-028 (<http://www.courts.oregon.gov/rules/Other%20Rules/05cER001sh.pdf>).

NOTE: All proposals submitted in response to this Request for Qualified Pool (RQP) shall become the property of Deschutes County and may be utilized in any manner and for any purpose by Deschutes County. **Be advised that proposals and all documents submitted in response to this RQP are subject to public disclosure as required by applicable state and/or federal laws.** If you intend to submit any information with your proposal which you believe is confidential, proprietary or otherwise protected from public disclosure (trade secret, etc.), you must separately bind and clearly identify all such material. The cover page of the separate binding must be red, and the header or footer for each page must provide as follows: "Not Subject to Public Disclosure." Where authorized by law, and at its sole discretion, Deschutes County will endeavor to resist disclosure of properly identified portions of the proposals.

Candidate shall submit one original and five (5) copies of the proposal in a sealed envelope that is clearly marked with the name and address of the proposing candidate or agency, titled "Mediation Services", and addressed to:

Janice Garceau
Deschutes County Health Services
2577 NE Courtney Drive
Bend, OR 97701

Proposals must be received no later than **4:00 p.m., on Friday, October 6, 2017** to be eligible for consideration. Submission and receipt of proposals by electronic means is not permitted. All costs associated with preparing and submitting a proposal is solely the responsibility of the proposer. This solicitation does not obligate Deschutes County to select any single proposer and Deschutes County reserves the right to cancel the procurement, reject any and all proposals, to retain all proposal materials in accordance with ORS 279B.100, and to use any material included in the proposal regardless of whether it is selected.

Questions concerning the proposal and/or the proposal process may be directed to Janice Garceau via email to janice.garceau@deschutes.org.

I. INTRODUCTION

The purpose of this Request for Qualified Pool (RQP) is to execute a contract or contracts with one or more individuals and/or agencies who are qualified to provide Mediation Services as a Court Connected Domestic Relations Mediator per Oregon Chief Justice Rule 05-028. Proponents shall meet education, training and experience requirements as outlined in this RQP.

Contingent upon approval by the Deschutes County Board of Commissioners, DCHS intends to award one (1) or more contracts to the responsible Proponent(s) whose proposal is determined to be the most responsive to the requirements of this RQP. The term of the resulting contract(s) is estimated to begin on or about December 1, 2017 and terminate June 30th 2018, with DCHS retaining sole discretion to renew for additional one (1) year terms, without a competitive bid process, subject to contractor performance and continued funding.

Candidates must complete and provide evidence of submitted application for court mediators:
http://www.courts.oregon.gov/Multnomah/docs/CivilCourt/Mediation_MediatorApplicationForm.pdf

The estimated amount of contract compensation may range from \$10,000 to \$18,000 based upon contractor's services, fee schedule, and subject to funding and an approved budget by DCHS. Candidate will be expected to furnish current insurance certificates as outlined in Attachment 2 of this RQP and provide a copy of applicable certifications with submission.

II. QUALIFICATIONS AND SCOPE OF SERVICES

Successful Proponent shall provide professional Mediation Services to families of Deschutes County who are mandated to mediate contested divorce and custody cases. Such services include orientation to mediation, screening and intake, mediation sessions, drafting of mediated agreements, and documentation of mediation completion for Deschutes County District Court. Services may be provided by contractor in person, by phone and written documentation, as needed by DCHS.

Selected contractor shall be expected to meet the following education, training and experience requirements:

- 1. Education Requirements.** Qualify as Court Connected Domestic Relations Mediator per Oregon Chief Justice Rule 05-028 (referenced at <http://www.courts.oregon.gov/rules/Other%20Rules/05cER001sh.pdf>). Include a copy of applicable Degree(s) with proposal.
 - A. Professional or Advanced Degree: JD, MSW, MA, PhD, etc..
 - B. Bachelor's Degree in a Behavioral Science field and at least seven (7) years full time equivalent post-bachelors experience in providing social work, mental health, or conflict resolution services to families.
- 2. Training Requirements.** Include a copy of documented training with proposal.
 - A. Basic Mediation Training (minimum 32 hours).
 - B. Advanced Domestic Relations Mediation Training (minimum 36 hours).
 - C. Court Systems Training (minimum 8 hours).
- 3. Experience Requirements.** Candidate must be able to provide evidence of experience in one (1) of the following areas:
 - A. Participation in a minimum of twenty (20) mediation cases including a total minimum of one hundred (100) hours of domestic relations mediation supervised by or co-mediated with a person qualified as a domestic relations custody and parenting time mediation supervisor. At least ten (10) cases and fifty (50) hours of supervised cases must be in domestic relations custody and parenting mediation. At least three (3) domestic relations custody and parenting mediation cases must have direct observation by the qualified supervisor.

OR

 - B. A minimum of two (2) years full time equivalent experience in any of the following: mediation, direct therapy or counseling experience with an emphasis on short-term problem solving, or as a practicing attorney handling a domestic relations or juvenile caseload. Candidate must have:
 - Participated as a mediator or co-mediator in a minimum of ten (10) cases including a minimum of fifty (50) hours of domestic relations custody and parenting mediation; and
 - Provide evidence of understanding court-connected domestic relations program(s).
- 4. Additional Experience Requirements.** Candidates who can provide evidence of the following additional experience may be ranked higher when DCHS evaluates proposals:
 - A. Provide proof of experience with and/or specific training in:
 - Divorce and separation issues as they impact parents and children;
 - Domestic violence and child abuse;
 - Substance use and mental health disorders and how they impact safety concerns of parents;
 - High conflict parent dynamics;
 - Conflict resolution and de-escalation principles;

- Co-parenting models and coaching principles;
- Domestic relations law;
- Development of written parenting plans;
- Applicable continuing education credits/certification;
- Family and child development principles.

B. Fluent in both spoken and written Spanish language.

C. Ability to provide a safe, professional space for mediation services, including capacity to maintain confidential mediation records and conduct shuttle mediation either by telephone or in person at no additional cost to DCHS or parents attending Mediation.

5. Scope of Services.

- A. Candidate must be willing to participate in DCHS program requirements including but may not be limited to:
- Provision of mediation with safety parameters as outlined in the Oregon DV Screen for Mediators Safety Plan document: <http://www.wicsec.org/wp-content/uploads/2014/10/W-45-Oregon-DVSM-Questionnaire.pdf>; and <http://www.wicsec.org/wp-content/uploads/2014/10/W-45-Oregon-DV-Screening-Tool-for-Mediators-Instructions.pdf>.
- B. Provide the following Mediation Services within a schedule agreed upon between DCHS, contracted Mediator and parents/family:
- Parent/family orientation to mediation;
 - Screening and intake activities;
 - Mediation sessions;
 - Drafting of mediated agreements;
 - Completion of County Mediation Program documentation as required (reporting/record keeping);
 - Uphold Court Connected Mediator Ethics listed in Section 1.4 of Court Connected Mediator Qualification Rules;

III. PERIOD OF SERVICE

A contract is expected to be awarded for the period **December 1, 2017 through June 30, 2018**. The contract may be renewed for additional years. Should a new contract be awarded for subsequent years, DCHS reserves the right to award a new contract with the selected contractor for this service without the need for further competitive procurement, subject to approval by Deschutes County Board of Commissioners, DCHS, the availability of sufficient funds and satisfactory performance by the contractor.

IV. PAYMENT PROVISIONS AND RATES

The estimated amount of contract compensation is expected to range between \$10,000 to \$18,000 and is subject funding and the specific services provided by selected Proponent(s). It is expected that the selected Proponent will submit a fee schedule for all services that may be contracted by DCHS.

V. INSTRUCTIONS AND CONDITIONS

Proposals must be signed by the Proponent or an authorized representative. Proponents shall include a copy of a Board Resolution authorizing a representative of its organization to sign the proposal and/or subsequent contract. This RQP does not commit DCHS to award a contract or to pay any associated cost. The proposal preparation cost is solely the responsibility of the Proponent.

Proposals are not to be marked as confidential or proprietary. Proposals submitted in response to an RQP are subject to public disclosure as permitted by Oregon State regulations. Additionally, all proposals shall become the property of DCHS. DCHS reserves the right to make use of any information or ideas in the proposals submitted.

REGARDLESS OF IDENTIFICATION OTHERWISE, INCLUDING MARKING SOME OR ALL OF THE PAGES AS “CONFIDENTIAL” OR “PROPRIETARY”, INFORMATION IN PROPOSALS SHALL BECOME PART OF THE PUBLIC RECORD AND SUBJECT TO DISCLOSURE WITHOUT FURTHER NOTICE TO THE PROPONENT. Proposals should not include personal identifier information in resumes or other documents such as social security numbers, dates of birth,

criminal clearance documents, etc. DCHS shall not in any way be liable or responsible for the disclosure of any such records.

Any proposal may be rejected if it is conditional, incomplete, or deviates from specifications in this RQP. By submitting a proposal, the Proponent agrees to meet all the requirements set forth in the RQP, unless specific exceptions are noted in Attachment 1 (Agency Summary). DCHS reserves the right to accept any part of the proposal and not be obligated in any way to accept those parts that do not meet with the approval of DCHS. DCHS reserves the right to waive, at its discretion, any procedural irregularity, immaterial defect or other impropriety not warranting rejection of the proposal. Any waiver will not excuse a Proponent from full compliance if awarded a contract. Reasons for rejecting any proposal will be supplied to the Proponent. **DCHS, in its sole discretion, reserves the right to modify or cancel this RQP in whole or in part. If modification or cancellation is determined to be in DCHS' best interest, all Proponents will be notified in writing of the specific reasons for such modification or cancellation.**

DCHS reserves the right to seek additional proposals beyond the final submission date, if, in DCHS' sole discretion, the proposals received do not meet with the approval of DCHS.

Proposals must be valid for a minimum of one hundred twenty (120) days from the due date of this RQP.

VI. TENTATIVE SCHEDULE OF EVENTS

Proponents must follow the instructions and conditions detailed in this RQP. Proposals that do not conform may be excluded from further review.

- | | |
|---|---------------------------------|
| • Request for Qualified Pool is released. | September 15, 2017 |
| • Proposals are due. | October 6, 2017, 2017 |
| • Proposals are evaluated. | October 9 through October 13 |
| • Discussions are conducted with top ranking candidates, if needed. | October 16 through October 20 |
| • Contract for services is developed. | October 23 through November 3 |
| • Contract is signed and executed. | November 6, 2017 to November 30 |
| • Contracted services commence. | December 1, 2017 |

DCHS anticipates that it will announce the results of this RQP process October 23, 2017. DCHS and the selected Proponent(s) will then negotiate terms and sign a legally-binding contract by December 1, 2017. Proposals must be submitted as described above no later than 4:00 p.m. on October 6, 2017 ("Due Date"). Proposals received after that time will be considered late and may be returned unopened.

Proposals will be opened in a manner that avoids disclosure of contents to competing proposers. Immediately following the receipt date, a list of the submitting proposers will be available by request. A register of all proposals received will be prepared and available for public inspection after a contract is awarded.

VII. WITHDRAWAL OF PROPOSALS

Proposals may be withdrawn by written or faxed request received from the Proponent(s) prior to the Due Date. Negligence on the part of the Proponent in preparing the proposal confers no right for the withdrawal of the proposal after it has been opened. The proposal will be irrevocable until such time as DCHS specifically cancels the procurement, rejects the proposal, or awards a contract(s).

VIII. ACCEPTANCE OR REJECTION PROPOSALS

In awarding a contract(s), DCHS will accept and consider the proposal or proposals which, in the estimation of DCHS, will best serve the interests of Deschutes County and Central Oregon. DCHS reserves the right to award a contract to the Proponent(s) whose proposal is most advantageous to Deschutes County based upon the evaluation process and evaluation criteria contained within this RQP. DCHS reserves the right to accept or reject any or all proposals. Any proposal which DCHS judges to be incomplete or nonconforming may be rejected. Any evidence of collusion between proposers may constitute a cause for rejection of any proposals so affected.

IX. SELECTION PROCESS

The Selected Proponent(s) must be able to demonstrate meeting the requirements outlined in Section II. "QUALIFICATIONS AND SCOPE OF SERVICES".

All proposals will initially be screened by DCHS staff. All proposals submitted by the RQP due date will be subject to a standard review process. An initial review of each proposal will be conducted by DCHS staff to determine if it is complete, in the required format, and in compliance with all requirements of this RQP. Failure to meet all of these requirements may result in a rejected proposal.

Each proposal that passes the initial review will be evaluated and scored by a review panel. The process may include a panel interview with the applicant agency. The review panel will evaluate and score each proposal on the basis of a 100-point scale, using the assigned weights listed below.

Evaluation Criteria	Point Value
How thoroughly the proposal demonstrates an understanding of the work to be performed.	10
Technical experience.	75
Demonstrated ability to provide similar services for public agencies and/or health care organizations	10
Creativity and innovation.	5
Total	100 Points

Narrative responses to each section of the application, any required attachments and the completed budget forms will be reviewed to determine compliance with the requested information and the feasibility and reasonableness of proposed program design, cost, and expected outcomes. Each evaluation criterion is described in full in Section XII., "Submission Package".

X. PROTEST OF AWARD

After DCHS approves and selects the Proponent(s), DCHS will notify each Proponent of who DCHS intends to award a contract. If no written protest is filed by 4:00 p.m. on the seventh (7) day following announcement of the decision, the award(s) will be deemed final. DCHS will not entertain protests submitted after this time period. The written protest must specify the grounds and legal authority upon which the protest is based. If a timely protest is filed, the decision of DCHS will be considered final only upon issuance of a written notice deciding the merit of the protest. The award and any written decision regarding the protest will be sent to each proposer. Protests should be submitted to:

Janice Garceau
 Deschutes County Health Services
 2577 NE Courtney Drive
 Bend, OR 97701

The protest shall state the reason for the protest, citing the law, rule, regulation, or practice on which the protest is based. A written response will be sent to the protester within ten (10) working days after receipt of the written protest.

XI. AWARD AND COMMENCEMENT OF WORK

Recommendation for award is contingent upon successful negotiation of the contract and resolution by DCHS of any protests. The successful Proponent(s) shall be required to sign the negotiated contract, which will be in the form and content approved by DCHS.

The final authority to award a contract(s) rests solely with DCHS. The successful Proponent(s) shall not be allowed to begin work under any negotiated contract until such time as the contract has been approved and executed by DCHS. The successful Proponent(s) must agree to all terms, insurance coverage provisions, and conditions of the contract with Deschutes County.

If only one proposal is received and it is deemed that such proposal meets requirements for funding, Deschutes County reserves the option to award such entity a contract on a sole-source basis. In the event no proposals are received, or proposals received do not meet requirements for funding under this RQP or designate another qualified entity to operate the program on a sole-source basis.

If revisions or additional information to this RQP become necessary, DCHS will post the addenda or supplements on the Deschutes County website.

As referenced in Attachment 2 of this RQP, the selected Proponent will need to submit evidence of the following insurance requirements prior to execution of the contract:

1. Commercial General Liability "occurrence" coverage, naming **Deschutes County, the State of Oregon, their officers, agents, employees and volunteers as an additional insured**, in the minimum amount of \$2,000,000 combined single limit (CSL) bodily injury & property damage each occurrence and \$4,000,000 aggregate, including personal injury, broad form property damage, products/completed operations, broad form blanket contractual and \$50,000 fire legal liability.
2. Professional Liability coverage in the minimum amount of \$2,000,000 combined each occurrence and \$4,000,000 aggregate, for damages caused by error, omission, or negligent acts related to professional services provided under the contract. The policy must provide extended reporting period coverage, sometimes referred to as "tail coverage" for claims made within two (2) years after the contract work is completed.
3. Commercial Automobile Liability coverage in the minimum amount of \$1,000,000 CSL bodily injury & property damage, including owned, non-owned, and hired automobiles. Also to include Uninsured/Underinsured Motorists coverage in the minimum amount of \$100,000 when there are owned vehicles. Contractor must have on file evidence of auto insurance in the minimum amount of \$100,000 CSL bodily injury & property damage for all employees and volunteers associated with the contract.
4. Workers' Compensation coverage, including a Waiver of Subrogation in full compliance with Oregon statutory requirements, for all employees of Contractor and Employer's Liability in the minimum amount of \$1,000,000.

Misrepresentation during the procurement or contracting process in order to secure the contract will disqualify a bidder or contractor from further consideration in the procurement or contracting process. Failure to comply with contract requirements once a contract has been awarded will constitute a material breach of the contract and may result in the suspension or termination of the affected contract and debarment from future Deschutes County contracting opportunities for a period not to exceed three (3) years. Other penalties may also apply.

As applicable, the selected Proponent shall also submit to DCHS prior to contract award the following documents:

- Articles of Incorporation or business license;
- Applicable Certifications, Degree(s) and/or licenses;

XII. SUBMISSION PACKAGE

Applications submitted in response to this RQP must include the items and be in the order as listed below. All of the items combined comprise your completed proposal pursuant to this RQP.

1. Signed Proposal Response Form-**Attachment 1**
2. Signed Acknowledgement of Insurance Requirements – **Attachment 2**
3. Executive Summary: Please complete as directed. **Attachment 3**
4. Narrative Section: Prepare a written response to the narrative section that fully addresses each of the evaluation criteria listed. The narrative must be typed in 12 point font, one inch margins, 8½" x 11", paginated, on white paper. Narrative section is limited to eight (8) pages. **Attachment 4**

It is the responsibility of the Proponent to ensure the proposal is submitted by the time and date and to the location as specified. Postmarks will not be accepted in lieu of this requirement. Therefore, use of the U.S. Mail is at the bidder's own risk. Proposals submitted to any other office will not be accepted.

To be considered for this RQP, all proposals submitted must be received no later than 4:00 p.m. on October 6, 2017 ("Due Date") with one complete application package with original signature and five (5) copies, either delivered in person or mailed to:

Janice Garceau
Deschutes County Health Services
2577 NE Courtney Drive
Bend, OR 97701

DESCHUTES COUNTY HEALTH SERVICES DEPARTMENT

**REQUEST FOR QUALIFIED POOL
FOR**

MEDIATION SERVICES

Proposal Response Form

Submit by e-mail to: Janice.garceau@deschutes.org

A signature on this form acknowledges that the proposer is hereby submitting a proposal in response to Deschutes County's Request for Qualified Pool for Mediation Services.

Authorized Signature: _____

Contact Name: _____

Title: _____

Phone: _____ Email: _____

Company Name: _____

Company Address: _____

Attachment 2 - ACKNOWLEDGEMENT OF INSURANCE REQUIREMENTS

Contractor shall at all times maintain in force at Contractor's expense, each insurance noted below. Insurance coverage must apply on a primary or non-contributory basis. All insurance policies, except Professional Liability, shall be written on an occurrence basis and be in effect for the term of the contract. Policies written on a "claims made" basis must be approved and authorized by Deschutes County.

Workers Compensation insurance must be in compliance with ORS 656.017, which requires all employers that employ subject workers, as defined in ORS 656.027, to provide workers' compensation coverage for those workers, unless they meet the requirement for an exemption under ORS 656.126(2).

Professional Liability insurance with an occurrence combined single limit of not less than:

Per Occurrence limit	Annual Aggregate limit
<input type="checkbox"/> \$1,000,000	<input type="checkbox"/> \$2,000,000
<input checked="" type="checkbox"/> \$2,000,000	<input checked="" type="checkbox"/> \$4,000,000
<input type="checkbox"/> \$3,000,000	<input type="checkbox"/> \$5,000,000

Professional Liability insurance covers damages caused by error, omission, or negligent acts related to professional services provided under the contract. The policy must provide extended reporting period coverage, sometimes referred to as "tail coverage" for claims made within two years after the contract work is completed.

Required by County Not required by County (one box must be checked)

Commercial General Liability insurance with a combined single limit of not less than:

<u>Per Single Claimant and Incident</u>	<u>All Claimants Arising from Single Incident</u>
<input type="checkbox"/> \$1,000,000	<input type="checkbox"/> \$2,000,000
<input checked="" type="checkbox"/> \$2,000,000	<input checked="" type="checkbox"/> \$4,000,000
<input type="checkbox"/> \$3,000,000	<input type="checkbox"/> \$5,000,000

Commercial General Liability insurance includes coverage for personal injury, bodily injury, advertising injury, property damage, premises, operations, products, completed operations and contractual liability. The insurance coverages provided for herein must be endorsed as primary and non-contributory to any insurance of County, its officers, employees or agents. Each such policy obtained by contractor shall provide that the insurer shall defend any suit against the named insured and the additional insureds, their officers, agents, or employees, even if such suit is frivolous or fraudulent. Such insurance shall provide County with the right, but not the obligation, to engage its own attorney for the purpose of defending any legal action against County, its officers, agents, or employees, and that contractor shall indemnify County for costs and expenses, including reasonable attorneys' fees, incurred or arising out of the defense of such action.

Required by County Not required by County (One box must be checked)

Automobile Liability insurance with a combined single limit of not less than:

Per Occurrence

\$500,000

\$1,000,000

\$2,000,000

Automobile Liability insurance includes coverage for bodily injury and property damage resulting from operation of a motor vehicle. Commercial Automobile Liability Insurance shall provide coverage for *any* motor vehicle (symbol 1 on some insurance certificates) driven by or on behalf of Contractor during the course of providing services under this contract. Commercial Automobile Liability is required for contractors that own business vehicles registered to the business. Examples include: plumbers, electricians or construction contractors. An Example of an acceptable personal automobile policy is a contractor who is a sole proprietor that does not own vehicles registered to the business.

Required by County Not required by County (one box must be checked)

Additional Insured. The Commercial General Liability insurance and Automobile Liability insurance must include the Deschutes County, the State of Oregon, their officers, employees, volunteers and agents as Additional insureds but only with respect to Contractor's activities to be performed under this Contract. Coverage must be primary and non-contributory with any other insurance and self-insurance. The additional insured endorsement shall not include declarations that reduce any per occurrence or aggregate insurance limit. The Contractor shall provide additional coverage based on any outstanding claim(s) made against policy limits to ensure that minimum insurance limits required by the County are maintained. The additional insurance protection shall extend equal protection to County as to Contractor or subcontractors and shall not be limited to vicarious liability only or any similar limitation. To the extent any aspect of this Paragraph shall be deemed unenforceable, then the additional insurance protection to County shall be narrowed to the maximum amount of protection allowed by law.

Additional Requirements. Contractor shall pay all deductibles and self-insured retentions. A cross-liability clause or separation of insured's condition must be included in all commercial general liability policies required by this Contract. Contractor's coverage will be primary in the event of loss.

Certificate of Insurance Required. Contractor shall furnish a current Certificate of Insurance to the County with the signed Contract. Contractor shall notify County in writing at least thirty (30) days in advance of any cancellation, termination, material change, potential exhaustion of aggregate limits of, non-renewal of the required insurance coverage(s) or reduction of limits of the insurance coverage. The Certificate shall also state the deductible or, if applicable, the self-insured retention level. Contractor shall be responsible for any deductible or self-insured retention. If requested, completed copies of insurance policies shall be provided to County. The certificate(s) or an attached endorsement must specify: i) all entities and Individuals who are endorsed on the policy as Additional Insured; and ii) for insurance on a "claims made" basis, the extended reporting period applicable to "tail" or continuous "claims made" coverage.

Tail Coverage. If any of the required insurance policies is on a "claims made" basis, such as professional liability insurance, Contractor shall maintain either "tail" coverage or continuous "claims made" liability coverage, provided the effective date of the continuous "claims made" coverage is on or before the effective date of this Contract, for a minimum of twenty-four (24) months following the later of : (i) Contractor's completion and County 's acceptance of all Services required under this Contract or, (ii) the expiration of all warranty periods provided under this Contract. Notwithstanding the foregoing twenty-four (24) month requirement, if Contractor elects to maintain "tail" coverage and if the maximum time period "tail" coverage reasonably available in the marketplace is less than the twenty-four (24) month period described above, then Contractor may request and OHA may grant approval of the maximum "tail" coverage period reasonably available in the marketplace. If OHA approval is granted, the Contractor shall maintain "tail" coverage for the maximum time period that "tail" coverage is reasonably available in the marketplace.

I certify that I acknowledge the above insurance information as a requirement to enter into a contract with Deschutes County. I also certify that the Agency carries the required insurance limits as stated in this Exhibit or can, if selected as a result of this RFQP, obtain the required insurance and provide proof of the required insurance certificates prior to signature and execution of the contract.

Signature: _____

Date: _____

Printed Name and Title: _____

Attachment 3 – EXECUTIVE SUMMARY (if consortium, please fill one out for each business entity).

1. Proposers Legal Name

Firm Name	
Address	
Telephone	

2. Briefly summarize your program design:

3. Chief Executive Contact

Name of Chief Executive	
Title	
Telephone	
E-mail Address	

4. Primary Application Contact

Name of Primary Contact	
Title	
Telephone	
E-mail Address	

5. Legal Status Information

Federal Employer Tax Identification or Social Security Number	
Oregon Tax I.D. Number	

An unsigned proposal will be rejected

I certify that the information provided in this proposal is true and correct to the best of my knowledge and that I have been duly authorized by applicants governing body or other authority to file this proposal. This proposal is submitted as firm and fixed offer valid for one hundred twenty (120) days of the submission date.

Signature: _____

Date: _____

Printed Name and Title: _____

Attachment 4 – NARRATIVE

Please provide a written response to each section. Your application proposal will be reviewed and scored according to the following evaluation criteria. All proposals will be reviewed for demonstrated capacity to provide the services/activities sought through this solicitation.

1. Letter of Introduction (5 Points)

Letter of introduction including a brief description of qualifications, experience and skills to provide domestic relations mediation services as described in this RQP. Include names and resumes of all staff that may be providing services if your proposal includes services provided by staff in your employment or under your direct supervision

2. References (10 Points)

A list of at least two (2) references from public agencies and/or professional colleagues who have direct knowledge of your work with domestic relations mediation cases.

3. Proposed Scope of Work/Description of Services (Outcomes) (30 Points)

Briefly describe how you meet each of the requirements listed in section II.1 through 4 of this RQP. If you do not meet a particular requirement, provide information about any other relevant training or experience that relates to the specific requirement area.

4. Special Populations (30 Points)

Briefly describe your experience providing mediation services to participants dealing with the following concerns. Be specific about how you protect participant safety, address power imbalances and maintain impartiality when the following issues arise in mediation.

- a) Intimate Partner Violence
- b) Child Safety Concerns
- c) Substance Use and Mental Health Concerns

5. Fee Schedule (25 Points)

Fee schedule for professional services. Schedule should include hourly rates for the following:

- a. Orientation to mediation
- b. mediation sessions
- c. drafting of written custody and parenting time plans

Total Points 100