**Attachment D – Proposal Forms**

**Proposer is to complete each of the Tabs 1 – 12 herein, and Attachment E (Tab 13), and submit per the instructions provided in the RFP. Any Exhibits provided by the Proposer are to be inserted at the end of each applicable tab. Proposers are permitted to make changes to the footers, and necessary formatting changes to tables, to optimize the presentation of information.**

**Proposer** **is instructed to organize Proposal in a tabbed format, and to insert the completed tab forms (Attachment D) in the corresponding tabs as a part of their Proposal response**. In addition to the information captured through the questions and tables in Attachment D, Proposer is requested to provide complementary narrative information, diagrams, and images to help substantiate and support their proposal response to each tab section. Any such information may be provided in Proposers preferred formatting/branding.

| **Proposal Tab No.** | **Proposal Section** | **Requested Page Limits**   1. **Includes tables as part of Attachment D** 2. **Excludes requested Exhibits** |
| --- | --- | --- |
| **Tab 1** | Company Introduction and Relevant Experience | Not to exceed eight (8) pages |
| **Tab 2** | Software Solution | Not to exceed thirteen (13) pages |
| **Tab 3** | Project Approach and Implementation Methodology | Not to exceed twelve (12) pages |
| **Tab 4** | Key Proposed Personnel and Team Organization | Not to exceed three (3) pages |
| **Tab 5** | Project Schedule | Not to exceed three (3) pages |
| **Tab 6** | System and Application Architecture | Not to exceed five (5) pages |
| **Tab 7** | Software Hosting | Not to exceed six (6) pages |
| **Tab 8** | Testing and Quality Assurance Plan | Not to exceed three (3) pages |
| **Tab 9** | Training Plan | Not to exceed five (5) pages |
| **Tab 10** | References | Not to exceed seven (7) pages |
| **Tab 11** | Sample Contracts, Warranty, and Escrow | Not to exceed two (2) pages |
| **Tab 12** | Exceptions to Project Scope and Contract Terms | No limit |
| **Tab 13** | Functional and Technical Requirements Response (Attachment E) | Not Applicable |
| **Supplements** | Any Proposer-submitted materials or documentation not specifically requested through this RFP may be included as Supplements to the Proposal in a separately marked “Supplements” tab of the proposal. | The CCPH requests that any supplements be kept to a bare minimum as deemed essential by the Proposer. |

# Tab 1 – Company Introduction and Relevant Experience

1. TRANSMITTAL CERTIFICATION

By signature on the Proposal, the Respondent certifies that it complies with:

1. The laws of the State of Washington and is licensed or qualified to conduct business in the State of Washington
2. All applicable local, state, and federal laws, codes, and regulations
3. All terms, conditions, and requirements set forth in this RFP
4. A condition that the Proposal submitted was independently arrived at, without collusion
5. A condition that the offer will remain open and valid for the period indicated in this solicitation; and any condition that the firm and/or any individuals working on the contract do not have a possible conflict of interest
6. The following Non-Collusion Affirmations

* I affirm that I am the Respondent, a partner of the Respondent, or an officer or employee of the Respondent’s corporation with authority to sign on the Respondent’s behalf.
* I also affirm that the attached has been compiled independently and without collusion or agreement, or understanding with any other Vendor designed to limit competition.
* I hereby affirm that the contents of this Proposal have not been communicated by the Respondent or its agent to any person not an employee or agent of Clark County.

If the Respondent fails to comply with the provisions stated in this paragraph, the County reserves the right to reject the Proposal, terminate the contract, or consider the Respondent in default.

#### Table 1-01: Transmittal Certification and Primary Contact Information

| **Field** | **Response** |
| --- | --- |
| Name of the Respondent Representative |  |
| Title |  |
| Name of Company |  |
| Address |  |
| Telephone Number |  |
| Email Address |  |
| Signature of Authorized Officer of the Firm |  |
| *A signature provides the County with the Respondent’s acknowledgement and acceptance of the RFP terms, requirements, and conditions, and the execution of same during the discharge of any succeeding contract.* | |

1. TRANSMITTAL LETTER

A Transmittal Letter, printed on letterhead, shall be submitted and signed by an authorized representative of the Respondent, such as the owner, partner, or in the case of a corporation, the President, Vice President, Secretary, or other corporate officer(s) that address the following:

1. A statement naming the Respondent (legal name and if corporation, whether corporation has corporate seal) and stating the type of entity for the Respondent and any joint Respondent or subcontractor (e.g., corporation, limited liability company, partnership, sole proprietor, etc.)
2. A statement of acknowledging that all addenda to this Request for Proposal have been reviewed by the Respondent; and
3. A statement disclosing whether or not the proposal contains confidential information, trade secrets, or other proprietary data the Respondent does not want to be subject to public inspection.
4. COMPANY BACKGROUND AND HISTORY
5. Proposer to provide a comprehensive history statement of the firm, including any mergers, assignments, or other corporate changes during the past 10 years.

1. Proposer shall complete the Company Background and History Table as provided below.

If a partnership with third-party company is a part of the Proposal, the Company Background and History table shall be provided for each entity. It is expected that all points shall be addressed for each company involved in the Proposal, prime or third party. Proposer to copy the table as needed for each Partner/Third-Party Firm proposed and fill out for each.

#### Table 1-02: Company Background and History

| **Metric** | **Response** |
| --- | --- |
| Name of Proposer: |  |
| (*Copy form and Complete if applicable for each)*  **Name of Partner/Third-Party Firm:** |  |
| Total number of employees |  |
| Type and number of employees committed to the product and support being proposed |  |
| Office locations (City and State) |  |
| Total years offering proposed software systems |  |
| Total number of active clients across all products/offerings/services | Government:  Private: |
| Total number of active EHR clients | Government:  Private: |
| Total number of Washington Government clients with breakout by Municipality, County, Other | Municipality:  County:  Other: |
| Total number of completed implementations of the proposed product and version |  |
| Total number of active government clients using the proposed product version |  |
| Total number of clients migrated to the proposed product from legacy system. |  |
| Largest active government installation, including population |  |
| Smallest active government installation, including population |  |
| Other products offered by the company |  |

1. RELEVANT EXPERIENCE
2. Please describe your relevant experience working with Washington public health entities.

1. Please describe any relevant experience working with similarly situated County public health organizations, including any unique factors that arise during the implementation process for an organization within Washington or otherwise.

1. Identify two recent project implementations that are most comparable to the CCPH’s proposed implementation, and provide a project profile for each, including: scope of modules; project duration; any unique requirements or circumstances that were a part of, or came up during, the project; the legacy system converted from; etc.

1. Please describe implementation barriers or challenges that have been experienced working within Washington on implementations. What proactive steps are planned in this proposed project to mitigate against similar challenges?

1. What sets the product(s) and services that your firm proposes apart from competitors’ products and services? Why should CCPH select your firm to partner with?

1. Please describe implementation barriers or challenges that have been experienced working on implementations fully remotely during COVID-19. What proactive steps are planned in this proposed project to mitigate against similar challenges?

1. USE OF SUBCONTRACTORS
2. The Proposer shall identify any of the required Services that are proposed to be subcontracted, if any. This table is to be copied and filled out for each proposed subcontractor.

#### Table 1-03: Subcontractor Questions

| **Question** | **Response** |
| --- | --- |
| Does your firm complete the implementations of the product being proposed or is this effort outsourced? |  |
| Has or will any portion of the proposed work be completed by subcontractors or contract employees? |  |
| **This below portion of the table is to be copied and filled out for each proposed subcontractor.** | |
| Name of subcontractor and address |  |
| Summary of Service and estimated percentage of Work the subcontractor will be providing. |  |
| Reasons for subcontracting |  |
| Experience |  |
| Detailed subcontractor responsibilities |  |
| Previous history of projects using the named subcontractor |  |
| Any additional relevant information |  |

CCPH reserves the right to request a copy of the prime contractor/subcontractor contract verifying the prime contractor has the sole responsibility for any and all Services under this RFP and is financially liable, without exception, to CCPH for all Services contracted by the Proposer and the subcontractor under this RFP.

CCPH reserves the right to request additional information regarding the subcontractor(s) as it relates to references, history of the firm, and other relative information that has been required of the Proposer to submit in this RFP.

The substitution of one subcontractor for another may be made only at the discretion and prior written approval of CCPH.

1. By signature (electronically or via ink) below on the Certification of Subcontractors/Partners, the Proposer and the Subcontractor/Partner certify that the Proposer has received the permission of the third-party to include the scope of software and services under the cover of the submitted proposal.

#### Table 1-04: Certification of Subcontractors/Partners

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Entity** | **Company Name** | **Representative Name** | **Title** | **Telephone Number** | **Email Address** |
| Proposer |  |  |  |  |  |
| Partner/Third-party software provider |  |  |  |  |  |
| Partner/Third-party software provider |  |  |  |  |  |

Respondents are instructed to return a copy of this Certification table signed by an authorized firm agent as part of proposal responses.

# Tab 2 – Software Solution

1. SUMMARY DESCRIPTION OF EACH FUNCTIONAL AREA

Proposer to provide a summary description of the capabilities for each functional area contained in the RFP, in narrative format. The purpose of this summary is so that the County has a high-level understanding of the proposed solution. The narrative should be written for an audience of the end-user community. Descriptions should be included for any products proposed by third parties to meet the capabilities described in the Functional and Technical Requirements in Attachment E.

Marketing materials should not be submitted on the proposed functionality.

1. SOFTWARE DOCUMENTATION FEATURES AND FUNCTIONS

Proposer to provide a summary of their software documentation that describes the features and function of the proposed application software. Identify what makes your documentation user friendly and useful to the end user and technical user of the software.

1. PROPOSED SOFTWARE MODULES TABLE

Proposer to complete the table below. Proposed modules that are required to satisfy the requirements associated with the functional areas identified below cannot be proposed as complementary or optional.

#### Table 2-01: Proposed Functional Areas/Modules

| Proposed Software Information | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Product Component/Suite  *(Name and Version of the Proposed Software Solution)* | | | |  | | | |
| Total Number of Years Product Proposed Has Been on Market | | | | Release Date of Most Current Version | | | |
|  | | | |  | | | |
| Next Major Release Date | | | | Next Minor Release Date | | | |
|  | | | |  | | | |
| **Licensing** | | | | | | | |
| Describe how the software is licensed (e.g. named user, concurrent users, enterprise/site, power user) and the options available for licensing: | | |  | | | | |
| How many licenses have been proposed? | | |  | | | | |
| Are the same licenses required for all users, or, would some users (e.g. those requiring view-only) have a different license type than other users (e.g. regular daily user)? | | |  | | | | |
| **Deployment Model** | | | | | | | |
| Deployment Models Proposed to the County  *(Corresponding Attachment G Cost Worksheets shall be completed for each separate deployment model proposed)* | | Proposer-Hosted (Perpetual License) | | | Software-as-a-Service (Subscription) | | |
| **☐** | | | **☐** | | |
| **Summary of Modules Proposed** | | | | | | | |
| No. | Functional Area | | Name of Proposed System Module(s) to Address Requested Functional Area | | | Previous Third-Party Partnerships and/or Solutions Successfully Integrated\* With |
| **1** | Clinical Documentation and Workflow​ | |  | | |  |
| **2** | Immunization Management​ | |  | | |  |
| **3** | Lab Results Management​ | |  | | |  |
| **4** | Medication and Order Management ​ | |  | | |  |
| **5** | Billing​ | |  | | |  |
| **6** | Scheduling and Demographics​ | |  | | |  |
| **7** | Medical Records​ | |  | | |  |
| **8** | Reporting ​ | |  | | |  |
| *\*Successful integration should include only those instances where both the software and the client are in production environments.* | | | | | | | |

1. OPTIONAL AND COMPLEMENTARY MODULES

What other system modules or products, not included in the scope of your proposal, would the Proposer recommend to be complementary or optional to the Project Scope?

#### Table 2-02: Optional and Complementary Modules

| **No.** | **Module Name** | **Narrative Description of Functionality Provided** |
| --- | --- | --- |
| **1** |  |  |
| **2** |  |  |

1. PARTNERSHIPS/THIRD-PARTY PRODUCT RELATIONSHIP
2. Proposer to fill out the below table for each of the Partnership/Third-Party software product proposed.

– Not applicable, no Partnership/Third-Party software proposed

**Table 2-03: Partnership and/or Third-Party Product Identification**

| **Name of Partnership/Third-Party Software Firm** | **Name of Software Product** | **Name of existing Clients using Proposer’s system and the Partnership/Third-Party Software** | **Number of years Client has been using the two products together** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |

1. For each product proposed as a Partnership/Third-Party product, detail the options available to the County as it relates to contracting relationship between the County and the Partnership/Third Party.

1. Proposer to provide the approach and responsibilities for managing the implementation and acceptance testing for each of the proposed Partnership/Third-Party products.

1. Proposer to provide the approach and responsibilities for the SLA/maintenance related to the Partner/Third-Party provider.

1. Proposer to submit references and qualification statements for each of the proposed Partners/Third-Party firms and attach as an Exhibit to Tab 2.

Confirmed, Exhibit attached.

1. Proposer shall indicate if the proposed approach utilizes a systems integrator or consulting firm as the third-party.

1. General
2. Proposer shall clearly indicate the deployment model(s) proposed from among the three categories presented in a-b below. If more than one product is proposed, please clearly identify the deployment model for each product proposed:
3. Software as a Service (SaaS or subscription-based models)
4. Proposer hosted (hosted and managed by the Proposer, perpetual licenses)

1. Is Active Directory integration and/or single sign-on supported? Please provide applicable diagrams and/or details to substantiate the level of integration and compliance with published internet standards (i.e. LDAP and DNS).

1. Proposer shall detail the ability of the proposed system(s) to integrate with Active Directory Domain Services implemented in accordance with published internet standards such as Lightweight Directory Access Protocol (LDAP) and Domain Name System (DNS). If such integration is not offered, Proposer shall explain the identify management solution that is provided.

1. If applicable to the proposed deployment model, describe how the SaaS application/service provides two-way user and group synchronization with Active Directory (AD). (e.g. As users and groups are added to and removed from AD, these changes are reflected in the SaaS applications). Would the County AD be able to push, and the SaaS applications able to receive, user profiles and groups?

1. When a user is added to AD, are the proposed solutions automatically provisioned and, conversely, when a user is removed from AD, access is automatically revoked?

1. Are users able to sign on to the Windows network once, and then easily gain access to the proposed applications without having to enter an additional set of credentials?

1. Would the County/CCPH be able to provision user accounts manually (via a system administrator, for example) as opposed to using single sign-on?

* 1. Would CCPH and the County be able to provision access to some users (e.g. internal users) using single sign-on, and provisioning some users (e.g. external users) manually through account creation by a software administrator?

1. How is access provisioned for external (non-CCPH/County) users of the system such as external agency users?

1. Proposer shall fully describe the integration/interface/data exchange capabilities of the proposed system, including available API’s, middleware, web services, etc.

1. For available API’s, does the proposed pricing include access to the entire API library? What functionality is exposed in the systems’ APIs?

1. If the system has the ability to integrate with MS Outlook, can this integration be configured for only some users of the system and not others?

1. What strategic decisions or direction is your firm taking or making related to the product being proposed today?

1. List applications that the product being proposed will integrate with or has integrated with in the past, beyond those listed in the Interfaces tab of Attachment E – Functional and Technical Requirements.

1. Does your EHR system have an efficient process for aggregating and displaying patient data over time in a chronological view?

1. Does your EHR have a medication management system that can deduct a medication from a medication/supply inventory when it is administered?

1. Does your EHR have a lab management system that can associated or link multiple test results to one lab specimen ID?

# Tab 3 – Project Approach and Implementation Methodology

1. PROJECT APPROACH

Proposer to provide a description of the proposed approach for providing the Scope described in the RFP, including a comprehensive description of the proposed implementation methodology for the Project. The description should include how the Proposer has developed this methodology to both incorporate lessons learned from experiences as well as to meet the needs described in the RFP.

1. Based on information provided in this RFP and experience in working with other localities, what is the Proposer’s perspective on the most significant risks to this Project, and how do you plan to mitigate these risks?

1. With what frequency will Proposer’s Project Team staff be on-site during implementation? Will staff be on-site for full or partial weeks? Has this approach been tailored based on social-distancing practices or has the proposed approach been standard for other implementations?

1. Describe in detail the approach to developing interfaces/integrations/data exchanges. What is the division of responsibility between CCPH and Proposer project teams? What technical skills are required of CCPH staff for this work?

1. Describe in detail the approach to configuration and set-up activities. Will the Proposer team complete the majority of the configuration based upon information gathered from CCPH subject matter experts, or will CCPH be expected to perform much of the configuration?

1. Describe any additional assumptions made in the Proposal, not already identified in detail. These should include any assumptions related to the current County technical environment, staffing, project management approach, and CCPH resources available during implementation and support phases.

1. DEPLOYMENT

Proposer to provide a detailed narrative description of how the implementation approach will vary between the deployment methods proposed (i.e. a Proposer-hosted and/or a subscription-based solution, etc.)

1. GO-LIVE AND ONGOING SUPPORT

Proposer to describe what level of pre- and post-go-live support is available under the proposed fee structure. If varying levels of support are available, this section of the RFP response should clarify these potential support services and highlight the level of support that has been proposed. Proposer shall use Attachment G, Cost Worksheets, to clearly identify the varying fees based on the varying levels of support that are available.

1. What are the standard hours that support is offered, and through what means (telephone, web ticket submission, etc.)?

1. Are afterhours and weekend support offered, and if so, is this part of the standard support offering or part of a different tier/offering?

1. How often are releases provided, and what is the process to test each release?

1. Would CCPH be able to test releases in a test environment prior to pushing updates to a live environment?

1. Does the system have the ability to roll back updates should challenges or bugs be encountered?

1. Describe how often major and minor software updates are provided, as well as the level of CCPH resources required for a major update and the level of resources required for a minor update.

1. Is product support offered by Proposer, through the software developer/provider, or sub-contracted?

1. Are there future costs associated with upgrade processes? For example, costs associated with purchasing licensing for upgrades, professional services costs associated with implementing upgrades, etc.? Proposer to describe the frequency of upgrades and any price ranges for anticipated upgrades.

1. What is the role of CCPH in providing ongoing support and maintenance of the system proposed? How many FTE are typically required to support the system on the client-side, and what tasks are entailed?

1. RESOURCE HOURS
2. Proposer shall include the proposed resource levels for the CCPH Implementation Project Team and their Project Teams by completing the table below.

#### Table 3-01: Project Team Resource Hours

| **Project Team** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Instructions:** The Proposer is asked to provide the number of resources that will be committed to the Project in terms of number of hours. These numbers should be based on the functionality the CCPH desires, included in the detailed Functional and Technical Requirements (Attachment E). | | | | | | | | |
| **Assumptions**: Any assumptions related to the number of Project Team staff for the Proposer and CCPH teams, roles of staff, and duration of involvement used in the development of the resource hour estimates **should be included here**: | | | | | | | | |
| **Functional Area** |  | **Requirements and Design** | **Configuration and Setup** | **Implementation/Project Management** | **Testing** | **Training** | **Total** |
| Clinical Documentation and Workflow​ | CCPH Team |  |  |  |  |  |  |
| Vendor Team |  |  |  |  |  |  |
| Immunization Management​ | CCPH Team |  |  |  |  |  |  |
| Vendor Team |  |  |  |  |  |  |
| Lab Results Management | CCPH Team |  |  |  |  |  |  |
| Vendor Team |  |  |  |  |  |  |
| Medication and Order Management | CCPH Team |  |  |  |  |  |  |
| Vendor Team |  |  |  |  |  |  |
| Billing | CCPH Team |  |  |  |  |  |  |
| Vendor Team |  |  |  |  |  |  |
| Scheduling and Demographics | CCPH Team |  |  |  |  |  |  |
| Vendor Team |  |  |  |  |  |  |
| Medical Records​ | CCPH Team |  |  |  |  |  |  |
| Vendor Team |  |  |  |  |  |  |
| Reporting | CCPH Team |  |  |  |  |  |  |
| Vendor Team |  |  |  |  |  |  |
| **Total Hours by Project Task:** | CCPH Team |  |  |  |  |  |  |
| Vendor Team |  |  |  |  |  |  |

1. Proposer shall include the anticipated resource hour’s levels for the CCPH Implementation Project Team based on typical project role by completing the tables below. Any comments related to the anticipated hours, any phase-specific involvement, or other assumptions should be noted in the Additional Vendor Comments column.

**Table 3-02: Anticipated Hours by Project Role**

|  |  |  |  |
| --- | --- | --- | --- |
| **Anticipated Hours by Project Role** | | | |
| **Project Role**  (e.g. Project Sponsor, Project Manager) | **Estimated hours per month per person in this role (ranges are acceptable)** | **Estimated number of individuals required for role** | **Additional Vendor Comments** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Proposer to provide their overall estimated split/division of the work effort as shared between the CCPH and the vendor teams (example: CCPH owns 20% of the work effort, and the Vendor owns 80% of the work effort) along with any narrative to support this estimate.

#### Table 3-03: Anticipated Work Effort Division

| **Anticipated Work Effort Division** | | |
| --- | --- | --- |
|  | **CCPH Project Team** | **Vendor Project Team** |
| **Estimated number of individuals required for Project Team** |  |  |
| **Approximate Percentage of Work Effort Owned** |  |  |
| **General Comments** |  | |

1. IMPLEMENTATION PLAN

Proposer to provide their overall objectives and approach to the CCPH implementation. Discuss timing as being chronological, in parallel, etc., for all of the modules proposed.

Proposer shall submit a Sample Implementation Plan as an Exhibit to Tab 3, labeled as VI, Implementation Plan.

Exhibit submitted Yes       No

1. STATUS REPORTING

Proposer to detail their approach to providing status reports throughout the course of the Project. This section should include an example of the recurring status report and identify the expected delivery mechanism that will be used to provide the report to CCPH.

1. PROJECT MANAGEMENT PROCESS

Proposer to provide their approach for the CCPH Project for each of the following project management processes that will be provided. If any of these processes/responsibilities are not being provided by the Proposer, Proposer to identify as such.

1. **Scope Management:** Proposer to describe their approach for managing the Project Scope and the process used to request changes to Project Scope. It is CCPH’s desire to use the proposed software system “as is” and, as such, any changes (e.g. customizations or modifications to the software) must be reviewed and approved by the County’s Implementation Project Team.

1. **Schedule Management:** Proposer to provide their approach for managing CCPH’s Project Schedule and the process used to submit requested changes to the schedule. The Proposer must ensure that the Project Schedule is kept current and will be responsible for reporting any missed milestones to CCPH. Include in your response how this requirement will be met.

1. **Risk Management:** Proposer to provide their approach for documenting Project risks, providing recommendations for mitigating the risk, and how this will be communicated to the CCPH’s Implementation Project Team. What is the process for monitoring, escalating, and resolving issues that will arise during the Project?

1. **Quality Management:** Proposer to provide their approach/policies to assure that all written deliverables have received appropriate reviews for quality before being submitted to CCPH.

1. **Communication Management:** Proposer to provide the approach that will be used to provide CCPH with a detailed communication plan that includes: key implementation metrics that will be used to track progress; types of communication methods (e.g., memo, email, one-on-one meetings,); frequency of these communications; and key points of contact with overall responsibility for ensuring these communications are provided as scheduled.

Address how Proposer will make key personnel and staff available for certain meetings, either on-site or via teleconference or web-conference, which may be required should major issues arise during the implementation that significantly impact the schedule or budget of the selected system.

1. **Organizational Change Management:** Proposer to describe the process, tools, and techniques they will use to manage the people side of change.

1. **System Interface Plan:** Proposer to detail their approach and process that will be used to perform CCPH’s desired interfaces as listed in Attachment E.

1. **Resource Management Plan:** Proposer to provide their approach to their resource management plan and managing resource allocation for the CCPH and vendor teams.

# Tab 4 – Key Proposed Personnel and Team Organization

1. ORGANIZATIONAL CHART
2. Proposer to submit as an Exhibit, labeled as I: Organizational Chart and insert in Tab 4.
3. The Organizational Chart is to include subcontractors and reporting structure of the entire team.
4. PROJECT TEAM RESUMES (PROPOSER)
5. As an Exhibit to Tab 4, resumes shall be provided for the implementation team, as well as for any additional personnel involved in live operation and ongoing support and maintenance. Resumes shall be specific to the actual personnel to be assigned to this Project for all primary roles (e.g., Project Manager, Trainer).

* Resumes to include listing of past software implementation projects and certifications held for each team member.
* CCPH anticipates that any staff assigned to the Project will remain assigned to the Project, unless CCPH deems the services to not meet expectations at which point the Contractor and CCPH will work together to remedy such non-conforming services.

1. Summary of Project Team: Proposer shall complete the table on the following page listing a summary of the Project Team Members.

**Table 4-01: Proposer Project Team Members**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Proposer Project Team Members** | | | | | | | |
| **Name** | **Title** | **Role on Proposed Project Team (e.g., Project Manager)** | **Years of Relevant Experience** | **Years with firm** | **Number of implementations completed within past five years** | **Identify Scope of Services/Tasks this individual will be working on for CCPH** | **Relevant certifications (PMP, etc.)** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

1. PROJECT TEAM RESUMES (SUBCONTRACTOR)
2. As an Exhibit to Tab 4, resumes shall be provided for any of the named subcontractor(s) who are part of the implementation team, as well as for any additional personnel involved in live operation and ongoing support and maintenance. Resumes shall be specific to the actual personnel to be assigned to this Project for all primary roles (e.g., Project Manager, Trainer).

* *Resume to include listing of past software implementation projects and certifications held for each team member.*

1. Summary of Project Team (Subcontractors)

**Table 4-02: Subcontractor Project Team Members**

| **Subcontractor Project Team Members** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Title** | **Role on Proposed Project Team (e.g., Project Manager)** | **Years of Relevant Experience** | **Years with firm** | **Number of implementations completed within past five years** | **Identify Scope of Services/Tasks this individual will be performing** | **Relevant certifications (PMP, MD, RNA, etc.)** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

# Tab 5 – Project Schedule

1. PROJECT SCHEDULE
2. Proposer shall submit a proposed Project Schedule with the major milestones, activities, and timing of deliverables for the Scope of Work described in the RFP. In addition, the response should reflect Project predecessors, successors, and dependencies.

* CCPH requests that the sample Project Schedule be in a Gantt chart format developed in Microsoft Project or a similar presentation.
* Proposer to submit as an Exhibit, labeled as I. Project Schedule and insert in Tab 5

**Exhibit submitted Yes       No**

1. PROJECT DELIVERABLES, MILESTONES, AND PAYMENT APPLICATIONS
2. Proposer to include a list of deliverables and milestones of the Project and should describe exactly how and what will be provided to meet the needs of CCPH.
3. Proposer to submit their payment schedule, tied to the listed deliverables and milestones for review by CCPH. This schedule shall be consistent with the terms provided in Attachment F of the RFP (Cost Narrative) and should not include the dollar amounts for payments, but rather the events that would trigger payments.
4. Proposer to submit as an Exhibit, labeled as II. Project Deliverables, Milestones, and Payment Applications and insert in Tab 5

**Exhibit submitted Yes       No**

1. PROJECT SCHEDULE QUESTIONS

**Table 5-01: Project Schedule Questions**

|  |  |
| --- | --- |
| 1. Based on current obligations, what is the earliest you can begin implementation after contract signing? |  |
| 2. What activities would the Proposer expect to occur within the first 30 days of contract signing? |  |
| 3. How long does the typical implementation of the product being proposed take for an organization of similar size to CCPH? |  |
| 4. What special considerations are there related to the timing of go-live activities? Does it vary based on functionality? |  |

1. PROJECTED GO-LIVE DATES

CCPH initially anticipates that the total implementation process for all modules/products will be 10-12 months in duration, subject to further planning with Proposers. CCPH anticipates that implementation activities would begin in January of calendar year 2022. Proposers are encouraged propose phasing and timelines that best align with the Proposers implementation approach.

**Table 5-02: Projected Go-Live Dates**

|  |  |  |  |
| --- | --- | --- | --- |
| **Phase** | **Functional Areas** | **Potential Start Date** | **Target Go-Live Date** |
| **I** |  |  |  |
| **II** |  |  |  |
| **III** |  |  |  |

# Tab 6 – System and Application Architecture

1. GENERAL OVERVIEW

Proposer to provide a description of the proposed system and application architecture for the proposed application.

As part of the proposal evaluation process, the County IT Department intends to have vendors being considered complete a security screening. Does your firm agree to complete a security screening if advanced through to the shortlist process (or thereafter)?

1. SYSTEM AND APPLICATION ARCHITECTURE QUESTIONS

**Table 6-01: System and Application Architecture Questions**

|  |  |
| --- | --- |
| 1. What is the source language(s) of the product? |  |
| 1. How many environments are available with your proposed solution at no additional cost (e.g., test, training, production)? |  |
| 1. Describe how often major and minor software updates are provided, as well as the level of resources required for a major update and the level of resources required for a minor update. |  |
| 1. Please describe the major/minor upgrade process that is required if the solution requires a client-based installation. |  |
| 1. List all browsers that are certified for use with the application and describe any required browser add-ons, function enablement, etc. |  |
| 1. The underlying architecture of the application design is important to CCPH. Please describe your system architecture model and explain the capabilities and features of this model that led to your use of it in developing this system. |  |
| 1. Please describe how data privacy and security compliance is supported within your proposed software solution. Is the system HIPAA compliant? |  |
| 1. Describe your approach to ensure scalability of the product. This includes transaction growth, upgrades, and replacements of components of the architecture, technology, and application. |  |
| 1. List all hardware/operating system/database platforms upon which the product is supported. Provide specifications in terms of processors, processor speed, memory requirements, and other sizing and capacity factors to assist CCPH in budgeting for and acquiring hardware. List which industry standard benchmarks or guidelines measures are used to establish this recommendation. |  |
| 1. Describe the design philosophy of your application. Include in your response the degree to which there is a common design philosophy across all modules, common programming languages and tools, and the extent of shared software code across all applications. |  |
| 1. CCPH seeks a future system that is ONC certified in addition to HIPAA and HITECH compliant. In addition, the future system should be Cures Act compliant. Please detail if the proposed system meets each of these standards, and if it does not, please detail in which areas the system is noncompliant and what roadmap items are in place to bring the system into compliance. CCPH seeks systems that are compliant in all current and future major/minor version. |  |

# Tab 7 – Software Hosting

1. GENERAL OVERVIEW

Proposer to provide a description of the proposed system deployment model if a proposer-hosted or SaaS model has been proposed for the application.

1. SOFTWARE HOSTING QUESTIONS

Proposer to respond to the following questions regarding their software hosting platform proposed for CCPH.

**Table 7-01: Software Hosting Questions**

| **Question** | **Response** |
| --- | --- |
| 1. Where are the data center and storage facilities? |  |
| 1. What is the total number of active clients currently served by hosted solutions provided by your company? |  |
| 1. How many years has your company provided hosted solutions? |  |
| 1. How are hosted software applications deployed for use by numerous customers? |  |
| 1. What availability and response time do you guarantee? |  |
| 1. How many instances of unplanned outages have any of your customers experienced within the past five years? |  |
| 1. What has been the duration and scope of such unplanned outages? |  |
| 1. What are the standard relief schedules for unplanned system downtime/outages? |  |
| 1. In how many instances has your firm had to pay client relief for unplanned outages? |  |
| 1. What is your process for notification of standard maintenance and downtime? |  |
| 1. What data security and system redundancy capabilities are available at Proposer’s data center and storage facilities? |  |
| 1. How many years has your company provided SaaS solutions? |  |
| 1. What is the total number of active clients currently utilizing the proposed software as a SaaS deployment provided by your company? |  |
| 1. Provide relevant documentation related to any recent certifications pertaining to the Proposer’s hosting technical and operation capabilities or that of their subcontracted provider for these services. |  |
| 1. Provide detailed information on the way(s) in which CCPH will access the software if deployed in a SaaS or hosted environment. Such information should include how the software is accessed when on or off the County network, as well as any additional hardware/software that may be required for accessing the software. |  |
| 1. What disaster recovery services are provided under your standard hosting agreement? If not standard, is there a separate agreement/cost associated with disaster recovery? |  |
| 1. Will data be encrypted at rest, and in transit? Please explain any applicable protocols. |  |

# Tab 8 – Testing & Quality Assurance Plan

1. APPROACH

Describe your standard approach to testing and quality assurance.

1. SAMPLE PLAN

Submit a Sample Testing and Quality Assurance Plan that would be very similar to the plan utilized for the CCPH Project. Proposer to submit as an Exhibit, labeled as II. Sample Plan and insert in Tab 8.

**Exhibit submitted Yes       No**

1. PLAN DETAILS

Awarded Proposer will be responsible to provide a Testing and Quality Assurance Plan that describes all phases of testing that may be used: unit, system, interface, integration, regression, parallel, and user acceptance testing (UAT). It is the CCPH’s expectation that the Testing and Quality Assurance Plan govern all phases of the Project and that the Proposer will also provide assistance during each testing phase involving CCPH users. The Awarded Proposer will develop the initial UAT plan, provide templates and guidance for developing test scripts, and will provide onsite support during UAT. The Awarded Proposer will also provide a plan for stress testing the system, which will occur during or after UAT. Proposer to confirm their proposal includes providing the services identified in this Section (Item III Plan Details) and provide any additional services that are also provided as part of your Testing and Quality Assurance Plan not listed.

1. LEVELS OF SUPPORT

What levels of support will be provided by the Proposer during the CCPH testing phases (e.g., parallel and UAT)? Will Proposer resources be onsite during certain testing phases? Are varying service levels offered for testing support?

# Tab 9 – Training Plan

1. PROPOSED TRAINING APPROACH/STRATEGY

Proposer to provide their approach to the training plan and what makes their training plan successful and effective for system implementations. Include your approach to when and why you choose to use on-site training versus a webinar or a train-the-trainer format.

1. TRAINING PLAN AND RESOURCE HOURS

Proposer to provide a chart detailing the proposed training plan and resource hours allocated for the CCPH project. A *sample format of the chart* is detailed below. Cost Worksheet provided in Attachment G to coincide with the hours and resources proposed.

**Table 9-01: Training Plan Legend**

|  |  |
| --- | --- |
| **Legend** | |
| User Types | Core Project Team, End Users, Technology Users, Other (please describe) |
| Training Model | Train-the-Trainer, Proposer-Provided Training, Other (please describe) |
| Class Format | On-Site Classroom, Webinar/Video Conference, Web Training Service, Other (please describe) |

**Table 9-02: Training Plan**

| **Training topic/course** | **Functional Module Covered** (please specify per module, such as billing, immunization management, etc.) | **Type of County users to attend** | **General summary of number of sessions offered of this course** | **Maximum class size** | **Format for the class** | **Training data that will be used for this topic/course (live, sandbox, etc.)** |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Proposer to submit as an Exhibit, labeled as II. Sample Training Plan, and insert in Tab 9.

**Exhibit submitted Yes       No**

1. TRAINING COORDINATION

Proposer to detail the roles and responsibilities for the training effort, including but not limited to:

**Table 9-03: Training Roles and Responsibilities**

|  |  |
| --- | --- |
| **Role/Responsibility** | **Identify if Role/Responsibility is County/Proposer (including any Subcontractors)/Shared** |
| Training Coordination/Scheduling |  |
| Training Curriculum/Material Development |  |
| Training Instruction |  |
| Other: |  |

1. KNOWLEDGE TRANSFER

Proposer to detail the knowledge transfer strategy proposed to prepare CCPH staff to maintain the system after it is placed into production.

Proposer to detail the approach to conducting training using webinar (e.g. GoToMeeting, Zoom, Teams, Skype), including how Proposer staff will monitor staff comprehension and, if applicable, provide assistance to trainees on navigation through the system.

Proposer to identify the requested analysis/training room environment requirements and any other requirements related to the training facility/room/equipment. Requirements may include any presentation equipment, whiteboards, seating style, number of computers, printers, and other amenities needed to support on-site implementation activities.

1. SYSTEM DOCUMENTATION

Proposer to provide a detailed description of system documentation and resources that will be included as part of the implementation by the Proposer including, but not limited to, detailed system user manuals, system schema and conceptual data models, “Quick Reference” guides, online support, help desk support, user group community resources, videos, and others as available. Proposer to itemize optional items on the Attachment G Cost Worksheets.

Proposer to check off all that are available and included as part of the RFP response.

**Table 9-04: System Documentation**

| **Type of Documentation** | **Included in Scope of Proposal to CCPH**  **Yes/No** | **Description/Explanation/Optional** |
| --- | --- | --- |
| Quick Reference Guides |  |  |
| Online Support |  |  |
| Help Desk Support |  |  |
| User Group Community Resources |  |  |
| Annual User Conferences |  |  |
| Videos |  |  |
| Custom User Guides/Manuals |  |  |
| System schema and conceptual data models |  |  |
| Other: |  |  |

# Tab 10 – References

1. INSTRUCTIONS FOR REFERENCES

Proposer is responsible for verifying correct phone numbers and contact information. Failure to provide accurate data may result in the reference not being considered, which includes the provision of contact person(s) who do not have knowledge of the services provided by your firm. **Failure to submit references may result in the Proposal not being considered for evaluation.**

CCPH may request a more detailed list, including other governmental agencies. Proposer to identify the requested analysis/training room environment requirements and any other requirements related to the training facility/room/equipment. Requirements may include any presentation equipment, whiteboards, seating style, number of computers, printers, and other amenities needed to support on-site implementation activities.

CCPH reserves the right to request or contact additional or different references from the provided customer list for consideration, including past experience with the County or CCPH.

Proposer to identify six **governmental** entities that are most similar to the size and requirements of CCPH that have gone live with the proposed software.

**Additional references may be submitted as an attachment to show depth of client base and number of installations within the past five years. This includes clients that are currently in the process of implementing the proposed software solution.**

**PROPOSER IS RESPONSIBLE FOR VERIFYING THAT ALL CONTACTS AND PHONE NUMBERS ARE UP TO DATE AND ACCURATE.**

1. SOFTWARE AND PROFESSIONAL SERVICES REFERENCES

Proposers to use the format provided in the table below for providing reference information in conformance with the guidelines in Section I. The County has a strong preference for references that are using the proposed software solution, and for new implementation project references and not upgrades from a previous version.

* References Numbered 1 – 5:
  + *Entity had a go-live* *date within the past five years*
* Reference Numbered 6:
  + *Entity had a go-live* *date five or more years in the past*

In the event the Proposer cannot provide the required six references, the Proposer may substitute other organizations to ensure six total references are provided, with understanding that this will be reflective in the evaluation of the Proposer. Substitute references may include those that are in the implementation process, have implemented comparable scopes of work without including all system modules, etc.

**Table 10-01 Reference Table**

|  |
| --- |
| **Reference Table** |
| Reference Number: |
| Governmental Entity Name:  What is the approximate staff count of the Entity?  What is the approximate population served by the Entity? |
| Detailed narrative description of work completed for this reference (e.g. upgrade process, new implementation for a client transitioning from a different legacy system): |
| **Contact Information**  Address:  City, State, Zip:  Reference Contact Name:       Title:  Phone No.:       Email Address:  Start Date of Project:       Go-Live Date :  **Project Information**  Vendor Project Manager/Lead for this Client:  Name and Version of software system installed:  Legacy software system replaced:  Scope of Modules installed:  Model used (Hosted, On-Premise, SaaS, etc.):  Is this reference still using the software? Yes       No  Narrative description of work completed for this reference (e.g. upgrade process, new implementation for a client transitioning from a different legacy system):  Total Project Cost: |

1. REFERENCES FOR PROJECT MANAGER ASSIGNED (GOVERNMENT CLIENTS)

Proposer to provide client list for the Project Manager proposed/assigned to manage and lead CCPH’s implementation. References for the Project Manager are to be clients within the past five years. CCPH acknowledges that some of the same references provided in Section I may be duplicated.

Name of Project Manager assigned by Proposer to the CCPH project:

**Table 10-01: Project Manager References**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Governmental Entity** | **Summary of Project** | **Role/Team Assignments for the Project** | **Implementation Start and Go-Live Date** |
|  |  |  | - |
|  |  |  | - |
|  |  |  | - |
|  |  |  | - |
|  |  |  | - |

1. CONTRACT TERMINATION/NON-RENEWAL

Provide a summary of any contracts/license agreements/hosted subscriptions that the customer provided notice of cancellation to your firm, with or without cause, or elected to not renew in the past five years as it relates to the software solution proposed. The summary shall state the name of the customer, summary of the contract, term of the contract and reason for cancellation or non-renewal. *If none, state as such.*

Submitted as an Exhibit  or Response provided as:

1. LITIGATION

A. Provide a summary of any litigation filed against the Proposer in the past seven years, which is related to the services that Proposer provides in the regular course of business. The summary shall state the nature of the litigation, a brief description of the case, the outcome or projected outcome, and the monetary amount involved.

*If none, state as such.*

Submitted as Attachment  or Type/Provide Response here:

B. Provide a summary of any litigation filed against the subcontractors identified as part of the team in the past seven years, which is related to the services that sub consultant, provides in the regular course of business. The summary shall state the nature of the litigation, a brief description of the case, the outcome or projected outcome, and the monetary amount involved.

*If none, state as such.*

Submitted as Attachment  or Type/Provide Response here:

# Tab 11 – Sample Contracts, Warranty, and Escrow

1. SAMPLE CONTRACTS FOR EACH LICENSE MODEL PROPOSED

As an Exhibit to Tab 11, Proposer to provide their sample contract that would be used as basis for developing the final agreement with the County/CCPH. A sample contract for each license model proposed shall be provided.

Attached as an Exhibit:

1. SERVICE LEVEL/MAINTENANCE AGREEMENT

As an Exhibit to Tab 11, Proposer to provide their proposed Maintenance and/or Service Level Agreement that would be used as basis for developing the final agreement with the County/CCPH. A sample is to be submitted for each license model proposed, unless the same Agreement applies to all products proposed.

Attached as an Exhibit:

1. THIRD-PARTY LICENSE AGREEMENTS

As an Exhibit to Tab 11, Proposer to provide any third-party license agreements that would be separate from the Proposers license agreement, i.e., Adobe or other partner/third-party modules proposed.

Attached as an Exhibit:

1. WARRANTY

A comprehensive warranty in form and content satisfactory to the County/CCPH is sought by the County/CCPH for all software and implementation services covered by this RFP. The entire system solution as proposed in this RFP must include a first-year warranty (for Proposer-supplied hardware and software) to conform to contractually agreed specifications, and to protect against any defects or damage caused by Manufacturer, Proposer, or subcontractors, in the systems’ equipment or software. The year-one warranty will begin (for products accepted in phases) at the point that the system is officially accepted by the County/CCPH. All repairs made under warranty will be at the sole expense of the Proposer (or Manufacturer), including parts, software, labor, travel expenses, meals, lodging and any other costs associated with the repair.

Proposer to provide as an Exhibit to Tab 11 or submit below a detailed explanation of their Warranty provisions. Proposer to be explicit in when the warranty period expires and when the fees for maintenance will start and be invoiced.

Attached as an Exhibit:      or detailed below as:

1. ESCROW AGREEMENT/SOURCE CODE

As an Exhibit to Tab 11, Proposer to provide their sample contract for the Source Code Escrow that would be used for the CCPH Project.

Attached as an Exhibit:      or Not available/applicable

# Tab 12 – Exceptions to Project Scope and Contract Terms

The County/CCPH reserves the right to disallow exceptions it finds are not in the best interests of the County/CCPH. Any and all exceptions must be identified and fully explained in the submitted Proposal. It is the County/CCPH intention to be made aware of any exceptions to terms or conditions prior to contract negotiations.

*Note: Deviations to the payment and retainage schedule to be provided in the Price Proposal. Deviations to functionally to be provided in Tab 13 (Attachment E).*

1. DEVIATIONS TO SCOPE OF WORK
2. The Proposer to identify and describe any exceptions/deviations to the Scope of Work and identify their impact to the County/CCPH, including, but not limited to workarounds; reductions in performance; capacity; flexibility; accuracy; and ultimately, cost and value.

1. Proposer to identify the areas where they feel the requested service or product is not available, deviates from the specific requests, or is deemed an unwise or unwarranted approach.

1. DEVIATIONS TO RFP TERMS AND CONDITIONS FOR CONTRACT AS PROPOSED BY THE COUNTY AND CCPH

As an Exhibit to Tab 12, Proposer to provide any deviations to the sample contract language proposed by the County/CCPH in the RFP. Each item to be listed along with the requested alternative language for review by the County/CCPH.

*If no deviations taken, state as such.* Substantive exceptions to the County/CCPH terms, submitted after the date and time established for the submittal of Proposals, will not be considered.

No deviations taken:

# Tab 13 – Functional and Technical Requirements Response

*Please note Tab 13 does not contain narrative questions. Proposer is instructed to complete and submit Attachment E, Functional and Technical Requirements/Capabilities under the cover of Tab 13.*

As part of the Project Scope, the Awarded Proposer will develop and provide a detailed System Interface Plan that contains the proposed strategy for interfacing to all applications described in the Interfaces section of **Attachment E – Functional and Technical Requirements**.