Invitation to Negotiate (ITN) – Solicitation Number 2021-2022 #2

DISASTER STAFFING SERVICES PROVIDER

Issue Date: March 18, 2022 – Reissue Date: May 9, 2022

For the period from
July 1, 2022 – June 30, 2023

This ITN allows for the execution of a contract for the specified term with an option of renewal for up to four additional years contingent upon performance and funding availability.


<table>
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<tr>
<th>Solicitation Timeline</th>
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<tbody>
<tr>
<td>3/18/2022</td>
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<tr>
<td>3/30/2022</td>
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<tr>
<td>4/5/2022</td>
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<td>4/29/2022</td>
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Any changes to this timeline will be posted on our website at the address above.
INVITATION TO NEGOTIATE (ITN) FOR DISASTER STAFFING SERVICES

First Coast Workforce Development, Inc. (FCWD), dba CareerSource Northeast Florida, is soliciting proposals for a Provider of Disaster Staffing Services to be funded through federal allocations received by the State of Florida and as authorized through federal and state legislation. The successful responder will provide services as identified in Section 3 of this ITN.

Services to be performed under this solicitation will be for the period from July 1, 2022 through June 30, 2023. This contract may be extended, in one-year increments from July 1 through June 30, for four (4) additional years if performance so warrants. Renewal will be at the option of FCWD based on effectiveness of services and funding availability.

FCWD is a not-for-profit corporation organized under the laws of the state of Florida and has been determined exempt by the Internal Revenue Service under the provisions of IRS Code, Section 501(c)(3). We have been certified by the Governor as a Regional Workforce Development Board for the purposes of implementing programs authorized by Temporary Assistance for Needy Families (also known as TANF or Welfare Transition), Wagner-Peyser, the Workforce Innovation and Opportunity Act (WIOA), Public Law No: 113-128, signed into law on July 22, 2014, and related enabling legislation, and the State of Florida Workforce Investment Act. Our principal function is the provision of, oversight of, and policy guidance to the workforce development system in the six counties of Baker, Clay, Duval, Nassau, Putnam, and St. Johns.

FCWD in most cases operates and administers these programs directly, however in some cases, acts as a “pass-through” organization, awarding federal funds to sub-recipients. It is our responsibility to ensure that our organization, as well as sub-recipients, adhere to government wide and program specific requirements set forth in grant agreements using effective monitoring resources.

Purpose and Scope

It is the intent of this ITN to seek vendors who have the demonstrated capacity to provide all services listed below.

Intent of This Solicitation

This ITN is for the purpose of meeting staffing needs (recruitment, placement, payroll, etc.) for workers placed into temporary jobs after a natural disaster or other event. To be considered, Proposers must demonstrate the ability to continue their own operations following a disaster or hurricane. Most temporary jobs will be in the categories of clean-up (manual labor), humanitarian relief (social services), or data-entry.
Service Levels

Responsibilities include:

- Recruit/vet individuals to fill temporary jobs created after a disaster/event.
- Ensure compliance with I-9, e-Verify, and other eligibility requirements.
- Act as employer of record.
- Provide required benefits (i.e., FICA, FUTA, WC)
- File appropriate state/federal forms and pay applicable taxes.
- Manage timesheets and payroll.
- Assist with additional work placements following termination of temporary jobs.

The temporary workers are generally those affected by the disaster/event but may be individuals seeking short-term employment recruited to fill temporary jobs. Temporary jobs range in salary from minimum wage to $25.00 per hour. The Proposer should have sufficient resources to be paid on a reimbursement basis. FCWD will not provide cost advances.

Firm Qualifications/ Proposal Response

Those interested in providing these services must include the following in a written response:

A. Company/Organization Information Sheet (An online form on our website.)

B. Narrative regarding your qualifications providing disaster staffing services including descriptions of:
   - Your background/experience with the service level responsibilities outlined above.
   - Engagements in the workforce development industry.
   - Engagements with organizations of a similar scale.
   - Your approach to customer service including services such as online tools for timesheets and billing.

C. Requirements/ Description of Services

Please describe how you will meet or exceed each of these requirements:
1. Maintain proper licensure with the state of Florida to provide services in Baker, Clay, Duval, Nassau, Putnam and/or St. Johns counties, having done so for a minimum of two (2) years.
2. Recruit/refer a minimum of twenty (20) temporary workers within five (5) days of notice of need for temporary workers.
3. Determine participant eligibility, including background screenings for certain positions, understanding that you assume financial responsibility for any expenditures made on ineligible persons.
4. Manage/maintain a timesheet sign-in/out process, understanding that you assume financial responsibility for payments made for hours not supported by time and attendance records.
5. Onboarding of temporary workers, including workplace safety training and placement at worksites identified/approved by FCWD.
6. Maintain/provide copies of I-9/eVerify, W-4 and/or candidate application or identification documents as requested.
7. Maintain/list First Coast Workforce Development, Inc. as an additional insured on liability, umbrella, and fidelity bond insurance policies.
8. Provide Workers Compensation Insurance for temporary workers. Please outline any potential exclusions or positions that could not be covered.
9. Participate and allow access to monitors who will evaluate and examine books, financial transactions, records, and participant files.

D. Additional Information

1. Firm Experience
   a. Describe your experience meeting employers’ staffing needs, how you fill job requests, and the time frame in which you fill jobs. Indicate current payroll levels and number of worksites, and the number of temporary staff placed each year for the past (3) three years.
   b. Describe your disaster recovery plan for establishing communication, office operations, and meeting employers’ needs immediately following a disaster. Indicate how soon you could be back in business with special arrangements in place in the event electricity and/or phones were not in service, or your office was flooded.
   c. Explain the method by which you ensure employees are paid correctly. We require invoices indicating employees’ name, rate of pay, and hours worked.

2. Recruitment
   a. Describe the strategies you would use to fill requests for temporary workers for short-term work assignments between two (2) and eighteen (18) weeks.
   b. Describe how you will recruit workers region-wide, including Baker, Clay, Duval, Nassau, Putnam, and St. Johns counties.
   c. Describe how long it will take to perform background screenings and drug tests, if needed.
   d. Describe how you will ensure compliance with anti-discrimination laws. Provide your EEO statement.

3. Job Placement
   a. Describe how you will match individuals to temporary jobs.
   b. Describe how you will ensure referred workers show up.
   c. Describe how you will follow up with worksites to ensure satisfaction.
   d. Describe what controls you have in place to ensure workers do not work overtime as this is prohibited under this contract.

4. Performance, Fiscal Information and Required Reports
a. Describe your process for reporting temporary employment placement numbers. List the elements to be included in your report.
b. Describe how you will ensure access to original documentation to substantiate invoices and how records will be maintained for five (5) years.

E. Other Services
Please indicate if there are other services available that you wish to propose and if these are a requirement to provide the requested services or optional.

F. Pricing
Provide your proposed pricing including all taxes and fees. Include a detailed budget narrative as well as any services not listed above that you propose providing. Include information about all costs per individual expressed in terms of a percentage of wage (e.g., 1.4% of hourly rate.) Include information about any volume discounts offered and how those would be applied. Rates quoted must be for all costs including background screenings, drug testing, and other pre-hire costs.

FCWD does not provide advance payments. Proposer must be able to meet payroll needs until reimbursed. Invoices must be accompanied by participant timesheets with original or electronic signature.

G. References
Please provide a list of three (3) or more current or previous clients we may contact. Clients listed should be of similar scale to our organization and served by the same staff who would be assigned for this engagement. Please include specific contact names and telephone numbers.

H. Other Information
Please include any additional information not already requested that you consider essential to your response. If there is no additional information, please state “There is no additional information we wish to present.” for this section.

I. Conflict of Interest
If a Proposer has any potential conflict of interest, disclosure must be included in this proposal. Proposers should review complete instructions for the preparation and submission of proposals, including notification of potential conflict of interest, at: https://careersourcenortheastflorida.com/requests-for-proposals/. If none, please state “There is no existing nor potential conflict of interest.” for this section.
Proposal Evaluation

A team will evaluate each proposal utilizing the Proposal Evaluation Form below. Upon conclusion of the rating process, FCWD may begin negotiations with one or more successful bidders. It is the bidder’s responsibility to present accurate, concise, adequate, and qualitative documentation in each area to be rated, so that the raters can make effective appraisals.

The proposal represents only one factor in the selection process of service providers and may not be the sole basis for selection of a proposal for funding. Other factors, such as the capability of administering and operating these services within the constraints and limitations specified may also be considered in the selection process.
**First Coast Workforce Development, Inc.**  
Proposal Rating Form

**Proposer:** _____________________________________________________________

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<tr>
<th>Did the Proposer:</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>Include all required elements?</td>
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<td>Provide references?</td>
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<td>Complete the online Company/Organization Information Sheet?</td>
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<td>Acknowledge the required online documents?</td>
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*If any of the above is answered no, write non-responsive in the adjoining block and proceed no further.*

**Evaluation of Vendor Qualifications and Services Proposed:**

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<td>Prior experience with similar scale organizations.</td>
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<td>How well the proposal meets the needs of FCWD.</td>
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<td>Effectiveness of recruitment plan.</td>
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<td>Effectiveness of plan for meeting/maintaining temporary staffing needs.</td>
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<tr>
<td>Effectiveness of plan for resuming business operations after a disaster.</td>
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<td>Effectiveness of internal fiscal, operational controls, and reporting.</td>
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**Fiscal Evaluation:**

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<td>Proposed pricing.</td>
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**Total Points**

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<td>0-100</td>
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**Reviewer’s Printed Name:** ________________________________

**Reviewer’s Signature:** ________________________________

**Date:** ________________________________