

REQUEST FOR QUALIFICATIONS (“RFQ”)
CODE BLUE SHELTER PROVIDERS
FOR BURLINGTON COUNTY
DEPARTMENT OF HUMAN SERVICES

PART I

Instructions to Vendors

1.0 PURPOSE

The intent of this Request for Qualifications (“RFQ”) is to allow the County, through the Department of Human Services, to create a pool of pre-qualified Code Blue providers from which the County may select vendors for Code Blue Providers for Burlington County Department of Human Services for January 1, 2022 through December 31, 2024. Vendors responding to this RFQ should have experience and a knowledgeable background and qualifications in the field of Code Blue Shelter. Additional information is contained within the “CONSULTANT RFQ RESPONSE FORM – CODE BLUE” attached which must be completed and returned with Statement of Qualifications.

The County intends to award contracts for Code Blue Shelter Services pursuant to N.J.S.A. 40A:11-5(1)(a)(i). This RFQ is being solicited through a fair and open process in accordance with N.J.S.A. 19:44A-20.4 et seq.

The specific extent and character of the Code Blue Shelter Services to be performed shall be subject to the general control and approval of the Administrator of Burlington County Department of Human Services and/or the Burlington County Solicitor’s Office.

2.0 COMPLIANCE WITH LAWS

The successful vendor(s) shall comply with all applicable federal, state, and local statutes, rules and regulations. If awarded a contract, our company/firm will be required to comply with the requirements of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27.

3.0 PROCEDURE FOR RESPONDING TO REQUEST FOR QUALIFICATIONS

3.1 SUBMISSION OF RESPONSES TO RFQ

Five (5) copies of the Response, INCLUSIVE OF ALL INFORMATION required in Part II, “Response Requirements” should be provided. Responses must be provided to Burlington County Department of Human Services. Responses sent regular mail should be addressed to Burlington County Department of Human Services, 795 Woodlane Rd,

RFQ – CODE BLUE SHELTER, P.O. Box 6000, Mt. Holly, NJ 08060. Responses sent UPS, Federal Express or Hand Delivery should be addressed to Burlington County Department of Human Services, 795 Woodlane Rd, Westampton, NJ 08060. Responses are scheduled to be opened on October 8, 2021. Any responses received after said opening whether by mail or otherwise, will be returned unopened. Responses should be provided in a sealed envelope with the title of the “RFQ CODE BLUE SHELTER” clearly marked on the outside. It is recommended that each Response package be hand delivered. The County assumes no responsibility for delays in any form of carrier, mail, or delivery service causing the Responses to be received after the above referenced due date and time. Submission by fax, telephone, or e-mail is NOT PERMITTED.

The Board of County Commissioners of Burlington County shall make final selection of vendor by formal resolution.

3.2 QUESTIONS REGARDING REQUEST FOR QUALIFICATIONS

Any questions regarding this RFQ must be made in writing to: Jennifer Hiros, Division Head, Community Development Office, 795 Woodlane Rd., PO Box 6000, Mt. Holly, NJ, 08060.

3.3 ADDENDA/REVISIONS TO REQUEST FOR QUAIFICATIONS

Addenda/revisions to this RFQ shall be provided to all vendors who have received this RFQ.

4.0 INSURANCE

Prior to commencing work under any agreement awarded to a duly qualified vendor to be created by virtue of this RFQ, the successful vendor shall furnish the County with a certificate of insurance as evidence that it has procured the insurance coverage required herein. This coverage must be provided by a carrier approved by the County and rated appropriately through A.M. Best. Vendors will provide the County a sixty-day notice of cancellation, non-renewal, or change in insurance coverage. Proof of this level of insurance is part of proper response to RFQ.

The successful vendor(s) shall provide and maintain the following minimum limits of insurance coverage during the period of performance required under the contract resulting from this RFQ:

Insurance shall be provided in the name of the entity and/or person providing the requested services.

- a. Commercial General Liability including Products Completed Operations coverage for Personal Injury and Property Damage of not less than one million dollars

(\$1,000,000) for each occurrence/two million dollars (\$2,000,000) annual aggregate.

- b. All Statutory Worker's Compensation and Employer's Liability Insurance coverage required to be held by law.
- c. Professional Liability insurance in the amount of \$1,000,000 each wrongful act/\$2,000,000 aggregate.
- d. Sexual Misconduct Insurance coverage.

Prior to the effective date of this agreement, and as a condition precedent to its taking effect, the vendor shall provide a Certificate of Insurance as verification of said policies. Approval of the coverage and the certificate by the Insurance and Risk Management Division is a precedent to the taking effect of this Agreement. This certificate should be issued to:

The Board of County Commissioners of Burlington County
49 Rancocas Road, PO Box 6000
Mt. Holly, NJ 08060-6000
Attention: Insurance & Risk Management

STATEMENT FROM INSURANCE BROKER: Each responder must include with submission a statement from the responder's insurance broker stating that the responder will, upon successful award any contract to their client, supply the responder with insurance in the types and amounts required by the specifications contained in this section.

5.0 INDEMNIFICATION

The selected vendor shall defend indemnify and hold harmless the County, its officers, agents, and employees from any and all claims and costs of any nature whether for personal injury, property damage or other liability arising out of or in any way connected with the vendor's acts omissions under any agreement entered into with the County as a result of being selected for award of a contract from by virtue of this RFQ.

6.0 STATEMENT OF OWNERSHIP

In accordance with N.J.S.A. 52:25-24.2, every corporation and/or partnership submitting a Statement of Qualifications (SOQ) shall, prior to the receipt of the SOQ by the Purchasing Agent for the Board County Commissioners of the County of Burlington, or accompanying said SOQ, submit a statement setting forth the names and addresses of all stockholders in the corporation or partners in the partnership, who own ten (10%) percent or greater interest therein, as the case may be. See section 4.01. If one or more such stockholder or partner is, itself a corporation or partnership, the stockholders holding 10% or more of that corporations' stock,

or the individual partners owning 10% of greater interest in that partnership, as the case may be, shall also be listed. This disclosure shall be continued until the names and addresses of every non-corporate stockholder, and individual partner exceeding the 10% ownership criteria established by this notice have been listed. **If no stockholder owns more than ten (10%) percent, note by stating “None”.**

Each responder must include with submission a signed statement of ownership.

7.0 MISCELLANEOUS REQUIREMENTS

7.1 Burlington County will not be responsible for any expenses incurred by any vendor in preparing or submitting a Response. All Responses shall provide a straightforward, concise delineation of the vendor’s capabilities to satisfy the requirements of the RFQ. Emphasis should be on completeness and clarity of content.

7.2 The contents of the Response submitted by the successful vendor and this RFQ may become part of any agreement for the performance of any services as awarded to any vendor created by virtue of this RFQ. The successful vendor will be expected to execute said contract with the County of Burlington.

7.3 Responses shall be signed in ink by the individual or authorized principal of the responding party. Responses submitted shall be valid for a minimum of 60 days from the date of opening.

7.4 The County of Burlington reserves the right to reject any and all Responses received by reason of this RFQ, or to negotiate separately in any manner necessary to serve the best interest of Burlington County. Vendors whose Responses are not accepted will be notified in writing.

7.5 The selected vendor shall be required to comply with the requirements of the Equal Employment Opportunity N.J.S.A. 10:5-31 et seq.(see attached affirmative action language) and submit an employee information report or certificate of employee information report approval. This requirement will be addressed upon execution of agreement.

7.6 All responses to this RFQ, with the exception of proprietary information, shall be subject to public scrutiny, subsequent to the selection of the vendor by resolution. Each vendor must clearly designate in its RFQ response any information which it deems to be proprietary. It is the County’s experience that the vast majority of RFQ responses contain no proprietary information. Therefore, any such designation must be limited in scope and reasonably based.

7.7 Any contract for services awarded to any vendor shall be subject to the availability and appropriation of sufficient funds for this purpose annually.

7.8 Contracts awarded to any vendor created by virtue of this RFQ may be amended to provide for closely related services, the need for which may arise or become apparent after the original contract award. Any contract amendment for closely related services must be approved by resolution of the Board of County Commissioners of Burlington County.

7.9 The entering into a Contract between the County of Burlington and applicant/vendor pursuant to this RFQ does not create an employer/employee relationship, and at all times applicant/vendor shall remain an independent contractor.

8.0 CRITERIA FOR EVALUTION OF RESPONSES

A Review Committee has been established to independently evaluate each submission and make a recommendation to the Board of County Commissioners of Burlington County as to the vendor(s) to be awarded the contract. Applicants are required to achieve a minimum average score of 50 to be used in awarding the contract shall include:

8.1 Experience in providing the type of Emergency Shelter services detailed herein and reputation in the field. (25)

8.2 Qualifications. (25)

8.3 Availability to provide services at Burlington County on a 24/hour basis and as indicated in Part II, Scope of Services. (25)

8.4 Location of Services. (25)

The County of Burlington reserves the right to award a contract to the vendor(s) that best meets the needs and interest of the County, cost and other factors considered.

SEE THE NEXT PAGE FOR PART II, RESPONSE REQUIREMENTS

PART II
RFQ RESPONSE REQUIREMENTS

FORMAT

To assure consistency, responses must conform to the following format:

- A. Scope of Services/Statement of Qualifications
- B. Facilities
- C. Conflict of Interest
- D. Form of Contract
- E. Statement of Ownership
- F. Insurance
- G. RFQ Response Form

All sections are to be addressed and specifically referenced.

The following explains what we expect in each of the major sections.

SECTION A - SCOPE OF SERVICES

The Director of the Department of Human Services is requesting qualification statements in order to select vendors to provide the following services. Your response should detail your qualifications to provide one or more of the following services set forth herein.

The Burlington County Department of Human Services is seeking community partners for Code Blue Services to provide overnight emergency shelter for the homeless during Code Blue declarations.

Providers of Code Blue Shelter Services will be expected to provide overnight, temporary shelter for homeless individuals. Overnight sheltering will be limited to no more than fourteen (14) homeless clients served per Code Blue declared night.

Vendors are authorized to include motels as overnight temporary shelter if a pandemic state of emergency is declared.

Compensation shall be at the approved Code Blue Shelter rate per homeless client sheltered per Code Blue declaration night. Unless otherwise approved by the Department of Human services, payment shall be made on a monthly basis upon submission of Purchase Orders/Vouchers (and appropriate client sign-in sheets) certifying the actual number of homeless clients served.

SECTION B – FACILITIES

This section should address areas as outlined:

For the facilities to be utilized in Burlington County, New Jersey, provide:

1. The name and location of the facility(s) where Code Blue Shelter Services will be provided.
2. Personnel assigned to this location
3. List of trainings completed by personnel assigned to this location
4. Proof that the facility is either licensed pursuant to N.J.A.C. 5:15-1 et seq, or an exempt Hospitality Room, as that term is defined in N.J.A.C. 5:15-2.1.

SECTION C - CONFLICT OF INTEREST

See attached conflict of interest certification to be executed and returned with submission package.

This section should disclose any potential conflicts of interest that the vendor may have in performing these services for Burlington County.

SECTION D - FORM OF CONTRACT

The Office of the County Solicitor will supply the form of contract.

SECTION E - STATEMENT OF OWNERSHIP DISCLOSURE

N.J.S.A. 52:25-24.2 et seq. (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.

Name of Organization: _____

Organization Address: _____

Part I Check the box that represents the type of business organization:

- Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- For-Profit Corporation (any type) Limited Liability Company (LLC)
- Partnership Limited Partnership Limited Liability Partnership (LLP)

Other (be specific): _____

Part II

The list below contains the names and addresses of all stockholders in the corporation who own ten percent (10%) or more of its stock, of any class, or of all individual partners in the partnership who own a ten percent (10%) or greater interest therein, or of all members in the limited liability company who own a ten percent (10%) or greater interest therein, as the case may be. (COMPLETE THE LIST BELOW IN THIS SECTION)

OR

No one stockholder in the corporation owns ten percent (10%) or more of its stock, of any class, or no individual partner in the partnership owns a ten percent (10%) or greater interest therein, or no member in the limited liability company owns a ten percent (10%) or greater interest therein, as the case may be.

(SKIP TO PART IV)

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Home Address (for Individuals) or Business Address

Part III DISCLOSURE OF TEN PERCENT (10%) OR GREATER OWNERSHIP IN THE STOCKHOLDERS, PARTNERS OR LLC MEMBERS LISTED IN PART II

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a ten percent (10%) or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a ten percent (10%) or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. **Attach additional sheets if more space is needed.**

Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

Please list the names and addresses of each stockholder, partner or member owning a ten percent (10%) or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II **other than for any**

publicly traded parent entities referenced above. The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member exceeding the ten percent (10%) ownership criteria established pursuant to N.J.S.A. 52:25-24.2 et seq. has been listed.

Attach additional sheets if more space is needed.

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Home Address (for Individuals) or Business Address

Part IV Certification

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the **County of Burlington** is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the **County of Burlington** to notify the **County of Burlington** in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the **County of Burlington** to declare any contract(s) resulting from this certification void and unenforceable.

Name (Print):		Title:	
Signature:		Date:	

SECTION F- INSURANCE

Statement from broker of your insurance coverage as required in Part I, Section 4

SECTION G – RFQ RESPONSE FORM

See attached

SECTION H – QUALIFICATION CERTIFICATION AND NOTARIZATION RESPONSE FORMAT

CERTIFICATION

I hereby certify that the foregoing information and any attachments thereto, are true, accurate, and consistent with the records maintained by the individual, partnership, or corporation submitting this Request for Qualification. I acknowledge that the County of Burlington is relying on the information contained herein, and I am aware that any willfully false statement or misrepresentation may subject me and/or my firm to criminal penalties.

(Typed Name)

(Signature)

(Date)

(Title)

The above individual(s) came before me in the capacity of _____ _____and signed this certification.	PLACE SEAL HERE
_____ Notary Attest	
_____ My commission expires	

RFQ RESPONSE FORM

Your submission will not be considered complete unless the following has been submitted:

Statement of Qualifications, Part II, Section A (MANDATORY)

Office Location, Part II, Section B

Executed Conflict of Interest Certification, Part II, Section C

Executed Statement of Ownership, Part II, Section E (MANDATORY)

Statement from Broker of Your Insurance Coverage, Part II, Section F (MANDATORY)

CONFLICT OF INTEREST CERTIFICATION

The undersigned certifies to the Board of County Commissioners of the County of Burlington ("Board") that in performing services to Burlington County he knows of no circumstance that would constitute a conflict of interest, financial or otherwise, between himself or his firm and the Board, its members or with the interest of the County of Burlington in general. The undersigned further certifies that he knows of no circumstances or relationships between himself or his firm and third parties that would cause the actual or appearance of a conflict of interest or a compromise of judgment and independence in the performance of the designated services.

The undersigned acknowledges this is a continuing certification, and shall remain in effect for the term of the consulting services.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Date: _____

By: _____

Exhibit A

Equal Employment Opportunity
N.J.S.A. 10:5-31 et seq.

HOLD HARMLESS/INDEMNIFICATION AGREEMENT

The Proposer agrees that upon execution of the CONTRACT for the services outlined in these specifications the Proposer shall defend, indemnify and hold harmless the County of Burlington and its agents, officers and employees from and against all claims, demands, actions, lawsuits, damages, judgments or liabilities (including attorney fees and costs of legal and administrative proceedings) including, but not limited to property damage or loss and/or personal injury including loss of life of any person, agency, corporation or governmental entity arising out of the purchase, installation and/or services related to Code Blue RFQ to be provided by the Proposer to the County of Burlington resulting from any act or omission by the Proposer, its officers, employees, agents, servants or subcontractors in the performance of any responsibility or service relating to the Contract. The PROPOSER further agrees that this indemnification by the PROPOSER shall continue after completion of the CONTRACT for all claims, demands, suits, actions, recoveries, judgments, costs and expenses including attorney's fees resulting from acts or omissions the PROPOSER, its officers, employees, agents, servants or subcontractors which occur prior to the completion of the CONTRACT. Notwithstanding any other provision of this paragraph, the Proposer is not responsible for indemnification of the County, its agents, officers, employees from claims, actions, lawsuits, damages, judgments, or liabilities arising out of the negligence or deliberate or willful actions on the part of County agents, officers and employees.

The County of Burlington shall not be responsible for representing or defending the Proposer, its officers, employees, agents, servants or subcontractors who may be named as defendants in any lawsuit, or in connection with any civil claim including, but not limited to tort, contractual or civil rights claims.

(Firm name)

_____, 20____
(Date signed)

(Signature)

(Type or print name and title)

[Corporate seal]

(Address)

(City, State) (Zip Code)

ATTEST: _____
(Signature)

(Type or print name/title)

NON-COLLUSION CERTIFICATION

The undersigned proposer hereby specifically certifies that, to the best of its knowledge and belief, the annexed proposal for the above named project has not been prepared in collusion with any other proposer or like item or service and that the prices, discounts, terms, and conditions thereof have not been directly or indirectly communicated by or on behalf of said proposer to any such person other than the recipient of such proposal and will not be communicated to any such person prior to the official opening of said proposal.

Proposer fully understands that no premiums, rebates or gratuities are permitted either with, prior to, or after signing of contract. Any such violation will result in cancellation and the removal from proposal list.

Undersigned proposer further certifies that it has the necessary authority to sign this stipulation stating it has not entered into any agreement or otherwise taken any action in restraint of free competitive proposing in connection with above-named project.

This certification may be treated for all purposes as a sworn statement made under the oath as equivalent affirmation, and that, any statements made herein are untrue the proposer may be subject to the provisions of N.J.S.A. 2C:28 -1 et seq. through N.J.S.A. 2C:28 - 3 et seq. inclusive, and relevant sequential sections, and if applicable, 18 U.S.C. 1001, et seq.

(Firm name)

(Signature)

(Type or print name and title)

(Address)

(City, State) (Zip Code)

Dated: _____, 20__

EQUAL EMPLOYMENT OPPORTUNITY

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to **N.J.S.A. 10:5-31 et seq.** as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with **N.J.A.C. 17:27-5.2.** et seq.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

1. Letter of Federal Affirmative Action Plan Approval
2. Certificate of Employee Information Report
3. Employee Information Report Form AA-302 (electronically provided by the Division and distributed to the public agency through the Division's website at www.state.nj.us/treasury/contract_compliance)

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Public Contracts Equal Employment Opportunity Compliance as may be requested by the office from time to time in order to carry out the purposes of these regulations, and

public agencies shall furnish such information as may be requested by the Division of Public Contracts Equal Employment Opportunity Compliance for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code at N.J.A.C.17:27.

EQUAL EMPLOYMENT OPPORTUNITY QUESTIONNAIRE

Complete questionnaire in the event that you or you firm is awarded this contract. The necessary forms (AA302) will be sent by the County prior to award. This form should be submitted with your proposal.

1. Our company has a Federal or State of New Jersey Affirmative Action Plan approval.

[] YES

[] NO

A. If yes, attach a photocopy of said approval to this page. Acceptable approvals are a current letter (not more than one (1) year from date) from the United States Department of Labor or a State of New Jersey Certificate of Employee Information Report.

B. If no, and you become Successful Proposer, an Employee Information Report (Form AA302) will be provided and must be submitted within seven (7) days after receipt of the notification of intent to award the contract.

You must enter the Contract number shown on the cover of this PROPOSAL on all forms submitted.

I certify that the above information is correct to the best of my knowledge.

SIGNATURE _____

NAME _____ TITLE _____

BUSINESS NAME _____

DATE _____, 20__

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NOTE: ATTACH COPY OF FORM HERE
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