

A. SUBJECT: : SWT-06-04, REQUEST FOR QUOTATION UNDER GSA SCHEDULE 621 I, SINs: 621-025J, 621-025G , 621-038 AND 621-039

OBSTETRICS AND GYNECOLOGY SERVICES FOR
THE NAVAL HOSPITAL CAMP PENDLETON, CA

All contractors will be given a fair opportunity to be considered for the Task Order resulting from this request. Specific information for services is as follows:

1. **SERVICES REQUIRED.** This is a firm-fixed price quotation request is for Obstetrician/Gynecologist Nurse Practitioner, Obstetric/Gynecologic Registered Nurses, Obstetric/Gynecologic Licensed Vocational Nurses, and Certified Medical Assistant services for Naval Hospital Camp Pendleton, CA, 92055.
2. **PERIOD OF PERFORMANCE.** The period of performance is from 1 July 2004 through 30 September 2004 with an option to extend (at the discretion of the Government) from 1 October 2004 through 30 September 2005 and from 1 October 2005 through 30 September 2006.
3. **SPECIFIC REQUIREMENTS.** Statements of work that outline, the work to be performed; location of work; hours of performance; applicable professional standards, certifications, education, experience; and the special requirements of these positions for this quotation are contained in **Attachments 001 through 005**. These requirements supplement but do not supplant the provisions of the schedule contract specified above.
4. **QUOTATION INFORMATION.**
 - a. Written responses to this quotation are due to the Contracting Officer **NLT 1200 pm local time (Noon EDT) 08 APR 2004**. Preferred response method is by email to sdwellen@nmlc.med.navy.mil. The Government will also accept telefaxed responses to: (301) 619-2925 (Attn: Code 21W). The business address of the Contracting Officer is: Commanding Officer, Naval Medical Logistics Command (Attn: Code 21W) 1681 Nelson Street, Fort Detrick, MD 21702-9203. Questions may be directed to sdwellen@nmlc.med.navy.mil. All correspondence shall reference SWT-06-04.
 - b. For this quotation, each Contractor's response must contain a completed Pricing Sheet (Section B), a Supplemental Pricing Worksheet for each position (**Attachment 006**). In addition, offerors must include as a contract requirement a completed resume/curriculum vitae for each position in the format contained in **Attachments 007A through 007E**.
5. **EVALUATION FACTORS AND THE BASIS FOR AWARD.**
 - a. **Evaluation Factors.** For this quotation, the Contracting Officer will select the awardee(s) based upon the relevance of the offeror's experience providing similar or like services as this experience meets or exceeds the requirements contained in **Attachments 001 through 005**; then, offeror's previous experience in military medical facilities, then the offeror's price. In descending order of importance, the evaluation factors are:
 1. The relevance of the offeror's experience (using **Attachment 009** Past Performance Format) providing similar or like services, then
 2. The offeror's previous experience in military medical facilities, then
 7. The offeror's price. The factors to be considered in evaluating prices proposed are:
 - (i) **Completeness** - All price information required has been submitted and tracks from Section B of the Task Order.
 - (ii) **Reasonableness** - The degree to which the proposed prices compare to the prices that a reasonable, prudent person would expect to incur for the same or similar services.

(iii) Realism - The offeror's prices, and supplemental pricing information will be examined to identify unusually low price estimates, understatements of costs, inconsistent pricing patterns, potential misunderstandings of the Task Order requirements, and the risk of personnel recruitment and retention problems during Task Order performance.

Basis for Award. Multiple awards may be made as a result of this quotation using GSA Contractor Teaming Arrangements; however, the Government reserves the right to make a single award when in the best interest of the Government. Award(s) will be made to the offeror(s) whose quotation(s) is/are the most advantageous to the Government, considering (1) the technical factors listed above, and (2) who have demonstrated positive experience (past performance) in providing Obstetrics and Gynecological Professional or services of similar complexity, and (3) who has submitted a fair and reasonable and price. At a minimum, awards will be made by Lot, i.e., all of Lot 1 will be awarded to one contractor; all of Lot 2 will be awarded to either the same contractor or another contractor; etc.

In the evaluation of offerors:

The greatest consideration will be given to offerors who demonstrate successful experience (since 1999) providing all of the labor categories required herein; and,

Lesser consideration will be given to offerors who demonstrate successful experience (since 1999) providing services in some but not all of the labor categories required herein; and

Lesser consideration will be given to offerors who demonstrate successful experience (since 1999) providing professional services similar to Obstetrics and Gynecological services but not specifically Obstetrical and Gynecological services; and

In all cases, experience providing dental services is not relevant to this requirement. Additionally, medical services where the healthcare workers are not privileged by a hospital credentialing body (for example, occupational health clinics, prison infirmaries, etc.) are not relevant to this requirement.

The combined technical factors of the qualifications of the offeror's successful experience providing Obstetrical and Gynecological professional services (past performance) both within the military medical system and in private sector hospitals is significantly more important than the offeror's price. However, the closer the merits of the technical factors are to one another, the greater the importance of price in making the award determination. The Government reserves the right to make an award to other than the low priced offeror if the technical qualifications of the contractor warrants paying a premium.

6. NON-COMPETE CLAUSES.

a. Offerors are directed to Section C, Paragraph 11.11. and its subparagraph with respect to the use of non-compete clauses.

EACH CONTRACTOR MUST CONFIRM RECEIPT OF THIS E-MAIL WITHIN 48 HOURS OF RECEIPT TO (Insert e-mail address).

B. Schedule of Prices

1. The Contractor shall furnish qualified Health Care Workers in accordance with this Task Order and the basic contract.

2. The following activity is/are the sole authority to issue and or modify this Task Order:

Naval Medical Logistics Command
Code 02
1681 Nelson Street
Fort Detrick MD 21702-9203

3. This Task Order will be placed using a DD Form 1155 signed by the Contracting Officer. It will be executed in writing by the Contracting Officer and transmitted either via mail, facsimile, or electronically via e-mail. If the order is transmitted via e-mail, the contractor shall acknowledge receipt of e-mail.

4. Performance of Health Care Worker services at military treatment facilities (MTFs), branch medical clinics (BMCs), or other activities under the cognizance of the Naval Hospital Camp Pendleton, CA are contemplated by this Task Order and shall be considered within the scope of these requirements.

5. In the event that performance requirements at a particular facility differ slightly from that in the basic contract, those differences shall be defined in this Task Order.

6. Each Task Order will contain at a minimum the following information:

- a. The date of order
- b. Contract number and order number
- c. Description of services
 - Labor category and,
 - Specific duties and,
 - Position qualifications and,
 - Place of performance and,
 - Hours of operation and,
 - Quantity required.
- d. The unit price
- e. The period of performance
- f. Accounting and appropriation data
- g. Payment office address
- h. Any other pertinent data
- i. Invoicing and Acceptance instructions
- j. Name of the Contracting Officer's Representative (COR)

7. The period of performance of any one Task Order shall be for a period of twelve (12) months or less in duration.

8. The Government reserves the right to reassign health care workers within a Military Treatment Facility (MTF), to meet patient demand.

9. In each Position Specific Statement of Work (**Attachments 001 through 005**) the Government will disclose specific information concerning the type(s), duration and location(s) of the services to be provided. This notice may include the number of work hours per day that constitutes the "shift" of an individual healthcare worker, the number of hours/shifts required, the times that hours/shifts will be scheduled, and the places where these hours/shifts will be performed. In the event that the Government requires shifts lasting more than 8 hours per day, the parties agree that the Contractor is solely responsible for investigating and determining the applicability of any state and/or local wage or overtime compensation laws with regard to its performance. It is further agreed that the Contractor assumes any and all risk as to the accuracy of its judgment. Accordingly, since the price provided herein reflects the Contractor's determination, the Contractor shall not be entitled to any equitable price adjustment should a state and/or local

agency charged with enforcement of such wage and overtime laws rule that the Contractor's determination was erroneous

10. The contractor shall factor all the cost of watch-standing, shifts greater than 8 hours, on-call, differential pay, special pay, etc into its hourly rate for the line item for that specific labor category. The Contractor shall provide a composite price that blends all requirements into a single hourly price for the scheduled services. The Contractor will be paid at that composite price. The Government's purpose is to ease the administrative burden on both the Contractor and the Government to track and validate frequent, urgent and/or emergent requirements for care that can originate from multiple services within the MTF. For subsequent requirements, the Government will provide pricing instructions for these requirements within each individual Task Order.

11. As a minimum, awards will be made by lot (i.e., all of Lot 1 will be awarded to one contractor; all of Lot 2 will be awarded to either the same contractor as Lot 1 or another contractor, etc.).

12. Offeror Pricing.

<u>SIN</u>	<u>DESCRIPTION</u>	<u>UNIT PRICE</u>	<u>UNIT</u>	<u>QUANTITY</u>	<u>TOTAL PRICE</u>
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LOT 1 (For Services from 1 Jul 2004 through 30 September 2004)

621-025(j) OBSTETRICS AND GYNECOLOGY NURSE PRACTITIONER	\$ _____	HRS	512	\$ _____
621-025(g) REGISTERED NURSE (INPATIENT)	\$ _____	HRS	6132	\$ _____
621-038 LICENSED VOCATIONAL NURSE (INPATIENT)	\$ _____	HRS	1356	\$ _____
621-038 LICENSED VOCATIONAL NURSE (OUTPATIENT)	\$ _____	HRS	512	\$ _____
621-039 CERTIFIED MEDICAL ASSISTANT	\$ _____	HRS	1024	\$ _____

LOT 2 (For Services from 1 October 2004 through 30 September 2005)

621-025(j) OBSTETRICS AND GYNECOLOGY NURSE PRACTITIONER	\$ _____	HRS	2000	\$ _____
621-025(g) REGISTERED NURSE (INPATIENT)	\$ _____	HRS	22836	\$ _____
621-038 LICENSED VOCATIONAL NURSE (INPATIENT)	\$ _____	HRS	5676	\$ _____
621-038 LICENSED VOCATIONAL NURSE (OUTPATIENT)	\$ _____	HRS	2000	\$ _____
621-039 CERTIFIED MEDICAL ASSISTANT	\$ _____	HRS	4000	\$ _____

LOT 3 (For Services from 1 October 2005 through 30 September 2006)

621-025(j) OBSTETRICS AND GYNECOLOGY NURSE PRACTITIONER	\$ _____	HRS	1992	\$ _____
621-025(g) REGISTERED NURSE (INPATIENT)	\$ _____	HRS	22824	\$ _____

621-038 LICENSED VOCATIONAL NURSE (INPATIENT)	\$ _____	HRS	5628	\$ _____
621-038 LICENSED VOCATIONAL NURSE (OUTPATIENT)	\$ _____	HRS	1992	\$ _____
621-039 CERTIFIED MEDICAL ASSISTANT	\$ _____	HRS	3984	\$ _____
TOTAL PRICE				\$ _____

C. Statement of Work.

NOTE 1: The award of this Task Order (DO) will create a Personal Services relationship between the Contractor healthcare worker and the Government. Therefore, the requirements of 10 USC §1089, 10 USC §1091, and all paragraphs in the basic contract related to Personal Services contracting, including the paragraph in the basic contract entitled, “Scope of Work Personal Services Only” shall all apply.

NOTE 2: The clauses within this Task Order supplement but do not supplant the clauses contained in of the Federal Supply Schedule contract **FSS/VA 621.1**. In the event there is a conflict between the clauses herein and the clauses in the basic contract, the basic contract will always have precedence.

NOTE 3: The use of *Commanding Officer* means the Commanding Officer of the military treatment facility or a designated representative, e.g., Contracting Officer’s Representative (COR), Department Head, or the head of the activity designated in a particular clinical area.

NOTE 4: The term *healthcare worker* (or HCW) refers to the individual(s) providing services under this agreement.

NOTE 5: The abbreviation *MTF* refers to the Military Treatment Facility or other Federal healthcare facility at which services are performed.

1. During the term of this Task Order, the Contractor agrees to provide, on behalf of the Government, the services identified in Position Specific Statements of Work (**Attachments 001 through 005**) for treatment of active duty military personnel and other eligible beneficiaries, in accordance with the terms and conditions of this contract.

2. The Contractor shall provide, medical and healthcare services at the locations specified in Schedule B and each Position Specific Statement of Work (**Attachments 001 through 005**).

3. RESERVED

4. SCHEDULES, ABSENCES, AND LEAVE. Each Attachment will specify the work schedule of each healthcare worker and shall specify whether the healthcare worker will either: (1) accrue leave as an individual and be subject to approval by the Government for scheduling accrued leave; or (2) not accrue leave and be subject to replacement coverage by the contractor during all scheduled and unscheduled absences.

4.1. No accrued leave positions are required.

4.2. Positions for which replacement coverage is required.

4.2.1. The Contractor shall have sufficient qualified reserve personnel so that all services are provided in the event a healthcare worker scheduled to work becomes ill, resigns, is terminated, or is otherwise unavailable to work. The requirement for services is not mitigated by inclement weather.

4.2.2. If a healthcare worker becomes ill or is otherwise unable to fulfill his/her obligation to work, they shall notify the contractor who in turn shall notify the COR.

4.2.3. The Contractor is responsible for replacing a healthcare worker who for any reason misses more than 2 hours of a shift.

4.2.4. The Contractor shall provide replacement coverage by a healthcare worker who meets the minimum healthcare worker contract qualifications and is approved for work (i.e., has been credentialed and privileged as appropriate and has satisfactorily completed orientation).

4.2.5. The contractor shall prepare the schedule of workers for all positions for which replacement coverage is required. Unless otherwise specified in the task order, the specific schedule for each 2-week period shall be provided to the COR 1 month in advance of the 2-week period. The schedule shall be complete and include the name of the specific healthcare worker and provide the specific individuals who will provide coverage.

4.3. Provisions for all healthcare workers.

4.3.1. Administrative Leave. For unusual and compelling circumstances (e.g., weather emergencies) in which the Commanding Officer either excuses all facility personnel from reporting to work or dismisses all personnel early, the Commanding Officer is authorized to grant administrative leave to the healthcare worker. This administrative leave may be compensated leave.

4.3.2. Furlough. Unless otherwise authorized by a defense appropriations bill, the Government shall not reimburse contractors for services not rendered during a Government furlough. In the event of a Government furlough, the Commanding Officer will determine which healthcare workers are considered critical and therefore must report to work. Healthcare workers deemed critical shall be compensated for services rendered during a furlough. All other healthcare workers shall be furloughed until the Government shutdown ends or they are notified by the Contracting Officer's Representative that they have become critical employees.

4.3.3. A healthcare worker with a bona fide medical emergency occurring while on duty, or with an on-the-job injury, will be provided medical care until the condition is stabilized. The contractor shall reimburse the Government for all medical services provided unless the healthcare worker is otherwise entitled to Government medical services.

4.3.4. In the instance where the Government directs the healthcare worker to remain on duty in excess of their scheduled shift due to an unforeseen emergency or to complete patient treatment where lack of continuity of care would otherwise jeopardize patient health, the healthcare worker shall remain on duty. The healthcare worker will be given an equal amount of compensatory time to be scheduled upon mutual agreement of the healthcare worker and the Commanding Officer. This provision is not intended to apply to the time required to complete routine tasks (e.g., completion of paperwork or routine administrative tasks at the end of a shift), which are to be completed as part of the shift.

4.3.5. Healthcare workers providing services will generally (as specified in the applicable Attachment) receive uncompensated meal breaks of 30 minutes. The healthcare worker's shift will be 8.5 hours or 12.50 hours, respectively, to constitute a full 8 or 12 hours of on-site service. This includes the Government's right to extend the work shift beyond the scheduled clinic closing time to complete patient care and administrative duties. No healthcare worker shall work beyond their scheduled 8.5 or 12.50 hours per shift.

4.3.6. In consonance with state and/or local labor law, healthcare workers may receive one compensated work break in the morning and one in the afternoon. The Government will schedule these breaks consistent with workload requirements. Neither break shall exceed 15 minutes. The Government will accept no liability and will pay no additional costs to the Contractor if the healthcare worker unilaterally decides to forego their scheduled break(s).

4.3.7. The Commanding Officer may also grant administrative leave to allow healthcare workers to attend continuing education courses. This administrative leave will not exceed 40 hours per consecutive 12 months, equivalently apportioned for part-time employees. The Government will not reimburse the healthcare worker for the cost of any course tuition and/or other related education expense. The healthcare worker shall provide proof of attendance and successful completion of continuing education to the Commanding Officer upon request.

5. DUTY HOURS.

5.1. The Government will identify specific duty hours in each individual Attachment. Unless otherwise specified, services required by an individual healthcare worker shall not exceed 80 hours per two-week (14 consecutive days) period. Any changes in the schedule shall be coordinated between the healthcare worker and the Government. Healthcare workers shall arrive for each scheduled shift in a well-rested condition.

5.2. Unless otherwise specified in each individual Attachment, the Contractor shall provide no more than two individuals for each 2,088 (or 2,096 in a leap year) hour requirement.

5.3. Individual healthcare workers may be temporarily assigned to another location within a 35 mile commuting area of their assigned MTF/Clinic.

5.4. Unless otherwise specified in the Attachment, services of the healthcare workers shall not be required on the day of observance of the following federally established holidays: New Year's Day, Martin Luther King's Birthday, President's Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. Healthcare workers who (1) accrue leave and (2) are scheduled to provide services on the 10 Federal holidays, will be compensated by the Government for these periods of authorized absence. For all positions for which replacement coverage is required, all days are treated equally and the healthcare worker who is not scheduled to provide services on any of the 10 Federal holidays will not be compensated by the Government for the holiday.

5.5. The contractor may elect to offer overtime to certain healthcare workers to fill otherwise unfilled shifts, portions of shifts, or scheduled hours of service. Nothing precludes the offer of this overtime to a healthcare worker who would otherwise provide 80 hours of service per two-week (14 consecutive day) period so long as all the following conditions apply:

5.5.1. In no case shall the amount of hours worked exceed 51 hours per consecutive 7-day period (calculated at 8.5 hours per shift x 6 shifts which includes uncompensated meal breaks) or 102 hours per consecutive 14 days period (calculated at 8.5 hours per shift x 12 shifts which includes uncompensated meal breaks) and,

5.5.2. In no case shall an individual work more than 6 consecutive days and,

5.5.3. In no case shall an individual work more than 12.50 hours during any consecutive 24 hour period (including uncompensated meal breaks) and,

5.5.4. In no case shall an employee's continued employment be contingent upon their accepting this overtime assignment and,

5.5.5. The parties agree that the Contractor is solely responsible for complying with state and/or local wage and overtime compensation laws as described herein and the parties further agree that the Contractor shall not look to the Government for additional reimbursement beyond the price already contained on the applicable hourly pricing for that labor category.

6 FAILURE AND/OR INABILITY TO PERFORM

6.1 Should a healthcare worker, who accrues leave and is subject to Government approval of the leave schedule, be unable to perform duties due to medical or physical disability for more than 10 consecutive days, that individuals' performance may be suspended by the Contracting Officer until such medical or physical disability is resolved. If performance is so suspended, no reimbursement shall be made to the contractor for the affected healthcare worker so long as performance is suspended.

6.2 If clinical privileges of a healthcare worker have been summarily suspended pending an investigation into questions of professional ethics or conduct, performance by that healthcare worker or for the Contractor in entirety may be suspended until clinical privileges are reinstated. No reimbursement shall be made to the contractor so long as performance is suspended. The denial, suspension, limitation, or revocation of clinical privileges based upon

practitioner impairment or misconduct will be reported to the appropriate licensing authorities of the state in which the license is held.

6.3 Any healthcare worker(s) demonstrating impaired judgment will be removed from providing healthcare services. The Government reserves the right to remove any employee who, in the judgment of a licensed physician, is impaired by drugs or alcohol. The contractor shall reimburse the Government for medical services provided to a contractor's employee, suspected to be impaired, in determining "fitness for duty" (i.e. test(s) for detecting illicit drug use).

6.4 Any healthcare worker(s) with alcohol or drug abuse problems may be allowed to return to work under the terms of this contract only with prior Government approval.

7. CONTRACT STATUS REVIEW (CSR) MEETINGS.

7.1. Each 30–90 days during performance, the Government will require the Contractor to discuss issues germane to the deliver of healthcare under this Task Order. The Government expressly retains the right to require the Contractor to attend face-to-face meetings at the Government's facilities. These meetings, at a minimum will discuss:

7.1.1. New healthcare workers who have begun providing services since the last CSR. The Government continually evaluates each healthcare worker's (a) personal interaction skills with patients and other staff, (b) their demonstrated fluency in the English language and, (c) their demonstrated familiarity with the equipment, supplies and materiel commonly used in the work site. At this meeting, the Government shall inform the Contractor of any employee-related issues that require corrective action on the part of the Contractor.

7.1.2. Contract administration issues relative to the efficient operation of the clinical setting.

7.1.3. Contractor generated opportunities or innovations aimed at improving services.

7.1.4. Any other item to the mutual benefit of the Contractor and the Government.

7.2. The Contractor is advised that these meetings are strictly informational and will not change the terms and conditions of this Task Order or the basic contract. A Government contract can only be changed with a signed modification issued by the Contracting Officer.

7.3. The Government encourages Contractor's to institute probationary policies for new employees.

8. CREDENTIALING.

8.1. General Information.

8.1.1. Contractor employees shall not provide medical services until the Commanding Officer has granted professional staff membership and clinical privileges. The Commanding Officer is the sole authority for granting and revoking privileges. The Government reserves the right to perform re-verification of credentials information. The Commanding Officer will not grant clinical privileges until the Government determines that credentials information has been satisfactorily verified. Therefore, the Navy considers the existence of Contractor employee within MTF who are not currently privileged, who fail to maintain their privileges or, who have privileges suspended or revoked to be a breach of contract. The Navy will make no payment for services resulting from services by such providers. Services covered or scheduled by such providers are furthermore considered uncovered. The Government additionally reserves the right to terminate this Task Order for Default and/or shall institute other appropriate contractual and/or legal remedies for failure to comply with the terms and conditions of this requirement.

8.1.2. The Government will not consider exceptions to the credentials review and clinical privileging process as defined by BUMEDINST 6320.66D and MTF instructions. The Contractor's failure to nominate individuals who do not meet the terms and conditions of this contract, including the requirements of BUMEDINST 6320.66D, shall not

excuse non-performance of contract requirements. A copy of BUMEDINST 6320.66D may be obtained at <http://nmo.med.navy.mil/Files/Media/directives/6320-66d.pdf>

8.1.3. Any Contractor or Contractor employee under suspension due to an investigation at any facility or licensing agency shall not be permitted to provide service under this contract. The Contractor shall notify the COR within 24 hours of occurrence of suspension concerning itself or any of its employees. These individuals may only provide services if privileges have been subsequently restored by the Commanding Officer.

8.1.4. The denial, suspension, limitation, or revocation of clinical privileges based upon practitioner impairment or misconduct shall be reported to the appropriate licensing authorities of the state in which the license is held.

8.1.5. The Government will appoint a member of MTF's Professional Affairs staff to assist the Contractor on all matters relating to credentialing and the application for clinical privileges. The Contractor shall appoint a member of its professional affairs or recruitment staff to coordinate the submission of credentialing information, assuring each file constitutes a complete, valid application for all healthcare workers. For those healthcare workers who currently have either an ICF or IPF on file, the Contractor shall submit to the COR an updated Personal and Professional Information Sheet (PPIS) for Privileged Providers, with a notation that an active ICF or IPF is on file. Generally, the Government defines the credentialing process as follows:

8.1.5.1 COR receives the credentialing package from the Contractor (Day 0).

8.1.5.2. COR reviews the package and (if complete) forwards it to the MTF's Professional Affairs staff, or notifies the Contractor of additional documentation required to complete the package, or returns the package to the Contractor (NLT Day 7).

8.1.5.3. If the package is complete and is forwarded to the MTF's Professional Affairs staff, credentialing action begins (Days 7-30). The MTF Professional Affairs staff will expedite credentialing actions as much as possible. The Contractor is directed to contact individual CORs at each MTF for the average expectation.

8.1.6. If a credentialing package is incomplete and returned to the Contractor or held by the COR pending receipt of additional information, the Contractor assumes full liability for filling or scheduling positions. Appropriate remedies will be instituted for vacancies.

8.1.7. Unless otherwise specified herein, the Government reserves the right to extend the credentials of a healthcare worker who has been granted delineated clinical privileges on a predecessor contract without a new or additional credentialing action. This extension may only occur (a) within the same command and, (b) when there is no increased clinical competency requirement of the healthcare worker and, (c) when there is no significant change in the scope of clinical practice of the healthcare worker and, (d) when there is no gap in performance between the contracts and, (e) when the healthcare worker has had acceptable performance evaluations.

8.1.8. Notwithstanding any actions taken or forbore by the Government's representative, the responsibility to provide fully qualified Contractor employees remains solely with the Contractor. Nothing herein shall limit the Commanding Officer's decision to deny clinical privileges to Contractor employees or to revoke clinical privileges already granted.

8.1.9. The MTF will retain the credentials documentation submitted for each healthcare worker within an official Individual Credentials File (ICF) or Individual Professional File (IPF) in accordance with JCAHO, MTF and, Bureau of Medicine and Surgery instructions and directives. The Contractor shall ensure that all documentation necessary to keep each individual file current is submitted to the MTF Professional Affairs Coordinator for inclusion in each file.

8.1.10. The Contractor shall maintain a complete employment file for each Contractor employee during the life of this contract. This file shall contain, at a minimum, all the documentation submitted to the Government for each employee. This file and the documents therein shall be kept current and will be made available for Government inspection upon request.

8.2. For Positions Requiring Individual Credentials Files (ICFs).

8.2.1. Following award and prior to the start of services for each applicable healthcare worker under BUMEDINST 6320.66D and MTF instructions, the contractor shall submit to the COR a completed Individual Credentials File (ICF). The ICF, which will be maintained at the MTF, contains specific information with regard to qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in BUMEDINST 6320.66D and subsequent revisions.

8.3. For Positions Requiring Individual Professional Files (IPFs).

8.3.1. Following award and prior to the start of services for each applicable healthcare worker under BUMEDINST 6320.66D and MTF instructions, the contractor shall submit to the COR a completed Individual Professional File (IPF). The IPF, which will be maintained at the MTF, contains specific information with regard to qualifying degrees and licenses, past professional experience and performance, education and training, health status, and competency as identified in BUMEDINST 6320.66D and subsequent revisions.

8.4. Qualifications Packages.

8.4.1. To document compliance with the requirements of the Position Specific Statements of Work (**Attachments 001 through 005**), the Contractor shall submit a qualifications package to the COR (to be retained by the COR) for each healthcare worker who is not required to submit either an ICF or an IPF (e.g., medical assistants, laboratory technicians, etc). Prior to Contractor employees providing services under this Task Order, the COR will verify the compliance of each healthcare worker with the qualification requirements appropriate to their employment category. The COR will not grant the authority to cover services a healthcare worker until they determine that the qualifications package has been satisfactorily verified. Therefore, the Navy considers the existence of Contractor employee within MTF whose qualifications packages are not approved, who fail to maintain the minimum qualifications for that labor category (via the applicable Attachment), or who have been suspended to be a breach of contract. The Navy will make no payment for services resulting from services by such healthcare workers. Services covered or scheduled by such healthcare workers are furthermore considered uncovered. The Government additionally reserves the right to terminate this Task Order for Default and/or shall institute other appropriate contractual and/or legal remedies for failure to comply with the terms and conditions of this requirement. Generally, the Government defines this review process as follows:

8.4.1.1. COR reviews the package and (if complete) notifies the Contractor that the healthcare worker may be scheduled to provide services, or notifies the Contractor of additional documentation required to complete the package, or returns the package to the Contractor (NLT Day 7).

8.4.1.2. If a package is incomplete and returned to the Contractor or held by the COR pending receipt of additional information, the Contractor assumes full liability for filling or scheduling positions. Appropriate remedies will be instituted for vacancies.

8.5. Interviews. The Government reserves the right to conduct interviews for healthcare workers proposed. If interviews will be required, specific information will be contained in the specific attachment to this Task Order.

9. GENERAL ADMINISTRATIVE/TRAINING DUTIES AND RESPONSIBILITIES APPLICABLE TO ALL HEALTHCARE WORKERS. The healthcare worker shall perform a full range of services on site using Government furnished facilities, equipment and supplies. Actual clinical activity will be a function of the overall demand for these services. All healthcare workers shall:

9.1. Participate in meetings to review and evaluate the care provided to patients, identify opportunities to improve the care delivered, and recommend corrective action when problems exist. Should a meeting occur outside of scheduled working hours, the healthcare worker shall be required to read and initial the minutes of the meeting.

9.2. Participate in the provision of in-service training to members of the clinical and administrative staff on subjects germane to their specialties.

- 9.3. Demonstrate awareness and sensitivity to patient/significant others' rights, as identified within the institution.
- 9.4. Demonstrate awareness of legal issues in all aspects of patient care and unit function and strive to manage situations in a reduced risk manner.
- 9.5. Demonstrate appropriate delegation of tasks and duties in the direction and coordination of health care team members, patient care, and clinic activities and provide training and/or direction as applicable to supporting Government employees (i.e., hospital corpsmen, students, interns, residents, etc.) assigned to you during the performance of duties.
- 9.6. Maintain an awareness of responsibility and accountability for own professional practice.
- 9.7. Participate in continuing education to meet own professional growth.
- 9.8. Attend annual renewal of the following training requirements provided by the Government: family advocacy, disaster training, infection control, sexual harassment, bloodborne pathogens and fire/safety.
- 9.9. Participate in the implementation of the MTF's Family Advocacy Program as directed. Participation shall include, but not be limited to, appropriate medical examination, documentation and reporting.
- 9.10. Contribute to the safe and effective operation of equipment used in patient care within a safe working environment. This shall include safe practices of emergency procedures, proper handling of hazardous materials and maintaining physical security.
- 9.11. Undergo orientation, as appropriate to the position. Orientation may be waived for personnel who have previously provided service at the MTF. Orientations include initial training requirements (e.g. fire, safety, infection control, and family advocacy) and information systems orientation (including the Composite Health Care System (CHCS) and the Ambulatory Data System (ADS)). The Government reserves the right to adjust orientation schedules to meet mission and workload requirements. In addition, healthcare workers identified as CHCS Super-users shall undergo additional training. Requirements for these CHCS Super-users will be specified in individual position specific statements of work.
- 9.12. Healthcare workers shall comply with Executive Order 12731, October 17, 1990, (55 Fed. Reg. 42547), Principles of Ethical Conduct for Government Officers and Employees, and shall also comply with Department of Defense (DOD) other government regulations implementing this Executive Order.
- 9.13. Healthcare workers shall become acquainted with and obey all station regulations, shall perform in a manner to preclude the waste of utilities, and shall not use Government telephones for personal business. All motor vehicles operated on these installations by healthcare workers shall be registered with the base security service according to applicable directives. Eating by healthcare workers is prohibited in patient care areas/clinics and is restricted to designated areas. Smoking is prohibited in all clinic facilities.
- 9.14. Healthcare workers ARE NOT prohibited, by reason of employment under this contract, from conducting a private practice or other employment so long as there is no conflict with the performance of duties under this contract. However, such private practice or other such employment shall not be conducted during those hours in which the healthcare worker is required to render services under this contract. Healthcare workers shall make no use of Government facilities or property in connection with such other employment.
- 9.15. While on duty, healthcare workers shall not advise, recommend, or suggest to individuals authorized to receive services at Government expense that such individuals should receive services from the healthcare worker when they are not on duty, or from a partner or group associated in practice with the contractor, except with the express written consent of the Commanding Officer. The contractor shall not bill individuals entitled to those services rendered pursuant to this contract.
- 9.16. Healthcare workers shall be neat, clean, well groomed, and in appropriate clothing when in patient care and public areas. All clothing shall be free of visible dirt and stains, and shall fit correctly. Fingernails shall be clean

and free from dirt and hair shall be neatly trimmed and combed. Healthcare workers shall display an identification badge, which includes the healthcare worker's full name and professional status (furnished by the Government) on the right breast of the outer clothing. Security badges provided by the Government shall be worn when on duty.

9.17 The Secretary of the Navy has determined that the illegal possession or use of drugs and paraphernalia in a military setting contributes directly to military drug abuse and undermines Command efforts to eliminate drug abuse among military personnel. The policy of the Department of the Navy (including the Marine Corps) is to deter and detect drug offenses on military installations. Measures to be taken to identify drug offenses on military installations, and to prevent introduction of illegal drugs and paraphernalia, include routine random inspection of vehicles while entering or leaving, with drug detection dogs when available, and random inspection of personal possessions on entry or exit. If there is probable cause to believe that a healthcare worker has been engaged in use, possession, or trafficking of drugs, the healthcare worker may be detained for a limited period of time until he/she can be removed from the installation or turned over to local law enforcement personnel having jurisdiction. When illegal drugs are discovered in the course of an inspection or search of a vehicle operated by a healthcare worker, the healthcare worker and vehicle may be detained for a reasonable period of time necessary to surrender the individual and vehicle to appropriate civil law enforcement personnel. Action may be taken to suspend, revoke, or deny clinical privileges as well as installation driving privileges. Implicit with the acceptance of this contract is the agreement by the healthcare worker to comply with all Federal and State laws as well as regulations issued by the Commander of the military installation concerning illegal drugs and paraphernalia.

9.18 All financial, statistical, personnel, and technical data which are furnished, produced or otherwise available to the contractor during the performance of this contract are considered confidential business information and shall not be used for purposes other than performance of work under this contract. Such data shall not be released by the contractor without prior written consent of the COR. Any presentation of any statistical or analytical materials, or any reports based on information obtained from studies covered by this contract, will be subject to review and approval by the COR before publication or dissemination.

9.19. The Contractor shall comply with applicable State and local laws, MTF instructions, policies and procedures.

9.20. Contractor personnel shall be subject to an automated data processing (ADP) background check in accordance with DoD Publication 5200.2-R. Personnel shall be required to complete the paper work necessary for the Government to complete this background check.

9.21. Healthcare workers shall become familiar with the Naval Hospital formulary. Providers authorized to prescribe pharmaceuticals shall do so according to the availability of drugs listed therein. The Government reserves the right to substitute generic medications for those prescribed by the healthcare worker. Pharmaceuticals shall only be dispensed to authorized beneficiaries of the Military Health System. Unauthorized prescribing may be grounds for revocation of clinical privileges.

9.22. When required, to ensure completion of services that extend beyond the normal close of business, the health care worker will remain on duty in excess of the scheduled shift. The health care worker will be given an equal amount of compensatory time to be scheduled upon mutual agreement of the healthcare worker and the workplace supervisor.

9.23. Cross Coverage (RN and LVN Positions ONLY).

9.23.1. In the event that acuity and/or workload drops to a level that allows the Government to safely reduce staff levels, the Government reserves the right to re-assign healthcare workers to other assignments within the MTF commensurate with their skills, certifications, experience and qualifications.

9.23.2. If the Government cannot reassign the healthcare worker, the Government will release that healthcare worker from duty, compensating the contractor for 4 hours of compensated service (for 12 hour shifts) or 2 hours of compensated service (for 8 hour shifts).

9.23.3. If the healthcare worker declines a reassignment, there will be no reimbursement to the Contractor.

9.24. All healthcare workers shall adhere to infection control guidelines and practice universal precautions.

10. PERSONNEL QUALIFICATIONS THAT APPLY TO ALL HEALTHCARE WORKERS. The contractor shall provide personnel having the minimum levels of education, training and experience. Basic qualification requirements are contained in this section. Additional qualifications specific to a particular labor category are contained in the applicable attachment and may include, but are not be limited to, experience, board certification, or other professional certifications appropriate to the particular labor category. Unique, position specific requirements are also provided in the applicable attachment. The following requirements apply to all individuals providing services under this contract:

10.1. Healthcare workers shall read, write, speak, and understand the English language fluently and maintain good communication skills with patients and other healthcare personnel.

10.2. Healthcare workers shall be physically capable of standing and/or sitting for extended periods of time and capable of normal ambulation.

10.3. Healthcare workers shall be eligible for U.S. employment. No alien shall be allowed to perform under this contract in violation of the Immigration Laws of the United States.

10.4. Healthcare workers shall represent an acceptable malpractice risk to the Government.

10.5. Healthcare workers shall maintain current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardio Pulmonary Resuscitation) for the Professional Rescuer; or equivalent.

10.6. Each healthcare worker shall obtain, at contractor expense, within 60 days prior to start of services, a statement from the healthcare worker's physician or a report of a physical examination indicating that the healthcare worker is free from mental or physical impairments which would restrict the healthcare worker from providing the services described herein. Healthcare workers hired after contract start shall be required to provide a physical exam statement or report obtained within 60 days prior to performance of services. The statement must contain the following information: "Having performed a physical examination on the person named below on (insert date), the following findings are true and accurate:

1. (Name of healthcare worker) is suffering from no physical disability which would restrict him/her from providing services as a (specialty).

2. (Name of healthcare worker) is not suffering from tuberculosis, hepatitis, sexually transmitted or other contagious diseases which restricts them from providing services as a (specialty). (Name of healthcare worker) has had a current (within 6 months) TB skin test (mantoux) reading or if a known reactor, an evaluation indicating no active disease. If a known reactor, completion of an annual questionnaire is required and can be obtained from the Occupational Health Department at the MTF.

3. (Name of healthcare worker) is considered free from Hepatitis B infection on the basis of having (circle the applicable number):

3a. Received at least three doses of recombinant hepatitis B vaccine currently licensed in the United States, or,

3b. Received an initial dose of the hepatitis B vaccine. The vaccine series shall be completed within 6 months of the employee start date, or,

3c. Provided documentation of the healthcare worker's waiver which declines the hepatitis B vaccine as set forth in OSHA guidelines (declination on the basis of religious convictions or medical contraindication only), or,

3d. Provided evidence of immunologically effective anti-HB levels in lieu of proof of recombinant hepatitis B vaccines. Assays must be performed in a laboratory accredited by the American Society of Clinical Pathologists (ASCP) and/or the College of American Pathologists (CAP).

4. (Name of healthcare worker) is considered to have evidence of immunity to Measles, Mumps and Rubella (MMR) by either (circle one): positive antibody titer, evidence of MMR immunization or, documentation of physician-diagnosed MMR.

5. (Name of healthcare worker) shows evidence of immunity to varicella by either (circle one): positive antibody titer; evidence of varicella immunization; or a statement of history of chicken pox.

(Signed)

Examining Physician

Examining Physician Information:

Name:

Address:

Telephone: _____ Date: _____

10.7. Except as provided in paragraph herein, no medical tests or procedures required by the contract may be performed at the MTF. Expenses for all required tests and/or procedures shall be borne by the contractor at no additional expense to the Government.

10.8. Further, healthcare workers shall agree to undergo personal health examinations and such other medical and dental examinations at any time during the term of this contract, as the Commanding Officer may deem necessary for preventive medicine, performance improvement, or privileging purposes. These examinations will be provided by the Government. If the contractor chooses, these examinations may be provided by private physician or dentist, at no expense to the Government. Additionally the healthcare worker should be immunized annually with the influenza vaccine in accordance with the BUMED instruction currently in effect. This vaccine will be provided by the Government. Although this vaccine will be provided by the Government, it may be obtained at other facilities with the cost being borne by the healthcare worker. Unless vaccinated by the Government, the healthcare worker shall be required to show proof of the vaccination. If the healthcare worker chooses to be immunized by the Government, they shall be required to sign a waiver in accordance with MTF rules and regulations. If the healthcare worker declines the immunization, they must provide documentation of the waiver, which declines the influenza vaccine (declination on the basis of religious convictions or medical contraindications only).

10.9. For individuals who do not show a positive antibody titer after immunization and appear to have a “non-immune” status, that employee must report varicella exposure to the COR and, in accordance with Centers for Disease Control Recommendations, may need to be removed from patient care duties beginning on the tenth day following exposure and remain away from work for the maximum incubation period of varicella (21 days). In this instance, personnel under this agreement who accrue leave will be considered to be in a leave status; all other personnel must be replaced during this period to ensure maintenance of contractually required coverage.

10.10. On an annual basis, healthcare workers must provide a current Purified Protein Derivative (PPD) reading or an evaluation if they are a known PPD reactor. The Contractor is responsible for any expenses incurred for required testing.

10.11. The management of HIV positive healthcare workers shall be consistent with current Center for Disease Control Guidelines (CDC) guidelines and Section 503 of Rehabilitation Act (29 U.S.C. Section 793) and its implementing regulations (41 CFR Part 60-741).

11. REQUIREMENTS AND CLAUSES SPECIFIC TO THIS TASK ORDER.

11.1. INSPECTION AND ACCEPTANCE

(a) The Contracting Officer's duly authorized representative, the Contracting Officer's Representative(s), will perform inspection and acceptance of services to be provided.

(b) For the purposes of this clause, the names of the Contracting Officer's representative(s) will be assigned in each individual Task Order issued.

(c) Inspection and acceptance will be performed at the locations listed in the position specific Statements of Work provided as attachments to this solicitation, or in subsequent Task Orders.

11.2. INVOICING INSTRUCTIONS AND PAYMENT FOR SERVICES

(a) The contractor shall submit invoices in quadruplicate with a copy of the applicable Material Inspection and Receiving Report, DD Form 250, signed by the cognizant Government representative, stating therein the name and title of the Government representative to whom delivery was made and the date of such delivery or period of performance.

(b) Invoices shall be submitted every two weeks to:

To be specified in individual Task Orders: Original and Three Copies

(c) The Government shall process invoices every two weeks for payment.

11.3. AWARDS. The Government intends to award Task Orders to each offeror selected for contract award. Task Orders will order the minimum quantity of services required from each awardee.

Awardees of Task Orders will be required to submit complete Credentialing Packages within 30 days following award. Failure to meet the 30-day requirement may result in termination of the Task Order. Additionally, failure to submit complete packages within 30 days following award may be considered as negative past performance information that may jeopardize the award of future Task Orders, and/or may result in termination of the Task Order.

11.4. COMMENCEMENT OF PERFORMANCE

Upon award, a Task Order will be transmitted to the Contractor on a DD Form 1155. Approved healthcare workers must begin performance no later than 60 days after execution of the Task Order by the Contracting Officer, unless otherwise mutually directed by the Government. If a healthcare worker cannot begin performance on the Task Order, the Contractor must notify the Contracting Officer immediately.

Failure to begin performance with the approved healthcare worker may result in termination of the Task Order. The Contractor may or may not be given the opportunity to propose a new healthcare worker. The Government reserves the right to terminate the Task Order for default if the Contractor fails to begin performance.

11.5. OMBUDSMAN. The ombudsman shall (a) review complaints from Contractors regarding the award of Task Order and (b) ensure that all Contractors are afforded a fair opportunity to be considered, consistent with the procedures in the contract. The Task Order ombudsman for this contract is the Navy Competition Advocate General. Contractors are encouraged to settle their complaints through the Competition Advocate chain of command, seeking review by the Command Competition Advocate at the Naval Medical Logistics Command before taking their complaints to the Navy Competition Advocate General. The Naval Medical Logistics Command's Competition Advocate can be reached at (301) 619-2158 or at the following address:

Naval Medical Logistics Command
ATTN: Executive Officer
1681 Nelson Street
Fort Detrick, MD 21702-9203
Fax Number: (301) 619-7430

11.6. PRIOR WRITTEN PERMISSION REQUIRED FOR SUBCONTRACTS. None of the services required by this Task Order shall be subcontracted to or performed by persons other than the Contractor or the Contractor's employees without the prior written consent of the Contracting Officer.

11.7. RESTRICTION ON THE USE OF GOVERNMENT-AFFILIATED PERSONNEL. Without the written approval of the Contracting Officer, the Contractor shall not use, in the performance of this Task Order, any U.S. Government employees or persons currently providing services on other Department of Defense contracts.

11.8. SUBSTITUTION OF PERSONNEL.

The Contractor agrees to initiate performance of each Task Order using only the healthcare worker(s) whose professional qualifications have been determined technically acceptable by the Government.

No personnel substitutions shall be made by the Contractor without the express consent of the Contracting Officer. All substitution requests will be processed in accordance with this clause. The government retains the right to terminate and re-compete a new Task Order.

No personnel substitutions shall be permitted during the period beginning with Task Order award and continuing through the first 30 days of performance, unless they are necessitated by a healthcare worker's unexpected illness, injury, death or termination of employment. Should one of these events occur, the Contractor shall promptly notify the Contracting Officer and provide the information required below, in writing.

All substitution requests must provide a detailed explanation of the circumstances necessitating the proposed replacement of personnel. The Contractor shall also demonstrate that the substitute healthcare worker(s) possess professional qualifications that meet the minimum requirements in this Task Order and in the position specific Statement of Work contained in the Task Order. In addition, all substitution requests shall include a Certificate of Availability signed and dated by each proposed healthcare worker, and any other information identified by the Contracting Officer. The Contracting Officer will evaluate such requests and promptly notify the Contractor or the approval or disapproval thereof.

11.9. PERSONNEL QUALIFICATIONS. The Contractor is required to provide personnel having certain minimum levels of education, training and experience. Proof that offered candidates possess these qualifications must be provided with each Contractor's proposal for each Task Order. Unique (i.e. position specific) requirements are provided in the position specific Statements of Work furnished as attachments to this Task Order.

11.10. LIABILITY INSURANCE. Before commencing work under a contract, the Contractor shall certify to the Contracting Officer in writing that the required insurance has been obtained. The following insurance as referenced in FAR 28.307, is the minimum insurance required:

- a. General Liability - Bodily injury liability insurance coverage written on the comprehensive form of policy of at least: \$500,000 per occurrence.
- b. Automobile liability insurance written on the comprehensive form of policy. The policy shall provide for bodily injury and property damage liability covering the operation of all automobiles used in connection with performing the contract. Policies covering automobiles operated in the United States shall provide coverage of a least \$200,000 per person and \$500,000 per occurrence for bodily injury and \$20,000 per occurrence for property damage. The amount of liability coverage on other policies shall be commensurate with any legal requirements of the locality and sufficient to meet normal and customary claims.
- c. Worker's compensation and employer's liability. Contractors are required to comply with applicable Federal and State Workers' compensation and occupational disease statutes. If occupational diseases are not compensable under those statutes, they shall be covered under the employer's liability section of the insurance policy, except when Contractor operations are so commingled with a Contractor's commercial operations that it would not be practical to require this coverage. Employer's liability coverage of at least \$100,000 shall be required, except in States with exclusive or monopolistic funds that do not permit workers, compensation to be written by private carriers.

11.11. NON-COMPETE CLAUSES – The use of non-compete agreements (including non-compete clauses within employment agreements) that are aimed at preventing the loss of Contractor personnel are acceptable only if the non-competition is limited to the current performance period specified in the contract, task order or Task Order. The use of non-compete agreements or clauses that prevent employees of an incumbent Contractor from accepting future employment with either the Government or with another Contractor is not acceptable. Awardees (including sub-Contractors) may not include conditions in employment agreements that hinder the Government's ability to accomplish the current or future mission of providing health and medical care to beneficiaries through the use of these clauses or agreements.

11.11.1. The Government reserves the right to query each offeror or Contractor regarding the use and purpose of these clauses or agreements and to use this information in award or logical follow-on decisions. If such conditions are included in employment agreements, the Government further reserves the right to reject an offeror's proposal or to terminate existing contracts or task orders.

11.12. CLAUSES INCORPORATED BY FULL TEXT

52.216-18 ORDERING. (OCT 1995)

(a) Any supplies and services to be furnished under this contract shall be ordered by issuance of Task Orders or task orders by the individuals or activities designated in the Schedule. Such orders may be issued from the date of contract award through a date to be determined, but not exceeding 60 months from contract award, or until all maximum quantities have been delivered, whichever occurs first.

(b) All Task Orders or task orders are subject to the terms and conditions of this contract. In the event of conflict between a Task Order or task order and this contract, the contract shall control.

(c) If mailed, a Task Order or task order is considered "issued" when the Government deposits the order in the mail. Orders may be issued orally, by facsimile, or by electronic commerce methods only if authorized in the Schedule.

(End of clause)

52.216-19 ORDER LIMITATIONS. (OCT 1995)

(a) Minimum order. When the Government requires supplies or services covered by this contract in an amount of less than \$1,000.00, the Government is not obligated to purchase, nor is the Contractor obligated to furnish, those supplies or services under the contract.

(b) Maximum order. The Contractor is not obligated to honor:

(1) Any order for a single item in excess of 100,000 hours per individual Line Item;

(2) Any order for a combination of items in excess of the maximum total requirements for this contract. (See Section B).

(c) Notwithstanding paragraphs (b) and (c) above, the Contractor shall honor any order exceeding the maximum order limitations in paragraph (b), unless that order (or orders) is returned to the ordering office within 30 days after issuance, with written notice stating the Contractor's intent not to ship the item (or items) called for and the reasons. Upon receiving this notice, the Government may acquire the supplies or services from another source.

(End of clause)

ATTACHMENTS

001 OBSTETRICS AND GYNECOLOGY NURSE PRACTITIONER

002 REGISTERED NURSE (INPATIENT)

003 LICENSED VOCATIONAL NURSE (OUTPATIENT)

004 LICENSED VOCATIONAL NURSE (INPATIENT)

005 CERTIFIED MEDICAL ASSISTANT

006 SUPPLEMENTAL PRICING WORKSHEET FOR EACH POSITION

007 RESUME/CURRICULUM VITAE FORMAT

007A OBSTETRICS AND GYNECOLOGY NURSE PRACTITIONER

007B REGISTERED NURSE (INPATIENT)

007C LICENSED VOCATIONAL NURSE (OUTPATIENT)

007D LICENSED VOCATIONAL NURSE (INPATIENT)

007E CERTIFIED MEDICAL ASSISTANT

008 PROOF OF US EMPLOYMENT ELIGIBILITY

009 PAST PERFORMANCE FORMAT

ATTACHMENT 001
OBSTETRICS AND GYNECOLOGY NURSE PRACTITIONER

1.0. SCOPE AND LOCATION. The Contractor shall provide OBSTETRICS AND GYNECOLOGY NURSE PRACTITIONER SERVICES at Naval Hospital Camp Pendleton, CA or an outlying Branch Medical Clinic. The Nurse Practitioner shall co-manage, with OB/GYN Physicians or appropriately credentialed Family Practice physicians, complicated (non low-risk) obstetric or gynecological patients. The Nurse Practitioner may be required to travel to an outlying Branch Medical Clinic within the Naval Hospital Camp Pendleton catchment area.

2.0. DUTY HOURS. The Government provides the information below as the Government's best estimate of the requirement for these services; however hours and frequency of service may vary as a result of patient demand, changes in schedules, and deployment of active duty providers. Unless otherwise described, specific schedules will be coordinated between the Contractor and the Government at least 30 days in advance. The Contractor shall provide a Nurse Practitioner in the OB-GYN Clinic to work a 8 hour shift with a .5 hour uncompensated lunch break or a 9 hour shift with a 1.0 hour uncompensated lunch break between the hours of 0800 and 1800, Monday through Friday. The contractor may credential up to 2.0 Full Time Equivalent personnel per each Full Time Equivalent position identified.

2.1. OB-GYN Clinic Services. Provide health care to women including, but not limited to, antepartum care, postpartum care, family planning, and gynecological care. Co-manage, with OB/GYN or appropriately credentialed Family Practice physicians, complicated (non low-risk) obstetric or gynecological patients. While providing Obstetrics and Gynecology Nurse Practitioner services in the Clinics, healthcare workers shall serve as a referral source for all house staff consults for Obstetrics and Gynecology Nurse Practitioner patient care. The healthcare worker shall respond to all "stat" or "immediate" requests for consultations from house staff consistent with their professional practice and local MTF instructions and directives.

2.2. Services of the healthcare worker shall not be required on the following paid holidays: New Year's Day, Martin Luther King's Birthday, Presidents Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. The healthcare worker will not be scheduled to provide services on any of the 10 Federal holidays; therefore, the Contractor will not be compensated by the Government for the holiday.

3. SPECIFIC DUTIES AND RESPONSIBILITIES.

3.1. The healthcare worker shall provide provide health care to women including, but not limited to, antepartum care, postpartum care, family planning, and gynecological care. Clinical activity will be a function of the Commanding Officer's credentialing process and the overall demand for women's health services. Productivity is expected to be comparable to other nurse practitioners assigned to a facility of similar size and complexity and authorized the same scope of practice.

3.2. Within the scope of practice granted by the Commanding Officer, the healthcare worker shall obtain histories, perform physical examinations, order and interpret laboratory and diagnostic studies, provide periodic health screening, diagnose women's health problems, develop treatment plans, perscribe and administer therapies, make referrals to other MTF specialists, participate in discharge planning, and provide teaching and counseling on subjects germane to the practice of women's health care.

3.3. The Nurse Practitioner shall provide guidance to Family Practice resident physicians during their OB/GYN rotations. Precept nurse practitioner students, nurse-midwifery students, medical students, and other health workers in training.

3.4. Promote economical ordering and utilization of equipment, supplies, and lab and radiological studies;

3.5. Healthcare workers shall technically direct and teach other staff, provide educational lectures and participate in in-service training to staff members. Such direction and interaction will conform with government and professional clinical standards and accepted clinical protocols and includes signing training evaluations for students assigned to the Women's Health Service. This requirement is consistent with the personal services nature of this contract.

3.6. Healthcare workers shall always promote preventive care and health maintenance including annual physicals, positive health behaviors and self-care through both formal and individual education and counseling.

3.7. Healthcare workers are members of a multi-disciplinary healthcare team. They shall delegate tasks and duties in the proper direction and coordination of healthcare team members, patient care and, clinic activities.

3.8. Healthcare workers shall recognize conditions that require isolation and ensure universal precautions are used in all patient encounters.

4.0 RESERVED.

5.0. SPECIFIC MINIMUM REQUIRED PERSONNEL QUALIFICATIONS FOR OBSTETRICS AND GYNECOLOGY NURSE PRACTITIONER. In addition to those personnel requirements both contained herein and in the basic contract, healthcare workers providing services under this contract shall:

5.1. Posses a Master's degree from an accredited university or college as a Women's Health Nurse Practitioner or a Master's degree in a clinical specialty and completion of a post-graduate certificate program as a Women's Health Nurse Practitioner from an accredited program.

5.2. Be certified as an Obstetrics/Gynecology Nurse Practitioner or Women's Health Care Nurse Practitioner by the National Certification Corporation for the Obstetric, Gynecologic, and Neonatal Nursing Specialties (NCC), and

5.3. Possess a current unrestricted license to practice as an Advanced Practice Nurse in any one of the fifty states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands, and

5.3. Possess current certification in Neonatal Resuscitation Program, and

5.4. Posses a minimum of 1 year of experience within the last 2 years as an OB/GYN Nurse Practitioner or Women's Health Care Nurse Practitioner in a Women's Health Services clinical setting.

ATTACHMENT 002
REGISTERED NURSE (INPATIENT)

1. SCOPE AND LOCATION. This position is located in the Maternal-Infant Services (MIS), MIS Directorate, Naval Hospital Camp Pendleton (NHCP), CA. The incumbent will be assigned to the MIS in one of the following areas: Labor & Delivery (L&D), Mother-Infant Unit (MIU), or Newborn & Special Care (Level II) Nursery. Each healthcare worker will be trained in all areas of MIS and is subject to rotation of all tours of duty and shifts as directed.

1.1. The Labor & Delivery (L&D) unit is an inpatient OB/Neonatal unit within the MIS Directorate. The unit provides comprehensive nursing care to women of child bearing age and their newborns. Historically, the L&D unit administered to approximately 130 - 150 deliveries per month, 18 -25 C-sections and approximately 400-600 outpatient visits per month.

1.2. The Mother-Infant Unit (MIU) is an inpatient OB/newborn unit within the within the MIS Directorate. Historically, the MIU administered to approximately 130 - 150 deliveries per month and 40 antepartum admissions per month.

1.3. The Newborn/Special Care Nursery is an inpatient OB/Neonatal unit within the MIS Directorate. Historically, the Newborn/Special Care Nursery administered to approximately 130 –150 deliveries per month and an average daily census of 3 in the Moderate Care/Level II nursery.

1.4. Scope of duties includes direct patient services with an emphasis on care continuity, return to wellness, health risk reduction, preventive care, patient/family education and assessment of patient compliance. A competent RN identifies, measures and evaluates patient and program outcomes; institutes actions to improve care; adheres to and communicates standards of practice; demonstrates professional competency; and ensures the clinical practice, competencies and performance of other assigned nursing personnel. Further, a competent RN conducts duties in accordance with organizational/Nursing Services/area policies and standard operating procedures and participates in educational and quality improvement programs within assigned area.

2. DUTY HOURS. The Government provides the information below as the Government’s best estimate of the requirement for these services; however hours and frequency of service may vary as a result of patient demand, changes in schedules, and deployment of active duty providers. Unless otherwise described, specific schedules will be coordinated between the Contractor and the Government at least 6 weeks in advance. The Contractor shall provide not more than 26 providers to meet these requirements. The contractor may credential up to 2.0 Full Time Equivalent personnel per each Full Time Equivalent position identified.

2.1. The work schedule consists of twelve hour shifts (0645-1915; 1845-0715) with a .5-hour uncompensated meal break on a Sunday through Saturday basis. Shift rotations may occur every six weeks. These positions are coverage positions. The Contractor shall provide an otherwise qualified replacement when scheduled personnel are unable to work due to planned and unplanned absences. The contractor shall provide Registered Nurses according to the Tables below. Each cell represents the duty hours, the corresponding days of the week and the number(s) of healthcare workers required.

Labor and Delivery Unit

<u>Hours</u>	<u>Sun</u>	<u>Mon</u>	<u>Tues</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>
0645-1915	2	2	1	1	1	1	2
1845-0715	2	2	2	2	2	2	2

Mother-Infant Unit

<u>Hours</u>	<u>Sun</u>	<u>Mon</u>	<u>Tues</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>
0645-1915	1	0	0	0	0	1	1
1845-0715	1	0	0	0	0	1	1

Newborn & Special Care (Level II) Nursery

<u>Hours</u>	<u>Sun</u>	<u>Mon</u>	<u>Tues</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>
0645-1915	1	0	0	0	0	1	1
1845-0715	1	1	1	0	1	1	1

2.2. Services of the healthcare workers are required on the following paid holidays: New Year's Day, Martin Luther King's Birthday, Presidents Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. If the healthcare worker is not scheduled to provide services on any of the 10 Federal holidays, the Contractor will not be compensated by the Government for the holiday.

3. SPECIFIC DUTIES AND RESPONSIBILITIES. The health care worker shall perform full range of Registered Nurse duties, within the scope of this statement of work, on site using government furnished supplies, facilities and equipment within the assigned unit of the hospital. Workload occurs as a result of scheduled and unscheduled requirements for care. Health care workers shall perform in accordance with established principles, practices and ethics of the nursing profession and written policies, procedures and requirements of Naval Hospital Camp Pendleton and shall apply age specific knowledge and competency appropriate to patient population served. The standards of performance for all health care workers shall reflect the degree of care, skill, and learning expected of a reasonably prudent health care worker in the professional category to which he or she belongs. Under the supervision of the Nursing Division Officer, Registered Nurses shall:

3.1. Provide nursing care to routine Obstetrical patients including newborns during the transition period within assigned inpatient unit based on relevant specialty care standards.

3.2. Establish priorities of patient care based on triage, nursing diagnosis, essential patient needs and outcomes and available unit, command, and community resources including time, personnel, equipment, and supplies.

3.3. Collaborate with multi-disciplinary team in assessing the effectiveness of existing therapies and interventions for patients with illnesses, their families and significant others.

3.4. Apply understanding and operation of specialty equipment. Maintain a safe patient care environment. Monitor and troubleshoot equipment assuring appropriate patient response. Provide intervention when indicated.

3.5. Maintain a clean, safe environment for the patient either by active participation in the cleaning of clinical spaces and medical equipment, or by guiding and directing other personnel in the environmental maintenance. Ensure upkeep, perform checks and maintain appropriate logs of medical equipment.

3.6. Administer medications and IV therapy employing knowledge of pharmacological agents and blood/blood components, their indications, routes of administration, expected actions and potential side effects, as related to specific patient population served. Manage complex central and peripheral intravenous lines/infusions.

3.7. Provide recovery care for post-anesthesia patients following C-Sections, cerclage, tubal ligations, and spontaneous pregnancy loss.

3.8. Provide circulating nurse support during obstetrical surgeries.

3.9. May serve as relief charge nurse. Coordinate and supervise the clinical activities of nursing care. Assure staff qualifications meet assignment care requirements. Develop contingency plan for unexpected events during shift.

3.10. Serve as a patient advocate and maintain patients right to confidentiality. Assist patients, families and significant others in identifying limitations.

3.11. Provide telephone advice based on clinical knowledge and accepted standards. Assist as needed in accessing appropriate ambulatory/emergency care for beneficiaries.

3.12. Consult and work collaboratively with social work and other ancillary services at the medical center and in the community to aid patients in maintaining independence, dignity, and quality of life.

- 3.13. Evaluate effectiveness of own performance and clinically supervise and evaluate the clinical care provided by health team members.
- 3.14. Contribute to health care system and support clinical environment resulting in quality services and positive patient outcomes.
- 3.15. Assist management and staff to develop and implement standards of care in keeping with unit and command's strategic patient care goals.
- 3.16. Demonstrate clinical expertise and independent practice necessary to function as a resource for medical and nursing personnel and mentor to staff. Provide clinical consultation and participate in problem-solving efforts of nursing staff, medical staff and other disciplines.
- 3.17. Conduct and participate in patient bedside rounds with care team, patient care conferences and discharge planning.
- 3.18. Assess and address the learning needs of patients and families, as well as, cultural and spiritual needs, individualizing each plan of care to meet patients specific needs.
- 3.19. Participate in formal patient education and development of patient education materials.
- 3.20. Demonstrate awareness and sensitivity to patient/significant others' rights, as identified within the institution.
- 3.21. Monitor patient responses to medications/procedures/treatments and provide timely, accurate, and concise documentation, manually and/or by use of computer.
- 3.22. Perform efficiently in emergency patient situations following established protocols, remaining calm, informing appropriate persons, and documenting events.
- 3.23. Participate in staff development, professional practice review, and evaluation for unit and directorate personnel.
- 3.24. Participate in the development, application and monitoring of clinical pathways. Act as pathway manager for specific pathways, assesses and tracks variances to established parameters. Initiate corrective action as needed.
- 3.25. Act as change agent. Influence policy and procedures; introduce and support new approaches to nursing practice. Practice effective problem identification and resolution skills as a method of sound decision making.
- 3.26. Demonstrate effective and professional communication methods, and skills, using lines of authority appropriately.
- 3.27. Participate in unit and Command Improvement activities. Assist with the development of programs that comply with all regulatory agencies and JCAHO requirements with a focus on CI, professional practice, and patient care/teaching.
- 3.28. Remain flexible in assignment, support staffing patterns and resolution of staffing conflicts; participate in temporary assignment measures of Nursing Directorate and within the boundaries of individual qualifications.
- 3.29. Comply with the standards of the Joint Commission, applicable provisions of law and the rules and regulations of any and all governmental authorities pertaining to:
 - 3.29.1. Licensure and/or regulation of healthcare personnel in treatment facilities, and
 - 3.29.2. The regulations and standards of professional practice of the treatment facility, and

3.29.3. The bylaws of the treatment facility's professional staff.

4. RESERVED.

5. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR REGISTERED NURSES. In addition to those personnel requirements both contained herein and in the basic contract, healthcare workers providing services under this contract shall:

5.1. Possess a Baccalaureate Degree in Nursing or an Associate Degree in Nursing or a Diploma from a Nursing Program accredited by the National League for Nursing Accrediting Commission (NLNAC), and

5.2. Possess a current unrestricted license to practice as a registered nurse in any one of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands. Additionally, health care workers licensed outside of the 50 States must provide proof of having successfully passed the Commissioner of Graduates of Foreign Nursing Schools exam or the National Council Licensure Exam (NCLEX). Foreign RN graduates must have three years experience working in the United States in addition to all other requirements, and

5.3. Possess current certification in Neonatal Resuscitation Program - Provider Level (NRP), and

5.4. Provide documentation showing attendance in AWHONN Fetal Monitoring.

5.5. Provide proof of professional development through continuing education within the last 24 months, and

5.6. Possess a minimum of 1 year of experience within the last 3 years in L&D, MIU, and/or Level II Nursery.

ATTACHMENT 003
LICENSED VOCATIONAL NURSE (OB/GYN CLINIC)

1. SCOPE AND LOCATION. The healthcare worker provides LICENSED VOCATIONAL NURSE (OB/GYN CLINIC) Services for the Naval Hospital Camp Pendleton, California or outlying Branch Medical Clinics. Scope of duties includes direct patient services with an emphasis on care continuity, return to wellness, health risk reduction, preventive care, patient/family education and assessment of patient compliance. A competent LVN identifies, measures and evaluates patient and program outcomes; institutes actions to improve care; adheres to and communicates standards of practice; demonstrates professional competency; and ensures the clinical practice, competencies and performance of other assigned nursing personnel. Further, a competent LVN conducts duties in accordance with organizational/Nursing Services/area policies and standard operating procedures and participates in educational and quality improvement programs within assigned area.

2. DUTY HOURS. The Government provides the information below as the Government's best estimate of the requirement for these services; however hours and frequency of service may vary as a result of patient demand, changes in schedules, and deployment of active duty providers. Unless otherwise described, specific schedules will be coordinated between the Contractor and the Government at least 30 days in advance. The Contractor shall provide not more than 2 providers to meet these requirements. The contractor may credential up to 2.0 Full Time Equivalent personnel per each Full Time Equivalent position identified.

2.1. The work schedule consists of 8-hour shifts (0800-1800) with a .5-hour uncompensated meal break on a Monday through Friday basis. This position is a coverage position. The Contractor shall provide an otherwise qualified replacement when scheduled personnel are unable to work due to planned and unplanned absences.

3. SPECIFIC DUTIES AND RESPONSIBILITIES. The health care worker shall perform full range of Licensed Vocational Nurse duties, within the scope of this statement of work, on site using government furnished supplies, facilities and equipment within the assigned unit of the hospital. Workload occurs as a result of scheduled and unscheduled requirements for care. Health care workers shall perform in accordance with established principles, practices and ethics of the nursing profession and written policies, procedures and requirements of Naval Hospital Camp Pendleton and shall apply age specific knowledge and competency appropriate to patient population served. The standards of performance for all health care workers shall reflect the degree of care, skill, and learning expected of a reasonably prudent health care worker in the professional category to which he or she belongs. Under the supervision of the Nursing Division Officer, Licensed Vocational Nurses shall:

3.1. Provide direct nursing care services to ambulatory patient populations serviced by the respective clinic:

3.1.1. OB-GYN Clinic. The healthcare worker provides obstetrical and neonatal nursing, including: (a) history of antepartum, postpartum, maternal and newborn patient. The healthcare worker possesses the knowledge to distinguish normal and at risk maternal-newborn anatomy, physiology, pathology and alterations that may be imposed by congenital anomalies, disease process and/or necessary surgical intervention and knowledge of gynecological practices and procedures.

3.1.2. Dysplasia Clinic. The healthcare worker provides gynecological concerns and general nursing care. The healthcare worker possesses the ability to distinguish normal and abnormal female anatomy, physiology, pathology and alterations that may be imposed by congenital anomalies, disease process and/or necessary surgical intervention; and knowledge of gynecological practices and procedures.

3.2. Administer medications under the supervision of a registered nurse or credentialed provider. Follow established medication administration guidelines. Make necessary judgments prior to administration of medications based on practical knowledge of the physiological effect, current condition of the patient and awareness of proper dosage.

3.3. Handle telephone information with courtesy, accuracy and respect for patient confidentiality. Receive information and distributes messages as appropriate.

- 3.4. Perform on-going patient assessment and evaluation. Observe changes in patient's conditions. Notify medical providers and nursing leaders of abnormal findings while supporting patient needs.
- 3.5. Document information about patient conditions, physical assessment results and nursing care plans in the medical record. Maintain paper and/or computerized medical records on assigned patients during tour of duty including data entry and retrieval.
- 3.6. Perform necessary treatments as directed by medical orders, the shift charge nurse or Team Leader. Understand the effects and expected outcomes of special procedures unique to the specific service line clinical setting and patient population.
- 3.7. Reinforce instructions to the patient on invasive procedures, surgical procedures and post surgical conditions that were previously provided to the patient by a nurse or physician.
- 3.8. Perform a wide range of diagnostic support including, but not limited to: blood collection for laboratory studies, urine, stool, sputum and other specimen collection, vital sign assessment, and CHCS computer utilization for retrieval of laboratory/radiological test results.
- 3.9. Assist medical providers with diagnostic testing. Position patients, secures equipment set-up and assist providers with instrument availability during procedures.
- 3.10. Apply understanding and operation of medical equipment. Maintain a safe patient care environment. Monitor and troubleshoot equipment assuring appropriate patient response. Provide intervention when indicated. Clean and maintain medical equipment in good working order.
- 3.11. Identify emergent situations, notifies appropriate personnel and assist with or initiates appropriate action.
- 3.12. Participate in Continuous Improvement activities by identifying problems, assisting in the formulation of a plan of action, assessing results of intervention and evaluating results.
- 3.13. Assist in maintaining a clean, safe environment for the patient either by active participation in the cleaning of clinical spaces and medical equipment, or by guiding and directing other personnel in the environmental maintenance. Ensure upkeep, perform checks and maintain appropriate logs of medical equipment. Inform supervisor of discrepancies.
- 3.14. Report malfunctioning equipment for repair and identifies and reports safety hazards. Ensure proper handling of hazardous materials.
- 3.15. Comply with infection control guidelines and practices universal precautions.
- 3.16. Maintain knowledge of instructions, policies and standards affecting the delivery of care to the specific patient population assigned.
- 3.17. Assist in the orientation of new personnel by directing and/or demonstrating various procedures, techniques and routines unique to the service line areas.
- 3.18. Maintain confidentiality of patient-related issues and intervene to protect same.
- 3.19. Provide customer service to patients, families, visitors and other medical, nursing and ancillary personnel throughout the Naval Hospital organization. Promote good relations both inter and intra departmentally. Employ tact and diplomacy when interacting with patients and staff.
- 3.20. Remain flexible in assignment, supports staffing patterns and resolution of staffing conflicts; participates in temporary assignment measures of Nursing Directorate and within the boundaries of individual qualifications.

3.21. Comply with the standards of the Joint Commission, applicable provisions of law and the rules and regulations of any and all governmental authorities pertaining to:

3.21.1. Licensure and/or regulation of healthcare personnel in treatment facilities, and

3.21.2. The regulations and standards of professional practice of the treatment facility, and

3.21.3. The bylaws of the treatment facility's professional staff.

4. RESERVED.

5. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR LICENSED PRACTICAL/VOCATIONAL NURSES. In addition to those personnel requirements both contained herein and in the basic contract, healthcare workers providing services under this contract shall:

5.1. Possess a current unrestricted license to practice as a licensed vocational/practical nurse in any one of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands, and

5.2. Possess at least 1 years of recent LVN ambulatory experience within last 2 years in an Ob/Gyn clinical setting, and

5.3. Provide proof of professional development through continuing education within the last 24 months, and

5.4. Maintain current IV certification. In the event a healthcare worker is otherwise qualified but does not possess or cannot maintain this certification and the Government elects to provide it, the Government reserves the right to deduct 4 hours of compensated service as consideration. Consideration will be based upon the hourly rate (in Schedule B) for this labor category.

ATTACHMENT 004
LICENSED VOCATIONAL NURSE (INPATIENT)

1. SCOPE AND LOCATION. This position is located in the Maternal-Infant Services (MIS), MIS Directorate, Naval Hospital Camp Pendleton (NHCP), CA. The incumbent will be assigned to the MIS in one of the following areas: Labor & Delivery (L&D), Mother-Infant Unit (MIU), or Newborn & Special Care (Level II) Nursery. Each healthcare worker will be trained in all areas of MIS and is subject to rotation of all tours of duty and shifts as directed.

1.1. The Labor & Delivery (L&D) unit is an inpatient OB/Neonatal unit within the MIS Directorate. The unit provides comprehensive nursing care to women of child bearing age and their newborns. Historically, the L&D unit administered to approximately 130 - 150 deliveries per month, 18 -25 C-sections and to approximately 400-600 outpatient visits per month.

1.2. The Mother-Infant Unit (MIU) is an inpatient OB/newborn unit within the within the MIS Directorate. Historically, the MIU administered to approximately 130 - 150 deliveries per month and 40 antepartum admissions per month.

1.3. The Newborn/Special Care Nursery is an inpatient OB/Neonatal unit within the MIS Directorate. Historically, the Newborn/Special Care Nursery administered to approximately 130 –150 deliveries per month and an average daily census of 3 in the Moderate Care/Level II nursery.

1.4. Scope of duties includes direct patient services with an emphasis on care continuity, return to wellness, health risk reduction, preventive care, patient/family education and assessment of patient compliance. A competent RN identifies, measures and evaluates patient and program outcomes; institutes actions to improve care; adheres to and communicates standards of practice; demonstrates professional competency; and ensures the clinical practice, competencies and performance of other assigned nursing personnel. Further, a competent RN conducts duties in accordance with organizational/Nursing Services/area policies and standard operating procedures and participates in educational and quality improvement programs within assigned area.

2. DUTY HOURS. The Government provides the information below as the Government’s best estimate of the requirement for these services; however hours and frequency of service may vary as a result of patient demand, changes in schedules, and deployment of active duty providers. Unless otherwise described, specific schedules will be coordinated between the Contractor and the Government at least 6 weeks in advance. The Contractor shall provide not more than 6 providers to meet these requirements. The contractor may credential up to 2.0 Full Time Equivalent personnel per each Full Time Equivalent position identified.

2.1. The work schedule consists of twelve hour shifts (0645-1915; 1845-0715) with a .5-hour uncompensated meal break on a Sunday through Saturday basis. Shift rotations may occur every six weeks. These positions are coverage positions. The Contractor shall provide an otherwise qualified replacement when scheduled personnel are unable to work due to planned and unplanned absences. The contractor shall provide Registered Nurses according to the Tables below. Each cell represents the duty hours, the corresponding days of the week and the number(s) of healthcare workers required.

Labor and Delivery Unit

<u>Hours</u>	<u>Sun</u>	<u>Mon</u>	<u>Tues</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>
0645-1915	0	0	0	0	0	0	0
1845-0715	1	0	0	0	0	1	1

Mother-Infant Unit

<u>1st Week</u>	<u>Sun</u>	<u>Mon</u>	<u>Tues</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>
<u>Hours</u>							
0645-1915	1	1	1	0	0	0	0
1845-0715	1	1	1	0	0	0	0
<u>2nd Week</u>	<u>Sun</u>	<u>Mon</u>	<u>Tues</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>
<u>Hours</u>							
0645-1915	0	0	0	0	1	1	1
1845-0715	0	0	0	0	1	1	1

2.2. Services of the healthcare workers are required on the following paid holidays: New Year's Day, Martin Luther King's Birthday, Presidents Day, Memorial Day, Independence Day, Labor Day, Columbus Day, Veteran's Day, Thanksgiving Day, and Christmas Day. If the healthcare worker is not scheduled to provide services on any of the 10 Federal holidays, the Contractor will not be compensated by the Government for the holiday.

3. SPECIFIC DUTIES AND RESPONSIBILITIES. The health care worker shall perform full range of Licensed Vocational Nurse duties, within the scope of this statement of work, on site using government furnished supplies, facilities and equipment within the assigned unit of the hospital. Workload occurs as a result of scheduled and unscheduled requirements for care. Health care workers shall perform in accordance with established principles, practices and ethics of the nursing profession and written policies, procedures and requirements of Naval Hospital Camp Pendleton and shall apply age specific knowledge and competency appropriate to patient population served. The standards of performance for all health care workers shall reflect the degree of care, skill, and learning expected of a reasonably prudent health care worker in the professional category to which he or she belongs. Under the supervision of the Nursing Division Officer, Licensed Vocational Nurses shall:

3.2. Provide direct nursing care services to patient populations serviced by the respective clinical areas:

3.1.1. Labor and Delivery. The primary function of a Licensed Vocational (Practical) Nurse is to provide a wide range of direct patient care to patients in Labor and Delivery, the Maternal Infant Unit or the Nursery as directed by a Registered Nurse or physician.

3.2.1.1. Obtain orientation to the hospital, the ward, its staff members, client population and operating procedures.

3.2.1.2. Provide nursing care for and assistance to patients in meeting their personal hygiene needs such as bathing, feeding, lifting and turning.

3.2.1.3. Performs nursing procedures specific to the patient's antepartum, intrapartum and postpartum needs.

3.2.1.4. Assists the doctor or nurse in patient examinations and procedures, e.g., cervical cultures, speculum exams, cervix exams; assists with connecting FSE to the monitor, ensures functions of IUPC by connecting IUPC to the monitor.

3.2.1.5. Prepares and administers commonly prescribed oral, topical and intramuscular medications, etc. under direction of and in accordance with established policy.

3.2.1.6. Starts or superimposes intravenous fluids without additives and withdraws blood, as certified to do so by the California Board of Vocational Nurses and this medical treatment facility.

3.2.1.7. Measures and records body temperature, pulse, respiration and blood pressure in the patient's medical record; FHT's baseline, identify FHT deceleration, acceleration monitor frequency intensity, duration of contraction patterns. Maintains accurate I/O.

3.2.1.8. Obtain and label routine urine, stool, blood and sputum specimens.

3.2.1.9. Observes and assesses clinical condition of all patients, recognizes abnormal situations and takes proper action, e.g., notifying the physician or initiating pre-planned emergency measures.

3.1.1.10. Educates the patient and family members based on needs identified during the antepartum, intrapartum and postpartum periods.

3.1.1.11. Inserts patient information in the logbook, CIS, CHCS, ADS computer systems, and maintains OB simulation data sheets.

3.1.1.12. Participates in orientation of nursing personnel, inpatient educational programs, ongoing staff inpatient training programs, ward and organizational quality improvement programs.

3.1.1.13. Provides environmental safety, security and patient privacy.

3.1.2. Newborn Nursery and Mother-Infant Unit. The primary function of a Licensed Vocational Nurse is to provide a wide range of direct patient care to patients in the Newborn Nursery and Mother-Infant Unit as directed by a Registered Nurse or physician. Licensed Vocational Nurse is assigned to one of the following areas: a newborn admitting area where infants less than 48 hours of age are under close surveillance for distress; an intermediate area utilized for infants requiring progressing from isolettes to open crib under moderate supervision for distress, intravenous therapy, phototherapy and borders; and a newborn area for infants over 4 hours of age.

3.1.2.1. Obtain orientation to the hospital, the ward, its staff members, client population and operating procedures.

3.1.2.2. Provide nursing care for and assistance to patients in meeting their personal hygiene needs such as bathing, feeding, lifting and turning.

3.1.2.3. Under the direction of the registered nurse, perform procedures to high risk infants which include: delivery of phototherapy, oxygen administration via oxyhood, endo or nasotracheal tube, application and use of cardiac/respiratory monitors and placement of oral/gastric feeding tubes.

3.1.2.4. Assist the physician or nurse in patient examinations and procedures.

3.1.2.5. Prepare and administer commonly prescribed oral, topical and intramuscular medications, etc. under direction of and in accordance with established policy.

3.1.2.6. Start or superimpose intravenous fluids without additives and withdraws blood, if certified to do so by the California Board of Vocational Nurses and this medical treatment facility.

3.1.2.7. Measure and record body temperature, pulse, respiration and blood pressure in the patient's medical record.

3.1.2.8. Obtain and label routine urine, stool, blood and sputum specimens.

3.1.2.9. Observe and assess clinical condition of all patients, recognize abnormal situations and take proper action, e.g., notifying the physician or initiating pre-planned emergency measures.

3.1.2.10. Teach parents infant care on the first six weeks of life.

3.1.2.11. Insert patient information in the logbook, CIS, CHCS, and ADS computer systems.

3.1.2.12. Participate in orientation of nursing personnel, patient care conferences, patient/family teaching, provide ward educational classes to fellow staff members and organizational quality improvement programs.

3.1.2.13. Provide environmental safety, security and patient privacy.

3.2. Perform on-going patient assessment and evaluation. Observe changes in patient's conditions. Notify medical providers and nursing leaders of abnormal findings while supporting patient needs.

3.3. Document information about patient conditions, physical assessment results and nursing care plans in the medical record. Maintain paper and/or computerized medical records on assigned patients during tour of duty including data entry and retrieval.

3.4. Perform necessary treatments as directed by medical orders, the shift charge nurse or Team Leader. Understand the effects and expected outcomes of special procedures unique to the specific service line clinical setting and patient population.

3.5. Reinforce instructions to the patient on invasive procedures, surgical procedures and post surgical conditions that were previously provided to the patient by a nurse or physician.

3.6. Perform a wide range of diagnostic support including, but not limited to: blood collection for laboratory studies, urine, stool, sputum and other specimen collection, vital sign assessment, and CHCS computer utilization for retrieval of laboratory/radiological test results.

3.6. Assist medical providers with diagnostic testing. Position patients, secures equipment set-up and assist providers with instrument availability during procedures.

3.7. Apply understanding and operation of medical equipment. Maintain a safe patient care environment. Monitor and troubleshoot equipment assuring appropriate patient response. Provide intervention when indicated. Clean and maintain medical equipment in good working order.

3.8. Identify emergent situations, notifies appropriate personnel and assist with or initiates appropriate action.

3.9. Report malfunctioning equipment for repair and identifies and reports safety hazards. Ensure proper handling of hazardous materials.

3.10. Comply with infection control guidelines and practices universal precautions.

3.11. Maintain knowledge of instructions, policies and standards affecting the delivery of care to the specific patient population assigned.

3.12. Maintain confidentiality of patient-related issues and intervene to protect same.

3.13. Provide customer service to patients, families, visitors and other medical, nursing and ancillary personnel throughout the Naval Hospital organization. Promote good relations both inter and intra departmentally. Employ tact and diplomacy when interacting with patients and staff.

3.14. Comply with the standards of the Joint Commission, applicable provisions of law and the rules and regulations of any and all governmental authorities pertaining to:

3.14.1. Licensure and/or regulation of healthcare personnel in treatment facilities, and

3.14.2. The regulations and standards of professional practice of the treatment facility, and

3.15.3. The bylaws of the treatment facility's professional staff.

4. RESERVED.

5. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR LICENSED PRACTICAL/VOCATIONAL NURSES. In addition to those personnel requirements both contained herein and in the basic contract, healthcare workers providing services under this contract shall:

- 5.1. Possess a current unrestricted license to practice as a licensed vocational/practical nurse in any one of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands, and
- 5.2. Possess at least 1 years of recent LVN inpatient experience within last 2 years in an Ob/Gyn clinical setting, and
- 5.3. Provide proof of professional development through continuing education within the last 24 months, and
- 5.4. Possess current certification in Neonatal Resuscitation Program (NRP).
- 5.5. Maintain current IV certification. In the event a healthcare worker is otherwise qualified but does not possess or cannot maintain this certification and the Government elects to provide it, the Government reserves the right to deduct 4 hours of compensated service as consideration. Consideration will be based upon the hourly rate (in Schedule B) for this labor category

ATTACHMENT 005
CERTIFIED MEDICAL ASSISTANT (OB/GYN CLINIC)

1. SCOPE AND LOCATION. The healthcare worker provides CERTIFIED MEDICAL ASSISTANT services for the OB/GYN Clinic of the Maternal-Infant services of Naval Hospital Camp Pendleton, California or outlying Branch Medical Clinics. Scope of duties includes direct patient services with an emphasis on care continuity, return to wellness, health risk reduction, preventive care, patient/family education and assessment of patient compliance. A competent Certified Medical Assistant (CMA) identifies, measures and evaluates patient and program outcomes; institutes actions to improve care; adheres to and communicates standards of practice; demonstrates professional competency; and ensures the clinical practice, competencies and performance of other assigned nursing personnel. Further, a competent CMA conducts duties in accordance with organizational/Nursing Services/area policies and standard operating procedures and participates in educational and quality improvement programs within assigned area.

2. DUTY HOURS. The Government provides the information below as the Government's best estimate of the requirement for these services; however hours and frequency of service may vary as a result of patient demand, changes in schedules, and deployment of active duty providers. Unless otherwise described, specific schedules will be coordinated between the Contractor and the Government at least 30 days in advance. The Contractor shall provide not more than 4 providers to meet these requirements. The contractor may credential up to 2.0 Full Time Equivalent personnel per each Full Time Equivalent position identified.

2.2. The contractor shall provide 2 CMAs. The work schedule consists of 8-hour shifts (0800-1800) with a .5-hour uncompensated meal break on a Monday through Friday basis. These positions are coverage positions. The Contractor shall provide an otherwise qualified replacement when scheduled personnel are unable to work due to planned and unplanned absences.

3. SPECIFIC DUTIES AND RESPONSIBILITIES. The health care worker shall perform full range of Certified Nursing Assistant duties, within the scope of this statement of work, on site using government furnished supplies, facilities and equipment within the assigned unit of the hospital. Workload occurs as a result of scheduled and unscheduled requirements for care. Health care workers shall perform in accordance with established principles, practices and ethics of the nursing profession and written policies, procedures and requirements of Naval Hospital Camp Pendleton and shall apply age specific knowledge and competency appropriate to patient population served. The standards of performance for all health care workers shall reflect the degree of care, skill, and learning expected of a reasonably prudent health care worker in the professional category to which he or she belongs. Under the supervision of the Nursing Division Officer, Certified Medical Assistants shall:

- 3.1. Obtaining vital signs from patients.
- 3.2. Administering commonly prescribed medications.
- 3.3. Receive patients seeking information or treatment in person or via telephone.
- 3.4. Provide patient education on system processes, medical procedures and health information, as needed using approved clinic guidelines.
- 3.5. Assist the providers in patient examinations and minor surgical or medical procedures, assuring patient privacy, comfort and safety.
- 3.6. File laboratory, radiology, and other reports. Copy patient records, as required.
- 3.7. Type correspondence and address labels when requested by the provider.
- 3.8. Obtain lab specimens as ordered by the provider. Review lab results and inform provider of abnormalities to facilitate prompt medical treatment as necessary.

3.9. Use computer systems to order labs and radiographic tests, and retrieve results.

3.10. Use CHCS system to schedule patient appointments as directed, check in patients producing encounter forms and workload forms, record telephone consultations, record appointment status, obtain organizational information via E-mail, maintain patient data bases, and produce other reports required/requested.

3.11. Screens telephone calls for provider, answer routine questions on services available, access and eligibility issues, and clinic policies. Refers questions beyond scope of knowledge to the proper authority.

3.12. Participate in clinic and organizational quality improvement programs including, but not limited to, patient needs surveys, patient satisfaction, and records review to ensure accuracy of data submitted in required reports.

3.13. Provide environmental safety, security and patient privacy, and general cleanliness.

3.14. Maintain current command and JCAHO certifications and training requirements for fire, safety, infection control, customer service, and emergency response plans, including Basic Life Support.

3.15. Stock patient care areas and/or clerical areas with needed supplies. Order needed supplies when stock is low.

4. RESERVED.

5. SPECIFIC MINIMUM PERSONNEL QUALIFICATIONS FOR CERTIFIED MEDICAL ASSISTANT. In addition to those personnel requirements both contained herein and in the basic contract, healthcare workers providing services under this contract shall:

5.1. Have either: successfully completed a Medical Assistant Training Course within the preceding 12 months; possess current licensure as an LPN/LVN and experience as an LPN/LVN or CMA of at least 12 months within the preceding 36 months; or possess certification as a military medical technician/hospital corpsman/medic and have at least 12 months experience as a military medical technician/hospital corpsman/medic within the preceding 36 months.

5.1.2. Provide two letters of recommendation from former employers, to include at least one letter from a practicing physician, or RN, attesting to your clinical skills. Reference letters must include name, title, phone number, date of reference, address and signature of the individual providing reference. Letters of reference must have been written within the preceding 2 years.

ATTACHMENT 006
SUPPLEMENTAL PRICING WORKSHEETS

Obstetrics and Gynecology Nurse Practitioner	Minimum Compensation for Nurse Practitioner	Average Compensation for Nurse Practitioner
Hourly Rate (direct compensation) to the healthcare worker		
Fringe Benefits* (expressed only in dollars and cents)		
Total Hourly Compensation to the healthcare worker		

Registered Nurse (Inpatient)	Minimum Compensation for Registered Nurse	Average Compensation for Registered Nurse
Hourly Rate (direct compensation) to the healthcare worker		
Fringe Benefits* (expressed only in dollars and cents)		
Total Hourly Compensation to the healthcare worker		

Licensed vocational Nurse (Outpatient)	Minimum Compensation for Licensed vocational Nurse	Average Compensation for Licensed vocational Nurse
Hourly Rate (direct compensation) to the healthcare worker		
Fringe Benefits* (expressed only in dollars and cents)		
Total Hourly Compensation to the healthcare worker		

Licensed vocational Nurse (Inpatient)	Minimum Compensation for Licensed vocational Nurse	Average Compensation for Licensed vocational Nurse
Hourly Rate (direct compensation) to the healthcare worker		
Fringe Benefits* (expressed only in dollars and cents)		
Total Hourly Compensation to the healthcare worker		

Certified Medical Assistant	Minimum Compensation for Certified Medical Assistant	Average Compensation for Certified Medical Assistant
Hourly Rate (direct compensation) to the healthcare worker		
Fringe Benefits* (expressed only in dollars and cents)		
Total Hourly Compensation to the healthcare worker		

*Fringe Benefits include non-cash compensation provided to employees (including that necessary to comply with Department of Labor compensation requirements), such as 401(k), Insurance (Medical/Dental/Life), Continuing Education Expenses, Bonuses, Incentives, and Uniform Allowances

On an attached page, provide any other fringe benefits offered but not included in the fringe benefit rate above. Specify and describe the value of these benefit(s).

On an attached page, provide any notes regarding source information used to develop these rates.

Provide the following regarding the schedule under which this requirement is being proposed.

Labor Category	Maximum Price Allowable under FSS/VA 621-1 for the Labor Category	Proposed Discount (expressed as a %)	Notes/Comments
Obstetrics and Gynecology Nurse Practitioner			
Registered Nurse			
Licensed Vocational Nurse			
Certified Medical Assistant			

Signature

Title

Organization

Date

ATTACHMENT 007A
OBSTETRICS AND GYNECOLOGY NURSE PRACTITIONER
RESUME/CURRICULUM VITAE

1. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam no more than 60 days prior to beginning work. This includes a record of required immunizations/tests. Maintaining current immunizations/test status is your responsibility. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

(Signature)

(Date)mm/dd/yy)

2. Malpractice Risk Information. Individuals providing service under Government contracts must represent an acceptable malpractice risk to the Government. **The information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract**

MALPRACTICE RISK INFORMATION

	<u>Yes</u>	<u>No</u>
1. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments)	___	___
2. Have you ever been a defendant in a felony or misdemeanor case? Indicate final disposition of the case in comments)	___	___
3. Has your license to practice or DEA certification ever been revoked or restricted in any state?	___	___

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

3. Resumes/Curriculum Vitae. Every item on the resume outline must be addressed. Please sign and date at the end of your resume. Any additional information required may be provided on a separate sheet of paper.

A. General Information. At a minimum, include

Your name (Last/First/Middle), and
Your Social Security Number, and
Your current Address (address/city/state/zip code), and
Telephone numbers where you may be reached (including area code), and
Email address(es) where you may be reached.

B. Professional Education/Certifications. At a minimum, include:

Evidence that you possess a current unrestricted license to practice as an Advanced Practice Nurse in any one of the fifty states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, or the U.S. Virgin Islands, and

Evidence that you are certified as an Obstetrics/Gynecology Nurse Practitioner or Women's Health Care Nurse Practitioner by the National Certification Corporation for the Obstetric, Gynecologic, and Neonatal Nursing Specialties (NCC), and

C. **Continuing Education:** Provide proof of current professional development through documentation that the healthcare worker has successfully completed continuing education within the last 12 months. Provide the course name, course dates and, CEU/contact hours received.

D. **BLS:** Evidence of current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of both sides of the card shall be submitted. **DO NOT SUBMIT THE ORIGINAL CARD.**

E. **NRP:** Evidence of current certification in Neonatal Resuscitation Certification - Provider Level (NRP). Provide the training type listed on the card and the expiration date. A copy of both sides of the card shall be submitted. **DO NOT SUBMIT THE ORIGINAL CARD.**

F. **Professional Employment:** Current and preceding employers for the past 10 years, even if they are not related to the healthcare worker's Nurse Practitioner experience. Provide the name and address of each employer, the dates of employment and a general description of the work performed/major duties/organizational position. For the most recent 2 employers, provide the name, address and, telephone number of the workplace supervisor.

If the healthcare worker is currently employed on a Navy contract, please disclose the location of the current contract, the position held, and the contract expiration date.

G. **Employment Eligibility:** Provide the documentation (as shown in the basic contract) that demonstrates that the healthcare worker meets the requirements for U.S. Employment Eligibility. If not, provide an explanation. A healthcare worker will not be employed in violation of the Immigration and Naturalization laws of the United States.

H. **Professional References:** Provide three letters of recommendation written within the last two years attesting to the healthcare worker's clinical skills. A minimum of one of the letters must be from a supervisor. The other letters must be from either clinic or hospital administrators, or practicing physicians. Reference letters shall attest to the healthcare worker's communication skills and ability to relate to patients as well as professional and other interpersonal skills among staff members and must include name, title, phone number, date of reference, address and signature of the individual providing reference.

I. **Required Immunizations/Screening Tests:** Provide evidence of immunity to MMR and varicella, evidence of Hepatitis B Series (including dates) and PPD (including date of last reading and sero-conversion status).

J. **Additional Information:** Provide any additional information that may enhance the healthcare worker's ranking such as professional certifications, the resume, curriculum vitae, commendations or documentation of any awards they may have received, etc.

K. **Certification of Accuracy.** The healthcare worker shall provide the following certification:

I hereby certify the above information to be true and accurate:

(Signature)

(Date) (mm/dd/yy)

ATTACHEMENT 0007B
REGISTERED NURSE (INPATIENT)
RESUME/CURRICULUM VITAE

1. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam no more than 60 days prior to beginning work. This includes a record of required immunizations/tests. Maintaining current immunizations/test status is your responsibility. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

(Signature) (Date)mm/dd/yy

2. Malpractice Risk Information. Individuals providing service under Government contracts must represent an acceptable malpractice risk to the Government. **The information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract**

MALPRACTICE RISK INFORMATION

- | | <u>Yes</u> | <u>No</u> |
|--|------------|-----------|
| 1. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments) | ___ | ___ |
| 2. Have you ever been a defendant in a felony or misdemeanor case? Indicate final disposition of the case in comments) | ___ | ___ |
| 3. Has your license to practice or DEA certification ever been revoked or restricted in any state? | ___ | ___ |

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

3. Resumes/Curriculum Vitae. Every item on the resume outline must be addressed. Please sign and date at the end of your resume. Any additional information required may be provided on a separate sheet of paper.

A. **General Information.** At a minimum, include

- Your name (Last/First/Middle), and
- Your Social Security Number, and
- Your current Address (address/city/state/zip code), and
- Telephone numbers where you may be reached (including area code), and
- Email address(es) where you may be reached.

B. **Professional Education/Certifications.** At a minimum, include:

The name and location of the college/institution that conferred the healthcare worker's nursing degree or certificate and the date of that degree or certificate, and

All current, unrestricted licenses to practice nursing held by the healthcare worker in any one of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands, (including state of issuance, date of issuance and, date of expiration), and

C. **Continuing Education:** Provide proof of current professional development through documentation that the healthcare worker has successfully completed continuing nursing education within the last 24 months. Provide the course name, course dates and, CEU/contact hours received.

D. **BLS:** Provide evidence of current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of both sides of the card shall be submitted. DO NOT SUBMIT THE ORIGINAL CARD.

E. **NRP:** Provide evidence of current certification in Neonatal Resuscitation Certification - Provider Level (NRP). Provide the training type listed on the card and the expiration date. A copy of both sides of the card shall be submitted. DO NOT SUBMIT THE ORIGINAL CARD.

F. **AWHONN Fetal Monitoring:** Provide evidence of documentation showing training in AWHONN Fetal Monitoring. Provide the training type listed on the card and the expiration date. A copy of both sides of the card shall be submitted. DO NOT SUBMIT THE ORIGINAL CARD.

G. **Professional Employment:** List current and preceding employers for the past 10 years, even if they are not related to the healthcare worker's nursing experience. Provide the name and address of each employer, the dates of employment and a general description of the work performed/major duties/organizational position. For the most recent 2 employers, provide the name, address and, telephone number of the workplace supervisor.

If the healthcare worker is currently employed on a Navy contract, please disclose the location of the current contract, the position held, and the contract expiration date.

H. **Employment Eligibility:** Provide the documentation (as shown in the basic contract) that demonstrates that the healthcare worker meets the requirements for U.S. Employment Eligibility. If not, provide an explanation. A healthcare worker will not be employed in violation of the Immigration and Naturalization laws of the United States.

I. **Professional References:** Provide three letters of recommendation written within the last two years attesting to the healthcare worker's clinical skills. A minimum of one of the letters must be from a supervisor. The other letters must be from either clinic or hospital administrators, nurse executives, or practicing physicians. Reference letters shall attest to the healthcare worker's communication skills and ability to relate to patients as well as professional and other interpersonal skills among staff members and must include name, title, phone number, date of reference, address and signature of the individual providing reference.

J. **Required Immunizations/Screening Tests:** Provide evidence of immunity to MMR and varicella, evidence of Hepatitis B Series (including dates) and PPD (including date of last reading and sero-conversion status).

K. **Additional Information:** Provide any additional information that may enhance the healthcare worker's ranking such as the resume, curriculum vitae, commendations or documentation of any awards they may have received, etc.

L. **Certification of Accuracy.** The healthcare worker shall provide the following certification:

I hereby certify the above information to be true and accurate:

(Signature)

(Date) (mm/dd/yy)

ATTACHMENT 007C
LICENSED VOCATIONAL NURSE (OUTPATIENT)
RESUME/CURRICULUM VITAE

1. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam no more than 60 days prior to beginning work. This includes a record of required immunizations/tests. Maintaining current immunizations/test status is your responsibility. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

(Signature)

(Date)mm/dd/yy)

2. Malpractice Risk Information. Individuals providing service under Government contracts must represent an acceptable malpractice risk to the Government. **The information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract**

MALPRACTICE RISK INFORMATION

	<u>Yes</u>	<u>No</u>
1. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments)	___	___
2. Have you ever been a defendant in a felony or misdemeanor case? Indicate final disposition of the case in comments)	___	___
3. Has your license to practice or DEA certification ever been revoked or restricted in any state?	___	___

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

3. Resumes/Curriculum Vitae. Every item on the resume outline must be addressed. Please sign and date at the end of your resume. Any additional information required may be provided on a separate sheet of paper.

A. General Information. At a minimum, include

Your name (Last/First/Middle), and
Your Social Security Number, and
Your current Address (address/city/state/zip code), and
Telephone numbers where you may be reached (including area code), and
Email address(es) where you may be reached.

B. Professional Education/Certifications. At a minimum, include:

All current, unrestricted licenses to practice nursing held by the healthcare worker in any one of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands, (including state of issuance, date of issuance and, date of expiration), and

Proof current IV certification.

C. **Continuing Education:** Provide proof of current professional development through documentation that the healthcare worker has successfully completed continuing nursing education within the last 24 months. Provide the course name, course dates and, CEU/contact hours received.

D. **BLS:** Provide evidence of current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of both sides of the card shall be submitted. **DO NOT SUBMIT THE ORIGINAL CARD.**

E. **Professional Employment:** List current and preceding employers for the past 10 years, even if they are not related to the healthcare worker's nursing experience. Provide the name and address of each employer, the dates of employment and a general description of the work performed/major duties/organizational position. For the most recent 2 employers, provide the name, address and, telephone number of the workplace supervisor.

If the healthcare worker is currently employed on a Navy contract, please disclose the location of the current contract, the position held, and the contract expiration date.

F. **Employment Eligibility:** Provide the documentation (as shown in the basic contract) that demonstrates that the healthcare worker meets the requirements for U.S. Employment Eligibility. If not, provide an explanation. A healthcare worker will not be employed in violation of the Immigration and Naturalization laws of the United States.

G. **Professional References:** Provide three letters of recommendation written within the last two years attesting to the healthcare worker's clinical skills. A minimum of one of the letters must be from a supervisor. The other letters must be from either clinic or hospital administrators, nurse executives, or practicing physicians. Reference letters shall attest to the healthcare worker's communication skills and ability to relate to patients as well as professional and other interpersonal skills among staff members and must include name, title, phone number, date of reference, address and signature of the individual providing reference.

H. **Required Immunizations/Screening Tests:** Provide evidence of immunity to MMR and varicella, evidence of Hepatitis B Series (including dates) and PPD (including date of last reading and sero-conversion status).

I. **Additional Information:** Provide any additional information that may enhance the healthcare worker's ranking such as the resume, curriculum vitae, commendations or documentation of any awards they may have received, etc.

J. **Certification of Accuracy.** The healthcare worker shall provide the following certification:

I hereby certify the above information to be true and accurate:

(Signature)

(Date) (mm/dd/yy)

ATTACHMENT 007D
LICENSED VOCATIONAL NURSE (INPATIENT)
RESUME/CURRICULUM VITAE

1. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam no more than 60 days prior to beginning work. This includes a record of required immunizations/tests. Maintaining current immunizations/test status is your responsibility. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

(Signature)

(Date)mm/dd/yy)

2. Malpractice Risk Information. Individuals providing service under Government contracts must represent an acceptable malpractice risk to the Government. **The information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract**

MALPRACTICE RISK INFORMATION

	<u>Yes</u>	<u>No</u>
1. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments)	___	___
2. Have you ever been a defendant in a felony or misdemeanor case? Indicate final disposition of the case in comments)	___	___
3. Has your license to practice or DEA certification ever been revoked or restricted in any state?	___	___

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

3. Resumes/Curriculum Vitae. Every item on the resume outline must be addressed. Please sign and date at the end of your resume. Any additional information required may be provided on a separate sheet of paper.

A. General Information. At a minimum, include

Your name (Last/First/Middle), and
Your Social Security Number, and
Your current Address (address/city/state/zip code), and
Telephone numbers where you may be reached (including area code), and
Email address(es) where you may be reached.

B. Professional Education/Certifications. At a minimum, include:

Possess a current unrestricted license to practice as a licensed vocational/practical nurse in any one of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam or the U.S. Virgin Islands, and

Proof current IV certification.

C. **Continuing Education:** Provide proof of current professional development through documentation that the healthcare worker has successfully completed continuing nursing education within the last 24 months. Provide the course name, course dates and, CEU/contact hours received.

D. **BLS:** Provide evidence of current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of both sides of the card shall be submitted. **DO NOT SUBMIT THE ORIGINAL CARD.**

E. **NRP:** Provide evidence of current certification in Neonatal Resuscitation Program Certification for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of both sides of the card shall be submitted. **DO NOT SUBMIT THE ORIGINAL CARD.**

F. **Professional Employment:** List current and preceding employers for the past 10 years, even if they are not related to the healthcare worker's nursing experience. Provide the name and address of each employer, the dates of employment and a general description of the work performed/major duties/organizational position. For the most recent 2 employers, provide the name, address and, telephone number of the workplace supervisor.

If the healthcare worker is currently employed on a Navy contract, please disclose the location of the current contract, the position held, and the contract expiration date.

G. **Employment Eligibility:** Provide the documentation (as shown in the basic contract) that demonstrates that the healthcare worker meets the requirements for U.S. Employment Eligibility. If not, provide an explanation. A healthcare worker will not be employed in violation of the Immigration and Naturalization laws of the United States.

H. **Professional References:** Provide three letters of recommendation written within the last two years attesting to the healthcare worker's clinical skills. A minimum of one of the letters must be from a supervisor. The other letters must be from either clinic or hospital administrators, nurse executives, or practicing physicians. Reference letters shall attest to the healthcare worker's communication skills and ability to relate to patients as well as professional and other interpersonal skills among staff members and must include name, title, phone number, date of reference, address and signature of the individual providing reference.

I. **Required Immunizations/Screening Tests:** Provide evidence of immunity to MMR and varicella, evidence of Hepatitis B Series (including dates) and PPD (including date of last reading and sero-conversion status).

J. **Additional Information:** Provide any additional information that may enhance the healthcare worker's ranking such as the resume, curriculum vitae, commendations or documentation of any awards they may have received, etc.

K. **Certification of Accuracy.** The healthcare worker shall provide the following certification:

I hereby certify the above information to be true and accurate:

(Signature)

(Date) (mm/dd/yy)

ATTACHMENT 007E
CERTIFIED MEDICAL ASSISTANT
RESUME/CURRICULUM VITAE

1. Health Certification. Individuals providing services under Government contracts are required to undergo a physical exam no more than 60 days prior to beginning work. This includes a record of required immunizations/tests. Maintaining current immunizations/test status is your responsibility. The exam is not required prior to award but is required prior to the performance of services under contract. By signing this form, you have acknowledged this requirement.

PRIVACY ACT STATEMENT

Under 5 U.S.C. 552a and Executive Order 9397, the information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract.

(Signature)

(Date)mm/dd/yy)

2. Malpractice Risk Information. Individuals providing service under Government contracts must represent an acceptable malpractice risk to the Government. **The information provided is part of my response to and for use in the consideration of a Government contract; disclosure of the information is voluntary; failure to provide information may result in the denial of the opportunity to enter into a contract**

MALPRACTICE RISK INFORMATION

	<u>Yes</u>	<u>No</u>
1. Have you ever been the subject of a malpractice claim? (indicate final disposition of case in comments)	___	___
2. Have you ever been a defendant in a felony or misdemeanor case? Indicate final disposition of the case in comments)	___	___
3. Has your license to practice or DEA certification ever been revoked or restricted in any state?	___	___

If any of the above is answered "yes" attach a detailed explanation. Specifically address the disposition of the claim or charges for numbers 1 and 2 above, and the State of the revocation for number 3 above.

3. Resumes/Curriculum Vitae. Every item on the resume outline must be addressed. Please sign and date at the end of your resume. Any additional information required may be provided on a separate sheet of paper.

A. General Information. At a minimum, include

Your name (Last/First/Middle), and
Your Social Security Number, and
Your current Address (address/city/state/zip code), and
Telephone numbers where you may be reached (including area code), and
Email address(es) where you may be reached.

B. Professional Education/Certifications. At a minimum, include:

Documentation of Medical Assistant Training Course within the preceding 12 months; possess current licensure as

an LPN/LVN and experience as an LPN/LVN or CMA of at least 12 months within the preceding 36 months; or possess certification as a military medical technician/hospital corpsman/medic and have at least 12 months experience as a military medical technician/hospital corpsman/medic within the preceding 36 months.

C. **Continuing Education:** Provide proof of current professional development through documentation that the healthcare worker has successfully completed continuing nursing education within the last 24 months. Provide the course name, course dates and, CEU/contact hours received.

D. **BLS:** Provide evidence of current certification in American Heart Association Basic Life Support (BLS) for Healthcare Providers; American Heart Association Healthcare Provider Course; American Red Cross CPR (Cardiopulmonary Resuscitation) for the Professional Rescuer; or equivalent. Provide the training type listed on the card and the expiration date. A copy of both sides of the card shall be submitted. **DO NOT SUBMIT THE ORIGINAL CARD.**

F. **Professional Employment:** List current and preceding employers for the past 10 years, even if they are not related to the healthcare worker's nursing experience. Provide the name and address of each employer, the dates of employment and a general description of the work performed/major duties/organizational position. For the most recent 2 employers, provide the name, address and, telephone number of the workplace supervisor.

If the healthcare worker is currently employed on a Navy contract, please disclose the location of the current contract, the position held, and the contract expiration date.

G. **Employment Eligibility:** Provide the documentation (as shown in the basic contract) that demonstrates that the healthcare worker meets the requirements for U.S. Employment Eligibility. If not, provide an explanation. A healthcare worker will not be employed in violation of the Immigration and Naturalization laws of the United States.

H. **Professional References:** Provide three letters of recommendation written within the last two years attesting to the healthcare worker's clinical skills. A minimum of one of the letters must be from a supervisor. The other letters must be from either clinic or hospital administrators, nurse executives, or practicing physicians. Reference letters shall attest to the healthcare worker's communication skills and ability to relate to patients as well as professional and other interpersonal skills among staff members and must include name, title, phone number, date of reference, address and signature of the individual providing reference.

I. **Required Immunizations/Screening Tests:** Provide evidence of immunity to MMR and varicella, evidence of Hepatitis B Series (including dates) and PPD (including date of last reading and sero-conversion status).

J. **Additional Information:** Provide any additional information that may enhance the healthcare worker's ranking such as the resume, curriculum vitae, commendations or documentation of any awards they may have received, etc.

K. **Certification of Accuracy.** The healthcare worker shall provide the following certification:

I hereby certify the above information to be true and accurate:

(Signature)

(Date) (mm/dd/yy)

ATTACHMENT 0008
PROOF OF US EMPLOYMENT ELIGIBILITY

LISTS OF ACCEPTABLE DOCUMENTS

EITHER SUBMIT ONE DOCUMENT FROM LIST A
OR SUBMIT ONE FROM LIST B AND ONE FROM LIST C
LIST A

(Documents that Establish Both Identity and Employment Eligibility)

1. U. S. Passport (unexpired or expired)
2. Certificate of U. S. Citizenship (INS Form N-560 or N-561)
3. Certificate of Naturalization (INS Form N-550 or N-570)
4. Unexpired foreign passport, with I-551 stamp or attached INS Form I-94 indicating unexpired employment authorization.
5. Alien Registration Receipt Card with photograph (INS Form I-151 or I-551)
6. Unexpired Temporary Resident Card (INS Form I-688)
7. Unexpired Employment Authorization Card (INS Form I-688A)
8. Unexpired Reentry Permit (INS Form I-327)
9. Unexpired Refugee Travel Document (INS Form I-571)
10. Unexpired Employment Authorization Document issued by the INS which contains a photograph (INS Form I-698B)

LIST B

Documents that Establish Identity

1. Driver's license or ID card issued by a state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address

LIST C

Documents that Establish Employment Eligibility

1. U.S. social security card issued by the Social Security Administration (other than a card stating it is not valid for employment)

PROOF OF U.S. EMPLOYMENT ELIGIBILITY
(CONTINUED)

2. ID card issued by federal, state or local government agencies of entitles provided it contains a photograph or information such as name, date of birth, sex height, eye color, and address

3. School ID card with a photograph

4. Voter's registration card

5. U.S. Military card or draft record

6. Military dependant's ID Card

7. U.S. Coast Guard Merchant Mariner Card

8. Native American tribal document

9. Driver's license issued by a Canadian government authority
For persons under age 18 who are unable to present a document listed above;

10. School record or report card

11. Clinic, doctor, or hospital record

12. Day-care or nursery school record

2. Certification of Birth Abroad issued by the Department of State (Form FS-545 or Form DS-1350)

3. Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal

4. Native American Tribal document

5. U.S. Citizen ID Card (INS Form I-197)

6. ID Card for use of Resident Citizen in the United States (INS Form I-179)

7. Unexpired employment authorization document issued by the INS (other than those listed under List a).

ATTACHMENT 009
PAST PERFORMANCE FORMAT

Ref	Number of HCWs (by FTE)	Types of HCWs	Location of Services	Start Date	End Date	Name. Telephone number, email address of verified point of contact
1						
2						
3						
4						
5						