REQUEST FOR QUALIFICATIONS & COST PROPOSAL

MEDICAL EXAMINER SERVICES

OCTOBER 26, 2020
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Procedures
Issuing Entity
The St. Joseph County Clerk’s Office is the entity issuing the RFQ/P.

Deadline for Receipt of Proposals
Deadline for receipt is Thursday, November 19, 2020 at 4 p.m. EST.

Submission and Receipt of Proposals
For a submission to receive consideration, it must be received prior to the deadline. No late submissions will be accepted. An authorized officer of the Consultant shall sign the certification and all proposal forms. Proposals must be clearly labeled “Qualifications and Cost Proposal – Medical Examiner Services.” Electronic copies shall be submitted along with all attachments as a PDF to oswaldl@stjosephcountymi.org. Proposals are considered received when in possession of the St. Joseph County Clerk.

Timeline
The timeline is as follows:

October 26, 2020 – RFQ/P issued

November 9, 2020 – Questions/inquiries due

November 13, 2020 – Question responses delivered

November 19, 2020 – Proposal due via email at 4 p.m.

November 25, 2020 – Proposal considered for placement on December 1, 2020 Commission agenda

December 1, 2020 – Proposal considered for award

Official Documents
The St. Joseph County Clerk’s Office officially distributes proposal documents via the St. Joseph County website. Copies of all official documents will also be available at the St. Joseph County Clerk’s Office, 125 W. Main Street, Centreville, MI 49032. St. Joseph County cannot guarantee the accuracy and is not responsible for any errors contained in any information received from alternate sources.

Interpretation of Proposal and/or Contract Documents
Any interpretation to a proposer regarding the RFQ/P or any part thereof is valid only if given by the St. Joseph County Clerk’s listed contact. Any information given by other sources in unofficial. Interpretations may or may not be given orally and may be written depending on the nature of the inquiry. Interpretations that could affect other proposers will be in writing and issued by the St. Joseph County Clerk’s Office designated contact. All inquiries shall be made within reasonable time prior to the stated deadline. Inquires received that are not made in a timely fashion may or may not be considered. Inquires should be sent to: St. Joseph County Clerk Lindsay Oswald by email to oswaldl@stjosephcountymi.org or phone at 269.467.5603.
Changes and Addenda to Proposal Documents
Each change will be posted on the County website and be on file in the Clerk’s Office. All such changes shall become part of the contract and all proposers shall be bound by such changes or addenda.

Alternates
Proposers are cautioned that any alternate proposal, unless requested by the St. Joseph County Clerk’s Office, or any changes, insertions, or omissions to the terms and conditions, specifications, or any other requirements of this RFQ/P may be considered non-responsive and, at the opinion of the St. Joseph County Clerk’s Office, may result in rejection of the proposal.

Award
Proposals will be reviewed by an internal committed. Proposing firms may be asked to participate in an interview. The contract will be awarded to the responsible, responsive firm whose proposal will be most advantageous to the St. Joseph County Clerk’s Office, price and other factors considered.

The St. Joseph County Clerk’s Office reserves the right to accept or reject any or all proposals, in part or whole and to waive informalities and minor irregularities in bids received.

Withdrawal
Proposals may only be withdrawn by written notice prior to the date and time set for the submission of proposals. No proposal may be withdrawn after the deadline for submission.

Default
No bid or proposal shall be accepted from any party (contractor) who is in default on the payment of taxes, licenses or other monies due St. Joseph County.

Non-Collusion Clause
By signing and submitting this proposal, proposer states that his proposal is genuine and not collusive or sham; such proposer has not colluded, conspired, connived, or agreed, directly or indirectly, with any proposer or person, to put in a sham bid, or that such other person will refrain from proposing and has not in any manner, directly or indirectly, colluded, conspired, connived, or agreed, with any person, to fix the price of affiant or any other proposer, or to fix any overhead, profit or cost element of said proposal price.

Project Details
Description
The St. Joseph County Clerk’s Office is seeking qualifications and cost proposals from Consultants to provide medical examiner services to St. Joseph County. The selected Consultant will be the primary provider of such services as outlined in the Scope of Work below.

Scope of Work
The Consultant, as the County’s Medical Examiner, shall provide the County with the following services:

1. All services required of the County Medical Examiner as described in and required by the laws of the State of Michigan, including, but not limited to, the investigation and certifications of all persons whose death are within the jurisdiction of the County’s Medical Examiner.
2. The provision of all necessary forensic pathology and toxicology services as well as other required consultants such as forensic anthropology, forensic entomology, etc. as needed to investigate deaths reported using standards established by the National Association of Medical Examiners.

3. Provide necessary communications and be available to respond to the inquiries of prosecuting attorneys, criminal defense attorneys, law enforcement agencies, funeral home directors, health care institutions and their professional staffs, and involved citizens and families regarding death investigations and general procedures.

4. Provide necessary information to and participate in death reviews, including participation in Child Death Review Team meetings.

5. Make recommendations for appointment as needed, validate the qualifications, assure the special and continuing education, and direct the official activities of all persons (deputy medical examiners, forensic pathologists, medical examiners investigators, et.al.) providing professional services to the County’s Medical Examiner’s Office. The St. Joseph County Board of Commissioners must approve the Medical Examiner and the Deputy Medical Examiners designated by the Consultant and the County.

6. Conduct postmortem examinations of all bodies pursuant to the requirements of the laws of the State of Michigan for County medical examiners and according to professionally accepted criteria.

7. Be available for and provide testimony in criminal prosecutions to the Prosecuting Attorney of the County and other counties as officially requested, for all postmortem examinations conducted under their jurisdictions, at no additional expense to the local governmental unit of the prosecuting attorney requesting such testimony, except for reimbursement for mileage for the medical examiner or deputy medical examiner at the rate established each year by St. Joseph County.

8. Autopsy Reports and Death Certificates
   a. Autopsies will be conducted within twenty-four (24) hours of the County’s request.
   b. The contractor will identify an alternative site for accepting a body in the event they cannot accept a body for reasons beyond their control. Agreements and processes that do not cause unnecessary delays in the transport of deceased individuals will be in place prior to execution of the contract.
   c. Preliminary autopsy findings will be made electronically available to the St. Joseph County Clerk’s Office and public safety officers no later than 9 a.m. on the day following the autopsy.
   d. The Contractor will ensure that death certificates with any items pending further testing or information shall be completed within sixty (60) days of the certified date of death, unless special diagnostic studies are necessary and such studies will delay completion of the case.
   e. Final autopsy reports will be available in the County Medical Examiner’s Office within fifty (50) days from the certified date of death ninety percent (90%) of the time.

9. Case Records

   The Consultant shall ensure that medical examiner case records originating during the term of this Agreement shall be maintained in its offices in professional acceptable content and format. The County shall have the sole and exclusive right to all records pertaining to the services.
rendered by the Contractor pursuant to this Agreement. The Contractor shall have use of appropriate records when such access is required for the performance of the services to be provided under this Agreement and for any of its quality, compliance or any other reviews as the Contractor deems necessary.

Upon the completion or termination of this Agreement, all records pertaining to services provided hereunder in the Contractor’s possession shall be turned over to the County; provided, however that Contractor shall have access to the records upon its written reasonable request. St. Joseph County shall have rights to any and all records and software programs relating to St. Joseph County records. It is further understood that material or documents shall be used only for internal matters and no materials or documents shall be released outside of the department.

10. Compensation

The County shall compensate the Consultant for services perform per the compensation agreed upon in quarterly installments. The Consultant shall invoice the County for additional autopsies and examinations on a quarterly basis. The County shall reimburse for services billed in accordance to the agreed upon pricing. Body transportation fees are to be paid by the County under separate arrangements. St. Joseph County shall retain billing for cremation permits.

Selection Criteria

The requested information is intended to provide information that will assist the St. Joseph County Clerk’s Office in the selection of the most qualified, competent, experienced, responsive and economical Consultant, who will best serve the needs of the County. During the evaluation process, where it may serve its best interest, the County reserves the right to request additional information or clarifications from proposers, to reject any or all proposals or unauthorized modifications, to allow corrections of errors or omissions, or to waive irregularities. A selection committee will evaluate the proposals based upon the submittal requirements. After a review of the written proposals, selected firms may also be asked to make an in-person presentation or field follow-up questions. The County will choose the proposal(s) that best fits its needs. The County is not obligated to award the contract based on cost alone. The selected firm will be required to enter into a written agreement with St. Joseph County that will detail the specifics of the relationship and include scope of work, compensation, insurance requirements and other matters. This agreement is anticipated to be for three years with a provision for the County, at its discretion, to extend the contract for two (2) additional one-year periods for a total contract period not to exceed five (5) years. If an agreement cannot be reached, the County reserves the right to render the proposal invalid and may award the contract to another qualified proposer in its sole discretion

Submittal Requirements

Proposals should demonstrate the qualifications, experience, service level, cost of services, competence, and capacity of the Consultant. The St. Joseph County Clerk’s Office considers qualified Consultants to be those that demonstrate the appropriate experience, capability, knowledge and financial ability to implement the Scope of Work outlined in the Project Details above. Each statement of qualifications must address all the points outlined below:
Firm Overview
Full name and address of the firm with a short description of the firm. Include a description of the business organization, year established, federal ID number, Michigan tax ID number, the firm’s legal formation (e.g. corporation, sole proprietor, etc.) and state of incorporation, if applicable. List the firm’s key personnel. Page limit for this section is one (1) page.

Qualifications
Provide résumé for the Key personnel who will provide the vast majority of the consulting services listed in the Scope of Work. Resume and/or narrative response shall provide, at a minimum, his/her education degree(s), institution(s) issuing the degrees, and year(s) received; certifications and registrations; years and position(s) with the company; years with other firms and firm names; types of services Key individual is qualified to perform; demonstration of the familiarity of Key individual with services required for this project; and recent experience of Key individual and his/her roles in similar projects. Response shall be limited to not more than three (3) pages.

Provide resumes for no more than two (2) staff persons who may assist the “Key” personnel with performing services listed in the scope of work. Resume and/or narrative response shall provide, at a minimum, education degree(s), institution(s) issuing the degrees, and year(s) received; certifications and registrations; years and position(s) with the company; years with other firms and firm names; types of services the staff persons are qualified to perform; demonstration of the familiarity of the staff persons with services required for this project; recent experience of staff persons and their roles in similar projects. Response shall be limited to not more than two (2) pages.

Describe what additional “value added services” your firm can provide. Page limit for this section is one (1) page.

List the key differentiators for your firm. What factors distinguish your firm from your competitors? Page limit for this section is one (1) page.

References
Reviewers may solicit references from some or all client contacts provided with previous experience examples above.

Compensation
For each year of the anticipated three-year contract and two additional one-year periods, please provide the following:

Annual Fee payable in quarterly installments for all autopsy and medical examiner services including medical examiner investigations and online reporting system.
Administration Fee:

- Administration fee including the review and authorization of cremation permits;
- Review of deaths reported not requiring autopsies and death certificates produced and delivered to funeral director within limits required by law;
- Administration of office and records including all standard office supplies and equipment;
- Attendance at Child Death Review Team meetings, at court proceedings, and meetings/communications with families and other interested parties;
- All remaining miscellaneous administrative services.

Complete autopsy, limited autopsy, and external examination to include:

- Toxicology (including reference laboratory toxicology);
- Forensic anthropology consultations;
- Forensic entomology consultations;
- Forensic dentistry consultations, neuropathology consultations, and cardiovascular pathology consultations.

Optional Number of included autopsies per year with administration fee.

Optional Body Transport Services per trip from County to ME location.

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Conflict of Interest

Disclose any conflicts or perceived conflicts of interest. Identify what procedures your firm utilizes to identify and resolve conflicts of interest.
Copies of the Following Items
- Comprehensive general liability and property damage coverage
- Professional liability (errors and omissions) coverage.
- Worker’s compensation coverage
- Any and all relevant license/registration numbers
- Contract for services

Certification
I hereby state that I have read, understand, and become thoroughly familiar with and understand the terms and scope of work contained in the RFQ/P. I hereby state that all of the information I have provided is true, accurate and complete. I hereby state that I have authority to submit this proposal which will become the basis for a binding contract if accepted by the St. Joseph County Clerk’s Office. I hereby state that this proposal will remain valid for not less than six (6) months from this certification date.

Signed: __________________________________________________________

Type or Print Name: ________________________________________________

Title: _____________________________ Date: _________________________

Company Name: ___________________________________________________

Address: _________________________________________________________

Contact Name: ____________________________________________________

Contact Phone Office: ________________ Cell: _________________________

Contact Email: ____________________________________________________