



QLV27007047
Solicitation Specifications
RISD Substitute Nursing Services

SECTION A: BACKGROUND

The Department of Elementary and Secondary Education, Rhode Island School for the Deaf (RISD), is seeking to establish a qualified list of vendors who provide Substitute Nursing Services. This solicitation is not intended for the individual substitute nurses but for staffing agencies and temporary nursing agencies.

Students at RISD rely on nursing support. This includes diabetic students, students who are tube fed, students who need medication, etc. If RISD does not have a nurse for a particular school day, these students cannot come to school. This is impactful to the students, and RISD must find a replacement nurse, who must be a Registered Nurse per RI Gen L § 5-34-1, The Rhode Island Nurse Practice Act.

This coverage may be required for planned absences, such as personal days or field trips, which can generally be scheduled in advance. This coverage may also be required for unplanned absences such as “morning-of sick call outs.” These will not have advance notice and may last for 1-2 days.

SECTION B: SCOPE OF WORK AND REQUIREMENTS

The vendor must be able to provide Registered Nurses (RN), per RI Gen L § 5-34-1, The Rhode Island Nurse Practice Act.

The vendor must be able to provide qualified nurses who have been vetted and who have all the correct certifications, licenses, background checks, etc. required.

The vendor should be able to provide an RN without much notice.

The vendor should be able to provide an RN who is able to work in a fast-paced school environment.

RISD may request a particular nurse be provided or not provided, depending on prior experience.

Priority may be given to vendors who can provide American Sign Language fluent RNs.

SECTION C: PROPOSAL

Proposal – QLV Pass / Fail Assessment

Vendor responses must address specifically each of the following criteria:

- A. References** – Please provide a minimum of three references of schools or other districts you have worked with. Please include contact names with emails, phone numbers, dates of service, and type(s) of service(s) provided.
- B. Registered Nurses** – Please certify your ability to provide Registered Nurses (RNs) with Rhode Island Registered Nursing Licenses for work.
- C. Certifications / Licenses** – Please list the certifications, licenses, background checks, etc. you require of the RNs you provide.
- D. Notice** – Please share your ability to provide RNs without much notice.
- E. Pace** – Please share your ability to provide RNs who can work in a fast-paced environment.
- F. Language** – Please share your ability to provide RNs fluent in American Sign Language.

SECTION D: EVALUATION AND SELECTION

Proposals shall be reviewed by the Division of Purchases on a “Pass / Fail” basis. All criteria must receive a “Pass” determination for a vendor’s potential inclusion on the resulting qualified vendor list. One or more criteria with a “Fail” determination will not be reviewed further and the vendor will be dropped from consideration.

Proposals shall be reviewed and scored based upon the following criteria:

Criteria	Pass / Fail
References	Pass / Fail
Registered Nurses	Pass / Fail
Certifications / Licenses	Pass / Fail
Notice	Pass / Fail
Pace	Pass / Fail
Language	Pass / Fail
Overall Pass / Fail	Pass / Fail

NOTE: See the “Requirements” tab of this solicitation for additional information on the evaluation and selection process in the “QLV-Qualified List of Vendors” section.