|  |
| --- |
| REQUEST FOR PROPOSALS RESPONSE TEMPLATE,REVISION 1  |
| **[Proposer inserts coMPANY name]****Regarding:**San Luis Obispo Case Management System Replacement ISD – 06192012 - SLO**PROPOSALS DUE:** 7/24/2012 no later than 4:30 p.m. Pacific time  |

# Executive Summary

**Instructions:** This section should be a seven (7) to ten (10) page summary of the key aspects of Vendor’s response to this Request for Proposal (RFP) and the principal advantages to the court.

## Overview of Proposed Statewide CMS Deployment Solution.

## Approach to Meet CMS Deployment Objectives.

## Overview of Vendor Qualifications.

## Confirmation of Contract Scope and Term.

## Benefits to the San Luis Obispo Superior Court.

# Minimum Qualifications and Vendor Profile

## Minimum Requirements to Qualify

**Instructions:** In the following sections, Vendor must provide responses to the minimum requirements to qualify for participation in the RFP process. Answer Yes or No to the following questions.

1. Minimum Requirements to Qualify

|  |  |  |
| --- | --- | --- |
|  | **Criteria** | **Response (Yes/No)** |
|  | Will your organization act as a prime contractor if subcontractors are required to provide in scope services?  |  |
|  | Are the proposed Vendor facilities for providing services to the Judicial Branch all located within the continental United States or territories and staffed by U.S. located personnel? |  |
|  | Are you willing to place Key Employees in Court facilities within the San Luis Obispo, California area?  |  |
| Has your organization, acting as the prime contractor, entered into at least three (3) major application deployments, similar is scope to Deployment Services Statement of Work within the last five (5) years where the following is true for each contract: |
|  | The contract value of each was at least $2,000,000 for application deployment services excluding application development services |  |
|  | The contract included the provision of Deployment Services where total revenue derived from the Deployment Services was at least 25 percent of total annual contract value, and included data exchanges, user training, and application configuration to support business work flow/process |  |
| Can you certify to the best of your knowledge that your organization or any of its officers: |
|  | Are not presently debarred, suspended, proposed for debarment, and declared ineligible or voluntarily excluded from covered transactions by any Federal department or agency? |  |
|  | Have not within a five (5) year period preceding this RFP been convicted of or had a civil judgment rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property? |  |
|  | Have not within a five (5) year period preceding this RFP had one or more public transactions (Federal, State or local) terminated for cause or default? |  |
| **End of Table** |

## Organization Overview

**Instructions:** In the following sections Vendor must provide all information requested regarding Vendor’s unique capabilities as an information technology (IT) Vendor.

### Vendor Company Overview

1. Company Overview

|  |  |
| --- | --- |
| **Company name** |  |
| **RFP Response lead/account executive name, title and contact information:** |  |
| **Industry (NAICS)** (North American Industry Classification System) |  |
| **Federal Tax Identification Number** |  |
| **Fiscal 2011 company revenue** |  |
| **Fiscal 2011 company net income** |  |
| **Headquarters Location** |  |
| **Date Founded** |  |
| **Company Ownership** (i.e. private/public, joint venture) |  |
| **Number of years Vendor has been providing Application Deployment and Application User Training services** |  |
| **Number of employees:****Total:****Deployment Services:** |  |
| **Service Delivery Locations in the Continental United States** |  |
| **Name, title, address, telephone number, and email address of the individual who will act as Proposer’s designated representative for purposes of this RFP.** |  |
| **End of Table** |

1. Details of Revenue Stream

| **Service Category** | **Revenue in US $** |
| --- | --- |
| **Business Process Outsourcing Services Total** |  |
| **IT Outsourcing Services Revenue Total** |  |
| **Deployment Services Revenue** |  |
| **Network, Desktop Management Services Revenue** |  |
| **Network Management Services Revenue** |  |
| **Applications Development Services Revenue** |  |
| **Application Maintenance Services Revenue** |  |
| **US Customer IT Outsourcing Services Revenue** |  |
| **Non US Customer IT Outsourcing Services Revenue** |  |
| **Commercial IT Outsourcing Services Revenue** |  |
| **Federal IT Outsourcing Services Revenue** |  |
| **State Government IT Outsourcing Services Revenue** |  |
| **Local Government IT Outsourcing Services Revenue** |  |
| **System Integration Services Revenue Total** |  |
| **Other IT Services Revenue Total (list below)** |  |
| **End of Table** |

###

### References

**Instructions to Vendor:** Provide at least five references of customers with comparable size and scope of service. Include a detailed overview of each contract including the project plan used to deliver the service. Vendor may refer to information provided in Section 2.1.11 as references to be included in a total of five references.

1. Reference 1

| **Reference # 1****Customer Name** |
| --- |
| **Industry** |  |
| **Contact Name and Title** |  |
| **Address** |  |
| **Telephone**  |  |
| **Vendor Project Manager Name** |  |
| **Average Annual Contract Value** |  |
| **Contract Value of each of the following service:** |
| **Deployment Services** |  |
| **Others**  |  |
| **Contract Durations (in months)** |  |
| **Subcontractors and services provided by each:** |  |
|  **(list)** |  |
| **End of Table** |

1. Reference 2

| **Reference # 2** |
| --- |
| **Customer Name** |  |
| **Industry** |  |
| **Contact Name and Title** |  |
| **Address** |  |
| **Telephone**  |  |
| **Vendor Project Manager Name** |  |
| **Average Annual Contract Value** |  |
| **Contract Value of each of the following service:** |
| **Deployment Services** |  |
| **Others**  |  |
| **Contract Durations (in months)** |  |
| **Subcontractors and services provided by each:** |  |
|  **(list)** |  |
| **End of Table** |

1. Reference 3

| **Reference # 3** |
| --- |
| **Customer Name** |  |
| **Industry** |  |
| **Contact Name and Title** |  |
| **Address** |  |
| **Telephone**  |  |
| **Vendor Project Manager Name** |  |
| **Average Annual Contract Value** |  |
| **Contract Value of each of the following service:** |
| **Deployment Services** |  |
| **Others**  |  |
| **Contract Durations (in months)** |  |
| **Subcontractors and services provided by each:** |  |
|  **(list)** |  |
| **End of Table** |

1. Reference 4

| **Reference # 4** |
| --- |
| **Customer Name** |  |
| **Industry** |  |
| **Contact Name and Title** |  |
| **Address** |  |
| **Telephone**  |  |
| **Vendor Project Manager Name** |  |
| **Average Annual Contract Value** |  |
| **Contract Value of each of the following service:** |
| **Deployment Services** |  |
| **Others**  |  |
| **Contract Durations (in months)** |  |
| **Subcontractors and services provided by each:** |  |
|  **(list)** |  |
| **End of Table** |

1. Reference 5

| **Reference # 5** |
| --- |
| **Customer Name** |  |
| **Industry** |  |
| **Contact Name and Title** |  |
| **Address** |  |
| **Telephone**  |  |
| **Vendor Project Manager Name** |  |
| **Average Annual Contract Value** |  |
| **Contract Value of each of the following service:** |
| **Deployment Services** |  |
| **Others**  |  |
| **Contract Durations (in months)** |  |
| **Subcontractors and services provided by each:** |  |
|  **(list)** |  |
| **End of Table** |

## Use of Subcontractors

**Instructions to Vendor:** Use the table below for a listing of proposed subcontractors if any. Provide a table for each subcontractor proposed.

1. 1st Proposed Subcontractor

| 1st Proposed Subcontractor  |
| --- |
| **Subcontractor Name** |  |
| **Fiscal 2011 Company Revenue** |  |
| **Fiscal 2011 Company Net Income** |  |
| **Company ownership** (i.e. private/public, joint venture) |  |
| **Headquarters Location** |  |
| **Date Founded** |  |
| **Number of employees** |  |
| **Products or Services to be provided to Court** |  |
| **Experience of subcontractor in performing the services to be provided** |  |
| **Experience Vendor has partnering with this subcontractor in the past** |  |
| **Locations where work is to be performed** |  |
| **End of Table** |

1. 2nd Proposed Subcontractor

| 2nd Proposed Subcontractor  |
| --- |
| **Subcontractor Name** |  |
| **Fiscal 2011 Company Revenue** |  |
| **Fiscal 2011 Company Net Income** |  |
| **Company ownership** (i.e. private/public, joint venture) |  |
| **Headquarters Location** |  |
| **Date Founded** |  |
| **Number of employees** |  |
| **Products or Services to be provided to Court** |  |
| **Experience of subcontractor in performing the services to be provided** |  |
| **Experience Vendor has partnering with this subcontractor in the past** |  |
| **Locations where work is to be performed** |  |
| **End of Table** |

## Vendor Business Profile and Strategy

### Vendor Current Market Position and Strategy

### Vendor Future Vision and Strategy

### Relevant Professional Certifications and Honors

**Instructions:** Describe your certifications and honors relating to the proposed Services.

#### Professional Certifications or Affiliations

1. Professional Certifications and/or Experience

| Vendor Certifications |
| --- |
| **ITEM #** | **Certification or Training**  | **Certification or Training Date** (MM/DD/YY) | **Vendor Response (include training information for any proposed individual staff members)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **End of Table** |

# Conformance with Requirements Response

## Requirements Response

**Instructions:** Please reference the technical requirements attachments detailed in Section 5.2. Each requirement should be addressed individually and responses should be made directly in each attachment. Requirements attachments are listed below:

* *Attachment 7*  Business and Functional Requirements
* *Attachment 8* Testing Requirements
* *Attachment 9* Configuration Requirements
* *Attachment 10* Training Requirements
* *Attachment 11* Integration Requirements
* *Attachment 12* **Network-Desktop Requirements**
* *Attachment 13*  **Application/Architecture/Security Requirements**
* *Attachment 14* **DMS Requirements**
* *Attachment 15* **San Luis Obispo Court Information**

## Deployment Services

**Instructions:** Please reference the Deployment Services requirements in sections 2.5. Please list and describe any approaches, methodologies and exceptions

### Deployment Approach

**Instructions:** In the section below, provide an overview of Vendor’s deployment approach. See Sections 2.4 and 2.5 of RFP for guidance.

### Proposed Staffing

**Instructions:** In the section below, provide an overview of Vendor’s proposed approach to meet the Roles and Responsibilities in section 3.0.

### Organization Chart

**Instructions:** Provide an organizational chart that clearly identifies the account team and roles that will support the CMS deployment. Include the names of Vendor Key employees and staff positions.

### Biographies

**Instructions:** For the Key Roles as described in section 3.0 provide resumes of Vendor’s proposed Personnel including years of experience in role, last two accounts in role, references from those account, and experience with deployment of case management systems.

## Project Sponsor

## Project Manager

## Architect

## Business Resources (please insert as many as necessary)

## Testing Resources (please insert as many as necessary)

## Training Resources (please insert as many as necessary)

## Programming Resources (please insert as many as necessary)

## Other Relevant Personnel (please insert as many as necessary)

### CMS/DMS Deployment Management Tools

**Instructions:** In the table below, provide information regarding the automated tools Vendor will use in the delivery of the CMS solution. Note: Attach and reference additional information where required.

1. CMS/DMS Deployment Management Tools

| CMS/DMS Deployment Management Tools | Product Name & Version | Describe Functions & Features (including manual and automated functions / integration points with other tools) | Expected Number of Licenses Required  |
| --- | --- | --- | --- |
| Vendor Tools |
| Project Management |  |  |  |
| SLA Monitoring & Reporting |  |  |  |
| Testing Tools |  |  |  |
| Knowledge Management |  |  |  |
| Change Management  |  |  |  |
| Account Management |  |  |  |
| Training Software  |  |  |  |
| Other (describe) |  |  |  |

# Other

**Instructions:** AOC and the Court consider Vendor to agree to all other requirements not addressed specifically in the previous sections of this document unless identified herein. Absence of issues will constitute agreement for those terms not herein addressed, and will be off the table for further negotiation.

# Supporting Information

**Instructions:** AOC and the Court expect that Vendor will provide additional information to further clarify its response.

## Additional Information for Solution Proposals

###  Application Deployment Management

### Application Deployment

### Contract Relationship Management

## Vendor Assumptions