



**TO:** SOUTHERN NEVADA DISTRICT BOARD OF HEALTH      **DATE:** February 25, 2016

**RE:** *Approval of Contract between the Southern Nevada Health District and the Reward Strategy Group*

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**PETITION # 10-16**

**That the Southern Nevada District Board of Health** *approves the contract between the Southern Nevada Health District and the Reward Strategy Group*

**PETITIONERS:**

**Shandra Hudson, SPHR, SHRM-SCP, Human Resources Administrator** *SH*  
**Andrew J. Glass, FACHE, MS, Director of Administration** *AG*  
**Joseph P. Iser, MD, DrPH, MSc, Chief Health Officer** *JPI*

**DISCUSSION:**

The Southern Nevada Health District desires a comprehensive agency-wide classification and compensation study to evaluate the internal equity and external competitiveness of the Health District's compensation plan. Approximately 160 classifications representing 465 full-time employees are encompassed within the study.

**FUNDING:**

The cost not to exceed \$141,000 based on the terms of the contract awarded from the RFP, with an anticipated start date of March 1, 2016 through December 31, 2016.



**REQUEST FOR PROPOSALS (RFP)  
FOR  
CLASSIFICATION STUDY**

**SNHD-9-RFP-16-005**

**December 15, 2015**

**330 S. VALLEY VIEW  
LAS VEGAS, NEVADA 89107**

## SECTION I – INTRODUCTION

**A. Purpose:** The Southern Nevada Health District (Health District) is seeking proposals from qualified proposers to provide a comprehensive agency-wide classification and compensation study to evaluate the internal equity and external competitiveness of the compensation plan.

**B. Entity Information:**

The mission of the Health District is “to protect and promote the health, the environment, and the well-being of Clark County residents and visitors.” The Health District is one of the largest local public health organizations in the United States.

The Health District was created in 1962, following statutory authorization from the Nevada State Legislature to combine the Health District health department and the health departments of several surrounding cities. The Health District serves over 2 million residents and 40 million visitors to the Las Vegas valley each year.

The Health District currently has locations in the following areas (all have hours of operation between 8:00 am and 4:30 pm):

Main Campus  
330 S. Valley View Blvd  
Las Vegas, Nevada

East Las Vegas Public Health Center  
560 N. Nellis Blvd, Suites D1 & E12  
Las Vegas, Nevada

Future Main Campus  
280 N. Decatur Blvd.  
Las Vegas, Nevada

Henderson Public Health Center  
520 E. Lake Mead Pkwy  
Henderson, Nevada

Sexual Health Clinic  
625 Shadow Lane Drive  
Las Vegas, Nevada

Warehouse  
700 Desert Lane  
Las Vegas, Nevada

**C. Anticipated Contract Term and Conditions:**

- a. The duration of the contract awarded from this RFP will be from date of award through December 31, 2016. The Health District reserves the right, prior to contract award, to determine the length of the initial contract term.
- b. The resulting agreement(s) will be subject to the availability of funding and shall be terminated immediately if for any reason State and/or Federal funding ability, or private grant funding ability, budgeted to satisfy this RFP and/or Agreement is withdrawn, limited, or impaired.
- c. The Health District does not guarantee to award a contract under this RFP.

- a. Update and/or create class specifications as needed to uniformly reflect distinguishing characteristics, essential job functions, minimum qualifications, working conditions, license requirements, regulatory requirements, standby/call-out responsibilities, etc., for all classifications.
- b. Identify management, supervisory, professional, technical, and general employees, including FLSA status (exempt/non-exempt). Incorporate core competencies for public health professionals into classification plan consistent with workforce development initiative.
- c. Draft and submit proposed class specifications for review by Health District.
- d. Recommend classification series and levels within the series (i.e. I/II, Senior/Lead, etc.), if appropriate
- e. Finalize class specifications and recommend appropriate classification for each employee, including correction of identified discrepancies between existing and proposed classifications
- f. Identify career ladders/promotional opportunities for each classification
- g. Recommend salary range for each existing or proposed position based on the Classification Plan and on the compensation survey results, and internal relationships and equity within the organization.
- h. Recommend salary range and compensations for each position based on median and mean salary of the comparable entities. In addition, consultant to prepare new salary step plan, compensation/incentive plan that is within industry best practices.

**D. Late Proposals:** Proposals received and/or date stamped after the Proposal Due Date and Time are late and will not be considered by the Health District. Proposals must be received at the Health District by the Due Date and Time stated above. Proposals received after that date and time will be rejected and will not be considered. Upon request the Health District will return unopened, late-received Proposals at the requester's expense. Proposer is responsible for ensuring third party deliveries conform to the delivery requirements set forth in this RFP.

**E. Receipt and Opening of Proposals:**

1. Proposals received prior to the advertised hour of opening will be time stamped and kept securely sealed. Time of receipt will be determined by the procurement office time stamp. Proposals received after the specified date and time of proposal opening are late. Late hand-carried proposals shall not be accepted. Proposals received by other methods shall remain unopened.
2. No responsibility will attach to the Health District or its representatives for the premature opening of, or the failure to open, a proposal not properly addressed and identified.
3. The proposal acceptance period shall extend for a period of ninety (90) calendar days from the date of proposal opening for the purpose of proposal evaluation and award unless otherwise stated elsewhere in this solicitation.

**F. Anticipated Contract Start Date: March 1, 2016**

5. Attachment A, Proposal Form.
6. Attachment B, Certifications and Assurances.
7. Attachment C, Firm-Fixed-Price (provide in a separate sealed envelope labeled SNHD-9-RFP-16-005, Price Proposal).

Proposals which fail to address each of the submission requirements above may be deemed non-responsive and will not be considered further. The Health District's evaluation team will not refer to a designated web site, brochure, or other location for the requested information. Responses that utilize references to external materials as an answer will be considered non-responsive .

**ATTACHMENT A  
PROPOSAL FORM**

The undersigned, as an authorized representative of the company named below, acknowledges that he/she has examined this Request for Proposal including any related documents, and hereby offers to furnish all labor, materials, tools, supplies, equipment and services necessary to comply with the specifications, terms and conditions set forth herein at the prices stated.

Company Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Phone No.: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Federal Tax ID Number\*: \_\_\_\_\_

Business License Number (if applicable): \_\_\_\_\_

**EXCEPTIONS:** Any exceptions to any of the specifications or requirements of this RFP shall be noted in writing, and attached to the Proposal when submitted. By taking exceptions and clearly stating them in writing on a separate sheet of paper headed "EXCEPTIONS", and by offering alternates to replace the stated requirements, the proposer may still compete in the solicitation. However, the Health District has the right to accept or reject any proposed exception.

Are there exceptions to this Proposal?      Yes \_\_\_\_      No \_\_\_\_

**ACKNOWLEDGMENT OF ADDENDA:**

The signer of this form acknowledges receipt of the following addenda:

Addendum No. _____	Dated _____
Addendum No. _____	Dated _____
Addendum No. _____	Dated _____

Or

No Addenda were received in connection with this RFP.      Date: \_\_\_\_\_

- (1) Abide by the terms of the statement.
  - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.
- (e) Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant.
  - (f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted –
    - (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended.
    - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by Federal, State, or local health, law enforcement, or other appropriate agency.
  - (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).
- 3. Certification Regarding Lobbying.** Title 31, United States Code, Section 1352, entitled “Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions,” generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non-appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93). The undersigned (authorized official signing for the applicant organization) certifies, to the best of his or her knowledge and belief, that:
- (a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
  - (b) If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, “Disclosure of Lobbying Activities,” in accordance with its instructions.
  - (c) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.



**ATTACHMENT C  
FIRM FIXED PRICE PROPOSAL**

Provide your firm-fixed price to complete this work. This firm fixed price will include all professional services, supplies and travel to complete the scope of work per this RFP. No additional out of pocket expenses shall be paid, including but not limited, to fuel and other associated travel costs.

**FIRM-FIXED PRICE:**     **\$** \_\_\_\_\_

**Additional Services (Optional):**

Any other related and recommended products or services not specified in this RFP which may be considered essential or beneficial by the proposer. These services should be priced separate from Firm-Fixed-Price above:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Proposers Signature:** \_\_\_\_\_     **Date:** \_\_\_\_\_

**By Signing above I Certify that I have carefully read and fully understand the information contained in this Request for Bid; and that I have the capability to successfully undertake and complete the responsibilities and obligations of the Bid being submitted and have the authority to sign bids on behalf of my organization.**

**NAME:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**COMPANY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

4. COMPENSATION. Contractor shall complete the services in a timely manner and consistent with the Scope of Work outlined in Attachment A, attached hereto. Contractor will be reimbursed for expenses incurred as provided in Attachment B: Budget. The total not-to-exceed amount of this Agreement is \$\_\_\_\_\_.
5. STATUS OF PARTIES; INDEPENDENT CONTRACTOR. The Parties are associated with each other only for the purposes and to the extent set forth in this Agreement and in respect to performance of Services pursuant to this Agreement. In the performance of such Services, Contractor shall at all times be an independent Contractor with respect to Health District. Contractor is not an employee or agent of Health District. Further, it is expressly understood and agreed by the Parties that nothing contained in this Agreement will be construed to create a joint venture, partnership, association, or other affiliation or like relationship between the Parties.
6. FISCAL MONITORING AND ADMINISTRATIVE REVIEW OF ADVERSE FINDINGS. Health District may, at its discretion, conduct a fiscal monitoring of Contractor at any time during the term of the Agreement. Contractor will be notified in writing at least three (3) weeks prior to the visit outlining documents that must be available prior to Health District's visit. Health District shall notify Contractor in writing of any Adverse Findings and recommendations as a result of the fiscal monitoring. Adverse Findings are defined as Lack of Adequate Records, Administrative Findings, Questioned Costs, and Costs Recommended for Disallowance. Contractor will have the opportunity to address adverse findings in writing responding to any disagreement of adverse findings. Health District shall review disagreement issues, supporting documentation and files and forward a decision to the Contractor in writing.
7. BOOKS AND RECORDS.
  - 7.01 Each Party shall keep and maintain under generally accepted accounting principles full, true and complete books, records, and documents as are necessary to fully disclose to the other Party, properly empowered government entities, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with the terms of this Agreement and any applicable statutes and regulations. All such books, records and documents shall be retained by each Party for a minimum of three (3) years, and for five (5) years if any federal funds are used pursuant to this Agreement, from the date of termination of this Agreement. This retention time shall be extended when an audit is scheduled or in progress for a period of time reasonably necessary to complete said audit and/or to complete any administrative and judicial litigation which may ensue.
  - 7.02 Health District shall, at all reasonable times, have access to Contractor's records, calculations, presentations and reports for inspection and reproduction.
8. CONFIDENTIALITY. No protected health information as that term is defined in the health Insurance Portability and Accountability Act of 1996 or personally identifiable information will be shared with Contractor during the course of this Agreement. Consistent with state and federal privacy laws, Contractor will at all times have in place procedures to ensure the privacy and maintain the confidentiality of any information received. Accordingly, no Business Associate Agreement is required.

negatives, blue prints, plans, maps, data, system designs, computer code, or any other documents or drawings, prepared or in the course of preparation by either Party in performance of its obligations under this Agreement shall be the joint property of both Parties.

19. PROPER AUTHORITY. The Parties hereto represent and warrant that the person executing this Agreement on behalf of each Party has full power and authority to enter into this Agreement and that the Parties are authorized by law to perform the services set forth in the documents incorporated herein.
20. ENTIRE AGREEMENT. This Agreement constitutes the entire Agreement between the Parties and supersedes any prior contracts or agreement between the Parties regarding the subject matter hereof.
21. AMENDMENTS. This Agreement may be amended only by a writing signed by a duly authorized agent/officer of each Party and effective as of the date stipulated therein.
22. GOVERNING LAW. This Contract and the rights and obligations of the Parties hereto shall be governed by, and construed according to the laws of the State of Nevada, with Clark County, Nevada as the exclusive venue of any action or proceeding related to or arising out of this contract.
23. NOTICES. All notices permitted or required under this Agreement shall be made by personal delivery, overnight delivery, or via U.S. certified mail, postage prepaid to the other Party at their address set out below:

**Southern Nevada Health District**  
Financial Services Department  
Materials Management Supervisor  
P.O. Box 3902  
Las Vegas, NV 89127

\_\_\_\_\_

BY SIGNING BELOW, the Parties agree that they have read, understood, and agreed to the conditions set forth above and have caused their duly authorized representatives to execute this Agreement.

# **Southern Nevada Health District**

## **Proposal to Conduct a Classification Study SNHD-9-RFP-16-005**

January 2016

**Submitted by:**



REWARD STRATEGY GROUP

Allan Crecelius, President

12707 High Bluff Drive, Suite 200, San Diego, 92130

(858) 259-3800 ■ Fax (858) 792-7465

[www.rewardstrategy.com](http://www.rewardstrategy.com)

**SECTION 1 – ABOUT REWARD STRATEGY GROUP**

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**CONTACT INFORMATION**

Legal Name: Reward Strategy Group, Inc. (a California corporation)  
Address: 12707 High Bluff Drive, Suite 200, San Diego, CA 92130  
Telephone: (858) 259-3800 Fax: (858) 792-7465  
Firm Owners: Allan Crecelius, President Sandra Comrie, Executive Director  
Primary Contact: Allan Crecelius, President Email: [acrecelius@rewardstrategy.com](mailto:acrecelius@rewardstrategy.com)  
Website: [www.rewardstrategy.com](http://www.rewardstrategy.com)

**HISTORY OF THE FIRM**

Reward Strategy Group, Inc. has been in continuous operation for 29 years, successfully consulting with clients across all business and service sectors. During our three decades in business, we have assisted more than 300 public and private sector organizations, including several with public health missions: the Cities of Long Beach, Pasadena and Berkeley; Los Angeles County, Pima County (AZ), Multnomah County (OR), and the federal Health Resources & Services Administration.

RSG's founders left large, international consulting organizations with a vision of creating a smaller firm with focused expertise, where senior, experienced consultants could personally deliver high-value client project results. Today, the firm's ongoing success validates our founding principles. We have several clients that have engaged our services and expertise for decades.

RSG is a California Corporation in good standing. Should we need to acquire a business license with the city or county for work with SNHD, we will do so.

**EXPERIENCE**

Classification and compensation are the core specialties of RSG's consulting practice. With decades of experience in conducting complete classification and compensation studies for a wide variety of both public and private sector organizations, RSG is very well qualified to perform these services for SNHD. We have accrued a depth of experience in classification and compensation plan analysis/design that is equaled by few, if any, other consultants.

In a typical year, 50 to 60 percent of our consulting is with cities, counties and special districts in the western United States. It is indicative of the value we bring to consulting engagements that dozens of organizations have retained us repeatedly over the course of many years for new projects.



**ALLAN CRECELIUS, PRESIDENT**

**Allan Crecelius** has been the President of RSG since the firm's founding in 1987. He has 38 years of experience in management consulting with a focus on executive and staff compensation, position classification, strategic planning, performance management and organization effectiveness. His consulting projects have ranged from studies for *Fortune 500* companies to engagements with small or startup entities. He has significant experience across a number of industry sectors, including service, educational, financial, technology, utility, not-for-profit and governmental. He has worked with executives, managers, governing boards and elected officials in more than 300 organizations.

Mr. Crecelius brings a range of experience and technical expertise to client engagements that lead to customized solutions and dramatic improvement in the organization's programs. He has assisted a large number of enterprises to better execute their strategies by operationalizing how they define performance, deliver service and reward success. Over the course of his career, he has successfully managed very large (seven-figure budgets), multi-disciplinary consulting engagements, down to small projects with clients of modest size.

Prior to becoming RSG's President in 1987, Mr. Crecelius was the Managing Partner–Western Region for Sibson & Co., Inc., a nationally recognized compensation consulting firm. With Sibson, he was responsible for managing staff in four offices and leading the firm's consulting practice in executive compensation and organization effectiveness. Previously, Mr. Crecelius was the Vice President– General Consulting for the Hay Group, an international compensation and human resources consulting firm.

Mr. Crecelius received a Bachelor of Science degree in Engineering from the United States Military Academy at West Point in 1968 and served as an officer in the U.S. Army for 10 years, holding key leadership positions in both combat and peacetime. He is frequently retained as a speaker in national/regional symposiums on planning, organization and compensation issues. He is the author of a number of articles and the co-author of the 1994 book, *Strategic Management — Creating Your Organization's Future*.

**SANDRA COMRIE, EXECUTIVE DIRECTOR**

**Sandra Comrie** leads the firm's consulting practice in position classification and performance management.

Ms. Comrie has more than 20 years of experience in management consulting. She has advised both large and small client organizations, with employee populations in the tens of thousands down to staff levels of under 100. Before joining RSG, Ms. Comrie was the Chief Operating

Service, American College of Emergency Physicians (ACEP), Veterans Integrated Service Network and the Division of Nursing in HRSA's Bureau of Health Professions. In Nevada, Mr. Mannle is a key member of RSG's current project team working on position classification analyses for Southern Nevada Water Authority and Las Vegas Valley Water District.

Mr. Mannle holds a Masters of Public Administration from Harvard University and received his undergraduate degree from the United States Military Academy at West Point (1971). He is the author/co-author of several articles published in professional journals.



#### EXAMPLES OF CLASS/COMP CLIENTS

City of Anaheim	Eastern Municipal Water District	Imperial County Superior Court
City of Bakersfield	Encina Wastewater Authority	Los Angeles County Superior Court
City of Berkeley*	Helix Water District	Orange County Superior Court
City of Camarillo	Inland Empire Utilities Agency	Riverside County Superior Court
City of Carpinteria	Las Vegas Valley Water District	San Diego County Superior Court
City of Corona	Leucadia Wastewater District	County of Los Angeles*
City of Culver City	Orange County Water District	County of Marin
City of Del Mar	Otay Water District	County of San Diego*
City of Hesperia	Ramona Municipal Water District	Multnomah County, OR*
City of Imperial Beach	Rancho California Water District	Pima County, AZ*
City of Lake Forest	San Diego County Water Authority	Antioch University
City of Long Beach*	Santa Fe Irrigation District	National University
City of Los Angeles	Vallecitos Water District	San Diego State University
City of Moreno Valley	Western Municipal Water District	San Jose State University
City of Orem, UT	Chino Valley Independent Fire District	Berkeley Unified School District
City of Pasadena*	Desert Recreation District	Montebello Unified School District
City of Peoria, AZ	East Bay Regional Park District	Orange County Dept of Education
City of Pleasanton	Monterey-Salinas Transit District	Long Beach Community College District
City of Portland, OR	San Diego Housing Commission	Palomar Community College District
City of Riverside	San Diego Regional Airport Authority	Rio Hondo College
City of Safford, AZ	San Diego Unified Port District	American Red Cross
City of San Bernardino	San Joaquin Regional Transit District	Timken Museum of Art
City of San Marino	SunLine Transit	Zoological Society of San Diego
City of Thousand Oaks		

\* RSG has conducted classification/compensation studies, which included the public health departments, in the cities and counties highlighted above.



## SECTION 4 – SCOPE OF WORK AND METHODOLOGY

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### BACKGROUND

The Southern Nevada Health District is a regional, multi-jurisdictional government agency providing public health services for the population of Southern Nevada. The Health District is seeking a qualified human resources consulting firm to provide a comprehensive agency-wide classification and compensation study to bring the position classification plan and all class specifications up to date, and to evaluate the internal equity and external competitiveness of the compensation plan. The District has approximately 160 classifications and 465 full-time employees that will be included in the study.

Reward Strategy Group is prepared and well positioned to bring the Health District's classification and compensation plan up to date:

- ◆ The firm has been successfully conducting classification studies for both public and private sector clients for **29 years**.
- ◆ Four senior classification/compensation **experts** will be available to serve the Health District.
- ◆ Our firm has an excellent record of performing client projects on time and within budget.

### STUDY OBJECTIVES

- ◆ Conduct a rigorous analysis of all positions' current duties/responsibilities/qualification requirements and develop an updated classification plan that accurately reflects the work being performed today and supports the District's operational needs, while ensuring the District can continue to attract and retain skilled employees.
- ◆ Ensure the classification plan identifies required competencies, including core competencies for the public health professionals that are aligned with workforce development initiatives.
- ◆ Ensure positions are effectively grouped into class series, with career ladders and job family levels of progression, where appropriate.
- ◆ Conduct an accurate compensation survey of the regional labor market that identifies the levels of competitiveness for the Health District's current compensation plans.
- ◆ Design a new, effective salary grade structure with improved salary ranges and steps.
- ◆ Allocate all positions into the new salary structure based on the classification plan, compensation survey results and internal job content relationships.



- ◆ **Conduct Orientation Meeting with Department Heads and Managers.** During this orientation/briefing session, the consultants will introduce the study and promote discussion on study issues.
- ◆ **Prepare *PDQs*.** The consultant team will modify RSG's standard *Position Description Questionnaire (PDQ)* to meet the District's job information collection requirements. The *PDQ* will be made available in printed copy and electronically.
- ◆ **Conduct Orientation Meetings with Employees.** RSG will work with the Human Resources Administrator and staff to schedule and conduct employee orientation sessions to introduce the study and the consultant team, go over *Position Description Questionnaire* completion requirements, and address employee questions.
- ◆ **Health District Review of Completed *PDQs*.** Each employee's completed *PDQ* must be reviewed by his/her manager or supervisor for completeness and accuracy. RSG will prepare a *Manager Supplement* form for use in this review and attachment to questionnaires.
- ◆ **Collect *PDQs* and *Manager Supplements*.** The SNHD will collect, account for and forward the material to RSG. The consulting team will review and study all *PDQs* and *Manager Supplements*.
- ◆ **Conduct Employee Job Analysis Interviews.** Based on our review of *PDQs*, we will conduct individual or, where appropriate, small-group interviews of employees in each current classification. Human Resources staff will need to schedule the interviews based on input from RSG.
- ◆ **Prepare Preliminary Classification Plan Findings and Recommendations for Improvement.** RSG will evaluate all data gathered through earlier meetings, *PDQs*, *Manager Supplement* forms and job analysis interviews and develop findings and recommendations for improving and bringing the District's classification plan up to date.
- ◆ **Recommend Allocation of Employees into Appropriate Classifications.**
- ◆ **Present Classification Plan Recommendations.** RSG will meet with executives to review our findings and recommendations. We will have examined the extent to which classifications appropriately reflect the *current* duties and responsibilities assigned to positions, with the appropriate FLSA designation, and are effectively grouped into class series. Titling protocols will be addressed.
- ◆ **Prepare Draft Class Specifications.** After resolving any issues on our classification thinking, RSG will prepare updated class specifications in a format approved by the Health

- ◆ **Document Survey Results.** Our consultants will prepare data sheets, charts and tables displaying the competitive market salary practices for the surveyed classes and detail comparisons with the Health District's current compensation opportunities.
- ◆ **Internal Relationships.** RSG will conduct job content evaluations of all classes and build an internal relationship hierarchy.
- ◆ **Design Improved Salary Structures/Schedules.** Incorporating all the information and data derived in previous steps — external market comparisons, internal relationship analyses, best practices in progressive agencies, and the District's compensation philosophy — we will model and design the optimum base salary structure for the District's classifications. The consultants will allocate all studied classifications into the appropriate grade in the salary structure based on survey results and internal job content relationships.
- ◆ **Present the New Structure and Salary Range Allocation Recommendations.** RSG will review our salary schedule and range allocation recommendations with executive management and any other requested forums.
- ◆ **Design a Recommended Incentive Compensation Plan.** A major part of RSG's consulting practice over the past three decades has been assisting clients to develop and implement effective *variable pay plans* unique to their enterprise needs. Incentive compensation plans can serve to signal and reinforce an organization's operational and service objectives. These plans can range from those of relatively simple gain-sharing design to detailed, metric-driven individual and group incentives. Since we will have learned a great deal about the organizational needs of the Health District in the preceding months of this study, for this element RSG's President will meet with senior management to discuss the range of variable pay options appropriate for consideration. Based on these discussions, we will work with management to design an effective architecture for an incentive compensation arrangement. In developing the budget for this proposal, RSG has assumed an incentive plan design that is on the relatively straightforward end of the design spectrum.

### PHASE 3 – STUDY CONCLUSION

- ◆ **Prepare and Present Final Report.** RSG will document study methodology, findings and recommendations into a final classification and compensation study report. We will present the final report to appropriate executives and, if desired, the Board of Health. Class specifications will be provided in a format desired by the District.
- ◆ **Implementation.** RSG will define components and assist in developing a strategy for implementation.

**SECTION 5 – ATTACHMENTS**

**ATTACHMENT A - PROPOSAL FORM**

**ATTACHMENT B - CERTIFICATIONS & ASSURANCES**

**ATTACHMENT C - FIRM FIXED PRICE PROPOSAL – Under separate cover  
(Includes options for reducing fees)**

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

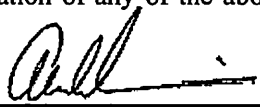
- 4. **Certification Regarding Program Fraud Civil Remedies Act (PFCRA).** The undersigned (authorized official signing for the applicant organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Public Health Service terms and conditions of award if a grant is awarded as a result of this application.
- 5. **Certification Regarding Environmental Tobacco Smoke.** Public Law 103-227, also known as the Pro-Children Act of 1994 (ACT), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the undersigned certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act. The applicant organization agrees that it will require that the language of this certification be included in any sub-awards which contain provisions for children's services and that all sub-recipients shall certify accordingly.

The Public Health Services (PHS) strongly encourage all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

- 6. **Conflict Of Interest:** By submitting a Proposal, proposer certifies that it has had no contact with an employee or Board member of the Health District in any manner which would give that proposer, any advantage over any other proposer. Health District employees and Board members shall not receive any compensation, in any manner or form, nor have any interest, direct or indirect, of any kind or nature inconsistent with loyal service to the public. A violation of any of the above is grounds for rejection without further consideration.

Signature of Authorized Certifying (Responder) Official: 

Title: Allan Crecelius, President

Applicant Organization: Reward Strategy Group, Inc.

Date Signed: 1/15/2016