

**STATE OF NEW HAMPSHIRE
DEPARTMENT OF EMPLOYMENT SECURITY (NHES)**

**REQUEST FOR PROPOSAL
RFP# NHES 2018-03 ISSUED 10-04-2017
AMERICAN SIGN LANGUAGE INTERPRETER SERVICES**

ADDENDUM #1

RESPONSES TO RFP# NHES 2018-03, SECTION 4B, PROPOSAL INQUIRIES. This Addendum #1 to RFP NHES 2018-03 includes responses to proposer inquiries received by the required date of October 13, 2017, as follows:

Question 1. Whether companies from Outside USA can apply for this (like, from India or Canada)?

NHES Response. If the company is able to comply with all aspects of the RFP, including but not limited to being registered to do business in New Hampshire and in good standing, and being able to provide the in-person American Sign Language (ASL) Interpreter services required by the RFP, a proposal may be submitted.

Question 2. Whether we need to come over there (USA) for meetings?

NHES Response. It is possible that on-site meetings will be required in connection with the provision of services. This might occur in the case of a mass layoff or layoffs or other emergencies where planning will involve in-person communication or meetings.

Question 3. Can we perform the tasks (related to the RFP) outside USA (like, from India or Canada)?

NHES Response. The in-person ASL interpretation tasks required to be performed under the terms of the RFP cannot be performed outside the USA.

Question 4. Can we submit the proposals via email?

NHES Response. Proposals may not be submitted by e-mail. The RFP provides at Section 4A. that “Proposals may be submitted by U.S. Mail or Other Delivery Service” to NHES headquarters located at 45 South Fruit Street, Concord, NH. Proposals submitted in response to the RFP must include one original and four clearly identified copies, including all required attachments. See RFP Section 4B. The RFP anticipates and requires the submission of hard copies of Proposals by the submission deadline.

Question 5. Under Section 3 – Proposed Scope of Work: Under bullet point (b), NHES requests that all interpreters either have “certification by the National Association of the Deaf-Registry of interpreters (NAD-RID) and/or screened by the New Hampshire Interpreter Classification System (NHICS), as appropriate.” They do not mention the Massachusetts Commission for the Deaf & Hard of Hearing screening (MCDHH). Will they accept interpreters with that screening? That screening is accepted by New Hampshire.

NHES Response. Massachusetts Commission for the Deaf & Hard of Hearing screening (MCDHH) is accepted under this RFP.

**STATE OF NEW HAMPSHIRE
DEPARTMENT OF EMPLOYMENT SECURITY (NHES)**

**REQUEST FOR PROPOSAL
RFP# NHES 2018-03 ISSUED 10-04-2017
AMERICAN SIGN LANGUAGE INTERPRETER SERVICES**

ADDENDUM #1

Question 6. Also, there is no mention of interpreters acquiring or having current NH Interpreter Licensure. Shouldn't that be part of their RFP?

NHES Response. The RFP provides at Section 3, Part A.c., that "ASL interpreters furnishing services under any contract resulting from this RFP shall be in compliance with any applicable State of New Hampshire licensing requirements." The intent of the RFP was to require compliance with licensing requirements.

Question 7. Under Section 4 – Part D, Experience: Included in our proposal should be the "approximate volume of business it did (in dollar value) in the past year for providing ASL Interpreter services. Unfortunately, we do not have a dollar value for interpreter services provided, except for those that had our company as the billing party. However, we are able to provide the referral fee income. Will that be sufficient? Do they want a total number of requests for the year? Also, what year would they like to see (calendar year, fiscal year July-June, specific month to month)? I'd rather have set dates to look at versus running a few different reports to see what looks best.

NHES Response. In lieu of an approximate volume of business, it is acceptable to supply the total number of requests and interpreters provided, including referral fee income, for calendar year 2016.

Vendor _____ Address _____

By: _____
(This document must be signed) (Title)

(Please print or type name) Tel. No. _____

**CONTACT: Jill D. Revels, Business Administrator
New Hampshire Employment Security
(603) 229-4449**