



STATE OF DELAWARE  
EXECUTIVE DEPARTMENT  
OFFICE OF MANAGEMENT AND BUDGET

**State of Delaware**  
**Interpretation & Translation Services**  
**Contract No. GSS15602B-LINGUIST**

***RE-BID OF BID PACKAGE A – SIGN LANGUAGE***

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Government Support Services

**CONTRACT NO. GSS15602B-LINGUIST**

ALL VENDORS:

The enclosed packet contains the service specific requirements for Bid Package A – Sign Language which is a part of "REQUEST FOR PROPOSAL" GSS15602B-LINGUIST, Interpretation & Translation Services. This packet consists of the following documents:

**BID PACKAGE A - CONTRACT NO. GSS15602B-LINGUIST**

- I. Scope of Work
- II. Response Requirements
  - a. Attachment 1 – Company/Independent Linguist Response Form
  - b. Attachment 2 – Linguist Standard Time Sheet

In order for your proposal to be considered for this bid package it must be submitted as part of your proposal response to Request for Proposal GSS15602-LINGUIST, Interpretation & Translation Services, per the instructions outlined within the Request for Proposal document.

For Scope of Work specific definitions, refer to II. Scope of Work, D. Detailed Requirements, 1. Scope Specific Definitions in the Request for Proposal, GSS15602B-LINGUIST, document.

**I. SCOPE OF WORK**

**A. General Requirements**

Interpreters shall adhere to the Registry of Interpreters for the Deaf (RID) Code of Professional Conduct seven tenets.

The vendor shall provide support services to requesting agencies by providing American Sign Language Interpretation services for a variety of situations at a variety of locations. Interpreters who possess demonstrated ability to use both languages with sufficient grammatical and conceptual accuracy shall perform services which allow the parties involved effective participation for formal and informal conversations on practical, social and professional topics. The maximum proficiency level will demonstrate that of a highly articulate, well-educated native speaker which reflects the cultural standards of the native language users.

**Unless otherwise stated in a service request all service requests are to be filled by certified interpreters.**

**B. Qualifications**

All Sign Language Interpreters, approved to provide service under this contract, will be held to the RID Code of Professional Conduct. A Sign Language Interpreter is someone who is able to interpret effectively, accurately and impartially both receptively and expressively, using any necessary specialized vocabulary.

- 1. **Certified**: Interpreter must possess a valid certification from a recognized national organization, Registry of Interpreters for the Deaf (RID) and/or National Association for the Deaf (NAD) including CSC, CI, CT, NIC (Any level), CID, NAD: Level 4 or NAD: Level 5.

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2. **Non-Certified, Qualified**: Defined as Interpreters who are not currently certified; however, can show evidence they are “qualified” to provide Sign Language Interpretation through the completion of Appendix C.

**C. Interpreter Operational Requirements**

The interpreter will remain neutral in the conversation unless prompted by the requesting agency rep with additional instructions, provided these instructions do not conflict with the RID Code of Professional Conduct.

- The interpreter will respect cultural differences of the clients.
- All communications, oral or written, between the interpreter, the requesting agency rep and the client will remain confidential.
- The interpreter will ensure that he/she understands the message to be transmitted by seeking clarification, as needed, from either or all parties.
- The interpreter will check the accuracy of their interpretation and identify and correct any misinterpretation for all parties.
- The interpreter will manage the flow/pace of communication to preserve the accuracy and completeness of all parties’ communications.
- The interpreter will complete appropriate documentation, as required.
- Interpreters adhere to standards of confidential communication.
- Interpreters possess the professional skills and knowledge required for the specific interpreting situation.
- Interpreters conduct themselves in a manner appropriate to the specific interpreting situation.
- Interpreters demonstrate respect for consumers.
- Interpreters demonstrate respect for colleagues, interns, and students of the profession.
- Interpreters maintain ethical business practices.
- Interpreters engage in professional development.

**D. Request for Service**

Rates will be assessed based on the amount of notice and date and time of requested service provided by the Requesting Agency; not on the time it takes to find an appropriate Interpreter. Unless a requesting agency has specified a longer period, linguists are required to arrive at least fifteen (15) minutes prior to the scheduled time of on-site performance to receive any instructions from the requesting agency. The vendor is responsible for taking all necessary actions to obtain adequate transportation, accurate times, locations, directions, telephone numbers, contact person(s) and any other information or actions to ensure that they are present at the proper location and on time. **Any calls the Requesting entities may need the interpreter to complete, such as scheduling appointment with client and confirmation of appointment are to be considered a part of the “appointment”. No additional fee for this service will be permitted.** Vendors must be aware of and adhere to any security clearances and dress code requirements applicable at the requesting agency’s location.

Requests for service should include, **at a minimum**, the following information:

- Appointment Location
- Appointment Date
- Appointment Start Time & Estimate Duration

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- Technical Requirements, if applicable
- Appointment Contact Person
- Billing Information

Requests may also include:

- Gender specific requirement
- Requests for a specific interpreter, previously used, for continuity and consistency

Requesting Agency and the vendor will mutually determine the most appropriate number and type of interpreters needed in all situations on a case by case basis to ensure all clients are appropriately served and interpreters are working in accordance with occupational health and safety standards.

At any time following interpretation service the vendor may be required by the requesting agency to answer questions and/or provide back-up documentation to support billing inquiries. The vendor must keep an accurate record of all performance time.

- 1) **Minimum Billing**: The minimum billable time will be two (2) hours. On-Site Interpretation service will include the fifteen (15) minutes proceeding the scheduled time for performance as billable time or any longer time requested by the requesting agency subject to interpreter availability, if the longer time is requested when the interpreter arrives on site. After the second hour, services will be billed in 15 minute increments.
- 2) **Mileage**: With the exception of full day or long term assignments, vendor is permitted to bill for mileage above 25 miles roundtrip at a rate of \$0.40/mile. Any travel for an interpreter that would be more than 100 miles roundtrip must be pre-approved by the requesting agency. The vendor shall provide the closest qualified interpreter available for the task in question. Invoices must include back-up documentation supporting the mileage billed. Back-up documentation to consist of a MapQuest print out showing the interpreters starting location and appointment location.
- 3) **Rates for Service**
  - a) **General**: Vendors are to provide a per hour rate for On-Site Interpretation services. Travel time, transportation and other associated costs will be the responsibility of the Vendor. Vendor will not be reimbursed separately for these services. Prices must be in US Dollars (2 decimal places). Rates submitted shall be broken down in the following categories:
    - Type of Service
      - General
      - Technical
    - Types of Notice
      - Routine
      - Expedited
      - Emergency
    - Time of Appointment
      - Monday – Friday; 6:00am – 6:00pm
      - After Hours (Including weekends & holidays)

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The State of Delaware will be capping rates for American Sign Language Interpretation Services. Hourly rates will be capped as follows:

<b>HOURLY RATE CAPS (Mon-Fri – 6AM-6PM)</b>	<b>Certified</b>	<b>Non-Certified</b>
Routine	\$75.00	\$60.00
Expedited	\$85.00	\$70.00
Emergency	\$95.00	\$80.00

Vendors will still be required to submit their rates in Appendix B, based on the various “notice” options. Unless exception is taken to rate caps, rates that exceed the caps outlined will not be considered. Acceptance of exceptions is not guaranteed.

This contract may apply to interpreter services provided in court-related activities pursuant to the Administrative Office of the Courts (AOC)’s Court Interpreter Program, if the AOC determines that the interpreters involved comply with the standards established by that Program.

- b) **Discount:** The State is requesting vendors provide discounted rates for:
- Half Day
  - Full Day
  - Long Term

4) **Requested Time -VS- Billable Time**

Should an interpreter not be needed for full requested time, requesting agency shall be billed for either minimum billable time or actual time interpreter was on site (whichever is greater) plus a \$25 shortened appointment fee. Examples below are based on a two-hour minimum.

- Example #1: Requested 9am – 1pm, with 8:45am arrival. Assignment completed at 11am. Agency would be billed 2.25 hours (8:45-11:00) + \$25.00
- Example #2: Requested 9am – 1pm, with 8:45am arrival. Assignment completed at 10am. Agency would be billed 2 hours (minimum bill) + \$25.00

Interpreters will be required to complete a linguist time sheet for each appointment under this contract. Time sheet must be signed off on by the requesting agency point of contact or their designee and a copy must be attached to the invoices.

Actual length of appointment may be less than or greater than the estimated time notated in original request for service. If it becomes clear the appointment may run past the estimated end time, a break will be called to allow the requesting agency to confer with the interpreter to see if their schedule allows for additional time or a follow-up appointment needs to be scheduled. In cases where the LEP client is involved in a DSCFY investigation or involuntary commitment to a State facility appointment length cannot be anticipated; therefore, interpreter will need to remain onsite until the initial appointment has concluded. Breaks will be provided where appropriate during the initial appointment.

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5) **Invoicing Requirements**

Invoices for services rendered must be on company letterhead and include the following **at a minimum**:

- Date of Invoice
- Contract #, GSS15602B-LINGUIST
- Date of Service, to included scheduled time
- Appointment location
- Interpreter Name and/or ID #
- # of Minutes (exact)
- # of Minutes (billed)
- Mileage billed (with supporting documentation)
- Hourly rate billed to requesting agency

**Billing will identify the exact # of minutes associated with each appointment. For SUPPLEMENTAL TIME the vendor must keep detailed records and be prepared to provide them upon request as back-up for an invoice.**

Each appointment shall be listed as a separate line item on the invoice.

**All Vendors must submit a sample invoice with their proposal clearly showing compliance to the minimum invoicing requirements above. Sample invoices that do not meet the minimum invoicing requirements will be rejected and your bid may be declared non-responsive.**

Invoices submitted to Requesting Entities after award that fail to meet the minimum requirements will be rejected. Failure to provide a valid invoice within 30-days of a correction request may warrant notice to cure and contract termination.

6) **Cancellations**

- a) **General**: Requesting agencies cancelling a service request more than 48 hours before the assignment will not be assessed a cancellation fee. Requesting agencies cancelling a service request less than 48 hours notice will be billed for two (2) compensatory hours at the designated rate for the cancelled assignment.
- b) **Weather**: In the event of inclement weather, the interpreter is responsible for checking the local TV and/or Radio Stations for closure information. Information regarding closures can also be found on the State's website. The Requesting agency will not be penalized for any service cancelled due to a weather related closure or delay. In the event of a delay interpreter is responsible for contacting the requester directly to determine the new arrival time or postponements.
- c) **Interpreter**: Should an interpreter(s) become unavailable to attend a scheduled appointment the vendor will be responsible for obtaining a replacement and notify the requesting agency of the change ASAP. The Requesting Agency will not be responsible for any additional fees associated with the need for a substitute interpreter. Should the vendor not be able to provide a replacement interpreter in a reasonable amount of time requesting agency can procure the services open market and charge the vendor any price difference.

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7) **Late Arrivals**

It is the responsibility of the vendor to provide notice to the requesting agency if they are running late (i.e. traffic, accident, etc.). In the event an interpreter is late and the agency utilizes the interpreter, the agency will only be billed for the time of actual services provided. Should notification of late arrival not be provided to the requesting agency prior to the scheduled time of services, the agency at its discretion may contact another supplier on contract for services. The initial vendor will be responsible for reimbursing the requesting agency for the difference in cost incurred for the replacement supplier's interpreter, plus the \$50 late fee.

II. **RESPONSE REQUIREMENTS**

A. **Acknowledgement**

Vendors are to respond or acknowledge each section found within this bid package.

B. **Exceptions**

Exceptions taken to the requirements outlined in this bid package must be taken per the instructions in the Request for Proposal document, using Attachment 3. Government Support Services shall evaluate each exception according to the intent of the terms and conditions contained herein, but Government Support Services must reject exceptions that do not conform to State bid law and/or create inequality in the treatment of bidders. Exceptions shall be considered only if they are submitted with the bid or before the date and time of the bid opening.

**Exceptions must be submitted utilizing Attachment 3 to be considered, notating the bid package in the first column.** Exceptions listed elsewhere in the Vendor's proposal will not be considered. Government Support Services maintains sole discretion to reject any vendor exceptions that are submitted.

C. **Supporting Documentation**

- 1) **Company Response**: Vendor is to provide a completed Appendix C for each proposed interpreters, outlining their capabilities. In addition, the following is to be attached to the completed Appendix C:
  - **Certified Interpreters**: Copy of RID certification for each proposed Sign Language Interpreter must also be included.
  - **Non-Certified, Qualified**: Three reference letters must also be included. Reference letters must be from:
    - A deaf customer,
    - A certified interpreter with no business or contractual relationship with the non-certified interpreter, and
    - A client (agency/business) with no business or contractual relation with the State of Delaware.

For the purposes of this solicitation and resulting contract(s) the translators and interpreters will be considered vendor employees; not subcontractors, so you will not complete Attachment 7 with information on the translators & interpreters.

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- 2) **Independent Linguist Response**: Interpreter is to provide a completed Appendix C. In addition, the following is to be attached:
- **Certified Interpreters**: Copy of RID certification for each proposed Sign Language Interpreter must also be included.
  - **Non-Certified, Qualified**: Three reference letters must also be included. Reference letters must be from:
    - A deaf customer,
    - A certified interpreter with no business or contractual relationship with the non-certified interpreter, and
    - A client (agency/business) with no business or contractual relation with the State of Delaware.



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**Attachment 1**

Contract No.: **GSS15602B-LINGUIST**  
Contract Title: **Interpretation & Translation Services**  
Bid Package A – Sign Language

**COMPANY RESPONSE FORM**

Suppliers are required to provide a reply to each question listed below. Your replies will aid the evaluation committee as part of the overall qualitative evaluation criteria of this Request for Proposal. Your responses should contain sufficient information about your company so evaluators have a clear understanding of your company's background and capabilities. Failure to respond to any of these questions may result in your proposal to be rejected as non-responsive. **Please do not refer to another answer if the question appears duplicative, but respond in full to each question.**

**Note: Vendor may use additional pages as necessary, but the format shall be the same as provided above.**

	<p>The State does have a need for 24/7 coverage, however, this is not a Mandatory requirement for this solicitation. Are you able to provide 24/7 coverage? Statewide?</p> <p><b>If yes:</b></p> <ul style="list-style-type: none"> <li>➤ Identify your regular office hours.</li> <li>➤ Outline your process for providing interpreter services after your typical business hours. Response to include: receipt of request, sourcing an available linguist, and notifying the requesting entity who to expect and when (complying with the “emergency” response requirement).</li> </ul> <p><b>If no:</b></p> <ul style="list-style-type: none"> <li>➤ Identify your regular office hours and available hours, if extended coverage outside regular office hours is available.</li> <li>➤ Identify the county/counties you can service.</li> </ul>

	<p>List criteria used to select a candidate for a project for an interpretation/translation job.</p>

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	Explain your screening process and quality assurance procedures for ensuring both certified and non-certified Sign Language Interpreters are qualified to provide services, representing your company.

	How many Sign Language Interpreters do you have in your linguist pool? certified? non-certified qualified? Based on the usage reports available for prior Fiscal Years do you feel your current pool is adequate to support future needs of the State? If not, what recruiting plans will be put in place should you be awarded to build up your linguist pool?

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Attachment 1

Contract No.: **GSS15602B-LINGUIST**  
Contract Title: **Interpretation & Translation Services**  
Bid Package A – Sign Language

**INDEPENDENT LINGUIST RESPONSE FORM**

Suppliers are required to provide a reply to each question listed below. Your replies will aid the evaluation committee as part of the overall qualitative evaluation criteria of this Request for Proposal. Your responses should contain sufficient information about your company so evaluators have a clear understanding of your company's background and capabilities. Failure to respond to any of these questions may result in your proposal to be rejected as non-responsive. **Please do not refer to another answer if the question appears duplicative, but respond in full to each question.**

**Note: Vendor may use additional pages as necessary, but the format shall be the same as provided above.**

	<p>The State does have a need for 24/7 coverage, however, this is not a Mandatory requirement for this solicitation. Are you able to provide 24/7 coverage? Statewide?</p> <p><b>If yes:</b></p> <ul style="list-style-type: none"><li>➤ Identify your regular office hours.</li><li>➤ Outline your process for providing interpreter services after your typical business hours. Response to include: receipt of request, sourcing an available linguist, and notifying the requesting entity who to expect and when (complying with the “emergency” response requirement).</li></ul> <p><b>If no:</b></p> <ul style="list-style-type: none"><li>➤ Identify your regular office hours and available hours, if extended coverage outside regular office hours is available.</li><li>➤ Identify the county/counties you can service.</li></ul>
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	<p>As an independent Interpreter outline your plan of action to provide back-up coverage in the event you are unable to attend a scheduled appointment for any reason.</p>
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Attachment 2

Contract No.: **GSS15602B-LINGUIST**  
Contract Title: **Interpretation & Translation Services**  
Bid Package A – Sign Language

Start Time	End Time	LEP Client Name or Ref #	POC Initial

  

**GSS15602-LINGUIT**  
**Linguist Services**

**STANDARD TIME SHEET**

<b>Linguist Company Name:</b> _____	<b>Requesting Agency:</b> _____
<b>Address:</b> _____	<b>Appt. Location:</b> _____
<b>Telephone #:</b> _____	<b>Appt. Date &amp; Time:</b> _____
<b>Point of Contact:</b> _____	<b>Point of Contact:</b> _____
<b>Linguist Name &amp; ID #:</b> _____	<b>Type of Service:</b> _____

Time sheet must be filled out completely by linguist providing on-site interpretation services, identifying exact start and end times, and must be initialed by Requesting Agency's Point of Contact or authorized representative.

Completed time sheets must be provided to the Company for billing. Vendor is responsible to ensure a copy of the completed time sheet is attached to the invoice.