

**FOUR RIVERS SANITATON AUTHORITY  
REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

Date: July 1, 2024

Name of Proposing Firm: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Proposal Due Date and Time: 4:00 p.m., July 29, 2024**

*Proposals will be accepted until the specified due date and time. Any proposal delivered after the due date and time will be refused.*

**PLEASE MARK THE RETURN SEALED ENVELOPE:**

1. Proposal Due Date and Time
2. Title of Job
3. Proposal Number

**SEND PROPOSALS TO:**

Four Rivers Sanitation Authority  
3501 Kishwaukee Street  
Rockford, IL 61109

If the proposer chooses to hand-deliver their proposal, it must be deposited in the Bid Box in the main lobby or handed to the Customer Service receptionist of the Graceffa Administration Building, 3501 Kishwaukee Street, Rockford, IL 61109, between the hours of 8:00 A.M. and 4:00 P.M., Monday through Friday, except for holidays.

**PROPOSALS WILL NOT BE ACCEPTED BY FAX OR EMAIL.**

The Illinois Department of Human Rights registration number must be provided with the proposal on the proposal due date.

Proposal results are available after contracts are awarded at the Regular Meeting of the Board of Trustees, held on the fourth Monday of the month. Please call 815-387-7425 or visit [fourrivers.illinois.gov](http://fourrivers.illinois.gov)

**SECTION I  
NOTICE**

**REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

FOR REVIEW PURPOSES ONLY

I  
NOTICE  
FOUR RIVERS SANITATION AUTHORITY  
REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM

Four Rivers Sanitation Authority (FRSA, Authority) will receive sealed and signed proposals for an **Employee Assistance Program (EAP)**. Proposals must be submitted to the Four Rivers Sanitation Authority Graceffa Administration offices located at 3501 Kishwaukee Street, Rockford, Illinois 61109 until 4:00 p.m., July 29, 2024

The scope of this request for proposals is EAP services that will provide programs and tools to employees and their families that will encourage health and wellness in all aspects of their lives. Request for information related to this request for proposals should be directed to Julia Scott-Valdez, Director of Management Services, 3501 Kishwaukee Street, Rockford, IL 61109, [jscott-valdez@fourrivers.illinois.gov](mailto:jscott-valdez@fourrivers.illinois.gov), telephone: 815-387-7580.

Each bid must be accompanied by cash or a certified or bank cashier's check on a solvent bank or trust company, drawn to the order of the Four Rivers Sanitation Authority, or an acceptable Bid Bond on the form attached, in an amount not less than ten percent (10%) of the total bid price. This sum is a guarantee that, if the bid is accepted, a contract will be entered into.

Copies of the RFP for review purposes only are available through the Four Rivers Sanitation Authority website [fourrivers.illinois.gov](http://fourrivers.illinois.gov). Proposal documents for submittal are available by contacting Purchasing at [purchasing@fourrivers.illinois.gov](mailto:purchasing@fourrivers.illinois.gov) or (815) 387-7425. For more information, visit the Four Rivers Sanitation Authority website at [fourrivers.illinois.gov](http://fourrivers.illinois.gov).

Four Rivers Sanitation Authority reserves the right to reject any or all proposals, or any part thereof, or to accept any or all proposals, or any part thereof, or to waive any formalities in any proposals, deemed in the best interest of Four Rivers Sanitation Authority.

The Authority will confirm any award decision in writing, to the successful proposer.



Julia Scott-Valdez  
Director of Management Services  
Four Rivers Sanitation Authority

**SECTION II**  
**GENERAL SPECIFICATIONS AND INSTRUCTIONS**

**REQUEST FOR PROPOSALS #24-214**  
**EMPLOYEE ASSISTANCE PROGRAM**

II  
GENERAL SPECIFICATIONS AND INSTRUCTIONS  
FOUR RIVERS SANITATION AUTHORITY  
REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM

### 2.1 Important Dates

- Proposal Release Date: July 1, 2024
- Last day for proposers to submit questions: July 22, 2024
- Last day to post addenda: July 24, 2024
- Proposal Due Date: July 29, 2024
- Interviews (tentative)
- Anticipated Award Date: August 26, 2024

### 2.2 Proposal Preparation

Where applicable, the respondent must submit their proposal on the forms the Authority provides in this document. **The respondent must complete all applicable blanks.** Respondent may submit additional information as they believe necessary on their stationery, under signature of the authorized representative who completes this document's forms.

If this Request for Proposals contains inconsistencies or contradictions between sections, Section III - Detailed Specifications supersede Section II - General Specifications, which supersede Section I - Notice. **No warranty is made or implied as to information contained in these specifications.**

An authorized officer or individual must sign the proposal. The authorized signature must be the individual owner of a proprietorship, a general partner of a partnership, or the corporation officer who is authorized to sign for a firm and whose title is affixed.

All prices and notations must be in ink or typewritten. The respondent may cross out mistakes and type corrections adjacent to the point of error. The person who signs the proposal must initial such corrections, in ink. **If FRSA finds a respondent's entry to be illegible, it may, at its sole discretion, reject the proposal.**

### 2.3 Submission of Proposals

FRSA **will not** receive proposals in an electronic format, by e-mail or internet or by facsimile. The respondent must return their proposal, clearly marked as **"Request for Proposal #24-214: Employee Assistance Program. FRSA cannot ensure that the sealed proposal will not be prematurely opened if the respondent does not properly label their proposal envelope.**

Proposals sent via USPS or other package delivery service should be addressed to:  
Four Rivers Sanitation Authority  
3501 Kishwaukee Street  
Rockford, IL 61109

If the respondent chooses to hand-deliver their proposal, it must be deposited in the Bid Box or handed to the Customer Service receptionist in the lobby of the Graceffa

Administration Building, 3501 Kishwaukee Street, Rockford, IL 61109, between the hours of 8:00 A.M. and 4:00 P.M., Monday through Friday, except for holidays.

FRSA cannot represent or guarantee that any information submitted in response to the Request for Proposals will be confidential. If FRSA receives a request for any document submitted in response to the RFP, the Authority's sole responsibility will be to notify respondent of a request for such document to allow the respondent to seek protection from disclosure in a court of competent jurisdiction. No documentation will be provided under FOIA until the contract has been awarded.

#### **2.4 Bid Security**

Each bid must be accompanied either by cash, an original certified or bank cashier's check on a solvent bank or trust company, or a bidder's bond (form attached) from acceptable surety, drawn to the order of the Four Rivers Sanitation Authority in an amount of not less than ten percent (10%) of the bid price, issued by a surety company licensed to conduct business in the State of Illinois and named in the current list of "Surety Companies Acceptable On Federal Bonds" as published in the Federal Register by the Audit Staff Bureau of Accounts, U.S. Treasury Department. Failure to provide a Bid Security in the amount specified will constitute sufficient cause for rejection of the bid.

Within three (3) days after the opening of bids, the bid securities of all but the three lowest bidders will be returned. The bid security of the remaining two unsuccessful bidders will be returned within three (3) days after the execution of the contract, or, if no such contract has been executed, within sixty (60) days after the date of opening of bids. The bid security of the successful bidder will be returned only after he has duly executed the contract and furnished the required insurance.

#### **2.5 Illinois Department of Human Rights Registration Number**

All proposers, regardless of location, must provide an Illinois Department of Human Rights Registration Number with the proposal on the due date. This number must be written or typed on the line in the Fair Employment Affidavit of Compliance (included in the documents you receive). The following link may be used to access the website where the number can be obtained: <https://dhr.illinois.gov/public-contracts.html>

#### **2.6 Exceptions**

Exceptions to any part of the requirements stated in this request must be clearly identified as exceptions. The stated exceptions and any alternatives offered must be included in Section 3 at the specific point at which the exception is taken (see "Proposal Response Format").

Submission of a Proposal indicates acceptance by the Proposer of the conditions contained in this Request for Proposals, unless clearly and specifically noted in the Proposal submitted and confirmed in the contract between FRSA and the Proposer selected.

#### **2.7 Proposal Response Format**

Submit three hard copies of the proposal and one copy on a flash drive. Proposal format should conform to that prescribed below:

## **Section 1 – Required Documents**

1. Proof of required insurance (COI, additional insured endorsements)
2. Qualification Form
3. Proposal Form
4. Fair Employment Practices Affidavit of Compliance
5. Forms of Affidavit

## **Section 2 – Executive Summary/Overview**

Executive Summary – An executive summary detailing the Proposer's competence, qualifications, experience, and number of years providing **Employee Assistance Programs** as described in this RFP. The summary should explain the Proposer's understanding of the Authority's intent and objectives and how their Proposal would achieve those objectives.

## **Section 3 – Main Body of Response**

Include a complete copy (all pages and content) of this RFP document and Specifications document with all sections completed. A complete, point-by-point response is required; incomplete documents may be deemed unresponsive and therefore eliminated from consideration.

## **Section 4 – Exceptions**

It will be assumed that the Proposer accepts all conditions and considerations as outlined within this document unless specifically noted in this Exceptions section, and within the Main Body of Response at the section and point where the exception is taken.

## **Section 5 – Financial Litigation Information**

1. Include an audited financial statement for the most current quarter and last year-end including Balance Sheet, Income Statement, and Statement of Cash Flows for your company (Proposer, not manufacturer of equipment).
2. Include a description of any litigation in which Proposer is currently involved. Indicate any potential conflict of interest with vendors that could affect FRSA's interests and plans for avoiding the conflict.

Place this information in a separate, single sealed envelope, labeled Section 6 (with your company name) in the original proposal copy. This information will be used to determine overall financial strength and maintained as confidential by FRSA, to the extent permitted by law.

### **2.8 Taxes**

FRSA is exempt, by law, from paying Federal Excise Tax and Illinois Retailers' Occupational Tax. Therefore, the respondent must exclude those taxes from their proposal. The Authority's tax exemption number is E9992-3696. The respondent must include all applicable taxes in their proposal price.

## **2.9 Withdrawal of Proposals**

At any time prior to the scheduled proposal deadline, the respondent may withdraw their proposal. In order to do so, they must submit a written request to the Director of Management Services.

## **2.10 Acceptance of Proposals/Form, Preparation, and Presentation of Proposals**

If the proposal contains any omissions, erasures, alterations, additions or items not called for in the itemized proposal, or contains irregularities of any kind, such may constitute sufficient cause for rejection of proposal. In case of any discrepancy in the unit price or amount proposed for any item in the proposal, the unit price as expressed in figures will govern.

FRSA may reject all or part of any or all proposals, for any reason. FRSA may accept all or part of any proposal or waive any formalities if it decides such action is in the Authority's best interest.

FRSA will only consider proposals that conform to the intent of this document. FRSA will reject proposals that contain one or more exceptions if FRSA determines that non-conforming proposals deviate from the intent of these specifications. The Authority's decision is final, and the Authority's procurement procedures contain no appeal provision.

## **2.11 Laws and Regulations**

The respondent who is awarded the contract must comply with all laws of the United States of America, the State of Illinois, and all lawful regulations of Four Rivers Sanitation Authority and the respective cities and villages in which the professional service and material supplied is to be performed respecting labor and compensation and all other statutes, ordinances, rules and regulations applicable and having the force of the law.

### **Illinois Regulations**

1. In accordance with Illinois Public Act 102-0265, FRSA is required to make a good faith effort to collect and publish certain demographic information provided by vendors and subcontractors doing business with FRSA. The Act requires FRSA to report whether a vendor or subcontractor is a minority, women, or veteran-owned business as defined by Illinois Law. In addition, FRSA is required to disclose if the business is certified as a small business under federal Small Business Administration standards. The successful proposer will be required to provide this information upon contract award.
2. Public Act 101-0221 requires that any party to a contract adopt and promulgate written sexual harassment policies that include, as a minimum, the following information:
  - a. the illegality of sexual harassment
  - b. the definition of sexual harassment under Illinois State law
  - c. a description of sexual harassment, utilizing examples
  - d. my (our) organization's internal complaint process including penalties
  - e. the legal recourse, investigative and complaint process available through the Illinois Department of Human Rights and the Illinois Human Rights Commission



- f. directions on how to contact the Department and the Commission
- g. protection against retaliation as provided by Section 6-101 of the Illinois Human Rights Act

Upon request, this information must be provided to the Illinois Department of Human Rights and Authority.

3. With regard to nondiscrimination in employment, the Contractor for this project will be required to comply with the Illinois Fair Employment Practices Commission's Rules and Regulations.
4. The Contractor for this project must comply with the Occupational Safety and Health Act.
5. The Contractor for this project must comply with the Federal Drug-Free Workplace Act.
6. Americans with Disabilities Act - The Contractor for this project will comply with all applicable requirements of the Americans with Disabilities Act of 1990 (ADA). The Contractor will hold harmless and indemnify Four Rivers Sanitation Authority (AUTHORITY) and their representatives from all:
  - a) suits, claims, or actions
  - b) costs, either for defense (including but not limited to reasonable attorney's fees and expert witness fees) or for settlement
  - c) damages of any kind (including but not limited to actual, punitive, and compensatory damages)

relating in any way to or arising out of the ADA, to which said firm is exposed or which it incurs in the execution of the contract.

## 2.12 Terms

**A. Payments to the Successful Respondent.** If the Authority receives an acceptable invoice for conforming materials prior to the fifth day of the month, the Authority will issue payment before the fifth day of the succeeding month. If received on or after the fifth day of the month, payment will be issued the following month.

**B. Default.** In case of default, the Authority will procure the materials and service described in this Request for Proposals from other sources. The Authority to hold the defaulting successful respondent responsible for any excess cost incurred. The defaulting successful respondent must make such payment no more than sixty (60) calendar days after the Authority notifies the successful respondent, in writing, of such an occurrence.

**C. Delivery Hours.** Unless otherwise specified, all items must be delivered to: Four Rivers Sanitation Authority, 3501 Kishwaukee Street, Rockford, Illinois, 61109, Monday through Friday, between the hours of 8:00 A.M. and 4:00 P.M., excluding holidays.

In the unlikely event that the Authority is picketed by its employees or by a third party, or if any labor-management dispute between the Authority and its employees or third parties becomes known to the successful bidder, then in such event and during the course of any such picketing or labor-management dispute, the successful bidder must continue to carry out the terms and conditions of this contract as if such pickets were not present or such labor-management dispute did not exist.

**D. F.O.B. Point and Shipping Charges.** All prices must be quoted F.O.B. destination, Four Rivers Sanitation Authority, 3501 Kishwaukee St., Rockford, Illinois, 61109. All shipping, handling and freight charges must be included in the proposal amount.

**E. Use of Authority Name Prohibited.** In the absence of the Authority's written permission, the successful respondent must not use the Authority's name in any form or medium of public advertising.

### **2.13 Investigation**

It is the responsibility of the respondent to make any and all investigations necessary to become thoroughly informed of what is required and specified in the proposal. No plea of ignorance by the respondent of conditions that exist or that may hereafter exist as a result of failure or omission on the part of the respondent to make necessary examinations and investigations will be accepted on a basis for varying the requirements of the Authority or the compensation of the respondent.

### **2.14 Addenda and Interpretation**

No interpretation of the meaning of the Plans, Specifications, or other Contract Documents will be made to any proposer orally. Every request for such interpretation must be in writing addressed to Four Rivers Sanitation Authority, 3501 Kishwaukee Street, Rockford, Illinois. Any and all such interpretations and any supplemental instructions will be in the form of written addenda. To be given consideration, such request must be received at least five (5) business days prior to the proposal due date.

If FRSA issues written addenda, such addenda become part of the contract documents. Not less than three (3) business days prior to the proposal due date, the Authority will post the addenda, if any, on its website at [fourrivers.illinois.gov](http://fourrivers.illinois.gov), and distribute the addenda via email to each recipient of the specifications, at either the:

- Email address to which the Authority emailed the original RFP document; or
- Corrected email address prospective proposer furnished

A proposer that does not receive the Authority's addenda, and who has previously submitted a proposal, is not relieved from any obligation in the proposal they submitted.

### **2.15 Contract Form**

No more than ten (10) business days following the contract award, the successful respondent must submit a completed Contract Form to the Authority's Director of Management Services. The Contract Form is part of this Request for Proposals. By their mutual agreement, the successful respondent and Authority may supplement this contract form or replace it with an alternative document. If the successful respondent fails to complete the agreed upon Contract Form within the specified time, they are in material default.

### **2.16 Contract Termination**

**A. Respondent's Unacceptable Performance.** If the successful respondent fails to provide materials and service in conformity with this Request for Proposals, FRSA will notify them in writing. If the successful respondent fails to correct the performance deficiency to the Authority's satisfaction within five (5) working days after they receive the Authority's notice, they are in default. If the same performance deficiency recurs despite the Authority's notification and the successful respondent's temporary correction, the

successful respondent is likewise in default. The Authority may, at its sole discretion, terminate the contract with the defaulting successful respondent, and remedy the matter under provisions set forth in this Section of this Request for Proposals.

**B. Authority's Action Following Contract Termination.** If the contract is terminated, FRSA may, at its sole option:

1. request new **Employee Assistance Program** proposals, or
2. designate the next-low respondent to provide an **Employee Assistance Program** provided that said next-low respondent agrees to their original proposal terms.

FRSA may repeat this option until it obtains an acceptable **Employee Assistance Program** contract.

### **2.17 Deliveries**

The successful respondent must ship all material as follows: F.O.B. Four Rivers Sanitation Authority, 3501 Kishwaukee Street, Rockford, Illinois, 61109, freight paid by seller. All deliveries must conform to the requirements stated in this Request for Proposals.

### **2.18 Incidental Work**

The cost of incidental work described in the Specifications for which there are no specific Contract Items is to be considered as part of the general cost of doing the work and must be included in the prices for the various Contract Items. No additional payment will be made therefore.

### **2.19 Plant, Tools and Equipment**

The Contractor must provide and maintain such modern plant, tools and equipment as may be necessary to perform in a satisfactory and acceptable manner all the work required by this Contract. Only equipment of established reputation and proven efficiency must be used. The Contractor is solely responsible for the adequacy of their plant and equipment.

### **2.20 Verification of Data**

The Contractor must verify all Specifications or other data received from FRSA and must notify it of all errors, omissions, conflicts, and discrepancies found therein. Failure to discover or correct errors, conflicts, or discrepancies does not relieve the Contractor of full responsibility for unsatisfactory work resulting there from nor from rectifying such conditions at the Contractor's own expense. Contractor will not be allowed to take advantage of any errors or omissions, as full instructions will be furnished by FRSA, should such errors or omissions be discovered. The Contractor must assume all responsibility for the making of estimates of the size, kind, and quality of materials and equipment included in work to be done under the Contract.

### **2.21 Payment Terms**

The awarded firm must submit invoices by mail to:

Four Rivers Sanitation Authority, 3501 Kishwaukee Street, Rockford, IL 61109 or by email to: [accountspayable@fourrivers.illinois.gov](mailto:accountspayable@fourrivers.illinois.gov). FRSA will make payments in the following manner: Authority's payment terms in Section 2.12.

**SECTION III  
DETAILED SPECIFICATIONS**

**REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

FOR REVIEW PURPOSES ONLY

III  
DETAILED SPECIFICATIONS  
FOUR RIVERS SANITATION AUTHORITY  
REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM

**3.1 Scope of Work**

Four Rivers Sanitation Authority requests proposals from qualified firms to provide Authority employees and their dependents with an Employee Assistance Program (EAP). FRSA's goal is that the vendor will take EAP services to the next level, providing programs and tools to employees and their families that will encourage health and wellness in all aspects of their lives.

The selected firm will work cooperatively with FRSA staff to provide employees with a holistic approach to managing health and wellness and will be required to work directly with employee focus groups to build programs that will meet the needs of our demographics.

**3.2 General Conditions**

**A. Firm Qualifications.** No contract shall be awarded except to responsible firms capable of performing the class of work contemplated.

**Proof of Qualifications.** Before being considered for the award of contract, firms may be required to show evidence of the necessary experience, facilities, equipment, ability, and financial resources to perform the work in a satisfactory manner and within the time stipulated. FRSA shall make the final determination as to the firm's ability to provide the desired services.

**B. Evaluation of Firms.** The Authority's evaluation team will assess the qualifications of firms based on their proposals. FRSA also reserves the right to interview representatives of firms and review the quality of Employee Assistance Programs provided to other clients in order to determine award.

**1. Evaluation Team.** An evaluation team will be used to evaluate the proposal submitted by each firm. This evaluation team will consist of the following Authority employees: Director of Management Services; Human Resources Generalist, and employee representatives.

**2. Evaluation Criteria.** The following criteria will be used to assess each firm's proposal:

- Responsiveness of proposal – Proposals will be screened to ensure responsiveness to the RFP. The Authority may reject as non-responsive any proposal that does not include the documents required to be submitted by this RFP.
- Qualification of the firm to provide EAP services based on experience providing similar services to public sector and private

sector clients.

- The firm's familiarity with and knowledge of core EAP technology.
- Qualifications and work experience of key personnel responsible for providing the service.
- Ability and experience in providing focused programs to protective service employees.
- The firm's experience in developing programs tailored to the needs of the demographics.
- Reasonableness of the proposed cost of the program.

**3. Basis of Award.** Each member of the evaluation team shall independently evaluate each proposal and the results of any other methods used to evaluate the firm's ability to provide quality services to FRSA. Once these individual evaluations have been completed, the scores will be averaged, and the overall average will be the final score of each proposal. The contract will be recommended for award to the firm with the highest average score.

**C. Contract Length.** The firm that is awarded the EAP contract shall provide these services for a period of three (3) years from the date service provision began. The contract shall have two (2) one-year extension options. Renewals are based upon the mutual consent of both parties. The resulting contract can be valid for a total of five (5) years from the date service begins.

**D. Contacts.** The contact for this RFP is Julia Scott-Valdez: [JScott-Valdez@fourrivers.illinois.gov](mailto:JScott-Valdez@fourrivers.illinois.gov) or 815-387-7580.

### 3.3 Minimum Requirements

**A. Proposal Requirements.** The response to this RFP must adhere to the following basic elements and characteristics:

1. The program must meet all legal requirements, be nondiscriminatory, and comply with all federal, state, and local requirements.
2. Firms and their representatives certified by the Employee Assistance Professionals Association (EAPA) will be given special consideration.

**B. Program Promotion and Training.** The successful vendor must include the following services:

1. Assist FRSA with publicizing the EAP to supervisors, employees, and their families. Communication pieces are expected to meet the needs of the demographics and may include traditional print or social media.
2. Provide training sessions for supervisors and facilitate wellness seminars for up to 15 hours per year.
3. Provide articles for FRSA publications as requested-will vary in length and scope.

**C. Services Provided to Employees and Families.** The successful vendor must include the following services:

1. Unlimited telephonic counseling and unlimited access to web and online services and information.
2. Network of professional EAP counselors to support toll-free telephone access staffed by master's level counselors and personally answered 24 hours a day, 7 days a week.
3. With minimal notice, ability to provide crisis intervention at the worksite(s) or off-site, for traumatic events.
4. Assistance to employees and family members who have been referred to the EAP or who request such services of their own volition. All services will be conducted in a manner to insure privacy and confidentiality.
5. Assess employees or their family members who presents in crisis to determine the appropriate level of intervention or treatment. Such assessments will be conducted whether or not the employee or their dependent has used all of their EAP benefits for the year.
6. Assessment and referral services for employees, their family members, and significant others. This includes a maximum of 6 sessions. The intent is not to act as a clearinghouse.
7. Counsel and encourage employees to proceed with a course of assistance by referring individuals to clinical or support organizations and medical professionals.
8. Comprehensive case management and demonstration that members are being referred to the levels of services needed for care
9. Work proactively to identify challenges and issues faced by FRSA employees and their families and develop programs as appropriate.
10. EAP clinicians with strong knowledge of local area resources for ancillary support
11. Serve as FRSA's Substance Abuse Professional (SAP) for the purposes of FRSA's drug program and as required under Department of Transportation regulations.
12. Follow-up as necessary to monitor referred employees' adherence to agreed course of treatment for up to two years.
13. Remain cognizant of FRSA's insurance benefits program to inform employees as to possible coverage of services. Examine the accreditation of organizations and professionals to which it refers employees to maximize reimbursement under the health plan.
14. Additional benefits including legal information and resources, financial information and resources, work-life referrals and resources, behavioral health education support for employees and family.

**D. Services Provided for Supervisor/Management Consulting.** The successful vendor must include the following services:

1. Provide supervisory consultation regarding specific employee issues. These consultations will be confidential and may result in referrals to the EAP.
2. Mediation services between employees or between employees and supervisors.
3. Consultation and assistance in design of EAP related policies for Personnel and organizational development.

**E. Other Services.** The successful vendor must include the following services:

Submit quarterly utilization reports to FRSA and provide ongoing evaluation regarding the effectiveness of the program.

**F. Transition to New Services.** If the decision that results from this Request for Proposal involves migrating to a new EAP provider, the new provider will be responsible for coordinating the transition process in conjunction with FRSA and the former provider. The transition process may also involve coordinating with former provider to resolve any ongoing counseling or referral services. In addition to these examples, the new firm would be responsible for other transitional activities as needed.

**G. Methods and Materials.** The proposal should include an outline of the intended process including a timeline and examples of materials to be used in the procedure.

**H. Appendix.** See the attached appendix for answers to questions firms may have which may impact their proposals.

### **3.4 Price Increases Prohibited.**

The successful respondent must not raise their fees over the entire duration of the contract.

### **3.5 Payments to Successful Proposer**

The successful proposer must invoice the Authority monthly. The Authority will deny invoices for any costs not included in the successful proposer's original proposal, unless the successful proposer attaches Authority management's written pre-authorization for additional payment. Section 2.12 of this Request for Proposal contains the Authority's general payment requirements.

### **3.6 Questions**

Interested parties may direct questions concerning this Request for Proposals or for specific details regarding services to be performed to Julia Scott-Valdez, Director of Management Services at 815-387-7580 or [jscott-valdez@fourrivers.illinois.gov](mailto:jscott-valdez@fourrivers.illinois.gov). The Authority will not interpret specifications for individual proposers. If the Authority



determines that the specifications need to be clarified or revised, it will issue an addendum to all prospective proposers.

### **3.7 Insurance**

**A. The successful respondent/contractor must, for the duration of the contract, maintain the following:**

**General Liability:** \$1,000,000 combined single limit per occurrence for bodily injury, personal injury and property damage. If Commercial General Liability Insurance or other form with a general aggregate limit is used, either the general aggregate limit must apply separately to this project or the general aggregate limit must be twice the required occurrence limit.

**Auto Liability:** \$1,000,000 combined single limit per accident for bodily injury and property damage including coverages for owned, hired or non-owned vehicles, as applicable.

**Workers' Compensation and Employers' Liability:** Workers' Compensation limits as required by statute and Employers' Liability limits of \$500,000 per accident and \$500,000 per disease.

**Umbrella:** \$2,000,000 per occurrence/aggregate.

The policies must contain, or be endorsed to afford Contractual Liability coverages for the following provisions in the General Liability and Automobile Liability coverages:

1. The Authority, its officers, officials, employees, and volunteers must be covered as additional insureds as respects liability arising out of activities performed by or on insured's general supervision of the successful respondent/contractor, products and completed operations of the successful respondent/contractor, premises owned, occupied or used by the successful respondent/contractor, or automobiles owned, leased, hired, or borrowed by the successful respondent/contractor. The coverage must contain no special limitations on the scope of protection afforded to the Authority, its officers, officials, employees, volunteers, or agents.

2. The successful respondent's/contractor's insurance coverage must be primary insurance as respects the Authority, its officers, officials, employees, volunteers, and agents. Any insurance or self-insurance maintained by the Authority, its officers, officials, employees, volunteers, or agents must be in excess of the successful respondent's/contractor's insurance and must not contribute with it.

3. Any failure to comply with reporting provisions of the policies must not affect coverage provided to the Authority, its officers, officials, employees, volunteers, or agents.

4. The successful respondent's/contractor's insurance must apply separately to each insured against whom claim is made or suit is brought, except with respect to the limits of the insurer's liability.

**B. Proof of Insurance – Certificate of Insurance and Additional Insured Endorsements.** No more than ten (10) calendar days subsequent to the Authority's issuance of an award letter and no later than thirty (30) days before commencement to work, the successful respondent/contractor must provide documentation including a Certificate of Insurance and additional insured endorsements for commercial general

liability and auto liability to prove that it has obtained all required insurance and bonds. The Certificate of Insurance must state Four Rivers Sanitation Authority is additional insured under the commercial general liability and automobile liability on a primary, non-contributory basis. The primary, non-contributory additional insured endorsements for commercial general liability and automobile liability must be provided. The Authority is the sole judge as to the acceptability of any such proof.

**C. Correction of Successful Respondent's/Contractor's Insurance Deficiencies.**

If the Authority determines the successful respondent's/contractor's insurance or documentation does not conform to the specifications, the Authority to inform said respondent/contractor of the non-conformity. If said respondent/contractor fails to provide conforming insurance or documentation within five (5) calendar days of the Authority's notice, it is in default.

**D. Suitability of Insurance.** The Authority is the sole judge of whether an insurer's rating is satisfactory. The Authority's decision is final and the Authority's request for proposal procedures contain no appeal provision.

**E. Best Ratings.**

1. Alphabetical Rating. For purposes of this Request for Proposals, "insurer" means any surety, insurance carrier, or other organization which proposes to provide an insurance policy or bond for the successful respondent/contractor. No insurer or surety rated lower than "A-," **Excellent**, in the current Best's Key Rating Guide is acceptable to the Authority.

2. Financial Size Rating. Provided an insurer's alphabetical rating is satisfactory, the Authority will examine said insurer's financial size rating.

a) If Best classifies the insurer XII or larger, said insurer is acceptable to the Authority.

b) If Best classifies the insurer as smaller than XII, but larger than VI, said insurer must be submitted to the Authority's Director of Management Services and/or the Authority's insurance consultant for review.

Financial Size ratings less than VII are not acceptable and will disqualify the respondent/contractor.

**3.8 Indemnification Clause**

Successful respondent/contractor must protect, indemnify, hold and save harmless and defend the Authority, its officers, officials, employees, volunteers, and agents against any and all claims, costs, causes, actions and expenses, including but not limited to attorney's fees incurred by reason of a lawsuit or claim for compensation arising in favor of any person, including the employees, officers, independent contractors, or subcontractors of the successful respondent/ contractor or Authority, on account of personal injuries or death, or damages to property occurring, growing out of, incident to, or resulting directly or indirectly from the performance by the successful respondent/contractor or subcontractor, whether such loss, damage, injury, or liability is contributed to by the negligence of the Authority or by premises themselves or any equipment thereon whether latent or patent, or from other causes whatsoever, except that the successful respondent/contractor must have no liability for damages or the costs incident thereto

caused by the sole negligence of the Authority.

The indemnification must not be limited by a limitation on amount or type of damages payable by or for the successful respondent/contractor or its subcontractor under any employee benefits act including, but not limited, to the Workers' Compensation Act.

No inspection by the Authority, its employees, or agents is deemed a waiver by the Authority of full compliance with the requirements of the Contract. This indemnification must not be limited by the required minimum insurance coverage in the Contract.

### **3.9 Force Majeure**

The obligations of either the Authority or the successful respondent are suspended during the time as such party is prevented from complying therewith in whole or in part because of any cause, except financial, beyond the reasonable control of such party. In the event of either the Authority or the successful respondent being rendered unable wholly or in part by force majeure to carry out its obligations other than to make payments due, it is agreed that on such party giving notice and full particulars of such force majeure in writing or by facsimile to the other party as soon as possible after the occurrence of the cause relied on, then the obligations of the parties insofar as they are affected by such force majeure are suspended during the continuance of any inability so caused but for no longer period, and such cause must as far as possible be remedied with all reasonable dispatch.

FOR REVIEW PURPOSES ONLY

**SECTION IV  
QUALIFICATION FORM**

**REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

FOR REVIEW PURPOSES ONLY

**IV  
QUALIFICATION FORM  
REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

**Failure to complete this form will result in disqualification of Vendor's bid or proposal.**

Each respondent proposing to provide an EAP must complete the following information. If FRSA believes a respondent's information is unsatisfactory, the respondent's proposal may be rejected without further consideration. FRSA's decision in such an event is final, and the FRSA's procurement procedures include no method of appeal.

**1. Corporate Profile.**

The proposal must include a 1-2-page description of the firm that includes the scope of services the firm provides, years of experience providing the services described in this RFP, and a description of the firm's capability to provide the desired services.

**2. Company Name & Ownership.**

Business name and business legal status:

\_\_\_\_\_

How long has the proposer been in business under the current company name and primary ownership?

\_\_\_\_\_ years

**3. Location of the office from which the work under this contract will be provided and the staff allocation of that office:**

\_\_\_\_\_

**4. Staff Qualifications.** Identify and provide vitae for individuals responsible for planning and conducting the programs.

**5. Previous Clients.** Provide the names of five (5) public sector or private sector employers for which the firm has provided similar services within the past 12 to 24 months.<sup>1</sup>

**Reference #1**

Organization Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Street Address \_\_\_\_\_

<sup>1</sup> References provided may be contacted by the Authority to be used in evaluation.

City, State, Zip  
Phone  
Email Address  
Dates of Service

**Reference #2**  
Organization Name  
Contact Name  
Street Address  
City, State, Zip  
Phone  
Email Address  
Dates of Service

**Reference #3**  
Organization Name  
Contact Name  
Street Address  
City, State, Zip  
Phone  
Email Address  
Dates of Service

**Reference #4**  
Organization Name  
Contact Name  
Street Address  
City, State, Zip  
Phone  
Email Address  
Dates of Service

**Reference #5**  
Organization Name  
Contact Name  
Street Address  
City, State, Zip  
Phone  
Email Address  
Dates of Service

FOR REVIEW PURPOSES ONLY

**SECTION V  
PROPOSAL FORM**

**REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

FOR REVIEW PURPOSES ONLY

V  
**PROPOSAL FORM  
REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

To: BOARD OF TRUSTEES  
FOUR RIVERS  
SANITATION AUTHORITY  
3501 Kishwaukee St.  
Rockford, IL 61109

From: \_\_\_\_\_  
(Individual, Partnership or Corporation)  
\_\_\_\_\_  
(Address of Individual, Partnership or Corporation)

Trustees:

I (We) the undersigned hereby propose to furnish an **Employee Assistance Program** in compliance with the attached Notice, General Specifications, Detailed Specifications, Proposal Form, Fair Employment Practices Affidavit of Compliance Form, Forms of Affidavit, and Contract Form.

The Undersigned also affirms and declares:

A. That they have examined and are familiar with all the related contract documents and found that they are accurate and complete and are approved by the undersigned.

B. That they have carefully examined the scope of the required service, and that, from their own investigation, have satisfied themselves as to the nature and location of the delivery point, the character, quality and quantity of materials, and the kind and extent of equipment and other facilities needed for the performance of the service and provision of the materials, the general and local conditions and all difficulties to be encountered, and all other items which may, in any way, affect the materials or services or their performance.

C. That this proposal is made without any understanding, agreement or connection with any other person, partnership, or corporation making a proposal for the same purposes, and is in all respects fair and without collusion or fraud; and that they are not barred from proposing as a result of a bid-rigging or bid-rotating conviction.

D. All goods and services provided in response to this request will be produced in compliance with all applicable requirements of the Fair Labor Standards Act, as amended, and of regulations and orders of the United States Department of Labor.

E. The firm which I (we) represent complies with all applicable requirements of the Americans with Disabilities Act (ADA), the Occupational Safety and Health Act (OSHA), rules and regulations of the US Department of Transportation (DOT), and the Federal Drug Free Work Place Act. If said firm is awarded a contract to provide the Authority's **Employee Assistance Program**, it will:

1. complete all OSHA, ADA, and DOT required supervisory, employee and customer training,
2. document compliance as required,



3. ensure that persons in safety-sensitive positions associated with loading, transportation, and delivery of the merchandise or service detailed in these specifications are subject to all required drug and alcohol testing and are properly licensed,
4. prepare and make available all required information and documentation, and
5. hold harmless and indemnify the Authority and the Authority's representatives as defined in Section 3.8 from all:
  - a. Suits, claims, or actions;
  - b. Costs, either for defense (including but not limited to reasonable attorney's fees and expert witness fees) or for settlements, and;
  - c. Damages of any kind (including but not limited to fines, actual, punitive, and compensatory damages) relating in any way to or arising out of the ADA or the OSHA, to which said firm is exposed or which it incurs in the execution of the contract.

F. The firm which I (we) represent has adopted and promulgated written sexual harassment policies that include, at a minimum, the following information:

1. the illegality of sexual harassment;
2. the definition of sexual harassment under Illinois State law;
3. a description of sexual harassment, utilizing examples;
4. my (our) organization's internal complaint process including penalties;
5. the legal recourse, investigative and complaint process available through the Illinois Department of Human Rights and the Illinois Human Rights Commission;
6. directions on how to contact the Department and the Commission; and
7. protection against retaliation as provided by Section 6-101 of Illinois Human Rights Act. (775 ILCS 5)

Upon request, my (our) organization will provide the Illinois Department of Human Rights with the information described in F1 through F7 above.

In submitting this proposal, I (we) understand that the Authority may reject part or all of any and all proposals. I (we) agree that I (we) must not withdraw this proposal for a period of sixty (60) calendar days following the scheduled proposal due date. I (we) have carefully examined the nature of the service and materials. The cost of all the materials, equipment, and service necessary to complete this contract is given in this proposal.

The selected proposer must enter into a Contract with the Authority to complete the Project in a form substantially similar to the Contract attached hereto. The Contract must be executed by the Contractor/Vendor and returned, together with the Insurance Documents and Performance Bond (if applicable) within ten (10) calendar days after it has been mailed to the Contractor. Two copies of the contract must be executed by the Contractor. One fully executed copy will be returned to the Contractor. See Section IX for a sample copy of the agreement.

**PROPOSAL PRICES FOR  
EMPLOYEE ASSISTANCE PROGRAM  
AS SPECIFIED IN THIS REQUEST FOR PROPOSALS**

**Failure to complete this form will result in disqualification of Vendor's bid or proposal.**

(Express all numerical quotations in figures and words)

**Please provide a detailed report of fees associated with the proposed service. Describe each item and provide a dollar amount:**

_____	\$
_____	\$
_____	\$
_____	\$
_____	\$
_____	\$

\*All quotations must be the total amount of the proposer's charge, inclusive of labor, and of materials, supplies, and tools and any and all other expenses necessary to provide the Employee Assistance Program in complete conformity with any and all provisions of this document.

By signing this proposal, I/we, the proposers, agree to the terms of the proposal, proposal requirements, addenda, and contract.

DATE: \_\_\_\_\_

PROPOSER: \_\_\_\_\_ BY: \_\_\_\_\_  
(print name of firm) (authorized rep's signature)

\_\_\_\_\_ (print street address) \_\_\_\_\_ (print rep's name)

\_\_\_\_\_ (print city, state, zip) \_\_\_\_\_ (print rep's title)

\_\_\_\_\_ (area code and phone number) \_\_\_\_\_ (email address)

**Note:** The Four Rivers Sanitation Authority, a Governmental Unit, pays neither Federal Excise Tax nor Illinois Retailers' Occupational Tax. The proposer must exclude those taxes from their proposal.

**“NO PROPOSAL” RESPONSE  
TO  
REQUEST FOR PROPOSALS**

If your firm is unable to submit a proposal at this time, please provide the information requested in the space provided below and return to:

Four Rivers Sanitation Authority  
3501 Kishwaukee Street  
Rockford, IL 61109

For this form only, responses can also be emailed to:

Purchasing@fourrivers.illinois.gov

We have received Request for Proposals **#24-214: Employee Assistance Program** due at **4:00 P.M.** on **July 29, 2024.**

Reason for not submitting proposal:

---

---

---

---

BY: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Name & Title, Typed or Printed

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

FOR REVIEW PURPOSES ONLY

**SECTION VI  
FAIR EMPLOYMENT PRACTICES AFFIDAVIT OF  
COMPLIANCE**

**REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

**VI**  
**FAIR EMPLOYMENT PRACTICES AFFIDAVIT OF COMPLIANCE**  
**REQUEST FOR PROPOSALS #24-214**  
**EMPLOYEE ASSISTANCE PROGRAM**

**Failure to complete this form will result in disqualification of Vendor's bid or proposal.**

PROJECT: **Employee Assistance Program**

NOTE: THE PROPOSER MUST EXECUTE THIS AFFIDAVIT AND SUBMIT IT WITH ITS SIGNED PROPOSAL. THE FOUR RIVERS SANITATION AUTHORITY CANNOT ACCEPT ANY PROPOSAL WHICH DOES NOT CONTAIN THIS AFFIDAVIT

\_\_\_\_\_, being first duly sworn, deposes and says that:  
(Name of person making affidavit)

They are: \_\_\_\_\_ of \_\_\_\_\_  
(Officer's Title) (Company Name)

that said company is and "Equal Opportunity Employer" as defined by Section 2000(e) of Chapter 21, Title 42 of the United States Code annotated and Federal Executive Orders #11375 which are incorporated herein by reference;

and that said company will comply with any and all requirements of Title 44 Admin. Code 750. APPENDIX A – Equal Employment Opportunity Clause, Rules and Regulations, Illinois Department of Human Rights, which read as follows:

In the event of the contractor's non-compliance with the provisions of this Equal Employment Opportunity Clause or the Act, the contractor may be declared ineligible for future contracts or subcontracts with the State of Illinois or any of its political subdivisions or municipal corporations, and the contract may be cancelled or voided in whole or in part, and other sanctions or penalties may be imposed or remedies invoked as provided by statute or regulation. During the performance of this contract, the contractor agrees as follows:

- 1) That he or she will not discriminate against any employee or applicant for employment because of race, color, religion, sex, sexual orientation, marital status, order of protection status, national origin or ancestry, citizenship status, age, physical or mental disability unrelated to ability, military status or an unfavorable discharge from military service; and, further, that he or she will examine all job classifications to determine if minority persons or women are underutilized and will take appropriate affirmative action to rectify any underutilization.
- 2) That, if he or she hires additional employees in order to perform this contract or any portion of this contract, he or she will determine the availability (in accordance with this Part) of minorities and women in the areas from which he or she may reasonably recruit and he or she will hire for each job classification for which employees are hired in a way that minorities and women are not underutilized.
- 3) That, in all solicitations or advertisements for employees placed by him or her or on his or her behalf, he or she will state that all applicants will be afforded equal opportunity without discrimination because of race, color, religion, sex, sexual orientation, marital status, order of protection status, national origin or ancestry, citizenship status, age, physical or mental disability unrelated to ability, military status or an unfavorable discharge from military service.
- 4) That he or she will send to each labor organization or representative of workers with which he or she has or is bound by a collective bargaining or other agreement or understanding, a notice advising the labor organization or representative of the contractor's obligations under the Act and this Part. If any labor organization or representative fails or refuses to cooperate with the contractor in his or her efforts to comply with the Act and this Part, the contractor will promptly notify the Department and the contracting agency and will recruit employees from other sources when necessary to fulfill its obligations under the contract.
- 5) That he or she will submit reports as required by this Part, furnish all relevant information as may from time to time be requested by the Department or the contracting agency, and in all respects comply with the Act and this Part.
- 6) That he or she will permit access to all relevant books, records, accounts and work sites by personnel of the contracting agency and the Department for purposes of investigation to ascertain compliance with the Act and the Department's Rules and Regulations.
- 7) That he or she will include verbatim or by reference the provisions of this clause in every subcontract awarded under which any portion of the contract obligations are undertaken or assumed, so that the provisions will be binding upon the subcontractor. In the same manner as with other provisions of this contract, the contractor will be liable for compliance with applicable provisions of this clause by subcontractors; and further it will promptly notify the contracting agency and the Department in the event any subcontractor fails or refuses to comply with the provisions. In addition, the contractor will not utilize any subcontractor declared by the Illinois Human Rights Commission to be ineligible for contracts or subcontracts with the State of Illinois or any of its political subdivisions or municipal corporations.  
(Source: Amended at 35 Ill. Reg. 3695, effective February 18, 2011)

IL Dept of Human Rights Registration No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

**SECTION VII  
FORMS OF AFFIDAVIT**

**REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

FOR REVIEW PURPOSES ONLY

VII  
FORMS OF AFFIDAVIT  
REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM

**Failure to complete this form will result in disqualification of Vendor's bid or proposal.**

Vendor City: \_\_\_\_\_ Vendor County: \_\_\_\_\_ Vendor State: \_\_\_\_\_  
-----

**This Section for Sole Proprietorship:**

I, \_\_\_\_\_ (name), being duly sworn, depose and say that the organization I represent is a sole proprietorship, and that I am the person described in and who executed the foregoing proposal and that the several matters therein stated are in all respects true.

Signature \_\_\_\_\_  
-----

**This Section for Partnership:**

I, \_\_\_\_\_ (name), being duly sworn, depose and say that I am a member of \_\_\_\_\_ (partnership name), the firm described in and which executed the foregoing proposal; that I duly subscribed the name of the firm thereunto on behalf of the firm; and that the several matters therein stated are in all respects true.

Signature \_\_\_\_\_  
-----

**This Section for Corporation:**

We, \_\_\_\_\_ (representative who signed the Proposal Form), and \_\_\_\_\_ (other corporate officer), being duly sworn, depose and say that we reside in the cities of \_\_\_\_\_ and \_\_\_\_\_, respectively, and that we are the \_\_\_\_\_ (representative's title) and the \_\_\_\_\_ (other corporate officer's title), respectively, of \_\_\_\_\_ (corporation name), the firm described in and which executed the foregoing instrument; that we are authorized to complete this form and to enter into this contract on behalf of said corporation; that we have signed our names thereto by like order; and that we have knowledge of the several matters therein stated and they are in all respects true.

\_\_\_\_\_  
(representative's signature) (other corporate officer's signature)  
-----

**This Section for a Limited Liability Corporation:**

I, \_\_\_\_\_ (name), being duly sworn, depose and say that I am a \_\_\_\_\_ (representative's title) of \_\_\_\_\_ (company name), the company described in and which executed the foregoing proposal; that I am authorized to complete this form and to enter into this contract on behalf of said company and have knowledge of the several matters therein stated and they are in all respects true.

Signature \_\_\_\_\_  
-----

**Notarization (required for all successful proposers):**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Notary Public \_\_\_\_\_

County \_\_\_\_\_

My Commission Expires \_\_\_\_\_

**SECTION VIII  
BID BOND**

**REQUEST for PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

FOR REVIEW PURPOSES ONLY



VIII  
BID BOND  
FOUR RIVERS SANITATION AUTHORITY  
ROCKFORD, ILLINOIS  
**EMPLOYEE ASSISTANCE PROGRAM**

KNOW ALL MEN BY THESE PRESENT, that we:

\_\_\_\_\_ (hereinafter called the Principal) and

\_\_\_\_\_ (hereinafter called the Surety) a

Corporation chartered and existing under the laws of the State of \_\_\_\_\_

with its principal offices in the City of \_\_\_\_\_ and authorized to do business in the State of Illinois are held and firmly bound onto the Four Rivers Sanitation Authority of Winnebago County, Illinois (Authority), in the full and just sum of:

\_\_\_\_\_ Dollars

(\$ \_\_\_\_\_) good lawful money of the United States of America, to be paid upon demand of the Authority, to which payment will and truly to be made we bind ourselves, our heirs, executors, administrators, and assigns, jointly and severally and firmly by these presents.

WHEREAS, the Principal is about to submit, or has submitted to the Authority, a bid for providing an **Employee Assistance Program**.

WHEREAS, the Principal desires to file this bond, in accordance with law, in lieu of a certified bidder's check otherwise required to accompany this Bid.

FOR REVIEW PURPOSES ONLY

IN TESTIMONY THEREOF, the Principal and Surety have caused these presents to be  
duly signed and sealed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
**Principal**

(Seal)

By \_\_\_\_\_

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

Title: \_\_\_\_\_

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

ATTEST:

\_\_\_\_\_

\_\_\_\_\_  
**Surety**

(Seal)

By \_\_\_\_\_

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

Title: \_\_\_\_\_

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

FOR REVIEW PURPOSES ONLY

**IX  
CONTRACT SAMPLE**

**REQUEST FOR PROPOSALS #24-214  
EMPLOYEE ASSISTANCE PROGRAM**

FOR REVIEW PURPOSES ONLY

**IX  
CONTRACT  
FOUR RIVERS SANITATION AUTHORITY  
ROCKFORD, ILLINOIS**

THIS CONTRACT, made and concluded this \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ between Four Rivers Sanitation Authority, Rockford, Illinois, also known as "Authority," and \_\_\_\_\_, their executors, administrators, successors or assigns, known as "Contractor":

In consideration of the payments and contracts mentioned in the Proposal attached hereto, to be made and performed by the Authority, the Contractor agrees with the Authority at their own proper cost and expense to do all the work, furnish all equipment, materials and all labor necessary to complete the work and furnish the merchandise in accordance with the specifications hereinafter described, and the Authority's requirements.

**1. Scope**

Both parties understand and agree that the Notice, General Specifications, Detailed Specifications, Proposal Form, Fair Employment Practices Affidavit of Compliance Form, and Forms of Affidavit of the **Request for Proposal: Employee Assistance Program**, all Addenda there to (if any), and any and all provisions required by law, are all essential documents of the contract, and are a part hereof, as if herein set out verbatim or as if attached, except for titles, subtitles, headings, table of contents and portions specifically excluded.

The Contractor understands and agrees that unless the contractor and the Authority terminate the Contract by their mutual written contract in conformity with Section 2.16 of this Request for Proposals, the Contractor must provide an **Employee Assistance Program** for a **36-month period**, October 1, 2024, through September 30, 2027. If the Authority and the successful proposer agree in writing, the contract may be extended twice for one year per extension.

**2. Contract Price**

The Authority to pay to the Contractor, and the Contractor to accept, in full payment for the performance of this Contract, subject to any additions or deductions provided for hereby, in current funds, the total contract price of:

\_\_\_\_\_ (\$\_\_\_\_\_).

The Contractor fully understands and agrees that their proposal price will be the only basis for payment for the contract's duration, and that in the absence of changes to which the Authority and Contractor agree because of revisions to the scope of the **Employee Assistance Program**, this contract allows for no price increases.

The Authority to make payments to the Contractor, in accordance with and subject to the provisions of Section 4 of this Contract.

### 3. Contract Execution

The Contractor must:

- A. Perform all services in a responsible manner, supplying only service that meets or exceeds the Authority's Specifications;
- B. Sustain all loss or damage arising out of the nature of the work to be done, or from any unforeseen obstruction or difficulty which contractor may encounter in the prosecution of the work, or from the action of the elements;
- C. Be responsible for all accidents their employees, or agents may incur in the contract's execution;
- D. Hold the Authority and its representatives harmless from liability of any nature or kind on account of use of any copyrighted or un-copyrighted composition, secret process, patented or unpatented invention, article or appliance furnished or used under this Contract. The Contractor must likewise hold harmless and indemnify the Authority and its representatives from all:
  1. suits, claims, or actions,
  2. costs, either for defense or for settlements, and
  3. damages to which the Authority or its representatives might be exposed by reason of an injury or alleged injury, to the person or property of another:
    - a. in the execution of the Contract, or
    - b. from actions the Authority or its representatives take on the Contractor's behalf, except in cases where such suits, claims, actions, or costs are found to be based on the Authority's negligence. For purposes of this paragraph, "its representatives" means "the Four Rivers Sanitation Authority's trustees, employees, agents, assigns, and their heirs."
- E. Comply with all applicable requirements of the Americans with Disabilities Act (ADA), the Occupational Safety and Health Act (OSHA), rules and regulations of the US Department of Transportation (DOT), and the Federal Drug Free Work Place Act, and will:
  1. complete all OSHA, ADA, and DOT required supervisory, employee and customer training,
  2. document compliance as required,
  3. ensure that persons in safety-sensitive positions associated with loading, transportation, and delivery of the merchandise or service detailed in these specifications are subject to all required drug and alcohol testing and are properly licensed,
  4. prepare and make available all required information and documentation, and
  5. hold harmless and indemnify the Authority and the Authority's representatives as defined in Section 3.8 from all:
    - a. Suits, claims, or actions;

- b. Costs, either for defense (including but not limited to reasonable attorney's fees and expert witness fees) or for settlements, and;
  - c. Damages of any kind (including but not limited to fines, actual, punitive, and compensatory damages)
- relating in any way to or arising out of the ADA or the OSHA, to which said firm is exposed or which it incurs in the execution of the contract.

- F. Adopt and promulgate written sexual harassment policies that include, at a minimum, the following information:
1. the illegality of sexual harassment;
  2. the definition of sexual harassment under Illinois State law;
  3. a description of sexual harassment, utilizing examples;
  4. Contractor's internal complaint process including penalties;
  5. the legal recourse, investigative and complaint process available through the Illinois Department of Human Rights and the Illinois Human Rights Commission;
  6. directions on how to contact the Department and the Commission; and
  7. protection against retaliation as provided by Section 6-101 of Illinois Human Rights Act.

Upon request, Contractor will provide the Illinois Department of Human Rights with the information described in F1 through F7 above.

- G. Maintain all specified insurance for the duration of the contract.

#### **4. Payments to Contractor**

If the Authority receives an acceptable invoice for conforming service prior to the fifth day of the month, the Authority to issue payment before the fifth day of the succeeding month. If received on or after the fifth day of the month, payment will be issued the following month.

#### **5. Subcontracts**

No part of the work herein provided for is to be sublet or subcontracted without the express consent of the Authority, and in no case will consent relieve said Contractor from the obligation herein entered into, or change the terms of this Contract.

#### **6. Contractor's Responsibility**

This Contract must extend to and be binding upon the successors and assigns, and upon the heirs, administrators, executors, and legal representatives of the Contractor.

#### **7. Counterparts**

This Agreement may be executed and recorded in counterparts, each of which is to be deemed an original and all of which, when taken together, constitutes one and the same instrument. The Parties hereby acknowledge and agree that facsimile signatures or signatures transmitted by electronic mail in so-called "pdf" format must be legal and binding and must have the same full force and effect as if an original of this Agreement had been delivered. Each of the parties (a) intend to be bound by the signatures on any document

sent by facsimile or electronic mail, (b) are aware that the other party will rely on such signatures, and (c) hereby waive any defenses to the enforcement of the terms of this Agreement based on the foregoing forms of signature.

**7. Time**

The Contractor agrees to all schedules specified in this request for proposals.

**8. Seals**

IN WITNESS WHEREOF, the parties have hereunto set their hands, and are duly authorized to enter into such contracts on behalf of their respective organizations.

\_\_\_\_\_  
Name of Firm - Contractor

By \_\_\_\_\_  
Authorized Signature

ATTEST:

By: \_\_\_\_\_

Its: \_\_\_\_\_

Four Rivers Sanitation Authority  
Winnebago County, Illinois

By \_\_\_\_\_  
Executive Director

ATTEST: \_\_\_\_\_  
Director of Management Services

STATE OF ILLINOIS )  
COUNTY OF WINNEBAGO )

On this \_\_\_ day of \_\_\_\_\_, 20\_\_\_, before me, a notary public within and for said County, personally appeared Timothy S. Hanson and Julia Scott-Valdez, to me personally known, who, being each by me duly sworn did say that they are respectively, the Executive Director and Director of Management Services of the Four Rivers Sanitation Authority, named in the foregoing instrument, and that said instrument was signed and sealed in behalf of the Authority, and said Executive Director and Director of Management Services acknowledge said instrument to be the free act and deed of said Authority.

(SEAL)

\_\_\_\_\_  
Notary Public

## Appendix

The following information is provided to answer questions firms may have which may impact their proposals:

- There are approximately 117 full time equivalents that may utilize the program benefits.
- All participants enrolled in FRSA's health plan are currently covered by a mental health benefit administered by BlueCross/BlueShield of IL. Enrollment in the health plan is approximately 108 employees or 92% of the employee population.
- As outlined in section 3.2, C of the specifications, the contract length is 3 years, with 2 one-year renewal options.
- Four copies of the proposal should be included with the response.
- FRSA's current provider is Perspectives located in Chicago, IL. Services outside traditional EAP counseling include legal, financial and work-life benefits and online tools.
- All firms submitting proposals must be able to provide a high level of service.
- The selected EAP vendor is not expected to manage the mental health care portion of health insurance. However, FRSA would like the EAP vendor to assist the employee in finding mental health care providers covered by the health insurance plan in a casual referral relationship.
- For 2023, FRSA's average annual utilization of the current EAP has been approximately:
  - **EAP Cases:** There were **4** EAP cases for the current reporting period with **7** activities including all sessions, coordination of resources, and/or other case management activities.
  - **Mobile App:** Mobile App usage totaled **8** with **101** activities.
  - **Organizational Services:** **119** employees engaged in organizational services, such as seminars, webinars, visibility tables, health fairs, etc.
  - **Supervisor Referral Cases:** **2** supervisor referrals
  - **Worklife Online:** **15** employees logged into Worklife Online with **33** touchpoints (page hits).
  - **Account Management:** **29** management consultations regarding organizational issues, report presentations, etc.



- FRSA employs approximately 36 DOT eligible drivers.
- FRSA averages 1 SAP evaluation every few years *but has not required an evaluation in five (5) years.*
- No critical incidences were responded to last year
- A vendor may include quotes on additional services offered that are not requested in the preceding specifications.
- Service with the selected vendor will commence after FRSA Board of Trustees' approval of award of the contract.

FOR REVIEW PURPOSES ONLY