

# DEPARTMENT OF CORONER



## REQUEST FOR STATEMENT OF QUALIFICATIONS

FOR

### AS-NEEDED NEUROPATHOLOGY SERVICES

**Project ID # 1012008ES**

Prepared By:  
County of Los Angeles  
Department of Coroner  
1104 N. Mission Road  
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**REQUEST FOR STATEMENT OF QUALIFICATIONS (RFSQ)  
AS-NEEDED NEUROPATHOLOGY SERVICES  
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## **1.0 GENERAL INFORMATION**

### **1.1 Scope of Work**

The County of Los Angeles, Department of Coroner (Department) is seeking qualified individuals to enter into Master Agreements with the County to provide neuropathology services.

The primary mission of the Department is to inquire into and determine the cause, manner and circumstances of all unnatural, suspicious, unusual, violent, sudden and unattended deaths. The cause of death is determined by investigation, post mortem examination and laboratory testing. In appropriate cases the Department utilizes neuropathology services in determination of the cause of death.

In order to fulfill its primary mission, the Department is releasing this Request for Statement of Qualifications (RFSQ) seeking qualified candidates who are interested in offering as-needed neuropathology services. Neuropathologists that are determined to be qualified by the Department will form a pool of eligible Contractors that may perform neuropathology services on an as-needed basis.

### **1.2 Overview of Solicitation Document**

This RFSQ is composed of the following parts:

- **GENERAL INFORMATION:** Specifies the required Minimum Qualifications, provides information regarding some of the requirements of the Master Agreement and explains the solicitation process.
- **SUBMISSION INSTRUCTIONS:** Instructs the applicant on how to prepare and submit their Statement of Qualifications (SOQ).
- **STATEMENT OF QUALIFICATIONS (SOQ) REVIEW/SELECTION/QUALIFICATION PROCESS:** Explains how the applicant's SOQ will be reviewed, qualified and selected.
- **APPENDICES:**
  - **A - REQUIRED FORMS:** Forms contained in this section must be completed and included in the SOQ.

- **B - TRANSMITTAL FORM TO REQUEST A SOLICITATION REQUIREMENTS REVIEW:** Transmittal sent to department requesting a Solicitation Requirements Review.
- **C - COUNTY OF LOS ANGELES POLICY OF DOING BUSINESS WITH SMALL BUSINESS:** County policy.
- **D - JURY SERVICE ORDINANCE:** County policy.
- **E - LISTING OF CONTRACTORS DEBARRED IN LOS ANGELES COUNTY:** Contractors who are not allowed to contract with the County for a specific length of time.
- **F - IRS NOTICE 1015:** Provides information on Federal Earned Income Credit.
- **G - SAFELY SURRENDERED BABY LAW:** County program.
- **H - MASTER AGREEMENT:** This document is substantially similar to the Master Agreement that will be used during the term of the Agreement. The terms and conditions shown in the Master Agreement are not negotiable.
- **I - CALIFORNIA CHARITIES REGULATION:**
- **J - PRICE SHEET:**

### **1.3 Minimum Qualifications**

Interested and qualified Individuals that meet the mandatory Minimum Qualifications stated below are invited to submit a SOQ.

- 1.3.1 Must have United States citizenship or permanent resident status.
- 1.3.2 Must have a valid California Physicians and Surgeons license.
- 1.3.3 Must be certified by the American Board of Pathology in Anatomic Pathology and Neuropathology (note: Physicians possessing certifications in Clinical and Forensic Pathology in addition to Anatomic Neuropathology are eligible).

#### **Desirable Qualifications:**

- 1.3.4 Prior experience providing consultations to a Medical Examiner/Coroner Office or as a qualified expert witness in neuropathology in California civil or criminal court.

#### **1.4 Master Agreement Process**

The objective of this RFSQ process is to secure a pool of eligible Contractors to perform neuropathology services on an as-needed basis. The Department, at its sole discretion, shall assign a Contractor a Work Order indicating specific tasks, deliverables, work load/cases etc.

1.4.1 Master Agreements may be entered into with Neuropathologists determined by the Department, at its sole discretion, to be qualified.

1.4.2 Upon the Department's execution of these Master Agreements, the qualified Neuropathologist will become a County Contractor and thereafter may provide neuropathology services on as-needed basis. Work Orders assigned by the Department shall include a Statement of Work, which shall include the Coroner case assigned and the type of neuropathology service required. Payment for all completed work shall be made on a fixed price basis per assigned Coroner case, subject to the Maximum Contract Sum. The execution of a Master Agreement does not guarantee a Contractor any minimum amount of work or payment from the County.

#### **1.5 Master Agreement Term**

1.5.1 The term of the Master Agreement will commence on the effective date and expire June 30, 2008 and three (3) one-year and six (6) month-to-monthly renewal option(s). Renewal options will be at the Department's sole discretion.

1.5.2 This RFSQ will be open-ended until the needs of the Department are met. County will be continuously accepting SOQ's throughout the duration of the Master Agreement from qualified applicants. The Master Agreement will become effective upon the date of its execution by the Director, Department of Coroner or designee.

#### **1.6 Master Agreement Additional Terms and Conditions**

Master Agreement Additional Terms and Conditions are contained in *Appendix H - Master Agreement*. Proposer's are advised that the Master Agreement Additional Terms and Conditions come directly from the County Code or are

mandated by the County's Board of Supervisors and are typically not negotiable. If a Proposer takes exception to any of the terms and conditions of this RFSQ and any appendix and exhibit thereto, Proposer shall describe in detail exception(s) taken and provide alternative language, and impact, if any, to Proposer's price.

### **1.7 County Rights & Responsibilities**

The County has the right to amend the RFSQ by written addendum. The County is responsible only for that which is expressly stated in the solicitation document and any authorized written addenda thereto. Such addendum shall be made available to each person or organization which County records indicate has received this RFSQ. Should such addendum require additional information not previously requested, failure to address the requirements of such addendum may result in the SOQ not being considered, as determined in the sole discretion of the County. The County is not responsible for and shall not be bound by any representations otherwise made by any individual acting or purporting to act on its behalf.

### **1.8 County Point of Contact**

Any contact with County personnel regarding this RFSQ or any matter relating thereto must be in writing to the County Point of Contact (CPOC) and may be mailed, e-mailed or faxed as follows:

County of Los Angeles  
Department of Coroner  
Attn: Elizabeth Seung, Contracts Manager  
1104 N. Mission Road  
Los Angeles, CA 90033  
e-mail address: [eseung@coroner.lacounty.gov](mailto:eseung@coroner.lacounty.gov)  
FAX: 323-441-9947

If it is discovered that a Proposer contacted and received information from any County personnel, other than the person specified above, regarding this solicitation, County, in its sole determination, may disqualify their SOQ from further consideration.

### **1.9 Mandatory Requirement to Register on County's WebVen**

Prior to executing a Master Agreement, all potential Contractors must register in the County's WebVen. The WebVen contains the Proposer's business profile and identifies the goods/services the business provides. Registration can be accomplished online via the Internet by accessing the County's home page at <http://camisvr.co.la.ca.us/webven/>.

### **1.10 County Option To Reject SOQs**

The County may, at its sole discretion, reject any or all SOQs submitted in response to this solicitation. The County shall not be liable for any cost incurred by a Proposer in connection with preparation and submittal of any SOQ. The County reserves the right to waive inconsequential disparities in a submitted SOQ.

### **1.11 Protest Process**

- 1.11.1 Any actual or prospective Proposer may file a protest in connection with the solicitation or award of a Board-approved service contract. It is generally accepted that the Proposer challenging the decision of a County department bears the burden of proof in its claim that the department committed a sufficiently material error in the solicitation process to justify invalidation of a proposed award.
- 1.11.2 Throughout the review process, the County has no obligation to delay or otherwise postpone an award of contract based on a Proposer protest. In all cases, the County reserves the right to make an award when it is determined to be in the best interest of the County of Los Angeles to do so.

### **1.11.3 Grounds for Review**

Unless state or federal statutes or regulations otherwise provide, the grounds for review of any departmental determination or action should be limited to the following:

Review of Solicitation Requirements Review (see sub section 2.4)

Review of a Disqualified SOQ (see sub section 3.2)

## **1.12 Notice to Proposer's Regarding Public Records Act**

1.12.1 Responses to this RFSQ shall become the exclusive property of the County. At such time as when the County executes a Master Agreement with the qualified Proposer(s), all such SOQs submitted in response to this RFSQ, become a matter of public record, with the exception of those parts of each SOQ which are defined and identified by the Proposer as business or trade secrets, and plainly marked as "Trade Secret," "Confidential," or "Proprietary."

1.12.2 The County shall not, in any way, be liable or responsible for the disclosure of any such record or any parts thereof, if disclosure is required or permitted under the California Public Records Act or otherwise by law. A blanket statement of confidentiality or the marking of each page of the SOQ as confidential shall not be deemed sufficient notice of exception and may subject the entire SOQ to disclosure. The Proposer must specifically label only those provisions of the SOQ which are "Trade Secrets," "Confidential," or "Proprietary" in nature.

## **1.13 SPARTA Program**

A County program, known as 'SPARTA' (Service Providers, Artisan and Tradesman Activities) may be able to assist potential Contractors in obtaining affordable liability insurance. The SPARTA Program is administered by the County's insurance broker, Municipality Insurance Services, Inc.

For additional information, a Proposer may call (800) 420-0555 or contact them through their web-address: [www.2sparta.com](http://www.2sparta.com)



#### **1.14 Background and Security Investigations**

Background and security investigations may be required at the discretion of the County as a condition of beginning and continuing work under any resulting agreement.

#### **1.15 Conflict of Interest**

No County employee whose position in the County enables him/her to influence the selection of a Contractor for this RFSQ, or any competing RFSQ, nor any spouse or economic dependent of such employees, shall be employed in any capacity by a Proposer or have any other direct or indirect financial interest in the selection of a Contractor. Proposer shall certify that he/she is aware of and has read Section 2.180.010 of the Los Angeles County Code as stated in *Appendix A - Required Forms Exhibit 2, Certification of No Conflict of Interest*.

#### **1.16 Determination of Proposer Responsibility**

- 1.16.1 A responsible Proposer is a Proposer who has demonstrated the attribute of trustworthiness, as well as quality, fitness, capacity and experience to satisfactorily perform the contract. It is the County's policy to conduct business only with responsible contractors.
- 1.16.2 Proposers are hereby notified that, in accordance with Chapter 2.202 of the County Code, the County may determine whether the Proposer is responsible based on a review of the Proposer's performance on any contracts, including but not limited to County contracts. Particular attention will be given to violations of labor laws related to employee compensation and benefits, and evidence of false claims made by the Proposer against public entities. Labor law violations which are the fault of the subcontractors and of which the Proposer had no knowledge shall not be the basis of a determination that the Proposer is not responsible.
- 1.16.3 The County may declare a Proposer to be non-responsible for purposes of this Master Agreement if the Board of Supervisors, in its discretion, finds that the Proposer has done any of the following: (1) violated a term of a contract with the County or a nonprofit corporation

created by the County; (2) committed an act or omission which negatively reflects on the Proposer's quality, fitness or capacity to perform a contract with the County, any other public entity, or a nonprofit corporation created by the County, or engaged in a pattern or practice which negatively reflects on same; (3) committed an act or omission which indicates a lack of business integrity or business honesty; or (4) made or submitted a false claim against the County or any other public entity.

- 1.16.4 If there is evidence that a Proposer may not be responsible, the Department shall notify the Proposer in writing of the evidence relating to the Proposer's responsibility, and its intention to recommend to the Board of Supervisors that the Proposer be found not responsible. The Department shall provide the Proposer and/or the Proposer's representative with an opportunity to present evidence as to why the Proposer should be found to be responsible and to rebut evidence which is the basis for the Department's recommendation.
- 1.16.5 If the Proposer presents evidence in rebuttal to the Department, the Department shall evaluate the merits of such evidence, and based on that evaluation, make a recommendation to the Board of Supervisors. The final decision concerning the responsibility of the Proposer shall reside with the Board of Supervisors.
- 1.16.6 These terms shall also apply to proposed subcontractors of Proposers on County contracts.

## **1.17 Proposer Debarment**

- 1.17.1 The Proposer is hereby notified that, in accordance with Chapter 2.202 of the County Code, the County may debar the Proposer from bidding or proposing on, or being awarded, and/or performing work on other County contracts for a specified period of time, which generally will not exceed five (5) years but may exceed five (5) years or be permanent if warranted by the circumstances, and the County may terminate any or

all of the Proposer's existing contracts with County, if the Board of Supervisors finds, in its discretion, that the Proposer has done any of the following: (1) violated a term of a contract with the County or a nonprofit corporation created by the County; (2) committed an act or omission which negatively reflects on the Proposer's quality, fitness or capacity to perform a contract with the County, any other public entity, or a nonprofit corporation created by the County, or engaged in a pattern or practice which negatively reflects on same; (3) committed an act or offense which indicates a lack of business integrity or business honesty; or (4) made or submitted a false claim against the County or any other public entity.

- 1.17.2 If there is evidence that the Proposer may be subject to debarment, the Department shall notify the Proposer in writing of the evidence which is the basis for the proposed debarment, and shall advise the Proposer of the scheduled date for a debarment hearing before the Contractor Hearing Board.
- 1.17.3 The Contractor Hearing Board shall conduct a hearing where evidence on the proposed debarment is presented. The Proposer and/or Proposer's representative shall be given an opportunity to submit evidence at that hearing. After the hearing, the Contractor Hearing Board shall prepare a tentative proposed decision, which shall contain a recommendation regarding whether the Proposer should be debarred, and, if so, the appropriate length of time of the debarment. The Proposer and the Department shall be provided an opportunity to object to the tentative proposed decision prior to its presentation to the Board of Supervisors.
- 1.17.4 After consideration of any objections, or if no objections are received, a record of the hearing, the proposed decision and any other recommendation of the Contractor Hearing Board shall be presented to the Board of Supervisors. The Board of Supervisors shall have the

right to modify, deny or adopt the proposed decision and recommendation of the Contractor Hearing Board.

- 1.17.5 If a Proposer has been debarred for a period longer than five (5) years, that Proposer may, after the debarment has been in effect for at least five (5) years, submit a written request for review of the debarment determination to reduce the period of debarment or terminate the debarment. The County may, in its discretion, reduce the period of debarment or terminate the debarment if it finds that the Proposer has adequately demonstrated one or more of the following: (1) elimination of the grounds for which the debarment was imposed; (2) a bona fide change in ownership or management; (3) material evidence discovered after debarment was imposed; or (4) any other reason that is in the best interests of the County.
- 1.17.6 The Contractor Hearing Board will consider requests for review of a debarment determination only where (1) the Proposer has been debarred for a period longer than five (5) years; (2) the debarment has been in effect for at least five (5) years; and (3) the request is in writing, states one or more of the grounds for reduction of the debarment period or termination of the debarment, and includes supporting documentation. Upon receiving an appropriate request, the Contractor Hearing Board will provide notice of the hearing on the request. At the hearing, the Contractor Hearing Board shall conduct a hearing where evidence on the proposed reduction of debarment period or termination of debarment is presented. This hearing shall be conducted and the request for review decided by the Contractor Hearing Board pursuant to the same procedures as for a debarment hearing.
- 1.17.7 The Contractor Hearing Board's proposed decision shall contain a recommendation on the request to reduce the period of debarment or terminate the debarment. The Contractor Hearing Board shall present its proposed decision and recommendation to the Board of

Supervisors. The Board of Supervisors shall have the right to modify, deny, or adopt the proposed decision and recommendation of the Contractor Hearing Board.

1.17.8 These terms shall also apply to proposed subcontractors of Proposers on County contracts.

1.17.9 *Appendix E* is a listing of Contractors that are currently on the *Debarment List for Los Angeles County*.

## **1.18 Gratuities**

### **1.18.1 Attempt to Secure Favorable Treatment**

It is improper for any County officer, employee or agent to solicit consideration, in any form, from a Proposer with the implication, suggestion or statement that the Proposer's provision of the consideration may secure more favorable treatment for the Proposer in the award of a Master Agreement or that the Proposer's failure to provide such consideration may negatively affect the County's consideration of the Proposer's submission. A Proposer shall not offer or give either directly or through an intermediary, consideration, in any form, to a County officer, employee or agent for the purpose of securing favorable treatment with respect to the award of a Master Agreement.

### **1.18.2 Proposer Notification to County**

A Proposer shall immediately report any attempt by a County officer, employee or agent to solicit such improper consideration. The report shall be made either to the County manager charged with the supervision of the employee or to the County Auditor-Controller's Employee Fraud Hotline at (800) 544-6861. Failure to report such a solicitation may result in the Proposer's submission being eliminated from consideration.

### **1.18.3 Form of Improper Consideration**

Among other items, such improper consideration may take the form of cash, discounts, services, the provision of travel or entertainment, or tangible gifts.

### **1.19 Notice to Proposers Regarding the County Lobbyist Ordinance**

The Board of Supervisors of the County of Los Angeles has enacted an ordinance regulating the activities of persons who lobby County officials. This ordinance, referred to as the “Lobbyist Ordinance”, defines a County Lobbyist and imposes certain registration requirements upon individuals meeting the definition. The complete text of the ordinance can be found in County Code Chapter 2.160. In effect, each person, corporation or other entity that seeks a County permit, license, franchise or contract must certify compliance with the ordinance. As part of this solicitation process, it will be the responsibility of each Proposer to review the ordinance independently as the text of said ordinance is not contained within this RFSQ. Thereafter, each person, corporation or other entity submitting a response to this solicitation, must certify that each County Lobbyist, as defined by Los Angeles County Code Section 2.160.010, retained by the Proposer is in full compliance with Chapter 2.160 of the Los Angeles County Code and each such County Lobbyist is not on the Executive Office’s List of Terminated Registered Lobbyists by completing and submitting the *Familiarity with the County Lobbyist Ordinance Certification*, as set forth in *Appendix A - Required Forms Exhibit 5*, as part of their SOQ.

### **1.20 County’s Quality Assurance Plan**

After award of a Master Agreement and subsequent Work Order(s), the County or its agent will evaluate the Contractor’s performance under the Master Agreement and Work Order on an annual basis. Such evaluation will include assessing Contractor’s compliance with all terms in the Master Agreement and performance standards identified in the Work Order. Contractor’s deficiencies which the County determines are severe or continuing and that may jeopardize performance of this Master Agreement and subsequent Work Orders will be reported to the County’s Board of Supervisors. The report will include improvement/corrective action measures taken by the County and Contractor.

If improvement does not occur consistent with the corrective action measures, the County may terminate the Master Agreement and/or Work Order in whole or in part, or impose other penalties as specified in the Master Agreement.

**1.21 Notification to County of Pending Acquisitions/Mergers by Proposing Company**

The Proposer shall notify the County of any pending acquisitions/mergers of their company. This information shall be provided by the Proposer on *Required Form - Exhibit 1 - Proposer's Organization Questionnaire/Affidavit*. Failure of the Proposer to provide this information may eliminate its SOQ from any further consideration.

**2.0 SUBMISSION INSTRUCTIONS**

This Section contains key project dates and activities as well as instructions to Proposers in how to prepare and submit their Statement of Qualifications (SOQ).

**2.1 County Responsibility**

The County is not responsible for representations made by any of its officers or employees prior to the execution of the Master Agreement unless such understanding or representation is included in the Master Agreement.

**2.2 Truth and Accuracy of Representations**

False, misleading, incomplete, or deceptively unresponsive statements in connection with a SOQ shall be sufficient cause for rejection of the SOQ. The evaluation and determination in this area shall be at the Department's sole judgment and his/her judgment shall be final.

**2.3 RFSQ Timetable**

The timetable for this RFSQ is as follows:

- Release of RFSQ..... January 24, 2008
- Due date ..... open continuous

**2.4 Solicitation Requirements Review**

A person or entity may seek a Solicitation Requirements Review by submitting *Appendix B - Transmittal Form to Request a RFSQ Solicitation Requirements Review* along with supporting documentation. A Solicitation Requirements Review shall only be granted under the following circumstances:

- The request for a Solicitation Requirements Review includes documentation, which demonstrates the underlying ability of the person or entity to submit a bid;
- The request for a Solicitation Requirements Review itemizes in appropriate detail, each matter contested and factual reasons for the requested review; and
- The request for a Solicitation Requirements Review asserts either that:
  - application of the minimum requirements, review criteria and/or business requirements unfairly disadvantage the Proposer; or,
  - due to unclear instructions, the process may result in the County not receiving the best possible responses from the Proposers.

The Solicitation Requirements Review shall be completed and the department's determination shall be provided to the Proposer, in writing, within a reasonable time prior to the SOQ due date.

All Requests for Review should be submitted to the CPOC (see sub section 1.8)

## **2.5 Proposers' Questions**

Proposers may submit written questions regarding this RFSQ by mail, fax or e-mail to the CPOC. When submitting questions, please specify the RFSQ section number, paragraph number, and page number and quote the passage that prompted the question. This will ensure that the question can be quickly found in the RFSQ. County reserves the right to group or summarize similar questions when providing answers.

Questions may address concerns that the application of minimum requirements, evaluation criteria and/or business requirements would unfairly disadvantage Proposers or, due to unclear instructions, may result in the County not receiving the best possible responses from Proposer.

Questions should be addressed to the CPOC (see sub section 1.8)

## **2.6 SOQ Submission**

One (1) original SOQ and two (2) numbered copies shall be enclosed in a sealed package, plainly marked in the upper left-hand corner with the name and address



of the Proposer and bear the words: "SOQ FOR NEUROPATHOLOGY SERVICES, Project 1012008ES."

**In order to be considered the SOQ must be submitted to the following address:**

County of Los Angeles  
Department of Coroner  
Attn: Elizabeth Seung, Contracts Manager  
1104 N. Mission Road  
Los Angeles, CA 90033

It is the sole responsibility of the submitting Proposer to ensure that its SOQ is received. Submitting Proposers shall bear all risks associated with delays in delivery by any person or entity, including the U.S. Mail. **No facsimile (fax) or electronic mail (e-mail) copies will be accepted.**

## **2.7 Preparation and Format of the SOQ**

All SOQs must be bound and submitted in the prescribed format. Any SOQ that deviates from this format may be rejected without review at the County's sole discretion.

General Format Requirements as follows:

- SOQ must be typewritten or machine printed. SOQ must be on eight and a half inch by eleven-inch (8-1/1" x 11") standard white bond paper with one-inch margins. Minimum font is eleven (11) point.
- SOQ must be numbered sequentially throughout from beginning to end, to ensure that there are no missing or duplicate pages.
- Proposer must submit one (1) original and two (2) complete copies of the SOQ for a total of three (3). Failure to submit the required number of SOQs as specified may be cause for rejection of the submission, which is at the sole discretion of the Department.

The content and sequence of the SOQ must be as follows:

- Cover Letter
- Table of Contents

- Qualifications and Capabilities (Section A)
- Required Forms (Section B)
- Proof of Insurability (Section C)
- Curriculum Vitae and Proof of Licenses (Section D)
- Exceptions (Section E)

**2.7.1 Cover Letter (2 page maximum)**

Cover letter shall be a maximum of two (2) page in length, and shall include:

- Proposers' legal name and address.
- Contact person(s) name, address, telephone and facsimile numbers, and e-mail address.
- Name and address of person authorized to legally bind the proposer to an Agreement.
- A statement that the Proposer will bear sole and complete responsibility for all neuropathology service performed.
- Proposer shall include a statement acknowledging and agreeing that this is a fixed price per assigned Coroner case Agreement.
- A statement agreeing acceptance of all terms and conditions of this RFSQ and all appendices and exhibits thereto.
- If a Proposer takes exception to any of the terms or conditions of this RFSQ and any appendix and exhibit thereto, Proposer shall indicate exceptions exist, and list all exception(s) in SOQ, Section E.

**2.7.2 Table of Contents**

The Table of Contents must be a comprehensive listing of material included in the SOQ. This section must include a clear definition of the material, identified by sequential page numbers and by section reference numbers.

**2.7.3 Qualifications and Capabilities (SOQ, Section A)**

Proposer shall demonstrate that Proposer is qualified and capable to perform the services required in the Agreement. The following sections must be included:

**A. Minimum Mandatory Qualifications (SOQ, Section A.1)**

This section must describe how Proposer meets each of the mandatory Minimum Qualifications requirements outlined in this RFSQ, Section 1.3 (Minimum Qualifications).

**B. Proposer's Background and Experience (Section A.2)**

The Proposer shall complete, sign and date the Proposer's Organization Questionnaire/Affidavit – Exhibit 1 as set forth in *Appendix A*. In addition, provide a summary of experience in providing the required services. Explain and state the number of years of experience Proposer has had in providing the required services requested in this RFSQ. Provide relevant background information to demonstrate that the Proposer has the experience and capability to perform the required services as an individual, corporation or other entity.

**C. Proposer's References (Section A.3)**

The Proposer must complete and include *Required Forms, Exhibits 6, 7 and 8* as set forth in *Appendix A*.

a. *Prospective Contractor References, Exhibit 6*

Proposer must provide references where the same or similar scope of services were provided.

b. *Prospective Contractor List of Contracts, Exhibit 7*

The listing must include all Public Entities contracts for the last two (2) years. A photocopy of this form should be used if necessary.

c. *Prospective Contractor List of Terminated Contracts, Exhibit 8*

Listing must include contracts terminated within the past three (3) years with a reason for termination.

It is the Proposer's sole responsibility to ensure that the firm's name, and point of contact's name, title and phone number for each reference is accurate. The same references may be listed on both forms – Exhibits 6 and 7.

County may disqualify a Proposer if:

- references fail to substantiate Proposer's description of the services provided; or
- references fail to support that Proposer has a continuing pattern of providing capable, productive and skilled services, or
- the Department is unable to reach the referenced point of contact with reasonable effort.

**D. Approach to Statement of Work (Section A.4)**

This section must describe Proposer's ability to provide any and all services required in the Agreement, specifically addressing the Statement of Work. Proposer shall provide a written narrative describing how the Proposer intends to satisfy the following areas of the Statement of Work:

- Examination
- Consultation
- Compliance with Medical Examiner Rules and Procedures
- Hours of Operations
- Security and Confidentiality Requirements
- General Fitness Requirements
- Workload

**E. Proposer's Pending Litigation and Judgments (Section A.5)**

Identify by name, case and court jurisdiction any pending litigation in which Proposer is involved, or judgments against Proposer in the past five (5) years. Provide a statement describing the size and scope of any pending or threatening litigation against the Proposer or principals of the Proposer.

#### **2.7.4 Required Forms (Section B)**

Include the following forms as provided in *Appendix A – Required Forms*.  
Complete, sign and date all forms.

*Exhibit 2 Certification of No Conflict of Interest*

*Exhibit 3 Proposer's Equal Employment Opportunity (EEO) Certification*

*Exhibit 4 Los Angeles County Community Business Enterprise (CBE) Program - Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form*  
Proposer to complete and submit with the SOQ. Attach Local SBE Certification Letter issued by Los Angeles County Office of Affirmative Action Compliance.

*Exhibit 5 Familiarity with the County Lobbyist Ordinance Certification*

*Exhibit 9 Attestation of Willingness to Consider GAIN/GROW Participants*

*Exhibit 10 County of Los Angeles Contractor Employee Jury Service Program Certification Form and Application for Exception*

*Exhibit 11 Signature Page of Master Agreement*

Proposer's submission of a signed signature page constitutes acknowledgement and acceptance of, and a willingness to comply with all terms and conditions of the Master Agreement.

*Appendix J Price Sheet*

Proposed fixed price to perform the services specified in the Agreement.

#### **2.7.5 Proof of Insurability (Section C)**

Proposer must provide proof of insurability that meets all insurance requirements set forth in the *Appendix H - Master Agreement*. If a Proposer does not currently have the required coverage, a letter from a qualified insurance carrier indicating a willingness to provide the required coverage should the Proposer be selected to receive a Master Agreement award may be submitted with the SOQ.

**2.7.6 Curriculum Vitae and Proof of Licenses (Section D)**

Provide Curriculum Vitae

Provide copies of educational and license certificates

**2.7.7 Exceptions (Section E)**

If a Proposer takes exception to any of the terms and conditions of this RFSQ or any appendix and exhibit thereto, Proposer shall describe in detail exception(s) taken and provide alternative language and impact, if any, to Proposer's price.

**2.8 SOQ Withdrawals**

The Proposer may withdraw its SOQ at any time prior to the date and time which is set forth herein as the deadline for acceptance of SOQs, upon written request to the Department.

**3.0 SOQ REVIEW/SELECTION/QUALIFICATION PROCESS**

**3.1 Review Process**

SOQs will be subject to a detailed review by qualified County staff. The review process will include the following steps:

**3.1.1 Adherence to Minimum Qualifications**

County shall review the *Proposer's Organization Questionnaire/Affidavit – Exhibit 1 of Appendix A, Required Forms*, and determine if the Proposer meets the minimum qualifications of this RFSQ.

Failure of the Proposer to comply with the minimum qualifications may eliminate its SOQ from any further consideration. The Department may elect to waive any informality in any SOQ if the sum and substance of the SOQ is present.

**Proposer's Qualifications (Section A)**

County's review shall include the following:

- A review to determine that the Proposer meets all Minimum Qualifications.
- Background and Experience as provided in Section A.2 of the SOQ.
- Proposer's References as provided in Section A.3. The review will include verification of references submitted, a review of the County's Contract Database, if applicable, reflecting past performance history on County contracts, and a review of terminated contracts.
- A review to determine that the Proposer's approach to providing neuropathology services will meet the requirements of the Statement of Work.
- A review to determine the magnitude of any pending litigation or judgments against the Proposer as provided in Section A.5.

**3.1.3 Required Forms**

All forms listed in Appendix A, except as instructed elsewhere, must be included in **Section B** of the SOQ.

**3.1.4 Proof of Insurability**

Review the proof of insurability provided in **Section C** of the SOQ.

**3.1.5 Curriculum Vitae and Proof of Licenses**

Review the proof of licenses provided in **Section D** of the SOQ.

**3.5.6 Exceptions**

Review exceptions provided in **Section E** (if any).

**3.2 Disqualification Review**

A SOQ may be disqualified from consideration because the County determined it was a non-responsive SOQ at any time during the review process. If the County determines that an SOQ is disqualified due to non-responsiveness, the County shall notify the Proposer in writing.

Upon receipt of the written determination of non-responsiveness, the Proposer may submit a written request for a Disqualification Review by the date

specified. Requests for a Disqualification Review not timely submitted will be denied.

A Disqualification Review shall only be granted under the following circumstances:

- A. The firm/person requesting a Disqualification Review is a Proposer;
- B. The request for a Disqualification Review is submitted timely; and,
- C. The request for a Disqualification Review asserts that the department's determination of disqualification due to SOQ non-responsiveness was erroneous (e.g. factual errors, etc.) and provides factual support on each ground asserted as well as copies of all documents and other material that support the assertions.

The Disqualification Review shall be completed and the department's determination shall be provided to the Proposer, in writing, prior to the conclusion of the review process.

### **3.3 Selection/Qualification Process**

The Department will select Proposers that possess a high level of experience and have demonstrated the ability to perform Neuropathology services at the standards of the Los Angeles County Chief Medical Examiner-Coroner. The Department, at its sole discretion, may offer Master Agreements to more than one Proposer.

### **3.4 Master Agreement Award**

Proposers who are notified by the Department that they appear to have the necessary qualifications and experience (i.e., they are qualified) may still not be recommended for a Master Agreement if other requirements necessary for award have not been met. Other requirements may include acceptance of the terms and conditions of the Master Agreement, and/or satisfactory documentation that required insurance will be obtained. Only when all such matters have been demonstrated to the Department's satisfaction can a Proposer, which is otherwise deemed qualified, be regarded as "selected" for recommendation of a Master Agreement.



The Department will execute Board of Supervisors-authorized Master Agreements with each selected Proposer. All Proposers will be informed of the final selections.

# ***APPENDIX A***

## ***REQUIRED FORMS***

# **APPENDIX A REQUIRED FORMS TABLE OF CONTENTS**

| <u>EXHIBITS</u>                                                                                                                                                  | <u>PAGE</u> |
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| 1 VENDOR'S ORGANIZATION QUESTIONNAIRE/AFFIDAVIT .....                                                                                                            | 1           |
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| 3 VENDOR'S EEO CERTIFICATION .....                                                                                                                               | 4           |
| 4 LA COUNTY COMMUNITY BUSINESS ENTERPRISE PROGRAM -<br>REQUEST FOR LOCAL SBE PREFERENCE PROGRAM CONSIDERATION<br>AND CBE FIRM/ORGANIZATION INFORMATION FORM..... | 5           |
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| 6 PROSPECTIVE CONTRACTOR REFERENCES .....                                                                                                                        | 7           |
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**VENDOR'S ORGANIZATION QUESTIONNAIRE/AFFIDAVIT**

Page 1 of 2

Please complete, date and sign this form and include it in Section A.2 of the SOQ. The person signing the form must be authorized to sign on behalf of the Vendor and to bind the applicant in a Master Agreement.

1. If your firm is a corporation, state its legal name (as found in your Articles of Incorporation) and State of incorporation:

|      |       |           |
|------|-------|-----------|
| Name | State | Year Inc. |
|------|-------|-----------|

2. If your firm is a partnership or a sole proprietorship, state the name of the proprietor or managing partner:

\_\_\_\_\_

3. If your firm is doing business under one or more DBA's, please list all DBA's and the County(s) of registration:

|      |                        |                 |
|------|------------------------|-----------------|
| Name | County of Registration | Year became DBA |
|      |                        |                 |
|      |                        |                 |

4. Is your firm wholly or majority owned by, or a subsidiary of, another firm? \_\_\_\_ If yes,

Name of parent firm: \_\_\_\_\_

State of incorporation or registration of parent firm: \_\_\_\_\_

5. Please list any other names your firm has done business as within the last five (5) years.

|      |                     |
|------|---------------------|
| Name | Year of Name Change |
|      |                     |
|      |                     |

6. Indicate if your firm is involved in any pending acquisition/merger, including the associated company name. If not applicable, so indicate below.

\_\_\_\_\_

\_\_\_\_\_

Proposer acknowledges and certifies that it meets and will comply with all of the Minimum Qualifications listed in Paragraph 1.3 - Minimum Qualifications, of this Request for Statement of Qualifications (RFSQ), as listed below.

Check the appropriate boxes:

- ☐ **Yes** ☐ **No** Sub-paragraph 1.3.1 Have United States citizenship or permanent resident status?
- ☐ **Yes** ☐ **No** Sub-paragraph 1.3.2 Have a valid state of California Physicians and Surgeons license?
- ☐ **Yes** ☐ **No** Sub-paragraph 1.3.3 Are you certified by the American Board of Pathology in Anatomic Pathology and Neuropathology? (note: Physicians possessing certification in Clinical and Forensic Pathology in addition to Anatomic Neuropathology are eligible.)

Applicant further acknowledges that if any false, misleading, incomplete, or deceptively unresponsive statements in connection with this SOQ are made, the SOQ may be rejected. The evaluation and determination in this area shall be at the Director's sole judgment and his judgment shall be final.

Corporation's Name:

\_\_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

e-mail address: \_\_\_\_\_ Telephone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

On behalf of \_\_\_\_\_ (Vendor's name), I \_\_\_\_\_  
(Name of Vendor's authorized representative), certify that the information contained in this Vendor's Organization Questionnaire/Affidavit is true and correct to the best of my information and belief.

Signature

Internal Revenue Service  
Employer Identification Number

Title

California Business License Number

Date

County WebVen Number

***CERTIFICATION OF NO CONFLICT OF INTEREST***

The Los Angeles County Code, Section 2.180.010, provides as follows:

**CONTRACTS PROHIBITED**

Notwithstanding any other section of this Code, the County shall not contract with, and shall reject any proposals submitted by, the persons or entities specified below, unless the Board of Supervisors finds that special circumstances exist which justify the approval of such contract:

1. Employees of the County or of public agencies for which the Board of Supervisors is the governing body;
2. Profit-making firms or businesses in which employees described in number 1 serve as officers, principals, partners, or major shareholders;
3. Persons who, within the immediately preceding 12 months, came within the provisions of number 1, and who:
  - a. Were employed in positions of substantial responsibility in the area of service to be performed by the contract; or
  - b. Participated in any way in developing the contract or its service specifications; and
4. Profit-making firms or businesses in which the former employees, described in number 3, serve as officers, principals, partners, or major shareholders.

Contracts submitted to the Board of Supervisors for approval or ratification shall be accompanied by an assurance by the submitting department, district or agency that the provisions of this section have not been violated.

---

Vendor Name

---

Vendor Official Title

---

Official's Signature

**VENDOR'S EEO CERTIFICATION**

---

Company Name

---

Address

---

Internal Revenue Service Employer Identification Number**GENERAL**

In accordance with provisions of the County Code of the County of Los Angeles, the Vendor certifies and agrees that all persons employed by such firm, its affiliates, subsidiaries, or holding companies are and will be treated equally by the firm without regard to or because of race, religion, ancestry, national origin, or sex and in compliance with all anti-discrimination laws of the United States of America and the State of California.

| CERTIFICATION                                                                                                                                                         | YES | NO  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|
| 1. Vendor has written policy statement prohibiting discrimination in all phases of employment.                                                                        | ( ) | ( ) |
| 2. Vendor periodically conducts a self-analysis or utilization analysis of its work force.                                                                            | ( ) | ( ) |
| 3. Vendor has a system for determining if its employment practices are discriminatory against protected groups.                                                       | ( ) | ( ) |
| 4. When areas are identified in employment practices, Vendor has a system for taking reasonable corrective action to include establishment of goal and/or timetables. | ( ) | ( ) |

---

Signature

---

Date

---

Name and Title of Signer (please print)

## County of Los Angeles – Community Business Enterprise Program (CBE)

Request for Local SBE Preference Program Consideration and  
CBE Firm/Organization Information Form

**INSTRUCTIONS:** All proposers/bidders responding to this solicitation must complete and return this form for proper consideration of the proposal/bid.

**I. LOCAL SMALL BUSINESS ENTERPRISE PREFERENCE PROGRAM:**

FIRM NAME: \_\_\_\_\_

- ☐ I AM NOT ☐ A Local SBE certified by the County of Los Angeles Office of Affirmative Action Compliance as of the date of this proposal/bids submission.

- ☐ I AM \_\_\_\_\_
- ☐ As an eligible Local SBE, I request this proposal/bid be considered for the Local SBE Preference.

My County (WebVen) Vendor Number : \_\_\_\_\_

**II. FIRM/ORGANIZATION INFORMATION:** The information requested below is for statistical purposes only. On final analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, religion, sex, national origin, age, sexual orientation or disability.

**Business Structure:** ☐ Sole Proprietorship ☐ Partnership ☐ Corporation ☐ Non-Profit ☐ Franchise  
☐ Other (Please Specify) \_\_\_\_\_

Total Number of Employees (including owners): \_\_\_\_\_

Race/Ethnic Composition of Firm. Please distribute the above total number of individuals into the following categories:

| Race/Ethnic Composition   | Owners/Partners/<br>Associate Partners |        | Managers |        | Staff |        |
|---------------------------|----------------------------------------|--------|----------|--------|-------|--------|
|                           | Male                                   | Female | Male     | Female | Male  | Female |
| Black/African American    |                                        |        |          |        |       |        |
| Hispanic/Latino           |                                        |        |          |        |       |        |
| Asian or Pacific Islander |                                        |        |          |        |       |        |
| American Indian           |                                        |        |          |        |       |        |
| Filipino                  |                                        |        |          |        |       |        |
| White                     |                                        |        |          |        |       |        |

**III. PERCENTAGE OF OWNERSHIP IN FIRM:** Please indicate by percentage (%) how ownership of the firm is distributed.

|       | Black/African American | Hispanic/Latino | Asian or Pacific Islander | American Indian | Filipino | White |
|-------|------------------------|-----------------|---------------------------|-----------------|----------|-------|
| Men   | %                      | %               | %                         | %               | %        | %     |
| Women | %                      | %               | %                         | %               | %        | %     |

**IV. CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES:**

*If your firm is currently certified as a minority, women, disadvantaged or disabled veteran owned business enterprise by a public agency, complete the following and attach a copy of your proof of certification. (Use back of form, if necessary.)*

| Agency Name | Minority | Women | Dis-<br>advantaged | Disabled<br>Veteran | Expiration Date |
|-------------|----------|-------|--------------------|---------------------|-----------------|
|             |          |       |                    |                     |                 |
|             |          |       |                    |                     |                 |

**V. DECLARATION:** I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.

| Print Authorized Name | Authorized Signature | Title | Date |
|-----------------------|----------------------|-------|------|
|                       |                      |       |      |



## **FAMILIARITY WITH THE COUNTY LOBBYIST ORDINANCE CERTIFICATION**

The Vendor certifies that:

- 1) it is familiar with the terms of the County of Los Angeles Lobbyist Ordinance, Los Angeles Code Chapter 2.160;
- 2) that all persons acting on behalf of the Vendor organization have and will comply with it during the proposal process; and
- 3) it is not on the County's Executive Office's List of Terminated Registered Lobbyists.

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

**PROSPECTIVE CONTRACTOR REFERENCES****Contractor's Name:** \_\_\_\_\_

List references where the same or similar scope of services were provided in order to meet the Minimum Qualifications stated in this solicitation.

|                        |                               |                       |                                     |                               |
|------------------------|-------------------------------|-----------------------|-------------------------------------|-------------------------------|
| <b>1. Name of Firm</b> | <b>Address of Firm</b>        | <b>Contact Person</b> | <b>Telephone #</b><br>(   )   (   ) | <b>Fax #</b><br>(   )   (   ) |
| Name or Contract No.   | # of Years / Term of Contract |                       | Type of Service                     | Dollar Amt.                   |
| <b>2. Name of Firm</b> | <b>Address of Firm</b>        | <b>Contact Person</b> | <b>Telephone #</b><br>(   )   (   ) | <b>Fax #</b><br>(   )   (   ) |
| Name or Contract No.   | # of Years / Term of Contract |                       | Type of Service                     | Dollar Amt.                   |
| <b>3. Name of Firm</b> | <b>Address of Firm</b>        | <b>Contact Person</b> | <b>Telephone #</b><br>(   )   (   ) | <b>Fax #</b><br>(   )   (   ) |
| Name or Contract No.   | # of Years / Term of Contract |                       | Type of Service                     | Dollar Amt.                   |
| <b>4. Name of Firm</b> | <b>Address of Firm</b>        | <b>Contact Person</b> | <b>Telephone #</b><br>(   )   (   ) | <b>Fax #</b><br>(   )   (   ) |
| Name or Contract No.   | # of Years / Term of Contract |                       | Type of Service                     | Dollar Amt.                   |
| <b>5. Name of Firm</b> | <b>Address of Firm</b>        | <b>Contact Person</b> | <b>Telephone #</b><br>(   )   (   ) | <b>Fax #</b><br>(   )   (   ) |
| Name or Contract No.   | # of Years / Term of Contract |                       | Type of Service                     | Dollar Amt.                   |

**PROSPECTIVE CONTRACTOR LIST OF CONTRACTS****Contractor's Name:** \_\_\_\_\_

List of all public entities for which the Contractor has provided service within the last two (2) years. Use additional sheets if necessary.

|                        |                               |                       |                             |                       |
|------------------------|-------------------------------|-----------------------|-----------------------------|-----------------------|
| <b>1. Name of Firm</b> | <b>Address of Firm</b>        | <b>Contact Person</b> | <b>Telephone #</b><br>(   ) | <b>Fax #</b><br>(   ) |
| Name or Contract No.   | # of Years / Term of Contract | Type of Service       | Dollar Amt.                 |                       |
| <b>2. Name of Firm</b> | <b>Address of Firm</b>        | <b>Contact Person</b> | <b>Telephone #</b><br>(   ) | <b>Fax #</b><br>(   ) |
| Name or Contract No.   | # of Years / Term of Contract | Type of Service       | Dollar Amt.                 |                       |
| <b>3. Name of Firm</b> | <b>Address of Firm</b>        | <b>Contact Person</b> | <b>Telephone #</b><br>(   ) | <b>Fax #</b><br>(   ) |
| Name or Contract No.   | # of Years / Term of Contract | Type of Service       | Dollar Amt.                 |                       |
| <b>4. Name of Firm</b> | <b>Address of Firm</b>        | <b>Contact Person</b> | <b>Telephone #</b><br>(   ) | <b>Fax #</b><br>(   ) |
| Name or Contract No.   | # of Years / Term of Contract | Type of Service       | Dollar Amt.                 |                       |
| <b>5. Name of Firm</b> | <b>Address of Firm</b>        | <b>Contact Person</b> | <b>Telephone #</b><br>(   ) | <b>Fax #</b><br>(   ) |
| Name or Contract No.   | # of Years / Term of Contract | Type of Service       | Dollar Amt.                 |                       |

## PROSPECTIVE CONTRACTOR LIST OF TERMINATED CONTRACTS

Contractor's Name: \_\_\_\_\_

List all contracts that have been terminated with the past three (3) years.

|                                                                   |                        |                       |                                     |                               |
|-------------------------------------------------------------------|------------------------|-----------------------|-------------------------------------|-------------------------------|
| <b>1. Name of Firm</b>                                            | <b>Address of Firm</b> | <b>Contact Person</b> | <b>Telephone #</b><br>(   )   (   ) | <b>Fax #</b><br>(   )   (   ) |
| Name or Contract No.                      Reason for Termination: |                        |                       |                                     |                               |
| <b>2. Name of Firm</b>                                            | <b>Address of Firm</b> | <b>Contact Person</b> | <b>Telephone #</b><br>(   )   (   ) | <b>Fax #</b><br>(   )   (   ) |
| Name or Contract No.                      Reason for Termination: |                        |                       |                                     |                               |
| <b>3. Name of Firm</b>                                            | <b>Address of Firm</b> | <b>Contact Person</b> | <b>Telephone #</b><br>(   )   (   ) | <b>Fax #</b><br>(   )   (   ) |
| Name or Contract No.                      Reason for Termination: |                        |                       |                                     |                               |
| <b>4. Name of Firm</b>                                            | <b>Address of Firm</b> | <b>Contact Person</b> | <b>Telephone #</b><br>(   )   (   ) | <b>Fax #</b><br>(   )   (   ) |
| Name or Contract No.                      Reason for Termination: |                        |                       |                                     |                               |
| <b>5. Name of Firm</b>                                            | <b>Address of Firm</b> | <b>Contact Person</b> | <b>Telephone #</b><br>(   )   (   ) | <b>Fax #</b><br>(   )   (   ) |
| Name or Contract No.                      Reason for Termination: |                        |                       |                                     |                               |

## ATTESTATION OF WILLINGNESS TO CONSIDER GAIN/GROW PARTICIPANTS

As a threshold requirement for consideration for contract award, Vendor shall demonstrate a proven record for hiring GAIN/GROW participants or shall attest to a willingness to consider GAIN/GROW participants for any future employment opening if they meet the minimum qualifications for that opening. Additionally, Vendor shall attest to a willingness to provide employed GAIN/GROW participants access to the Vendor's employee mentoring program, if available, to assist these individuals in obtaining permanent employment and/or promotional opportunities.

Vendor shall complete all of the following information, sign where indicated below, and return this form with any resumes and/or fixed price bid being submitted:

A. Vendor has a proven record of hiring GAIN/GROW participants.

\_\_\_\_\_ YES (subject to verification by County) \_\_\_\_\_ NO

B. Vendor is willing to consider GAIN/GROW participants for any future employment openings if the GAIN/GROW participant meets the minimum qualifications for the opening. "Consider" means that Vendor is willing to interview qualified GAIN/GROW participants.

\_\_\_\_\_ YES \_\_\_\_\_ NO

C. Vendor is willing to provide employed GAIN/GROW participants access to its employee-mentoring program, if available.

\_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_ N/A (Program not available)

Vendor Organization: \_\_\_\_\_

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

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

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

Tel.#: \_\_\_\_\_ Fax #: \_\_\_\_\_

## COUNTY OF LOS ANGELES CONTRACTOR EMPLOYEE JURY SERVICE PROGRAM CERTIFICATION FORM AND APPLICATION FOR EXCEPTION

The County's solicitation for this Request for Statement of Qualifications is subject to the County of Los Angeles Contractor Employee Jury Service Program (Program), Los Angeles County Code, Chapter 2.203. All Vendors, whether a contractor or subcontractor, must complete this form to either certify compliance or request an exception from the Program requirements. Upon review of the submitted form, the County department will determine, in its sole discretion, whether the Vendor is excepted from the Program.

|                                  |        |           |
|----------------------------------|--------|-----------|
| Company Name:                    |        |           |
| Company Address:                 |        |           |
| City:                            | State: | Zip Code: |
| Telephone Number:                |        |           |
| Solicitation For _____ Services: |        |           |

***If you believe the Jury Service Program does not apply to your business, check the appropriate box in Part I (attach documentation to support your claim); or, complete Part II to certify compliance with the Program. Whether you complete Part I or Part II, please sign and date this form below.***

### **Part I: Jury Service Program is Not Applicable to My Business**

- ☐ My business does not meet the definition of "contractor," as defined in the Program, as it has not received an aggregate sum of \$50,000 or more in any 12-month period under one or more County contracts or subcontracts (this exception is not available if the contract itself will exceed \$50,000). I understand that the exception will be lost and I must comply with the Program if my revenues from the County exceed an aggregate sum of \$50,000 in any 12-month period.
- ☐ My business is a small business as defined in the Program. It 1) has ten or fewer employees; and, 2) has annual gross revenues in the preceding twelve months which, if added to the annual amount of this contract, are \$500,000 or less; and, 3) is not an affiliate or subsidiary of a business dominant in its field of operation, as defined below. I understand that the exception will be lost and I must comply with the Program if the number of employees in my business and my gross annual revenues exceed the above limits.

**"Dominant in its field of operation"** means having more than ten employees and annual gross revenues in the preceding twelve months, which, if added to the annual amount of the contract awarded, exceed \$500,000.

**"Affiliate or subsidiary of a business dominant in its field of operation"** means a business which is at least 20 percent owned by a business dominant in its field of operation, or by partners, officers, directors, majority stockholders, or their equivalent, of a business dominant in that field of operation.

- ☐ My business is subject to a Collective Bargaining Agreement (attach agreement) that expressly provides that it supersedes all provisions of the Program.

**OR**

### **Part II: Certification of Compliance**

- ☐ My business has and adheres to a written policy that provides, on an annual basis, no less than five days of regular pay for actual jury service for full-time employees of the business who are also California residents, or my company will have and adhere to such a policy prior to award of the contract.

*I declare under penalty of perjury under the laws of the State of California that the information stated above is true and correct.*

|             |        |
|-------------|--------|
| Print Name: | Title: |
| Signature:  | Date:  |

**AUTHORIZATION OF MASTER AGREEMENT FOR  
AS-NEEDED NEUROPATHOLOGY SERVICES**

**IN WITNESS WHEREOF**, the Board of Supervisors of the County of Los Angeles has caused this Agreement to be subscribed by the Director, Department of Coroner and Chief Medical Examiner-Coroner, and Contractor has caused this Agreement to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

**COUNTY OF LOS ANGELES**

By \_\_\_\_\_  
**Lakshmanan Sathyavagiswaran, M.D.**  
**Chief Medical Examiner-Coroner**

By \_\_\_\_\_  
**Anthony T. Hernandez**  
**Director, Department of Coroner**

**CONTRACTOR**

By \_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Title**

**APPROVED AS TO FORM:**

**RAYMOND G. FORTNER, Jr.**  
**COUNTY COUNSEL**

By \_\_\_\_\_  
**Senior Deputy County Counsel**

## TRANSMITTAL FORM TO REQUEST A RFSQ SOLICITATION REQUIREMENTS REVIEW

***A Solicitation Requirements Review must be received by the County  
within 10 business days of issuance of the solicitation document***

|                |                  |
|----------------|------------------|
| Vendor Name:   | Date of Request: |
| Project Title: | Project No.      |

A **Solicitation Requirements Review** is being requested because the Vendor asserts that they are being unfairly disadvantaged for the following reason(s): *(check all that apply)*

- ☐ Application of **Minimum Requirements**
- ☐ Application of **Business Requirements**
- ☐ Due to **unclear instructions**, the process may result in the County not receiving the best possible responses

I understand that this request must be received by the County within **10 business days** of issuance of the solicitation document.

For each area contested, Vendor must explain in detail the factual reasons for the requested review.  
*(Attach additional pages and supporting documentation as necessary.)*

Request submitted by:

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Title)

### For County use only

Date Transmittal Received by County: \_\_\_\_\_ Date Solicitation Released: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Results of Review - Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date Response sent to Vendor: \_\_\_\_\_



## **COUNTY OF LOS ANGELES**

### **POLICY ON DOING BUSINESS WITH SMALL BUSINESS**

Forty-two percent of businesses in Los Angeles County have five or fewer employees. Only about four percent of businesses in the area exceed 100 employees. According to the Los Angeles Times and local economists, it is not large corporations, but these small companies that are generating new jobs and helping move Los Angeles County out of its worst recession in decades.

#### ***WE RECOGNIZE. . . .***

##### ***The importance of small business to the County. . .***

- in fueling local economic growth
- providing new jobs
- creating new local tax revenues
- offering new entrepreneurial opportunity to those historically under-represented in business

##### ***The County can play a positive role in helping small business grow. . .***

- as a multi-billion dollar purchaser of goods and services
- as a broker of intergovernmental cooperation among numerous local jurisdictions
- by greater outreach in providing information and training
- by simplifying the bid/proposal process
- by maintaining selection criteria which are fair to all
- by streamlining the payment process

#### ***WE THEREFORE SHALL:***

1. Constantly seek to streamline and simplify our processes for selecting our vendors and for conducting business with them.
2. Maintain a strong outreach program, fully-coordinated among our departments and districts, as well as other participating governments to: a) inform and assist the local business community in competing to provide goods and services; b) provide for ongoing dialogue with and involvement by the business community in implementing this policy.
3. Continually review and revise how we package and advertise solicitations, evaluate and select prospective vendors, address subcontracting and conduct business with our vendors, in order to: a) expand opportunity for small business to compete for our business; and b) to further opportunities for all businesses to compete regardless of size.
4. Insure that staff who manage and carry out the business of purchasing goods and services are well trained, capable and highly motivated to carry out the letter and spirit of this policy.

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**2.203.010 Findings.**

The board of supervisors makes the following findings. The county of Los Angeles allows its permanent, full-time employees unlimited jury service at their regular pay. Unfortunately, many businesses do not offer or are reducing or even eliminating compensation to employees who serve on juries. This creates a potential financial hardship for employees who do not receive their pay when called to jury service, and those employees often seek to be excused from having to serve. Although changes in the court rules make it more difficult to excuse a potential juror on grounds of financial hardship, potential jurors continue to be excused on this basis, especially from longer trials. This reduces the number of potential jurors and increases the burden on those employers, such as the county of Los Angeles, who pay their permanent, full-time employees while on juror duty. For these reasons, the county of Los Angeles has determined that it is appropriate to require that the businesses with which the county contracts possess reasonable jury service policies. (Ord. 2002-0015 § 1 (part), 2002)

**2.203.020 Definitions.**

The following definitions shall be applicable to this chapter:

- A. "Contractor" means a person, partnership, corporation or other entity which has a contract with the county or a subcontract with a county contractor and has received or will receive an aggregate sum of \$50,000 or more in any 12-month period under one or more such contracts or subcontracts.
- B. "Employee" means any California resident who is a full-time employee of a contractor under the laws of California.
- C. "Contract" means any agreement to provide goods to, or perform services for or on behalf of, the county but does not include:
  - 1. A contract where the board finds that special circumstances exist that justify a waiver of the requirements of this chapter; or
  - 2. A contract where federal or state law or a condition of a federal or state program mandates the use of a particular contractor; or
  - 3. A purchase made through a state or federal contract; or
  - 4. A monopoly purchase that is exclusive and proprietary to a specific manufacturer, distributor, or reseller, and must match and inter-member with existing supplies, equipment or systems maintained by the county pursuant to the Los Angeles County Purchasing Policy and Procedures Manual, Section P-3700 or a successor provision; or
  - 5. A revolving fund (petty cash) purchase pursuant to the Los Angeles County Fiscal Manual, Section 4.4.0 or a successor provision; or
  - 6. A purchase card purchase pursuant to the Los Angeles County Purchasing Policy and Procedures Manual, Section P-2810 or a successor provision; or
  - 7. A non-agreement purchase with a value of less than \$5,000 pursuant to the Los Angeles County Purchasing Policy and Procedures Manual, Section A-0300 or a successor provision; or
  - 8. A bona fide emergency purchase pursuant to the Los Angeles County Purchasing Policy and Procedures Manual, Section PP-1100 or a successor provision.

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- D. "Full time" means 40 hours or more worked per week, or a lesser number of hours if:
1. The lesser number is a recognized industry standard as determined by the chief administrative officer, or
  2. The contractor has a long-standing practice that defines the lesser number of hours as full time.
- E. "County" means the county of Los Angeles or any public entities for which the board of supervisors is the governing body. (Ord. 2002-0040 § 1, 2002; Ord. 2002-0015 § 1 (part), 2002)

**2.203.030 Applicability.**

This chapter shall apply to contractors who enter into contracts that commence after July 11, 2002. This chapter shall also apply to contractors with existing contracts which are extended into option years that commence after July 11, 2002. Contracts that commence after May 28, 2002, but before July 11, 2002, shall be subject to the provisions of this chapter only if the solicitations for such contracts stated that the chapter would be applicable. (Ord. 2002-0040 § 2, 2002; Ord. 2002-0015 § 1 (part), 2002)

**2.203.040 Contractor Jury Service Policy.**

A contractor shall have and adhere to a written policy that provides that its employees shall receive from the contractor, on an annual basis, no less than five days of regular pay for actual jury service. The policy may provide that employees deposit any fees received for such jury service with the contractor or that the contractor deduct from the employees' regular pay the fees received for jury service. (Ord. 2002-0015 § 1 (part), 2002)

**2.203.050 Other Provisions.**

- A. Administration. The chief administrative officer shall be responsible for the administration of this chapter. The chief administrative officer may, with the advice of county counsel, issue interpretations of the provisions of this chapter and shall issue written instructions on the implementation and ongoing administration of this chapter. Such instructions may provide for the delegation of functions to other county departments.
- B. Compliance Certification. At the time of seeking a contract, a contractor shall certify to the county that it has and adheres to a policy consistent with this chapter or will have and adhere to such a policy prior to award of the contract. (Ord. 2002-0015 § 1 (part), 2002)

**2.203.060 Enforcement and Remedies.**

For a contractor's violation of any provision of this chapter, the county department head responsible for administering the contract may do one or more of the following:

1. Recommend to the board of supervisors the termination of the contract; and/or,
2. Pursuant to chapter 2.202, seek the debarment of the contractor. (Ord. 2002-0015 § 1 (part), 2002)

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**2.203.070. Exceptions.**

- A. Other Laws. This chapter shall not be interpreted or applied to any contractor or to any employee in a manner inconsistent with the laws of the United States or California.
- B. Collective Bargaining Agreements. This chapter shall be superseded by a collective bargaining agreement that expressly so provides.
- C. Small Business. This chapter shall not be applied to any contractor that meets all of the following:
  - 1. Has ten or fewer employees during the contract period; and,
  - 2. Has annual gross revenues in the preceding twelve months which, if added to the annual amount of the contract awarded, are less than \$500,000; and,
  - 3. Is not an affiliate or subsidiary of a business dominant in its field of operation.

"Dominant in its field of operation" means having more than ten employees and annual gross revenues in the preceding twelve months which, if added to the annual amount of the contract awarded, exceed \$500,000.

"Affiliate or subsidiary of a business dominant in its field of operation" means a business which is at least 20 percent owned by a business dominant in its field of operation, or by partners, officers, directors, majority stockholders, or their equivalent, of a business dominant in that field of operation. (Ord. 2002-0015 § 1 (part), 2002)

**2.203.090. Severability.**

If any provision of this chapter is found invalid by a court of competent jurisdiction, the remaining provisions shall remain in full force and effect. (Ord. 2002-0015 § 1 (part), 2002)

## LISTING OF CONTRACTORS DEBARRED IN LOS ANGELES COUNTY

## Listing of Contractors Debarred in Los Angeles County

Vendor Name: ADVANCED BUILDING MAINTENANCE  
Alias:  
Debarment Start Date: 6/14/2005 Debarment End Date: 6/13/2008  
Principal Owners and/or  
Affiliates: Michael Sullivan Erlinda Sullivan

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Vendor Name: G COAST CONSTRUCTION INC.  
Alias:  
Debarment Start Date: 9/11/2007 Debarment End Date: 9/10/2012  
Principal Owners and/or  
Affiliates: Ezra Levi

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Vendor Name: INSPECTION ENGINEERING CONSTR  
Alias: Inspection Engineering Construction  
Debarment Start Date: 6/13/2006 Debarment End Date: 6/12/2016  
Principal Owners and/or  
Affiliates: Jamal Deaifi

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Vendor Name: MTS Advanced Corp.  
Alias:  
Debarment Start Date: 2/8/2005 Debarment End Date: 2/7/2008  
Principal Owners and/or  
Affiliates: Emir Khan / Zulaine Hernandez

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Department of the Treasury  
Internal Revenue Service

## Notice 1015

(Rev. December 2004)

### Have You Told Your Employees About the Earned Income Credit (EIC)?

#### What Is the EIC?

The EIC is a refundable tax credit for certain workers.

**What's New.** Workers cannot claim the EIC if their 2004 investment income (such as interest and dividends) is over \$2,650.

#### Which Employees Must I Notify About the EIC?

You must notify each employee who worked for you at any time during the year and from whom you did not withhold income tax. However, you do not have to notify any employee who claimed exemption from withholding on Form W-4, Employee's Withholding Allowance Certificate.

**Note.** You are encouraged to notify each employee whose wages for 2004 are less than \$35,458 that he or she may be eligible for the EIC.

#### How and When Must I Notify My Employees?

You must give the employee one of the following:

- The IRS Form W-2, Wage and Tax Statement, which has the required information about the EIC on the back of Copy B.
- A substitute Form W-2 with the same EIC information on the back of the employee's copy that is on Copy B of the IRS Form W-2.
- Notice 797, Possible Federal Tax Refund Due to the Earned Income Credit (EIC).
- Your written statement with the same wording as Notice 797.

If you are required to give Form W-2 and do so on time, no further notice is necessary if the Form W-2 has the required information about the EIC on the back of the employee's copy. If a substitute Form W-2 is given on time but does not have the required information, you must notify the employee within 1 week of the date the substitute Form W-2 is given. If Form W-2 is required but is not given on time, you must give the employee Notice 797 or your written statement by the date Form W-2 is required to be given. If Form W-2 is not required, you must notify the employee by February 7, 2005.

You must hand the notice directly to the employee or send it by First-Class Mail to the employee's last known address. You will not meet the notification requirements by posting Notice 797 on an employee bulletin board or sending it through office mail. However, you may want to post the notice to help inform all employees of the EIC. You can get copies of the notice by calling 1-800-829-3676, or from the IRS website at [www.irs.gov](http://www.irs.gov).

#### How Will My Employees Know If They Can Claim the EIC?

The basic requirements are covered in Notice 797. For more detailed information, the employee needs to see the 2004 instructions for Form 1040, 1040A, 1040EZ, or Pub. 596, Earned Income Credit (EIC).

#### How Do My Employees Claim the EIC?

Eligible employees claim the EIC on their 2004 tax return. Even employees who have no tax withheld from their pay or owe no tax can claim the EIC and get a refund, but they must file a tax return to do so. For example, if an employee has no tax withheld in 2004 and owes no tax but is eligible for a credit of \$791, he or she must file a 2004 tax return to get the \$791 refund.

#### How Do My Employees Get Advance EIC Payments?

Eligible employees who expect to have a qualifying child for 2005 can get part of the credit with their pay during the year by giving you a completed Form W-5, Earned Income Credit Advance Payment Certificate. You must include advance EIC payments with wages paid to these employees, but the payments are not wages and are not subject to payroll taxes. Generally, the payments are made from withheld income, social security, and Medicare taxes. For details, see Pub. 15 (Circular E), Employer's Tax Guide.

**Notice 1015**

(Rev. 12-2004)

# **SAFELY SURRENDERED BABY LAW**

# **No shame. No blame. No names.**

**Newborns can be safely given up  
at any Los Angeles County  
hospital emergency room or fire station.**



**In Los Angeles County:  
1-877-BABY SAFE  
1-877-222-9723  
[www.babysafela.org](http://www.babysafela.org)**



**State of California**  
Gray Davis, Governor

**Health and Human Services Agency**  
Grantland Johnson, Secretary

**Department of Social Services**  
Rita Saenz, Director



**Los Angeles County Board of Supervisors**

Gloria Molina, Supervisor, First District

Yvonne Brathwaite Burke, Supervisor, Second District

Zev Yaroslavsky, Supervisor, Third District

Don Knabe, Supervisor, Fourth District

Michael D. Antonovich, Supervisor, Fifth District

This initiative is also supported by First 5 LA and INFO LINE of Los Angeles.



**What is the Safely Surrendered Baby Law?**

California's Safely Surrendered Baby Law allows parents to give up their baby confidentially. As long as the baby has not been abused or neglected, parents may give up their newborn without fear of arrest or prosecution.

**How does it work?**

A distressed parent who is unable or unwilling to care for a baby can legally, confidentially and safely give up a baby within three days of birth. The baby must be handed to an employee at a Los Angeles County emergency room or fire station. As long as the child shows no signs of abuse or neglect, no name or other information is required. In case the parent changes his or her mind at a later date and wants the baby back, workers will use bracelets to help connect them to each other. One bracelet will be placed on the baby, and a matching bracelet will be given to the parent.

**What if a parent wants the baby back?**

Parents who change their minds can begin the process of reclaiming their newborns within 14 days. These parents should call the Los Angeles County Department of Children and Family Services at 1-800-540-4000.

**Can only a parent bring in the baby?**

In most cases, a parent will bring in the baby. The law allows other people to bring in the baby if they have legal custody.

**Does the parent have to call before bringing in the baby?**

No. A parent can bring in a baby anytime, 24 hours a day, 7 days a week so long as the parent gives the baby to someone who works at the hospital or fire station.

**Does a parent have to tell anything to the people taking the baby?**

No. However, hospital personnel will ask the parent to fill out a questionnaire designed to gather important medical history information, which is very useful in caring for the child. Although encouraged, filling out the questionnaire is not required.

**What happens to the baby?**

The baby will be examined and given medical treatment, if needed. Then the baby will be placed in a pre-adoptive home.

**What happens to the parent?**

Once the parent(s) has safely turned over the baby, they are free to go.

**Why is California doing this?**

The purpose of the Safely Surrendered Baby Law is to protect babies from being abandoned by their parents and potentially being hurt or killed. You may have heard tragic stories of babies left in dumpsters or public bathrooms. The parents who committed these acts may have been under severe emotional distress. The mothers may have hidden their pregnancies, fearful of what would happen if their families found out. Because they were afraid and had nowhere to turn for help, they abandoned their infants. Abandoning a baby puts the child in extreme danger. It is also illegal. Too often, it results in the baby's death. Because of the Safely Surrendered Baby Law, this tragedy doesn't ever have to happen in California again.

**A baby's story**

At 8:30 a.m. on Thursday, July 25, 2002, a healthy newborn baby was brought to St. Bernardine Medical Center in San Bernardino under the provisions of the California Safely Surrendered Baby Law. As the law states, the baby's mother did not have to identify herself. When the baby was brought to the emergency room, he was examined by a pediatrician, who determined that the baby was healthy and doing fine. He was placed with a loving family while the adoption process was started.

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**Every baby deserves a chance for a healthy life. If someone you know is considering abandoning a newborn, let her know there are other options.**

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***It is best that women seek help to receive proper medical care and counseling while they are pregnant. But at the same time, we want to assure parents who choose not to keep their baby that they will not go to jail if they deliver their babies to safe hands in any Los Angeles County hospital ER or fire station.***

# Sin pena. Sin culpa. Sin peligro.

**Los recién nacidos pueden ser entregados  
en forma segura en la sala de emergencia de  
cualquier hospital o en un cuartel de bomberos  
del Condado de Los Angeles.**



**En el Condado de Los Angeles:**

**1-877-BABY SAFE**

**1-877-222-9723**

**[www.babysafela.org](http://www.babysafela.org)**



**Estado de California**  
Gray Davis, Gobernador

**Agencia de Salud y Servicios Humanos**  
(Health and Human Services Agency)  
Grantland Johnson, Secretario

**Departamento de Servicios Sociales**  
(Department of Social Services)  
Rita Saenz, Directora



**Consejo de Supervisores del Condado de Los Angeles**

Gloria Molina, Supervisora, Primer Distrito

Yvonne Brathwaite Burke, Supervisora, Segundo Distrito

Zev Yaroslavsky, Supervisor, Tercer Distrito

Don Knabe, Supervisor, Cuarto Distrito

Michael D. Antonovich, Supervisor, Quinto Distrito

Esta Iniciativa tambien esta apollada por First 5 LA y INFO LINE de Los Angeles.

### ¿Qué es la Ley de Entrega de Bebés Sin Peligro?

La Ley de Entrega de Bebés Sin Peligro de California permite a los padres entregar a su recién nacido confidencialmente. Siempre que el bebé no haya sufrido abuso ni negligencia, padres pueden entregar a su recién nacido sin temor a ser arrestados o procesados.

### ¿Cómo funciona?

El padre/madre con dificultades que no pueda o no quiera cuidar de su recién nacido puede entregarlo en forma legal, confidencial y segura, dentro de los tres días del nacimiento. El bebé debe ser entregado a un empleado de una sala de emergencias o de un cuartel de bomberos del Condado de Los Angeles. Siempre que el bebé no presente signos de abuso o negligencia, no será necesario suministrar nombres ni información alguna. Si el padre/madre cambia de opinión posteriormente y desea recuperar a su bebé, los trabajadores utilizarán brazaletes para poder vincularlos. El bebé llevará un brazalete y el padre/madre recibirá un brazalete igual.

### ¿Qué pasa si el padre/madre desea recuperar a su bebé?

Los padres que cambien de opinión pueden empezar el proceso de reclamar a su recién nacido dentro de los 14 días. Estos padres deberán llamar al Departamento de Servicios para Niños y Familias (Department of Children and Family Services) del Condado de Los Angeles, al 1-800-540-4000.

### ¿Sólo los padres podrán llevar al recién nacido?

En la mayoría de los casos, los padres son los que llevan al bebé. La ley permite que otras personas lleven al bebé si tienen la custodia legal del menor.

### ¿Los padres deben llamar antes de llevar al bebé?

No. El padre/madre puede llevar a su bebé en cualquier momento, las 24 horas del día, los 7 días de la semana, mientras que entregue a su bebé a un empleado del hospital o de un cuartel de bomberos.

### ¿Es necesario que el padre/madre diga algo a las personas que reciben al bebé?

No. Sin embargo, el personal del hospital le pedirá que llene un cuestionario con la finalidad de recabar antecedentes médicos importantes, que resultan de gran utilidad para los cuidados que recibirá el bebé. Es recomendado llenar este cuestionario, pero no es obligatorio hacerlo.

### ¿Qué ocurrirá con el bebé?

El bebé será examinado y, de ser necesario, recibirá tratamiento médico. Luego el bebé se entregará a un hogar preadoptivo.

### ¿Qué pasará con el padre/madre?

Una vez que los padres hayan entregado a su bebé en forma segura, serán libres de irse.

### ¿Por qué California hace esto?

La finalidad de la Ley de Entrega de Bebés Sin Peligro es proteger a los bebés del abandono por parte de sus padres y de la posibilidad de que mueran o sufran daños. Usted probablemente haya escuchado historias trágicas sobre bebés abandonados en basureros o en baños públicos. Es posible que los padres que cometieron estos actos hayan estado atravesando dificultades emocionales graves. Las madres pueden haber ocultado su embarazo, por temor a lo que pasaría si sus familias se enteraran. Abandonaron a sus recién nacidos porque tenían miedo y no tenían adónde recurrir para obtener ayuda. El abandono de un recién nacido lo pone en una situación de peligro extremo. Además es ilegal. Muy a menudo el abandono provoca la muerte del bebé. Ahora, gracias a la Ley de Entrega de Bebés Sin Peligro, esta tragedia ya no debe suceder nunca más en California.

### Historia de un bebé

A las 8:30 a.m. del jueves 25 de julio de 2002, se entregó un bebé recién nacido saludable en el St. Bernardine Medical Center en San Bernardino, en virtud de las disposiciones de la Ley de Entrega de Bebés Sin Peligro. Como lo establece la ley, la madre del bebé no se tuvo que identificar. Cuando el bebé llegó a la sala de emergencias, un pediatra lo revisó y determinó que el bebé estaba saludable y no tenía problemas. El bebé fue ubicado con una buena familia, mientras se iniciaban los trámites de adopción.

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Cada recién nacido merece una  
oportunidad de tener una vida saludable.  
Si alguien que usted conoce está pensando  
en abandonar a un recién nacido, infórmele  
qué otras opciones tiene.

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***Es mejor que las mujeres busquen ayuda para recibir atención médica y asesoramiento adecuado durante el embarazo. Pero al mismo tiempo, queremos asegurarles a los padres que optan por no quedarse con su bebé que no irán a la cárcel si dejan a sus bebés en buenas manos en cualquier sala de emergencia de un hospital o en un cuartel de bomberos del Condado de Los Angeles.***