

OPCRP

Orientation & Training

Agenda

- Welcome – Ron Rowland
- OPCRP Program Overview – Ron Rowland
- Annual Reporting – Ron Rowland
- CRP Strategic Plan – Wayne McCulty
- ODOT Update – Tim Brunney
- Certification – Mark Hollingsworth
- Quarterly Reporting – Mark Hollingsworth
- Terms & Conditions – Ron Rowland
- Contracts – Kristen Johnson
- Questions - OPCRP
- Thank you – Ron Rowland



**Questions can be submitted from the
Webcast Audience through out the
presentation by sending them via e-mail
to:**

Kristen.johnson@das.ohio.gov

OPCRP

Program Overview

Ron Rowland

Historical Journey

- **1976** – Gov. James A. Rhodes signed 4115.31 – 4115.35
- **1977** – Formation of the State Use Committee & Incorporation of Ohio Industries
- **1980** – First Roadside Rest Contract for ODOT
- **1980s & 1990s** – Program continued to grow

Ohio Revised Code

125.60 through 125.6012

&

Ohio Administrative Code

123:5-3-1 through 123:5-3-12



Purpose

Provide jobs and training opportunities
for people with disabilities



Employment Statistics

Non-institutionalized; people with disabilities (PWD); ages 21 to 64
(Cornell University, 2009)

	Prevalence of PWD	Employment of PWD	Employment of P w/o D
OHIO	12.0%	34.0%	76.5%
USA	10.4%	36.0%	76.8%

Government Ordering Office

Any state agency, including the General Assembly; The Supreme Court of Ohio; any state authority, board, bureau, commission, institution, or instrumentality of the state:

any county, township, village, school district, special purpose district, board, commission, authority, public corporation, college, university, other educational institution or any other entity supported in whole or in part by funds appropriated by the general assembly

Procurement Obligation

For ***any*** procurement need and ***prior*** to the start of a competitive selection process, Ohio's state agencies and political subdivisions are obligated to review and buy from the "***procurement list***" of products & services available from certified Community Rehabilitation Programs (CRP)

CRP Obligation

Quality Products & Services

At

A Fair Market Price

Delivered in

A Timely Manner



Certified CRPs



113 Certified Ohio CRPs

76 with DAS Contracts

260+ DAS Contracts

Cost Benefit

- A tax user becomes a tax payer of local, state and federal taxes
- Eliminates or reduces **county** entitlement liabilities including food stamps, TANF, disability assistance, etc.
- Eliminates or reduces **state** entitlement liabilities including Medicaid, subsidized housing, etc.
- Eliminates or reduces **federal** entitlement liabilities including SSDI, SSI, etc.

Cost Benefit

- Using Ohio Department of Taxation reports in CY2011 for each employed Ohioan, the combined state and local annual average tax gain is **\$3,140**
- Research by NISH reported to Congress in FY2009 that a person with a disability working for a CRP on a government contract saves government balance sheets between **\$3,067** and **\$6,918**

Some Numbers to Think About!

FY2013 Ohio Cost Benefit Analysis



Reduced Government Entitlements	\$169,367
Increased Tax Payments*	\$282,217
Total Government Savings	\$451,584
Or Per Worker Savings	\$2,182

*Does not include local or school board income tax collections.

Business Partners



OPCRP
(Administration)

CRPs
(Vendors)

Government Buyers
(Customers)*

**A state agency, board, commission, institution; a county, township, village or school district; a special purpose district, board, commission or authority; a college, university or other educational institution; or any other entity supported in whole or in part by funds appropriated by the general assembly.*

Note: A CRP may be represented by an Agent, currently there are no certified Agents

OPCRP = Administration

- Certify CRPs as qualified non-profit agencies (QNA)
- Assist government entities in navigating their obligations pursuant to **ORC 125.60-125.6012**
- Receive the agreements and process the contracts. Establish fair market price (only when an agreement cannot be reached)
- Maintain and update the “*Procurement List*” of approved products and services

Administration

- Issue waivers when appropriate
- Set competition among certified CRPs
- Resolve conflicts
- Moderate and resolve complaints
- Identify needs of state agencies and political subdivisions

Administration

- Monitor program activities
- Train
- Report



Annual Report

Ron Rowland

Annual Report

DUE

AUGUST 15TH

EACH YEAR

Annual Reporting

- Total number of individuals who worked to manufacture products or provide services to government ordering offices.
- Total number of individuals with work-limiting disabilities who worked on the contracts.
- Total number of all direct labor hours worked on the contracts.
- Total number of all direct labor hours worked by individuals with work-limiting disabilities in the manufacture of products or the provision of services to government ordering offices.

Annual Reporting Cont'd

- Total wages paid to individuals with work-limiting disabilities on total sales to all government ordering offices.
- Total number of Veterans with disabilities who worked on contracts.
- Total number of individuals with work-limiting disabilities who worked to manufacture products or provide services to government ordering offices and transitioned to competitive employment.
- Total Sales

FY2013 Data

Certified CRPs	113
Number of CRPs with Contracts	76
Total Contract Value	\$32,133,937
Persons w/ Work-Limiting Disabilities (PW-LD)	2,736
Total Direct Labor Hours by PW-LD	1,455,940
Total Wages Paid to PW-LD	\$11,780,898
Average Hourly Wage Paid	\$8.09
Number of PW-LD Who Gained Experience and Transitioned to Community Employment	389
Number of Veterans with Disabilities that were Employed	34

Strategic Plan

Wayne McCulty

CRP Strategic Plan

What is it?

Strategic Planning

Strategic planning is an [organization](#)'s process of defining its [strategy](#), or direction, and making [decisions](#) on allocating its resources to pursue this strategy.

It's a Business Plan...on Steroids!

- In order to determine the direction of the organization, it is necessary to understand its current position and the possible avenues through which it can pursue a particular course of action.
- Three questions to ask when developing a strategic plan:
 1. What do we do?
 2. For whom do we do it?
 3. How do we excel / improve?

Strategic Plan Steps

- Establish Strategic Planning Team
- Determine Core Values
- Establish a Mission Statement
- Create a Vision Statement
- Visualize where you want the organization to be in 5 years
- Analyze where the organization is today (SWOT analysis)
- What are the gaps between today and future image?
- Develop Initiatives from those gap elements
- Establish goals and objectives from the initiatives
- Prioritize the goals
- Develop a schedule to complete the goals with timelines.
- Assign goals to teams for execution and completion
- The Strategic Planning Team continues to meet quarterly to monitor and track goal progress and make any necessary adjustments
- When 5 year plan is achieved – develop another 5 year plan by starting again.

CRP Strategic Plan

- What is it?
- Who is on the Strategic Planning team?

CRP Strategic Planning Steering Committee Members

- Doug Bailey - ODMH
- Tim Brunney – ODOT
- Deborah Capuano – Greene, Inc.
- Bob Comben – VGS, Inc.
- Judy DeBevoise – Licking / Knox Goodwill
- Kristen Helling - DODD
- Wayne McCulty – ODAS
- John Mitchell – CABVI
- Ron Rowland – ODAS
- Greg Dormer - OOD

CRP Strategic Plan

Mission & Vision Statements

Mission Statement:

To enhance opportunities for people with disabilities thru the Procurement Community Rehabilitation Program enabling them to provide quality products and services that exceed customer expectations.

Vision Statement:

Utilizing the talents of people with disabilities to provide preferred customer solutions.

CRP Strategic Plan

Key Initiatives & Teams

Key Initiatives & Team Responsibility	
<u>Key Initiative</u>	<u>Responsible Team</u>
1. Increase job opportunities for People with Disabilities through the expansion of the state and local government base ~ Expand Products & Services ~ Orientations; Trade Shows; Presentations; Information/Training Sessions	DAS Team Team Lead - Ron Rowland
2. Develop CRP business acumen/capabilities so they can become a more viable business ~ Financial; Accounting; Marketing; Operational Functions of an Organization	Ohio Alliance Team Team Lead - Jay Salvage
3. Marketing (developing a campaign for) the CRP program to state customers ~ Branding; Logo; Advertising	Agency Team Team Lead - Tim Brunney (ODOT)
4. Communication within the CRP Community, to Agency Customers, and State Government ~ Gaining Government Support, as a Priority ~ Promote Program Expansion ~ Newsletter; Listserv; web-site; Communication among CRPs	CRP Team Team Lead - Judy DeBevoise

CRP Strategic Plan

- What is it?
- Who is on the Strategic Planning team?
- **How long will the process take to complete?**

CRP Strategic Plan

- The plan and initiatives are completed. Annual goals will be completed by June 30, 2014. Teams will be working on those goal assignments.
- The Strategic Planning Team will continue to meet quarterly to monitor and adjust.
- Progress reports will be published.

CRP Strategic Plan

- What is it?
- Who is on the Strategic Planning team?
- How long will the process take to complete?
- **Will a status of progress be published?**

CRP Strategic Plan

- Strategic Planning is a dynamic process.
- The Steering Committee will continue to meet periodically to monitor progress and make adjustments.
- Progress of actual to plan will be reported.

OPS Strategic Plan

- What is it?
- Who is on the Strategic Planning team?
- How long will the process take to complete?
- Will a status of progress be published?
- **Is there anything you can do during the process?**

CRP Strategic Plan

- Provide input anytime.
- Provide suggestions anytime.
- Ask questions anytime of anyone on the Steering Committee.
- Take advantage of any training, mentoring, guidance opportunities presented as a result of this plan.
- Pursue every opportunity to grow your business and improve you capabilities and performance.
- Continue to strive to be the best business you can be, and continue to improve every day.

OPS Strategic Plan

- What is it?
- Who is on the Strategic Planning team?
- How long will the process take to complete?
- Will a status of progress be published?
- Is there anything you can do during the process?
- **Questions / Concerns / Comments?**

*ODOT
UPDATE*

Tim Brunney

ODOT Facilities Contracts

Year in Review:

- All renewals completed on time
- No amendments for minimum wage
- Brought several new sites into the program
- Smoother process for renewals

Upcoming Renewals:

- 120 Site Contracts will be renewed
 - 71 will be two year contracts
 - 49 will be three year contracts
 - 10 index numbers will combine with others to reduce the overall quantity of index numbers (less administrative time for everyone)
 - 68 contracts renew 7-1-2014(DAS Deadline May 15)
 - 17 contracts renew 8-1-2014(DAS Deadline June 15)
 - 18 contracts renew 9-1-2014(DAS Deadline July 15)
 - 17 contracts renew 11-1-2014(DAS Deadline September 15)

- ODOT wants to include ALL janitorial supplies in your contract total cost
 - We will work with you to determine quantities of products we provided over the last year(s)
 - Will phase in where necessary for vendors
 - We will have data ready to go out with the renewals
- Future minimum wage increase planning
- Minimal changes to ODOT forms
 - New dates at the top
 - Added field for our facility inventory numbers
- Focus on quick return of the documents
 - Update your supply and equipment pricing now
 - If you have questions, call me right away!

Certification

Mark Hollingsworth

QNA Certification

- ❖ Nonprofit per IRS [501(c) 3]
- ❖ Registered with Ohio Secretary of State
- ❖ OSHA Compliant
- ❖ FLSA 14 (c) Special Minimum Wage Certificate (*if applicable*)

QNA Certification Cont'd

- ❖ Mission Statement Documents Organization's Purpose to Serve People with Disabilities
- ❖ Organization's Direct Labor = 75% PWD
- ❖ Other criteria

Certification Application

Application for Certification as a Qualified Non-Profit Agency

APPLICATION BY A NONPROFIT CORPORATION FOR CERTIFICATION AS A QUALIFIED NONPROFIT AGENCY FOR THE OFFICE OF PROCUREMENT FROM COMMUNITY REHABILITATION PROGRAMS PURSUANT TO SECTION 123.5-3-02 OF THE OHIO REVISED CODE AND AMPLIFIED IN SECTION 123.5-3-02 OF THE OHIO ADMINISTRATIVE CODE.

Applicant Entity Name _____

Address _____

City, State, Zip Code _____

Telephone Number: (____) (____) _____ Fax: (____) (____) _____

CEO: _____ E-Mail: _____

Primary Contact: _____ E-Mail: _____

THE ABOVE NAMED APPLICANT REQUESTS CERTIFICATION AS A QUALIFIED NONPROFIT AGENCY WITHIN THE MEANING OF SECTION 123.5-3-02 (A)(1)-(6) OF THE OHIO REVISED CODE AND AMPLIFIED IN OHIO ADMINISTRATIVE CODE 123.5-3-02. TO OBTAIN CERTIFICATION, THE APPLICANT MUST ASSURE THE OFFICE OF PROCUREMENT FROM CRPS THAT IT IS IN COMPLIANCE WITH THE FOLLOWING STATEMENTS AND WILL MAKE THIS INFORMATION AVAILABLE UPON REQUEST AS EVIDENCE OF COMPLIANCE. THE OFFICE OF PROCUREMENT FROM CRPS RETAINS THE RIGHT TO REVIEW THE AGENCY'S RECORDS TO ENSURE COMPLIANCE WITH THE STATEMENTS BELOW OR TO REQUEST ADDITIONAL INFORMATION.

Initial Certification: The applicant nonprofit corporation must submit necessary documentation for demonstration of compliance and fulfillment of requirements named in statements #1a, #2, #3, #4, & #5 below.

Renewal Certification: If the applicant nonprofit corporation has *changed its name or incorporated status* since the initial application for certification, then documentation described in statement #1-a below must be submitted. If the *applicant's name and incorporated status is unchanged* since the initial application for certification, then the documentation described in #1-b should be submitted. Documentation in fulfillment of the requirements named in statement #5 must be submitted with each renewal application.

1. Applicant has obtained and/or maintained certification from the Ohio Secretary of State as a nonprofit corporation according to Section 1702.01 to 1702.58 of the Ohio Revised Code as evidenced by:

- a) A copy of the applicant's certificate of nonprofit incorporation, or
- b) A copy of the applicant nonprofit corporation's most recent "Statement of Continued Existence".

2. A legible copy of the applicant's Letter of Determination from the U.S. Internal Revenue Service acknowledging their status as a nonprofit corporation and being tax exempt under Section 501(C)(3) of the Federal Internal Revenue Code.

3. Applications for Initial Certification must include a legible copy of each of the listed documents. Applications for Renewal Certification shall include these documents only if this information has changed since the time of initial or most recent certification.

- Articles of Incorporation
- Bylaws of the Corporation
- Constitution
- Mission Statement

4. With the notarized signature on this application, the Chief Executive Officer attests to the compliance of the nonprofit corporation to the below listed requirements:

- Applicant entity is in current and ongoing compliance with all applicable Occupational Safety and Health Administration (OSHA) Laws, Rules, Codes, and Standards promulgated by any jurisdiction of competent authority.
- Applicant entity is in current and ongoing compliance with the letter and intent of Sections 123.5-3-02 (B) 6 a. - b. - c. of the Ohio Administrative Code pertaining to the required ratio and quota of people with work limiting disabilities employed in direct labor capacities for the named applicant. Further that the applicant entity maintains such records as are necessary and appropriate to demonstrate that complete compliance.

Upon request of the Office of Procurement from CRPs, applicants shall provide evidence necessary to demonstrate their compliance with the above requirements.

5) Applications for Initial or Renewal Certification from nonprofit corporations which pay commensurate wages must include a legible copy of the most recently issued and current FLSA Section 14(c) Special Minimum Wage Certificate issued by the US DOL Wage Hour Division.

- Commensurate Wages Paid (*Attach FLSA Section 14(c)*)
- Prevailing or Minimum Wages Paid

It is expressly understood and acknowledged by the undersigned on behalf of the applicant entity that willful failure or inability to comply with all OSHA Laws, Rules, Codes, and Standards as well as with the policies, procedures and requirements of the Office of Procurement from CRPs may result in revocation of this certification in accordance with Section 123.5-3-02 (D)-(E)-(G) of the Ohio Administrative Code. The undersigned attests to the ongoing truthfulness and accuracy of the statements of fact contained herein.

(Signature - Chief Executive Officer)

(Printed Name & Title)

Sworn to before me and subscribed in my presence this ____ day of _____ 20__

(Notarial Seal)

Signature Notary Public
My Commission Expires: _____

OPCRP OFFICE:

Application / Attachments Reviewed: _____

Cert. Granted: _____ Certification Number: _____

Approved By: _____ Date: _____

Letter Sent: _____

Quarterly Reporting

Mark Hollingsworth

Quarterly Reporting

Due October 15, January 15, April 15, July 15

- Total dollar value (itemized) of purchases made by state government ordering office where the CRP was contractor of record. *Include Index Number.*
- Total dollar value (itemized) of purchases made by political subdivisions where the CRP was the contractor of record. *Include Index Number.*
- Payment for .4% (4/10 of 1%) of the sales total of the value of purchases made by political subdivision where the CRP was the contractor of record. This percentage can and does change.

Electronic Quarterly Reporting

Anticipated effective 1st Quarter
FY2015

Terms & Conditions

Ron Rowland

Contracts

Kristen Johnson

- Contract Types
- Contract Process
- How to Submit Contracts

Customer Specific Contracts

- Address the specific needs of a given **agency**
- Available to a single **agency**
- Examples: Data Entry, Janitorial Services

General Distribution Contracts (GDC's)

- Mandatory Contracts
- Contain popular items utilized by many agencies
- Available to all government ordering offices
- Examples: Batteries, Pens, Drug Screening Kits, etc.

Contracting Process

- CRP contacts agency or agency contacts a CRP
- OPCRP initiates on its own or at request of an agency
- Agency negotiates price for its specifications **without** competitive bidding
- If agreement is reached, CRP presents ***Contract Approval Form*** to agency
- *Contract Approval Form* with **Original Signatures** sent to DAS
- DAS assembles contract

Contracting Process Cont'd

- OPCRIP processes contract , it is displayed on State Procurement Website & added to the Procurement List.
- OR OPCRIP sends a contract opportunity notice to CRPs
- Interested CRPs respond to OPCRIP.
- OPCRIP coordinates a tour of the site (if applicable).
- CRPs submit proposal to government agency.
- Government agency selects CRP.
- Selected CRP works with government agency to prepare contract paperwork, etc.

What Do I Submit for New / Renewal Contracts?

- ✓ **Contract Approval Form***
- ✓ **Specifications***
- ✓ **Multi Year/Site Form***
- ✓ **Terms and Conditions***
- ✓ **Business Submission Form**
- ✓ **Insurance (Certificate of Liability)**
- ✓ **AAPV**



***What you need to send to the agency**

Documentation

*Submit Original, Signed document(s)
to OPCRP, Facsimiles will NOT
be accepted*

*Keep a Copy of All Documents for
Your Records*

Contract Approval Form

CONTRACT APPROVAL FORM

INDEX NUMBER:

SECTION A: CONTRACT INFORMATION

CONTRACT TYPE:	<input type="checkbox"/> NEW CONTRACT	<input type="checkbox"/> RENEWAL
PROCUREMENT TYPE:	<input type="checkbox"/> PRODUCT	<input type="checkbox"/> SERVICE
TYPE OF PRODUCT OR SERVICE:	<input type="text"/>	
SERVICE SITE (IF APPLICABLE):	<input type="text"/>	
SITE STREET ADDRESS:	<input type="text"/>	
CITY: <input type="text"/>	STATE: <input type="text"/>	ZIP CODE: <input type="text"/>

- **Index Number:** Renewal Contracts input index number. *(New Contracts will be assigned an Index number when received by the OPCRP Office.)*
- **Procurement Type:** Mark either Product or Service
- **Type of Product or Service:** Description of what the Product or Service is
 - Ex:
 - Janitorial Services
 - Printer / Copier Paper
- **Service Site Information:** Where the service be taking place

<input type="checkbox"/> CHECK (✓) IF CONTRACT COVERS MULTIPLE YEARS OR CONTAINS MULTIPLE ITEMS, <u>ATTACH</u> CONTRACT MULTI YEAR/ MULTI SITE FORM, AND INDICATE IN THE UOM COST AS "VARIES".	CONTRACT PERIOD:		START DATE:	END DATE:
			■ / ■ / ■	■ / ■ / ■
	CONTRACT TOTAL:		\$ ■■■■	
UNIT OF MEASURE (UOM) COST:		\$ ■■■■		
UOM & NUMBER OF INCREMENTS	<input type="checkbox"/> HOURS ■■■■	<input type="checkbox"/> WEEKS ■■■■	<input type="checkbox"/> OCCURRENCES ■■■■	
	<input type="checkbox"/> DAYS ■■■■	<input type="checkbox"/> MONTHS ■■■■	<input type="checkbox"/> OTHER: ■■■■	

- **Contract Period** - The start date and end date of the contract
- **Contract Total** - Total amount of the contract
- **Unit of Measure (UOM)** - Unit that will be used for billing purposes. (Multiple UOM or years, check mark box and put "Varies" in this line. Use the *Multi Year/ Multi Site Form*.)
- **UOM & Number of Increments** – Estimated number of UOM to be billed on your contract

SECTION B: CONTRACTOR INFORMATION			
CONTRACTOR OF RECORD:	[REDACTED]		
CONTRACTOR CONTACT:	[REDACTED]		
CONTRACTOR ADDRESS:	[REDACTED]		
CONTRACTOR PHONE:	([REDACTED]) [REDACTED] - [REDACTED]	CONTRACTOR FAX:	([REDACTED]) [REDACTED] - [REDACTED]
CONTRACTOR EMAIL:	[REDACTED]@ [REDACTED]	VENDOR NUMBER:	[REDACTED]

ALL NEW AND RENEWAL CONTRACTS ARE REQUIRED TO PROVIDE A CERTIFICATE OF LIABILITY INSURANCE AND DESIGNATING THE STATE OF OHIO AS AN ADDITIONAL INSURED AS REFERENCED IN THE *TERMS AND CONDITIONS SUPPLEMENTAL CONTRACT TERMS AND CONDITIONS S-13*.

- **Contractor of Record** – CRP Vendor that will be providing the product / service
- **Contractor Contact** – Vendor Contact for this contract
- **Contractor Address / Phone/ Fax / Email** - CRP Vendor contact information
- **Vendor Number** – This is the number that is assigned to the CRP Vendor by Ohio Shared Services (OSS) for billing invoices
- **Insurance** – Provide form Acord 25 Insurance Certificate of Liability as stated in the Terms and Conditions

SECTION C: GOVERNMENT ORDERING OFFICE INFORMATION

AGENCY, BOARD OR COMMISSION

OHIO DEPARTMENT OF TRANSPORTATION (ODOT)

POLITICAL SUBDIVISION:

UNIVERSITY:

BOARD OF EDUCATION:

OTHER:

ORDERING OFFICE:

ORDERING OFFICE CONTACT:

ORDERING OFFICE ADDRESS:

ORDERING OFFICE EMAIL: @

ORDERING OFFICE PHONE: () - FAX: () -

- **Government Ordering Office Information** - Select the type of Ordering Office
- **Ordering Office** – What is the name of the Government Ordering Office.
EX. ODOT District 2
- **Ordering Office Contact** – Who is the contact for the Agency, that the CRP Vendor has worked with

SECTION D: ACKNOWLEDGMENT

SIGNATURE INDICATES ACCEPTANCE OF OFFICE OF PROCUREMENT FROM COMMUNITY REHABILITATION PROGRAMS TERMS AND CONDITIONS (INCLUDING SPECIAL TERMS AND CONDITIONS WHERE APPLICABLE), THE PRICING, THE DURATION AND THE SPECIFICATIONS (OR SCOPE OF WORK), BUT DOES NOT COMMIT A GOVERNMENT ORDERING OFFICE TO ANY SPECIFIC PURCHASE. PLEASE REFER TO THE WEBSITE BELOW FOR THE TERMS AND CONDITIONS.

<http://das.ohio.gov/crp>

PLEASE REMEMBER TO SUBMIT THE SCOPE OF WORK OR SPECIFICATIONS OF THE CONTRACT

(SIGNATURE – QNA/CRP) DATE

(SIGNATURE – ORDERING OFFICE) DATE

(PRINTED NAME)

(PRINTED NAME)

(TITLE)

(TITLE)

- **Terms and Conditions** – Acknowledgement that both the CRP Vendor and Ordering Office agree to DAS Terms & Conditions
- **Signatures** – Original Signatures of the CRP Vendor and Government Ordering office

Business Submission Form

INDEX NUMBER:

SECTION A: CONTRACT INFORMATION

CONTRACTOR OF RECORD:

ORDERING OFFICE:

CONTRACT TYPE: NEW CONTRACT RENEWAL

PROCUREMENT TYPE: PRODUCT SERVICE

TYPE OF PRODUCT OR SERVICE:

SERVICE SITE (IF APPLICABLE):

SITE STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

- **Index Number**
- **Contract Information** – Same information that is on the Contract Approval Form

Business Submission Form Cont'd

SECTION B: PAYROLL INFORMATION

PERCENTAGE OF DIRECT LABOR BY PERSONS WITH WORK LIMITING DISABILITIES:		[] %	
WORK AVAILABLE TO PERSONS WITH WORK LIMITING DISABILITIES (IN FTEs):		[] FTEs	
DATE OF LAST PREVAILING WAGE SURVEY:	[] / [] / []	PREVAILING WAGE RATE:	\$ []
WORKERS ARE PAID:	<input type="checkbox"/> COMMENSURATE WAGE	<input type="checkbox"/> MINIMUM WAGE	<input type="checkbox"/> PREVAILING WAGE
PAYROLL TAX RATE:	[] %	FRINGE BENEFIT RATE:	[] %

- **Percentage of Direct Labor by PW-LD**
- **Work Available to PW-LD in FTEs**
- **Date of Last Prevailing Wage**
- **Prevailing Wage Rate**
- **Worker are Paid** – Check the box that applies
- **Payroll Tax Rate**
- **Fringe Benefit Rate**

Multi Year / Multi Site Form

INDEX NUMBER:

CONTRACTOR OF RECORD:	<input type="text"/>
ORDERING OFFICE:	<input type="text"/>

SITE/PRODUCT INFORMATION			
PROCUREMENT TYPE:	<input type="checkbox"/> PRODUCT	<input type="checkbox"/> SERVICE	
SERVICE SITE/PRODUCT NAME:	<input type="text"/>		
SITE ADDRESS (IF APPLICABLE):	<input type="text"/>		
PERIOD / YEAR 1			
EFFECTIVE DATES:	START DATE: <input type="text"/> / <input type="text"/> / <input type="text"/>	END DATE: <input type="text"/> / <input type="text"/> / <input type="text"/>	INCREMENTAL COST: \$ <input type="text"/>
UOM & NUMBER OF INCREMENTS:	<input type="checkbox"/> HOUR <input type="text"/>	<input type="checkbox"/> WEEK <input type="text"/>	<input type="checkbox"/> OCCURRENCE <input type="text"/>
	<input type="checkbox"/> DAY <input type="text"/>	<input type="checkbox"/> MONTH <input type="text"/>	<input type="checkbox"/> OTHER: <input type="text"/>
PERIOD / YEAR 2			
EFFECTIVE DATES:	START DATE: <input type="text"/> / <input type="text"/> / <input type="text"/>	END DATE: <input type="text"/> / <input type="text"/> / <input type="text"/>	INCREMENTAL COST: \$ <input type="text"/>
UOM & NUMBER OF INCREMENTS:	<input type="checkbox"/> HOUR <input type="text"/>	<input type="checkbox"/> WEEK <input type="text"/>	<input type="checkbox"/> OCCURRENCE <input type="text"/>
	<input type="checkbox"/> DAY <input type="text"/>	<input type="checkbox"/> MONTH <input type="text"/>	<input type="checkbox"/> OTHER: <input type="text"/>
SITE/ITEM TOTAL:	\$ <input type="text"/>		

SPECIFICATIONS / SCOPE OF WORK

The specifications are:

- a written description of the work that is provided by the government ordering office
- or a statement of work to produce a product, with product description/s
- can be a simple, comprehensive list of the work
- must include an electronic pricelist (cd) for all new / renewal contracts with multiple products

Certificate of Liability Insurance Form Acord 25

- Must comply with Section **S-13** of the Supplemental Terms & Conditions
- Certificates to include the insurance coverage
- Names the “State of Ohio” as additional insured

Affirmative Action Program Verification

Annually each contractor (CRP) with purchases of \$2,500 or more is required to file a description of the affirmative action program and a progress report on its implementation with the Equal Employment Opportunity Office (EOD) of the Department of Administrative Services.

You can file the report at:

<http://www.das.ohio.gov/Divisions/EqualOpportunity/AffirmativeActionProgramVerification/tabid/133/Default.aspx>

NEW ITEMS!

- Amendment Form
- Instructions for Contract Approval Form
- Instructions for Amendment Form



Amendment Form

INDEX NUMBER:

CONTRACT NUMBER:

Dear State Purchasing Contracts Manager:

Enter Contractor's name here (click here and press F1 for help) hereby requests the above referenced contract be amended as follows;

Type of amendment being requested:

- Update the Contractor of Record Information (provide details with this amendment form)
- Update products, pricing and/or payment terms (detailed justification for price increases and specifications included with this amendment form)
- Agreement to mutually extend an existing contract at the same prices, terms and conditions effective: through .
- Other:

Amendment Form Cont'd

Acknowledgment

Signature indicates acknowledgement that the State of Ohio Terms and Conditions (Including Special Terms and Conditions where applicable) originally agreed to under this Contract shall remain in effect until the termination or expiration of this Contract.

(SIGNATURE — QNA/CRP)

DATE

(SIGNATURE — ORDERING OFFICE)

DATE

(PRINTED NAME)

(PRINTED NAME)

(TITLE)

(TITLE)

ATTACH PROPER DOCUMENTATION

Instructions for Contract Offer



— INSTRUCTIONS —
Submitting a Community Rehabilitation Program Contract Offer

GETTING STARTED:

Thank you for your interest in submitting an offer to the State of Ohio to establish a Community Rehabilitation Program (CRP) contract. These instructions pertain to CRP Manufacturers and/or Service Providers that are submitting a new offer with the State of Ohio. Please do not proceed with submitting a Contract Approval Form if your organization has not been requested to do so by the Ohio Office of Procurement from Community Rehabilitation Programs (OPCRP).

The CRP submitting a Contract Approval Form is hereby referred to as the "Contractor."

SEE [ATTACHMENT A](#) FOR A LIST OF ALL APPLICABLE DOCUMENTS AND THEIR DESCRIPTIONS- PLEASE MAKE SURE YOU ARE USING CURRENT DOCUMENTATION AS FOUND ON THE [PROCUREMENT WEBSITE AT http://das.ohio.gov/CRP](#).

1. DOCUMENTS REQUIRED TO BE SUBMITTED BY THE CRP:

When submitting a CRP offer please include the following in the package, or submit electronically if applicable:

~~Documents 1, 7, 8 and 9, if applicable, and if needed, 11.~~

2. DOCUMENTS REQUIRED TO BE SUBMITTED BY SUBCONTRACTOR(S):

If the Contractor is assigning authorized subcontractors to their CRP contract, and the subcontractor agrees to be bound by all Terms, Conditions and pricing set forth in the CRP Contract, the following form must be completed by each authorized subcontractor, and then returned to the CRP for inclusion in the offer package:

Document 8, if applicable

3. DIRECT DEPOSIT OF EFT PAYMENTS:

If the Contractor wishes to receive payments via direct deposit (electronic funds transfer), the following form must be completed:

Document 11

HOW TO SUBMIT THE OFFER PACKAGE:

Prepare one version of each document for your CRP offer package using the appropriate Microsoft Office or text-searchable PDF format. If you are including a price list label your CD "CRP Price List" and include your company name. Include with the CD the originally signed CRP Contract Approval Form, and mail to:

Office of Procurement
Community Rehabilitation Program
Attn: Kristen Johnson
4200 Surface Road
Columbus, OH 43228-1395



— INSTRUCTIONS —
Submitting a Community Rehabilitation Program Contract Offer

ATTACHMENT A

Document#	Document Name/Description
1.	Original Signed CRP Contract Approval Form – If there is multiple years or Services please include the additional form Multi-Year/Site Form
2.	The Business Submission Form
3.	Standard Affirmation and Disclosure Form - Executive Order 2011-12K regarding services offered outside of the United States. This form is to be completed if any services are performed under this Contract and a completed form does not already exist under the Contract. Not needed for a janitorial or security service Contract.
4.	Specifications / Pricelist PDF – Specifications must accompany the offer. The CRP Contractor must include an electronic pricelist for all new and renewal offers for products unless the product line is limited in size. Any price changes on a renewal must be supported by a justification for the increase. For example, increase in minimum wage, unemployment rates, raw materials increased in market, fuel increases. Documentation must be provided to support increase.
5.	Affirmative Action Program Verification – The CRP will comply with all state and federal laws regarding equal employment opportunity, including Ohio Revised Code Section 125.111 and all related Executive Orders. The form must be filed electronically annually on the Ohio Business Gateway ("OBG") website https://ohiobusinessgateway.ohio.gov/OBG/Membership/Security.mvc/Login#MainContainer .
6.	Certificate of Liability Insurance (Acord 25) – The CRP will provide a copy of the current certificate of liability insurance that meets coverage requirements defined in section S-13 of the OPCRPs Terms and Conditions. This certificate must be provided with all new and renewal Contract documents.
7.	Registration with the Secretary of State – Do not send verification. OPCRPs will verify your organization's registration.
8.	W9 Form – If new to doing business with the State and not set up in OAKS accounting system, a W9 must be completed and sent to vendor@ohio.gov . Forms and instructions for completing these forms can be obtained from http://ohiosharedservices.ohio.gov/VendorsForms.aspx
9.	Vendor Information Form (OBM-5657) – If new to doing business with the State and not set up in OAKS accounting system, or if there is a change of address, a Vendor Information Form must be completed and sent to vendor@ohio.gov . Forms and instructions for completing these forms can be obtained from http://ohiosharedservices.ohio.gov/VendorsForms.aspx
10.	Subcontractor List – To be completed if the CRP is assigning subcontractors
11.	Authorization Agreement for Direct Deposit of EFT Payments (OBM-1234) – Do not include this form with the CRP offer package. The CRP must mail the form to Ohio Shared Services at the address indicated on the form. The form can be obtained from http://ohiosharedservices.ohio.gov/VendorsForms.aspx

Instructions for Amendment



— INSTRUCTIONS —
Submitting Contract Amendment Requests for CRP Contracts

Getting Started:

The Community Rehabilitation Program (CRP) holding a DAS Contract is the contractor when a contractor requests to amend their contract, the Contractor must submit the "Contract Amendment Form". Multiple requests may be combined under one form. The form must be signed by the person authorized to find the CRP and the Government Ordering Office.

An amendment request is required for any of the following applicable reasons:

1. Renewing (extending) an existing Contract. This does not pertain to new offers.
2. CRP (Contractors) name change, and/or changes that alters the original information on the Contract
3. CRP (Contractors) address change, and/or demographic change that alters the original information on the Contract
4. Contractor's contact information change
5. Product and/or price changes

SEE **ATTACHMENT A** FOR A LIST OF ALL APPLICABLE DOCUMENTS AND THEIR DESCRIPTIONS-PLEASE MAKE SURE YOU ARE USING CURRENT DOCUMENTATION AS FOUND ON THE [PROCUREMENT WEBSITE](#).

1. CONTRACT RENEWAL/EXTENSION OF EXISTING CONTRACT

For a Contract renewal/extension, the Contractor is responsible for compiling and submitting all of the following documents and forms associated with each request.

- A. Required from Contractor: Documents 1-6, and 8 if applicable
- B. Required from Subcontractor(s): No additional documentation is required for subcontractors already on the existing contract. If this is a new subcontractor, see Item 6 for adding subcontractors.

2. COMPANY NAME CHANGE, TAX ID CHANGE PERTAINING TO THE CONTRACTOR OR DEALER(S) LISTED

Documents 1 and 6, and 7, 8 and 10 if applicable

3. ADDRESS CHANGE OR ANY OTHER DEMOGRAPHIC CHANGES THAT ALTER THE ORIGINAL INFORMATION ON THE CONTRACT PERTAINING TO THE CONTRACTOR (EXCLUDING CONTRACTOR'S CONTACT INFORMATION CHANGE-see Item 4)

Documents 1 and 8 and 10 if applicable

4. CONTRACTOR'S CONTACT INFORMATION CHANGE

Document 1 including the changed contact information (Only CRP Signature is needed on this Amendment Request)

5. ADDING SUBCONTRACTORS TO A CONTRACT

Documents 1 and 7, if applicable

6. REMOVING SUBCONTRACTORS FROM A CONTRACT

Document 1 requesting the removal of subcontractor

7. PRODUCT AND/OR PRICE CHANGES CONSISTENT WITH THE CONTRACT TERMS & CONDITIONS

Documents 1 and 3

Mail required hard copy documents and CD (if applicable) to:

Office of Procurement
Community Rehabilitation Program
Attn: Kristen Johnson
4200 Surface Road
Columbus, OH 43228-1395



— INSTRUCTIONS —
Submitting Contract Amendment Requests for CRP Contracts

ATTACHMENT A

Document #	Document Name/Description
1.	Amendment Request Form – The Contractor shall complete and sign this document.
2.	Standard Affirmation and Disclosure Form - Executive Order 2011-12k regarding services offered outside of the United States. This form is to be completed if any services are performed under this Contract and a completed form does not already exist under the Contract. Not needed for a janitorial or security service Contract.
3.	Specifications/Pricelist PDF – Specifications must accompany the offer. The CRP Contractor must include an electronic pricelist for all new and renewal offers for products unless the product line is limited in size. Any price changes on a renewal must be supported by a justification for the increase. For example, increase in minimum wage, unemployment rates, raw materials increased in market, fuel increases. Documentation must be provided to support increase.
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5.	Certificate of Liability Insurance (Accord 25) – The CRP will provide a copy of the current certificate of liability insurance that meets coverage requirements defined in section 5-13 of the OPCR Terms and Conditions. This certificate must be provided with all new and renewal Contract documents.
6.	Registration with the Secretary of State – Do not send verification. OPCR will verify your organization's registration.
8.	W9 Form – If new to doing business with the State and not set up in OAKS accounting system, a W9 must be completed and sent to vendor@ohio.gov . Forms and instructions for completing these forms can be obtained from http://ohiosharedservices.ohio.gov/VendorsForms.aspx
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11.	Authorization Agreement for Direct Deposit of EFT Payments (OBM-1234) – Do not include this form with the CRP package. The CRP must mail the form to Ohio Shared Services at the address indicated on the form. The form can be obtained from http://ohiosharedservices.ohio.gov/VendorsForms.aspx

The Timeline

Contracts Should Be Submitted to OPCRP 45 Days Before the Contract Start Date

- OPCRP needs the documents **45 days** before the contract starts in order to process the contract prior to the implementation date.
- All documentation must be provided for the contract to avoid any delays for the implementation start date
- Government ordering offices look up contracts on the State Procurement Website and use the information to enter their purchase orders.

OPCRP Contracting Process

What We Do

- OPCRP receives and date stamps submitted contract documents and specifications.
- OPCRP reviews documents for completeness, correct pricing, original signatures and dates.
- OPCRP assigns a contract number (and index number on new business), reviews the documents, and prepares the final document for the ODAS Director's signature.
- Contract is displayed on the State Procurement Website.

<http://procure.ohio.gov>



State Procurement

for **Contractors/Vendors**

for **Government Entities**

for **State Employees**



Purchasing Marketplace Directory

Cooperative Purchasing Program

Community Rehabilitation Program

What's New

Think Ohio First Score Card

Selling to the State

Current Contracts

MBE/EDGE Contracting

Find It Fast

Procurement Contacts

Help & Reference Materials

FAQ

Forms

Web Links

Comments/Questions

Training/Tutorials

Login



The State of Ohio's Procurement Web site provides access to bid opportunities and contract award information for supplies and services from all levels of state government.

Payment Process - Invoices

- Many payments for the State of Ohio are processed through Ohio Shared Services (OSS). OSS will return invoices to any vendor who does not include a PO number on their invoice.
- Every invoice should have an invoice number. No duplicate invoice numbers.
- A Contractor CANNOT bill for anything not on the contract.
- Billing must match Unit of Measures, as noted on the contract.
- When addressing invoices, please reference the agency name and satellite location in addition to OSS.
Example: OSS/DRC-Lorain Correctional
4310 East 5th Avenue
Columbus, Ohio 43219
- Website: www.ohiosharedservices.ohio.gov

OPCRP Website

<http://das.ohio.gov/crp>

Please do not save Forms or Terms and Conditions, to your computer, refer to the website as information will be updated at least quarterly.



General Services » Procurement Services » Community Rehabilitation Programs

Community Rehabilitation Programs

About Us:

The Office of Procurement from Community Rehabilitation Programs assists state agencies and political subdivisions purchase supplies and services offered by work centers which employ people with work-limiting disabilities. For more information, please call 614.387.0065

Please use the following links for more information and updates on the State of Ohio's Community Rehabilitation Program.

- [The Program Highlights: Why, What, and How](#)
- [Certification Process](#)
- [Matching Work Centers with State Agencies - Ohio CRPs](#)
- [Matching Work Centers with Political Subdivisions](#)
- [Procurement List](#)
- [Products and Services Ideas](#)
- [Products and Services](#)
- [Forms and Procedures](#)
- [Laws, Rules and Terms](#)
- [Annual Reports](#)
- [OPCRP Facts](#)
- [Related CRP Web Links](#)
- [Training Materials](#)
- [Contact Us](#)

General Contact

Office of Procurement Services
 Gretchen Adkins
 4200 Surface Road
 Columbus, Ohio 43228
 Phone: 614.466.5090
 Fax: 614.485.1056
Das.statepurchasing@das.state.oh.us
[Driving directions](#)

Services

- [State Procurement](#)
- [Cooperative Purchasing](#)
- [Community Rehabilitation Programs](#)
- [Vendor Registration](#)
- [Procurement Opportunities](#)
- [Current Contracts](#)
- [IT Staff Augmentation](#)

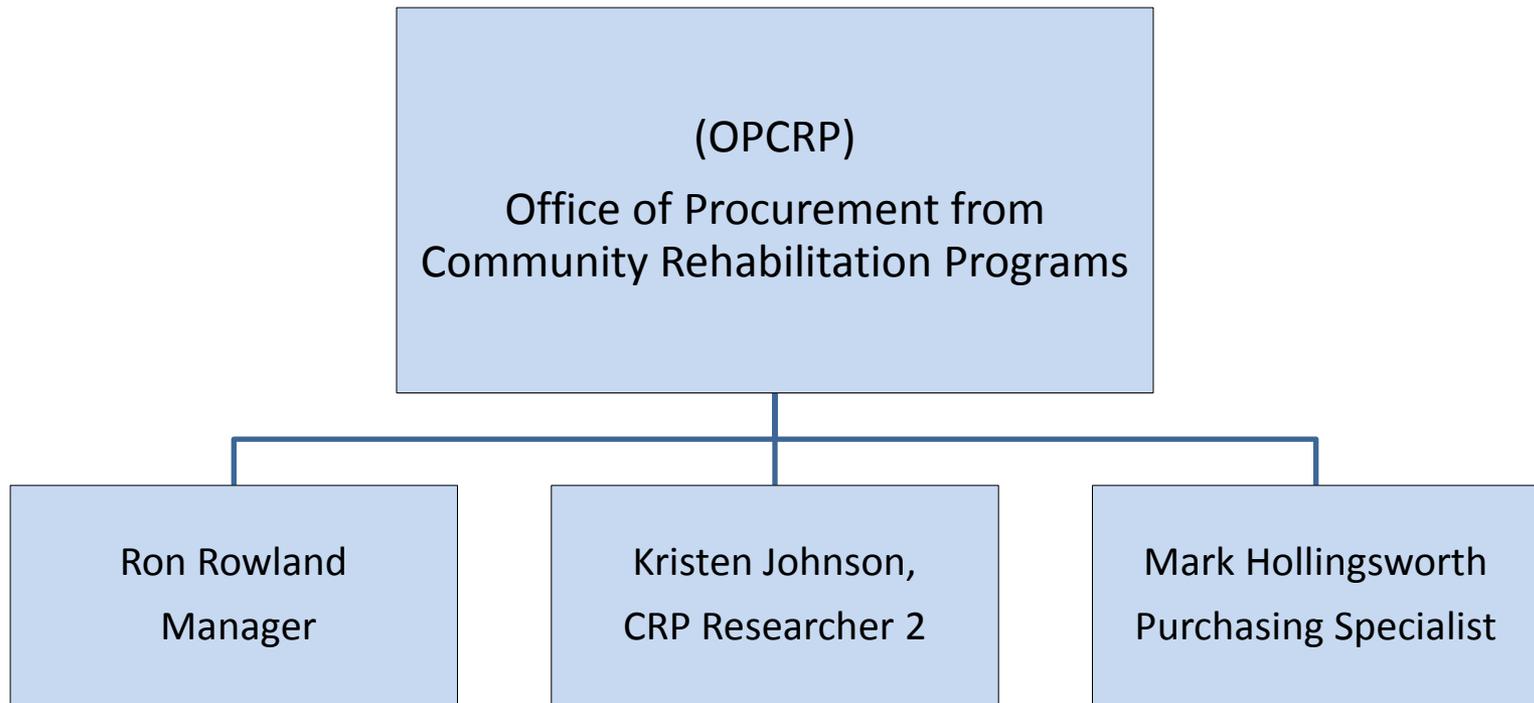
Publications

COMING SOON

QNA / CRP Vendor Map

The map will list all the Certified QNAs/CRPs in the State of Ohio and include Products and Services that are available or Potentially available.

OPCRP Staff



Questions?



E-Mailed Questions!

- Please address methods CRP's use to prove compliance with 123:5-3-02 (B)(6) in specific reference to the cumulative quota of direct labor hours performed by people with work limiting disabilities not being less than 60% of the total (off-site locations)?

E-Mailed Questions Cont'd

- Concern of privatization that has started with State contracts.

E-Mailed Questions Cont'd

- Please address the “Set-Aside” contracts for the 15% for MBE/EDGE

Questions on Today's Information

Webcast Audience:

Submit Questions to

Kristen.johnson@das.ohio.gov

Contact

Ron Rowland, Manager

614-728-0853

Kristen Johnson, CRP Researcher 2

614-387-0065

Mark Hollingsworth, CRP Purchasing Specialist

614-752-9782

Community Rehabilitation Programs

4200 Surface Road

Columbus, OH 43228

Fax: 614-485-1056

Email: DASGSD.OPCRP@das.ohio.gov

Website: <http://das.ohio.gov/CRP>