

# **Somerset County Health Department**

8928 Sign Post Road, Suite 2, Westover, Maryland 21871 443.523.1700 • Fax 410.651.5680 • TDD 1-800-735-2258

Health Officer Danielle Weber, MS, RN

# SOMERSET COUNTY HEALTH DEPARTMENT PURCHASING DIVISION 8928 SIGN POST ROAD, STE 2 WESTOVER, MARYLAND 21871

## **REQUEST FOR PROPOSAL # 2025-002**

PROJECT:	NUTRITIONIST CONSULTANT SOMERSET COUNTY, MARYLAND	
LOCATION:		
Vendor Name:		
Address:		
Telephone:	Fax:	
Signature of Authorized Re	presentative:	
Proposal Submission Deadl	ine: November 15, 2024 4:00 p.m. EST	
Submit To:	Kimberly Mason, Purchasing Agent Somerset County Health Dept. 8928 Sign Post Road Westover, MD 21871	

#### I. INTRODUCTION

The Somerset County Health Department (SCHD) is announcing a request for proposal (RFP) for an in person Nutritionist consultant to promote and implement nutritionist services in public health. The funding for this program is provided by a grant under Maryland Community Health Resources Commission, (MCHRC) and Maryland Department of Health (MDH).

#### II. BACKGROUND

The Somerset County Health Department has been awarded grant funding support from Maryland Community Health Resources Commission (MCHRC). The licensed nutritionist position will provide nutrition services to clients in a public health or community setting. Nutritionists will implement in person nutrition counseling to all participants enrolled in prevention and self management classes for educating the importance of good nutrition. The grant is focused on educating our diabetic and hypertension population and will promote SCHD HEALTH program and monitor client participation in meetings. The nutritionist will plan as well as develop healthy menus and meals specific to participants' needs.

## III. PERFORMANCE REQUIREMENTS

- A. Develops, reviews, evaluates and distributes nutrition education materials to participants enrolled in prevention and self management classes.
- B. Provides direct nutrition counseling services to health department clients on the importance of good nutrition and physical activity.
  - 1. Provide nutrition counseling individually or in group settings.
  - 1. May provide services to clients with special nutritional needs because of age, health status, socioeconomics status or other characteristics at SCHD and in the community at large.
  - 2. Concentration on educating diabetics and hypertension populations as per grant funding specifications.
  - 3. Keep applicable written participant records including: assessment, nutrition plans and advice, dietary orders and progress notes.
- C. Develops nutritional and healthy meal plans and menus for participants, meeting Dietary guidelines for Americans published by the Secretary of Health and Human Services.
  - 1. Develop a menu substitution list for specific dietary needs or restrictions for conditions such as diabetes and hypertension.
- D. HEALTH (Helping Everyone Achieve Long Term Health) will promote client involvement with prevention programs and participation in meetings at SCHD.

- E. Makes public presentations on general nutrition topics.
  - 1. May provide in service training and nutrition education materials to professionals and staff in public health.
- F. Serves as a resource person to other SCHD programs on food or nutritional matters.
- G. Establishes and maintains cooperative working relationships with employees, community groups and others interested in programs related to food and nutrition.
- H. Research information in order to keep abreast of current nutritional practices and guidelines.
- I. May need to provide or prepare reports for professional and other use.
- J. Analyze data recorded on diabetic and hypertensive participants for grant reporting.
- K. Participation in the development of client satisfaction assessments and review assessment results.

#### IV. EVALUATION OF GOALS

- A. Nutritionist knowledge, skills and abilities will be evaluated for effectiveness in meeting its intended goals and objectives. Objectives for this position:
  - 1. Knowledge of science and practice of nutrition, its relationship to health and disease and its effect on the quality of life.
  - 2. Knowledge of techniques of nutrition education and counseling
  - 3. Knowledge of health care programs and community.
  - 4. Skill in nutrition interviewing and counseling of participants
  - 5. Skill in public presentations using a variety of media.
  - 6. Ability to plan, organize and evaluate a public health nutrition service.
  - 7. Ability to evaluate the suitability and effectiveness of nutrition education materials.
  - 8. Ability to communicate effectively.
- B. Nutritionists are evaluated comparing the assigned duties and responsibilities of the position to the criteria found in the grant and monitored for acceptable services rendered throughout the contract term.
- C. Licensed Nutritionist performs duties under close supervision at times and general supervision at other times depending on the complexity of the specific duty being performed.

#### V. APPLICATION - REQUIRED COMPONENTS

Application proposals must contain the following information to be considered:

- A. Nutritionists must possess current licenses as Dietitian/Nutritionist from the Maryland State Board of Dietetic Practice, 4201 Patterson Avenue, Baltimore Maryland 21215 prior to appointment. Providing a current copy of registration and license will be required.
- B. Nutritionists shall have one year of experience providing professional nutrition or dietetic services.
- C. Nutritionists shall provide a profile letter that describes in detail how services will be provided, monitored and reported addressing each task identified in performance requirements. Detailed capacity to fulfill our needs and serve our clients and a described policy for ensuring client satisfaction with services provided.
- D. Nutritionists shall submit qualifications, relevant experience and training pertinent to the position along with their resume.
- E. Nutritionists shall provide three references relating to the provision of similar work. Include organization's or clients name, contact length, scope of services provided and telephone number of a responsible contact person.
- F. Completed and signed cover sheet.

#### VI. GRANT FUNDED POSITION:

Nutritionist position is a contractual position funded by a five year grant from (MCHRC), with optional yearly renewal. A maximum total of **§17,500** funded yearly. The annual funding is based on ten working hours per week. Contractor will be expected to sign a SCHD Contract for Consultant Services form reviewed yearly.

- A. Contractor shall not be entitled to any payment for holidays or leave, retirement or health insurance benefits, salary adjustment, workman's compensation, unemployment insurance, ect. normally associated with permanent State employment, and is responsible for any Social Security (FICA) taxes, state and federal withholding taxes and liability insurance.
- B. Contractor shall be required to submit an accurate and complete invoice to SCHD utilizing the invoice-consultant form provided: including dates and time of service rendered, number of hours, type of service, location of service. Invoices are to be submitted weekly (preferred) or no more than biweekly for reimbursement.

#### VI. TIMELINE

RFP release date: October 30, 2024

Pre-proposal meeting date: November 06, 2024 @ 10:30 AM

Join by computer: <a href="meet.google.com/irs-ybap-abv">meet.google.com/irs-ybap-abv</a>
Join by phone: (US)+1 314-282-9875 PIN: 623 109 914#

Proposal deadline: November 15, 2024
Tentative award date: November 22, 2024

#### VII. SUBMISSION OF PROPOSAL

One proposal packet bearing original signature in **blue ink** and four copies are to be submitted in a sealed envelope.

#### ON THE ENVELOPE CLEARLY IDENTIFY: "Nutritionist"

Each proposal must include the items discussed on the previous page:

- Completed proposal form.
- Attach a copy of current registrations and licenses as Dietitian/Nutritionist.
- Nutritionist profile letters include items C-E in stated order under "application required components" Number all pages and clearly note any attachments. Must be typed with 1 inch margins.
- Completed and signed cover sheet.

#### VIII. DELIVERY OF PROPOSAL

The deadline for submission of proposals is <u>by 4:00 p.m.</u> on <u>November 15, 2024</u>.

Proposals should be mailed or hand delivered to <u>Kimberly Mason at the Somerset County Health Department at 8928 Sign Post Road, Suite 2, Westover, MD 21871</u> prior to the stated deadline. **PROPOSAL RECEIVED AFTER THAT TIME WILL BE RETURNED UNOPENED.** It is the full responsibility of the contractor to ensure the proposal is received on time. No telegraphic or facsimile proposals will be accepted. The Somerset County Health Department is not responsible for failure of a public carrier to

promptly deliver proposal documents.

## IX. ADDITIONAL INSTRUCTIONS TO CONTRACTOR

## Right to Reject:

The Somerset County Health Department reserves the right to reject any and/or all proposals or waive any technicality it deems in the Agency's best interest.

## **Maryland Law Prevails:**

The provisions of this contract shall be governed by the laws of the state of Maryland.

#### **Evaluation:**

Each proposal will be evaluated utilizing the criteria outlined in the application packet.

#### **Solicitation Information:**

Issuing Officer: Danielle Weber, Health Officer

Grant Project Coordinator/Monitor: Christopher Osment

## **Questions:**

Contact Christopher Osment at Somerset County Health Department at 443-523-1700 or <a href="mailto:christopher.osment@maryland.gov">christopher.osment@maryland.gov</a>.

## **COVER SHEET**

(Please complete this page and submit with proposal)

Name of Organization	
Name of Project Director	
Mailing Address	
Physical Address (if different from above)	
Phone	
Email	
Federal Tax ID Number	
Title of Proposed Project	
Amount Requested	
How did your organization become aware of this RFP?	
Certif	ication
I certify that all the information provided in this my knowledge.	application is correct and accurate to the best of
Name and Title	
Signature	
Date	