Part IA – Technical Proposal	
RFP Title:	Food Services for Nevada State Veterans Home
RFP:	3257
Vendor Name:	Healthcare Services Group, INC.
Address:	3220 Tillman Dr. #300 Bensalem, Pa 19020
Opening Date:	July 21, 2016
Opening Time:	2:00 PM

MASTER

Healthcare SERVICES GROUP

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Vendor Information Sheet

V1	Firm Name	Healthcare Services Group, INC.

V2	Street Address	3220 Tillman Dr. #300

V3	City, State, ZIP	Bensalem, PA 19020

V4	Telephone Number		
	Area Code:	Number: (800) 363-4274	Extension:

V5	Facsimile Number		
	Area Code:	Number: (215) 639-2152	Extension:

V6	Toll Free Number		
	Area Code:	Number: (800) 363-4274	Extension:

V7	***Contact Person for Questions / Contract Negotiations, including address if different than above***
	Name: Dan Hills
	Title: Regional Director
	Address: 5199 E Pacific Hwy #402 Long Beach, CA 90804
	Email Address: DHills@hcsgcorp.com

V8	Telephone Number for Contact Person		
	Area Code:	Number: (207) 450-3829	Extension:

V9	Facsimile Number for Contact Person		
	Area Code:	Number: (866) 728-4785	Extension:

V10	***Name of Individual Authorized to Bind the Organization***	
	Name: Dan Hills	Title: Regional Director

V11	Signature ***(Individual must be legally authorized to bind the vendor per NRS 333.337)***	
	Signature:	Date:

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State Documents

Amendment Signature(s)

State of Nevada
Department of Administration
Purchasing Division
515 E. Musser Street, Suite 300
Carson City, NV 89701

Brian Sandoval
Governor

Jeffrey Haag
Administrator

SUBJECT:	Amendment 1 to Request for Proposal 3257
RFP TITLE:	Food Services for Nevada State Veterans Home
DATE OF AMENDMENT:	July 8, 2016
DATE OF RFP RELEASE:	June 8, 2016
OPENING DATE:	July 21, 2016
OPENING TIME:	2:00 PM
CONTACT:	Heather Moon, Procurement Staff Member

The following shall be a part of RFP ***3257.*** If a vendor has already returned a proposal and any of the information provided below changes that proposal, please submit the changes along with this amendment. You need not re-submit an entire proposal prior to the opening date and time.

---

1. What are the current meal services times by Dining Room, to include actual seating times?

   Please see the attached sheet titled: "Meal times for Town Hall and Units".

meal times.pdf

2. Who is responsible for recording meal intakes- Dietary or Nursing?

Nursing is responsible for recording meal intakes.

3. Can we get copies of current menus?

A copy of the current menu is attached.

NSVH Menu July 2016.pdf

4. Can we get copies of the current Snack/Nutrition list?

A copy of the current snack/nutrition list is attached.

snacks.pdf

5. Does each Dining Room have its own service equipment to include a steam-table?

The main dining room and one other unit currently have steam tables; however, we are in the process of ordering two (2) additional steam tables.

6. Are meals served on china or disposable wear?

Meals are served on china.

7. Is the current staff in a union?

No.

8. If the staff is unionized can we get a copy of the current Collective Bargaining Agreement?

No.

9. Section 3.20.6 of the RFP references internal laundry use- are there charges associated with this that are passed on to the vendor?

Our in-house laundry service cleans aprons, etc. Each employee is responsible for their own uniforms.

10. Section 3.29.9 & 10 reference keeping current employees on at the current prevailing wage- can we get a list by position of current wages?

We are unable to provide that information.

11. Are Holiday meals considered as part of the 2 required monthly specials?

Yes and there is an additional charge to the facility for $1.00 per resident for the day for special meals.

12. When was the last Joint Commission review and when are they next expected?

There is no Joint Commission survey.

13. Can we get a copy of the current food-service contract?

A copy of the current contract is attached.

Current Contract.pdf

14. What is the current volume of Snack usage?

See question #4.

NOTE:

AGENCY QUESTION:

What system will your company put into place to ensure a high quality of resident satisfaction for dining services and quality of food?

Please incorporate your response to the agency question in your RFP submittal.

ALL ELSE REMAINS THE SAME FOR RFP 3257.

Vendor must sign and return this amendment with proposal submitted.

Vendor Name: _____

Authorized Signature: _____

Title: _____ Date: _____

This document must be submitted in the "State Documents" section/tab of vendors' technical proposal.

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RFP 3257 FOOD SERVICES

AGENCY QUESTION TO VENDORS

The Nevada State Veteran's Home would like the following question answered:

What system will your company put into place to ensure a high quality of resident satisfaction for dining services and quality of food?

Please complete this question and e-mail to Heather Moon -- hmoon@admin.nv.gov at State Purchasing no later than 5:00 p.m. on June 29, 2016.

Thank you!

ANSWER:

We employ a suite of tools in order to maintain high levels of customer satisfaction. It starts with our production and preferencing software. We use a program called Meal Tracker Direct. It is a very powerful web based program where we can set the residents likes, dislikes, allergies, preferences and any other resident specific info and it will interact with the menu and ensure all meals are accurate to their desires. In addition to that we have a full complement of QA tools that are ran either with pen and paper or on a "mobile app" platform. Tools include but are not limited to: Monthly Resident Satisfaction Survey, Monthly Test Tray Audits, Monthly Sanitation Inspection, Monthly Unit Inspection and Service Line Checklist (Daily Checklist to ensure all items were prepared and at correct temps). Copies of all of the aforementioned documents will be included in the confidential technical proposal.

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ATTACHMENT A – CONFIDENTIALITY AND CERTIFICATION OF INDEMNIFICATION

Submitted proposals, which are marked "confidential" in their entirety, or those in which a significant portion of the submitted proposal is marked "confidential" **will not** be accepted by the State of Nevada. Pursuant to NRS 333.333, only specific parts of the proposal may be labeled a "trade secret" as defined in NRS 600A.030(5). All proposals are confidential until the contract is awarded; at which time, both successful and unsuccessful vendors' technical and cost proposals become public information.

In accordance with the Submittal Instructions of this RFP, vendors are requested to submit confidential information in separate binders marked "**Part I B Confidential Technical**" and "**Part III Confidential Financial**".

The State will not be responsible for any information contained within the proposal. Should vendors not comply with the labeling and packing requirements, proposals will be released as submitted. In the event a governing board acts as the final authority, there may be public discussion regarding the submitted proposals that will be in an open meeting format, the proposals will remain confidential.

By signing below, I understand it is my responsibility as the vendor to act in protection of the labeled information and agree to defend and indemnify the State of Nevada for honoring such designation. I duly realize failure to so act will constitute a complete waiver and all submitted information will become public information; additionally, failure to label any information that is released by the State shall constitute a complete waiver of any and all claims for damages caused by the release of the information.

This proposal contains Confidential Information, Trade Secrets and/or Proprietary information as defined in ***Section 2 "ACRONYMS/DEFINITIONS.***"

Please initial the appropriate response in the boxes below and provide the justification for confidential status.

Part I B – Confidential Technical Information			
YES	X	NO	
Justification for Confidential Status			
A Public Records CD has been included for the Technical and Cost Proposal			
YES	X	NO	
Part III – Confidential Financial Information			
YES	X	NO	
Justification for Confidential Status			
Contains Confidential Financial Info including Tax ID, Dun and Bradstreet, Etc.			

Healthcare Services Group, INC

Company Name

Signature

Dan Hills

Print Name

Date

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ATTACHMENT C – VENDOR CERTIFICATIONS

Vendor agrees and will comply with the following:

(1) Any and all prices that may be charged under the terms of the contract do not and will not violate any existing federal, State or municipal laws or regulations concerning discrimination and/or price fixing. The vendor agrees to indemnify, exonerate and hold the State harmless from liability for any such violation now and throughout the term of the contract.
(2) All proposed capabilities can be demonstrated by the vendor.
(3) The price(s) and amount of this proposal have been arrived at independently and without consultation, communication, agreement or disclosure with or to any other contractor, vendor or potential vendor.
(4) All proposal terms, including prices, will remain in effect for a minimum of 180 days after the proposal due date. In the case of the awarded vendor, all proposal terms, including prices, will remain in effect throughout the contract negotiation process.
(5) No attempt has been made at any time to induce any firm or person to refrain from proposing or to submit a proposal higher than this proposal, or to submit any intentionally high or noncompetitive proposal. All proposals must be made in good faith and without collusion.
(6) All conditions and provisions of this RFP are deemed to be accepted by the vendor and incorporated by reference in the proposal, except such conditions and provisions that the vendor expressly excludes in the proposal. Any exclusion must be in writing and included in the proposal at the time of submission.
(7) Each vendor must disclose any existing or potential conflict of interest relative to the performance of the contractual services resulting from this RFP. Any such relationship that might be perceived or represented as a conflict should be disclosed. By submitting a proposal in response to this RFP, vendors affirm that they have not given, nor intend to give at any time hereafter, any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant or any employee or representative of same, in connection with this procurement. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of a vendor's proposal. An award will not be made where a conflict of interest exists. The State will determine whether a conflict of interest exists and whether it may reflect negatively on the State's selection of a vendor. The State reserves the right to disqualify any vendor on the grounds of actual or apparent conflict of interest.
(8) All employees assigned to the project are authorized to work in this country.
(9) The company has a written equal opportunity policy that does not discriminate in employment practices with regard to race, color, national origin, physical condition, creed, religion, age, sex, marital status, sexual orientation, developmental disability or handicap.
(10) The company has a written policy regarding compliance for maintaining a drug-free workplace.
(11) Vendor understands and acknowledges that the representations within their proposal are material and important, and will be relied on by the State in evaluation of the proposal. Any vendor misrepresentations shall be treated as fraudulent concealment from the State of the true facts relating to the proposal.
(12) Vendor must certify that any and all subcontractors comply with Sections 7, 8, 9, and 10, above.
(13) The proposal must be signed by the individual(s) legally authorized to bind the vendor per NRS 333.337.

Healthcare Services Group, INC.

Vendor Company Name

Vendor Signature

Dan Hills

Print Name

Date

Healthcare SERVICES GROUP

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ATTACHMENT K – CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all sub awards at all tiers (including subcontracts, sub grants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

By: _____ _____

Signature of Official Authorized to Sign Application Date

For: Healthcare Services Group, INC.

Vendor Name

NV Stave Veterans Home Food Services – RFP 1996

Project Title

Healthcare SERVICES GROUP

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ATTACHMENT B – TECHNICAL PROPOSAL CERTIFICATION OF COMPLIANCE WITH TERMS AND CONDITIONS OF RFP

I have read, understand and agree to comply with the terms and conditions specified in this Request for Proposal.

YES X I agree to comply with the terms and conditions specified in this RFP.

NO _____ I do not agree to comply with the terms and conditions specified in this RFP.

In order for any exceptions and/or assumptions to be considered they **MUST** be documented in detail in the tables below. The State will not accept additional exceptions and/or assumptions if submitted after the proposal submission deadline. Vendors must be specific. Nonspecific exceptions or assumptions may not be considered. If the exception or assumption requires a change in the terms or wording of the contract, the scope of work, or any incorporated documents, vendors must provide the specific language that is being proposed in the tables below.

Healthcare Services Group, INC.

Company Name

Signature

Dan Hills

Print Name

Date

Vendors MUST use the following format. Attach additional sheets if necessary.

EXCEPTION SUMMARY FORM

EXCEPTION #	RFP SECTION NUMBER	RFP PAGE NUMBER	EXCEPTION (Complete detail regarding exceptions must be identified)
5	3.20.6.4	23	Facility will allow vendor use of copy machine and fax for any work related to operation of department.

ASSUMPTION SUMMARY FORM

ASSUMPTION #	RFP SECTION NUMBER	RFP PAGE NUMBER	ASSUMPTION (Complete detail regarding assumptions must be identified)
1	3.17.7.4	21	An orientation meeting shall be held by vendor with all non-management employees during first week of this agreement (assumption this is only all **dietary** non-management staff)
2	3.18.2	22	Vendor shall provide new employee orientation prior to the first day of work (assumption that as noted under 3.17.7.4, any time during the first week will satisfy this requirement)

3 – Scope of Work

Healthcare Services Group, INC. can meet or exceed all areas laid out within section 3 and all of its subsections regarding the scope of work. Please see the confidential technical proposal for our policies, procedures and diet manual outlining the systems we have in place to provide exceptional services and a high quality scope of work.

3.1 – Maximum number of meals:

- ***We acknowledge the maximum number of meals, current number of meals and projected number of meals based upon the census numbers provided. Additionally we understand that a different billing methodology may be applied for raw food for nutritional snacks.***

3.2 – Food Standards:

- ***We can meet and exceed all items laid out in section 3.2 and all of its subsections regarding the food quality and standards.***

3.3 – Food supplies and specifications:

- ***Utilizing our current vendor and distributor base and through effective management HCSG can meet and exceed all areas in section 3.3 and all of its subsections. We welcome and encourage inspection of inventory and supplies by NV Veterans Home representatives.***

3.4 – Menu planning:

- ***We can meet and exceed all criteria laid out in section 3.4 and all of its subsections regarding menu planning. Our menus can be tailor maid to fit any requirements and with our singular focus in the healthcare industry we are specialists in providing proper clinical and therapeutic diets.***

3.5 – Food production:

- ***We can meet and exceed all items laid out in section 3.5 and all of its subsections regarding food production.***

3.6 – Distribution:

- ***We can meet and exceed all items laid out in section 3.6 and all of its subsections regarding distribution. (please see attachment J for minor exception).***

3.7 – Quality assurance:

- ***Quality assurance is paramount to success in any kitchen, particularly in a clinical environment. Healthcare Services Group, INC only provides services to the healthcare industry and we have a comprehensive QA/PI program. Through our current programs – adapted to fit the individual specifications and nuances or the NV Veterans Home – we can meet and exceed all quality assurance measures and requirements laid forth within section 3.7 and all of its subsections.***

3.8 – Inventory:

- ***HCSG can meet and exceed all areas in section 3.3 and all of its subsections regarding inventory. We can implement all required QA measures in regards this this area and we welcome and encourage inspection of inventory and supplies by NV Veterans Home representatives.***

3.9 – State owned equipment and physical plant:

- ***We understand and acknowledge our responsibilities regarding maintenance and repair of state owned equipment and the physical plant.***

3.10 – Vendor qualifications:

- ***We far exceed all requirement laid out within section 3.10 and its subsections. Healthcare Services Group, INC has been providing dining and nutrition services to the healthcare industry – and only the healthcare industry – for over 14 years. We currently provide dining and nutritional services to over 600 Skilled nursing facilities as well as hospitals, rehab centers and LTAC Hospitals.***

3.11 – Statutory/licensure requirements:

- ***We understand and will comply with all requirements and have all certification and licenses required and laid out within section 3.11 and its subsections.***

3.12 – Status of vendor:

- ***We understand we are recognized as an independent contractor per NRS 284.173.***

3.13 – Restrictions:

- ***We understand, agree with and will abide by all restrictions listed in sections 3.13 and all of its subsections.***

3.14 – Inspections:

- ***Healthcare Services Group, INC. will comply with all regulatory and accreditation agencies and will welcome and submit to all inspections both internal and external. We understand and will comply with all items laid out within section 3.14 and its subsections.(please see attachment J for minor exception).***

3.15 – Equipment:

- ***We are aware of and can comply with all requirements regarding the equipment set forth within section 3.15 regarding equipment – including, but not limited to, service and cleaning to grease traps, refuse traps and cupboards and refrigerators. (please see attachment J for minor exception).***

3.16 – Special personnel requirements:

- ***We understand and will comply with all special personnel requirements laid out on section 3.16 and all of its subsections.***

3.17 – Personnel Requirements:

- ***Healthcare Services Group, INC. will provide more than adequate staffing, training and screening to ensure that all specifications in section 3.17 and all of its subsections are met or exceeded.***

3.18 – Staff training:

- ***We feel that staff training, like QA, is a critical aspect of running a quality, efficient and productive dietary department. HCSG has a thorough orientation AND on-going monthly in-service training program that cover all areas indicated in section 3.18 and it subsections as well as additional areas.***

3.19 – Hazardous substances and materials:

- ***We understand the importance of hazardous substance and material safety and training. We will maintain up-to-date MSDS sheets for all chemicals and materials needed in addition to providing comprehensive hazard communication training. All sills will be reported per 3.19.2.***

3.20 – Vendor responsibility:

- ***We understand and accept all responsibilities set forth in section 3.20 and its subsections. (please see attachment J for minor exception).***

3.21 – Reporting:

- ***Healthcare Services Group, INC. understands and will comply with and provide all required reporting and accounting documentation for the July 1 – June 30 fiscal year per section 3.21 and its subsections.***

3.22 – Fidelity bond:

- ***We carry adequate insurances to meet the requirements.***

3.23 – Subcontractors:

- ***We understand and will comply with all requirements regarding the use of subcontractors per section 3.23.***

3.24 – Miscellaneous conditions:

- ***We understand and will comply with a miscellaneous conditions listed in section 3.24 and all of its subsections.***

3.25 – Invoicing:

- ***We will submit invoicing utilizing the methodology set forth in section 3.25 and its subsections.***

3.26 – Nevada State Veterans Home responsibility:

- ***Healthcare Services Group, INC. acknowledges the NV State Veterans Home's responsibilities.***

3.27 – Compensation and time of payment:

- ***We accept and agree to all items within section 3.27 and it subsections in regards to compensation and time of payment.***

3.28 – Integration/amendments:

- ***We understand and will comply with all items in section 3.28 and it subsections.***

4 – Company Background and References

4.1 – Vendor Information

Question	Response
Company name:	Healthcare Services Group, INC.
Ownership (sole proprietor, partnership, etc.):	Corporation
State of incorporation:	Pennsylvania
Date of incorporation:	November 26, 1976
# of years in business:	35+
List of top officers:	Daniel McCartney, Chairman; Theodore Wahl, President and CEO, John Shea, Secretary and CFO & Mike McBryan, COO
Location of company headquarters:	Bensalem, PA
Location(s) of the company offices:	Long Beach, CA & Bensalem, PA
Location(s) of the office that will provide the services described in this RFP:	Henderson, NV; Long Beach, CA & Bensalem, PA
Number of employees locally with the expertise to support the requirements identified in this RFP:	100+
Number of employees nationally with the expertise to support the requirements in this RFP:	50,000+
Location(s) from which employees will be assigned for this project:	Boulder City, Henderson and Las Vegas, NV – Los Angeles, CA

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4.1.3 -

SECRETARY OF STATE

STATE OF NEVADA

CORPORATE QUALIFICATION

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that **HEALTHCARE SERVICES GROUP, INC.** did on **December 4, 2002** file in this office a Statement to Transact Business in this State and is now on file and of record in the office of the Nevada Secretary of State, and further, that said Corporation is at the date of this Certificate duly qualified to exercise therein all the powers recited in its Charter or Articles of Incorporation, and to transact business in the State of Nevada in accordance with the laws governing Corporations in said State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office in Carson City, Nevada, on **December 5, 2002**.

DEAN HELLER
Secretary of State

By Laurie Freeman

Certification Clerk

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STATE OF NEVADA
DEPARTMENT OF TAXATION

HEALTHCARE SERVICES GROUP INC
3220 TILLMAN DR 300
BENSALEM PA 19020

IN ACCORDANCE WITH TITLE 32 OF NEVADA REVISED STATUTES, PURSUANT TO PROPER APPLICATION DULY FILED AND PAYMENT OF APPROPRIATE PRESCRIBED FEES/SECURITY, THE ABOVE NAMED IS HEREBY GRANTED THE FOLLOWING LISTED PERMIT, LICENSE OR CERTIFICATE FOR BUSINESS ACTIVITIES CONDUCTED WITHIN THE STATE OF NEVADA.

PERMIT, CERTIFICATE OR LICENSE	REGISTRATION #	DATE OF ISSUE
BUSINESS TAX	487660500	04/01/91

The above listed permit, license and/or certificate, shall be considered valid unless cancelled, suspended or revoked for good cause, in accordance with Title 32.

This document is not transferable and IS NOT issued in lieu of any locally required business license, permit or registration.

Question	Response
Nevada Business License Number:	487660500 (See Certificates Above)
Legal Entity Name:	Healthcare Services Group, INC

Is "Legal Entity Name" the same name as vendor is doing business as?

Yes	X	No	

4.1.5

Has the vendor ever been engaged under contract by any State of Nevada agency?

Yes	X	No	

Question	Response
Name of State agency:	State of Nevada Veteran's Home
State agency contact name:	Annette Morfin
Dates when services were performed:	2012 through Present
Type of duties performed:	Housekeeping and Laundry Services
Total dollar value of the contract:	$44,804 per month. $2,150,592 for the 4 year term

4.1.6

Are you now or have you been within the last two (2) years an employee of the State of Nevada, or any of its agencies, departments, or divisions?

Yes		No	X

4.1.7

Disclosure of any significant prior or ongoing contract failures, contract breaches, civil or criminal litigation in which the vendor has been alleged to be liable or held liable in a matter involving a contract with the State of Nevada or any other governmental entity. Any pending claim or litigation occurring within the past six (6) years which may adversely affect the vendor's ability to perform or fulfill its obligations if a contract is awarded as a result of this RFP must also be disclosed.

Does any of the above apply to your company?

Yes		No	X

4.1.8

Vendors must review the insurance requirements specified in ***Attachment E, Insurance Schedule for RFP 1996.*** Does your organization currently have or will your organization be able to provide the insurance requirements as specified in ***Attachment E.***

Yes	X	No	

4.1.9

Company Background/History:

Healthcare Services Group, Inc. since its inception in 1977 has been in the forefront of providing housekeeping, laundry, linen, dining and facility maintenance and management services which improve quality and reduce costs to our market in the health care industry:

- Nursing Homes
- Rehabilitation Centers
- Assisted living
- Retirement Facilities
- Hospitals

Healthcare Services Group, Inc. has established itself as a leader in our industry providing cost-effective means of outsourcing indirect patient care services. As a result, our clients can maximize the attention paid to their direct patient care responsibilities.

Healthcare Services Group, Inc. has been able to bring a high level of professionalism to managing these ancillary services. Healthcare prides itself on creating a partnership with our clients to focus on delivering the highest quality care to the residents of the health facilities.

Healthcare Services Group, Inc. is the single largest service provider to the healthcare industry servicing over 3000 accounts nationwide in housekeeping, laundry and dining services with over 36,000 employees.

The Company is dedicated to four (4) simple business principles:

1) Service
   To provide our clients (residents, families, visitors and employees) with the best service possible with a concentration on consistency, quality control and systems operations. Our standardized operational methods are set and never compromised.

2) Professionalism
   To bring to our industry and our services the "professional" approach of business people. Our department head (Account Manager) will be professional at all times and in all aspects of the job.

3) Cost Efficiency
   To operate the department in the most cost-effective manner possible. By standardizing operations, maintaining controls and planning schedules, service to the residents will improve.

4) Growth
   To expand our operations through a satisfied client base and a strong management team developed by promoting from within.

Why is Healthcare Services Group, Inc. the best fit for Nevada State Veterans Home? Today's challenging healthcare environment demands an experienced partner who can deliver innovative service solutions while operating on a budget. Healthcare Services Group has the experience and expertise to meet these needs, making us the preferred choice of countless senior living facilities nationwide.

Our proactive approach to dining and nutrition services delivers the solutions, performance and results that you need to increase your residents' satisfaction and improve your bottom line results. Our singular focus on the healthcare sector as well as our expansive district and regional support network gives us the flexibility to meet your individual needs within the financial parameters of your operating budget.

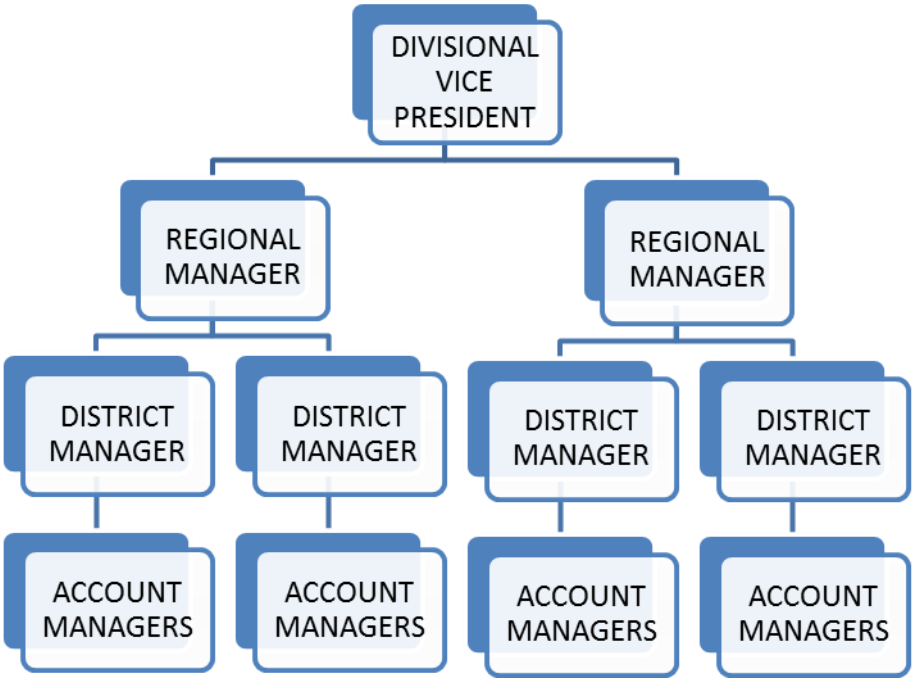
From innovative dining programs and services to extensive training and quality assurance initiatives to financial performance commitments, Healthcare Services Group keeps your residents and your facility at the center of our focus, each and every day.

This gives us the unique position of being the specialists at all aspects of dining and nutrition services in the healthcare environment including, but not limited to: Infection control, resident rights, CMS regulations, state BLQC surveys, Joint Commission, etc…

We pride ourselves at being the best in the industry at what we do and doing it at the best price; thus allowing the facility to focus their energies on patient care, quality of life, driving census and patient mix, and dealing with the myriad other items that arise on a daily basis while not having to worry about the dining, nutrition and food quality.

The biggest way we are able to maintain these high standards day in and day out is through the strength of our management team. All management in our organization has started from the ground up, beginning their careers running a dietary operation at a healthcare center. This equates into a team of managers, from on-site supervisors to Divisional Vice Presidents, who have significant hands-on healthcare dining and nutrition management experience.

In addition to the ground-up approach we have a structure that provides us the ability to support the healthcare centers and drive the systems and quality control measures essential to maintaining an program fit for the resident population. See a truncated version of our management structure below:



4.1.9

Healthcare Services Group, INC has been providing Dining and nutrition services to both the public and private sectors for over 20 years.

4.1.10

Please See: Part III – Confidential Financial Information.

4.2 Sub-Contractor Information:

4.2.1

Does this proposal include the use of subcontractors? Check the appropriate response in the table below.

Yes		No	X

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4.3 Business References

Reference #:	1		
Company Name:	Healthcare Services Group, INC		
Identify role company will have for this RFP project (Check appropriate role below):			
X	***VENDOR***		***SUBCONTRACTOR***
Project Name:	Mountain View Care Center		
Primary Contact Information			
Name:		Mark McBride	
Street Address:		601 Adams Boulevard	
City, State, Zip		Boulder City, NV 89005	
Phone, including area code:		(702) 293-5151	
Facsimile, including area code:		(702) 293-5782	
Email address:		Mark.Mcbride@pcitexas.net	
Alternate Contact Information			
Name:			
Street Address:			
City, State, Zip			
Phone, including area code:			
Facsimile, including area code:			
Email address:			
Project Information			
Brief description of the project/contract and description of services performed, including technical environment (i.e., software applications, data communications, etc.) if applicable:		Dining and Nutrition services for an 86 bed long term care Skilled Nursing Facility.	
Original Project/Contract Start Date:		1/11/2016	
Original Project/Contract End Date:		Open Ended	
Original Project/Contract Value:		$31,800 per Month	
Final Project/Contract Date:		N/A	
Was project/contract completed in time originally allotted, and if not, why not?		N/A Ongoing Contract	
Was project/contract completed within or under the original budget/ cost proposal, and if not, why not?		Yes, currently on/below budget.	

Reference #:	2		
Company Name:	Healthcare Services Group, INC		
Identify role company will have for this RFP project (Check appropriate role below):			
X	***VENDOR***		***SUBCONTRACTOR***
Project Name:	Angels Nursing		
Primary Contact Information			
Name:		Araceli Enciso	
Street Address:		415 S Union Ave.	
City, State, Zip		Los Angeles, CA 90017	
Phone, including area code:		(213) 484-0784	
Facsimile, including area code:		(213) 484-1003	
Email address:		Araceli@caravanoperations.com	
Alternate Contact Information			
Name:			
Street Address:			
City, State, Zip			
Phone, including area code:			
Facsimile, including area code:			
Email address:			
Project Information			
Brief description of the project/contract and description of services performed, including technical environment (i.e., software applications, data communications, etc.) if applicable:		Dining, Nutrition, Housekeeping and Laundry Services for a 50 bed Skilled Nursing Facility.	
Original Project/Contract Start Date:			
Original Project/Contract End Date:		Open Ended – On-going	
Original Project/Contract Value:		$27,997.00 Per Month	
Final Project/Contract Date:		N/A	
Was project/contract completed in time originally allotted, and if not, why not?		N/A Ongoing Contract	
Was project/contract completed within or under the original budget/ cost proposal, and if not, why not?		Yes, currently on/below budget.	

Reference #:	3		
Company Name:	Healthcare Services Group, INC		
Identify role company will have for this RFP project (Check appropriate role below):			
X	***VENDOR***		***SUBCONTRACTOR***
Project Name:	Alcott Rehabilitation Hospital		
Primary Contact Information			
Name:		Martin Hipschman	
Street Address:		3551 W Olympic Blvd	
City, State, Zip		Los Angeles, CA 90019	
Phone, including area code:		(323) 737-2000	
Facsimile, including area code:		(323) 737- 3234	
Email address:		Admin@Alcottrehab.com	
Alternate Contact Information			
Name:			
Street Address:			
City, State, Zip			
Phone, including area code:			
Facsimile, including area code:			
Email address:			
Project Information			
Brief description of the project/contract and description of services performed, including technical environment (i.e., software applications, data communications, etc.) if applicable:		Dining, Nutrition, Housekeeping and Laundry Services	
Original Project/Contract Start Date:			
Original Project/Contract End Date:		Open Ended – Ongoing	
Original Project/Contract Value:		$29,376.00 Per Month	
Final Project/Contract Date:		N/A	
Was project/contract completed in time originally allotted, and if not, why not?		N/A Ongoing Contract	
Was project/contract completed within or under the original budget/ cost proposal, and if not, why not?		Yes, currently on/below budget.	

Reference #:	4		
Company Name:	Healthcare Services Group, INC		
Identify role company will have for this RFP project (Check appropriate role below):			
X	***VENDOR***		***SUBCONTRACTOR***
Project Name:	HMR Veterans Homes		
Primary Contact Information			
Name:	Heyward Hilliard – Regional VP		
Street Address:	8 Justice Ln.		
City, State, Zip	Anderson, SC 29621		
Phone, including area code:	(864) 224-3898		
Facsimile, including area code:	(864) 224-3609		
Email address:	HHilliard@hmrvsi.com		
Alternate Contact Information			
Name:			
Street Address:			
City, State, Zip			
Phone, including area code:			
Facsimile, including area code:			
Email address:			
Project Information			
Brief description of the project/contract and description of services performed, including technical environment (i.e., software applications, data communications, etc.) if applicable:	Provide Dining, Nutrition, Housekeeping and Laundry Services for 7 veterans homes throughout the eastern seaboard		
Original Project/Contract Start Date:	1/1993		
Original Project/Contract End Date:	Open Ended		
Original Project/Contract Value:	$12 Million annually		
Final Project/Contract Date:	N/A		
Was project/contract completed in time originally allotted, and if not, why not?	N/A Ongoing Contract		
Was project/contract completed within or under the original budget/ cost proposal, and if not, why not?	Yes, currently on/below budget.		

Reference #:	5		
Company Name:	Healthcare Services Group, INC		
Identify role company will have for this RFP project (Check appropriate role below):			
X	***VENDOR***		***SUBCONTRACTOR***
Project Name:	Edward C. Allworth Oregon Veterans Home		
Primary Contact Information			
Name:	Kelly Odegaard		
Street Address:	600 N 5th St.		
City, State, Zip	Lebanon, OR 97355		
Phone, including area code:	(541) 497-7267		
Facsimile, including area code:	(541) 248-2001		
Email address:	Kelly.Odergaard@ovhlebanon.org		
Alternate Contact Information			
Name:			
Street Address:			
City, State, Zip			
Phone, including area code:			
Facsimile, including area code:			
Email address:			
Project Information			
Brief description of the project/contract and description of services performed, including technical environment (i.e., software applications, data communications, etc.) if applicable:	Providing Dining and Nutrition services to the Oregon State Veteran's Home.		
Original Project/Contract Start Date:	10/2015		
Original Project/Contract End Date:	Open Ended		
Original Project/Contract Value:	$1.5 Million Annually		
Final Project/Contract Date:	N/A		
Was project/contract completed in time originally allotted, and if not, why not?	N/A Ongoing Contract		
Was project/contract completed within or under the original budget/ cost proposal, and if not, why not?	Yes, currently on/below budget.		

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Proposed Staff Resumes

Company Name Submitting Proposal:	*HEALTHCARE SERVICES GROUP, INC*

Check the appropriate box as to whether the proposed individual is Prime contractor staff or subcontractor staff.

Contractor:	*X*	Subcontractor:	

The following information requested pertains to the individual being proposed for this project.

Name:	*DANIEL HILLS*		Key Personnel: (Yes/No)	*X*
Individual's Title:	*Regional Director*			
# of Years in Classification:	*5*	# of Years with Firm:		*12.5*

BRIEF SUMMARY OF PROFESSIONAL EXPERIENCE
Information should include a brief summary of the proposed individual's professional experience.

Housekeeping and Laundry management specialist with over 9 years of experience in the industry.
Started at the ground level as a Floor care Technician and moved my way up through the ranks.

RELEVANT EXPERIENCE
Information required should include: timeframe, company name, company location, position title held during the term of the contract/project and details of contract/project.

9/2011 to Present
Healthcare Services Group, INC.
Regional Director
Oversee Dining, Nutrition, Housekeeping and Laundry operations, management and staff development for 85+ Skilled Nursing Facilities, Rehab Centers and Hospitals.

5/2006 to 9/2011
Healthcare Service Group, INC.
District Manager
Oversee Housekeeping and Laundry operations, management and staff development for 10 to 25 Skilled Nursing Facilities, Rehab Centers and Hospitals.

2/2005 to 5/2006

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Healthcare Service Group, INC.
Villa Rancho Bernardo
Bob Durbin
15720 Bernardo Center Dr
Rancho Bernardo, CA 92127
(858) 672-3900
Admin.vrb@mpowercom.net

Housekeeping, Laundry and Maintenance Director
Oversee the Housekeeping, Laundry and Maintenance departments of a 298 bed 150,000+ sq ft skilled nursing facility in San Diego, CA. Including 2 separate 40+ bed secure Alzheimer's and Dementia units and large sub-acute and therapy population. Contract still in place, I was promoted to District Manager.

EDUCATION

Information required should include: institution name, city, state, Degree and/or Achievement and date completed/received.

Description	***# of Years Experience***
University of Southern Maine	4
Gorham	
Maine	
BA Political Science	
Pre Law Society and Coaching Certificate	

CERTIFICATIONS

Information required should include: type of certification and date completed/received.

Insert here any certifications proposed individual has received.

REFERENCES

A minimum of three (3) references are required, including name, title, organization, phone number, fax number and email address.

Glenn Tuttle – VP Operations Beacon Industries, (860) 416-9019, TuttleGT@aol.com
Jim Wyse – Owner Industronics Service Company, (800) 878-1551 ext. 101, JWyse@industronics.com
Joe McCartney – Manager (retired), (860) 871-6136, JMeMcc1@aol.com

Company Name Submitting Proposal:	*Healthcare Services Group, INC.*

Check the appropriate box as to whether the proposed individual is prime contractor staff or subcontractor staff.

Contractor:	*X*	Subcontractor:	

The following information requested pertains to the individual being proposed for this project.

Name:	*Gina Stella*		Key Personnel: (Yes/No)	*Yes*
Individual's Title:	*Division VP/Division Dietitian – Dining and Nutrition Services*			
# of Years in Classification:	*2*	# of Years with Firm:		*16.5*

BRIEF SUMMARY OF PROFESSIONAL EXPERIENCE

Information should include a brief summary of the proposed individual's professional experience.

Over 19 years of experience in Foodservice Management and Clinical Nutrition having worked both as a clinical nutrition provider as well as overseeing institutional foodservice operations.

RELEVANT EXPERIENCE

Information required should include: timeframe, company name, company location, position title held during the term of the contract/project and details of contract/project.

2/2000-present
Healthcare Services Group, INC.
Divisional VP and Dietitian overseeing clinical/operational support to staff registered dietitians, dietary managers and district management teams in over 150+ facilities in the Western United States.

3/1998-9/2000
King's Daughter's Hospital
1901 SW HK Dodgen Loop, Temple, TX
Clinical Nutrition Manager responsible for the clinical care at 138-bed hospital and outpatient clinic. Worked alongside Foodservice Director and was actively involved in tray line service and retail operation.

07/1997-03/1998

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Scott and White Memorial Hospital
2401 S. 31st St., Temple, TX
Clinical Dietitian responsible for med/surg units, gen med and pediatric coverage.

EDUCATION

Information required should include: institution name, city, state, degree and/or Achievement and date completed/received.

Pepperdine University
Malibu, CA
BS in Nutritional Science

Also completed Graduate Studies in Human Nutrition at Texas A&M University

CERTIFICATIONS

Information required should include: type of certification and date completed/received.

Insert here any certifications proposed individual has received.

REFERENCES

A minimum of three (3) references are required, including name, title, organization, phone number, fax number and email address.

Mike Shaddock, Foodservice Director, Morrison Management Services, mshaddock@sbcglobal.net

Carol Larkin-VP of Clinical Services, Rockport Healthcare, 949-394-8006, clarkin@rockporthc.com

Jeff Wittenauer, National Director of Culinary Services, Sava Senior Care, 970-646-3682
jawittenauer@savasc.com

Company Name Submitting Proposal:	*Healthcare Services Group*

Check the appropriate box as to whether the proposed individual is

prime contractor staff or subcontractor staff.

Contractor:		Subcontractor:	

The following information requested pertains to the individual being proposed for this project.

Name:	*Rodney Carrington*	Key Personnel: (Yes/No)	*Yes*
Individual's Title:	*District Manager*		

# of Years in Classification:	*6*	# of Years with Firm:	*4*

BRIEF SUMMARY OF PROFESSIONAL EXPERIENCE

Information should include a brief summary of the proposed individual's professional experience.

Over 20 years of experience in Foodservice Management and Clinical Nutrition and overseeing institutional foodservice operations.

RELEVANT EXPERIENCE

Information required should include: timeframe, company name, company location, position title held during the term of the contract/project and details of contract/project.

11/2011-Present

Healthcare Services Group, INC.

District Manager

Overseeing the day to day operation of several accounts within an assigned multi-state district by providing necessary training, time management, and helping Account Managers reach financial goals set forth by the company.

02/09-10/11

Los Angeles Jewish Home for the Aging, Reseda, CA

Director of Food Services

Overall responsibility for the direction, development and performance of management operations, including planning, coordinating and evaluating multiple units for 350 patient distribution to TCU, SNF, Acute Care and Assisted Living for long term and acute care patients.. Controlled a multi-million dollar budget which involved adhering to a Kosher Kitchen/Dietary Department, as well as researching new Kosher Vendor accounts. Increased productivity for 72 employees.

03/06-02/09
Vista Healthcare, Rancho Cucamonga, CA
Director of Dietary/Food Nutrition Services
Overall responsibility for the management planning and total administration of Dietary Department for two hospitals, including all labor, revenue, capital, and operational budgeting for the department within the scope of operations. Evaluate staffing needs, develops job descriptions, task assignments and operate the department within budgeted FTE's.

11/00 - 03/06
Sodexho, Whittier, CA
G.M./Food Service
Overall responsibility for food service operations in an account with more than $2M. Managed volume, maintained a high level of client/customer satisfaction and quality standards. Provide strong leadership and foster development and mentoring for all staff. Develop and attain account's financial objectives.

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EDUCATION

Information required should include: institution name, city, state, degree and/or Achievement and date completed/received.

12/84-12/86 Business Management-Subdivision of University of Maryland, Okinawa, Japan
- **1984 -** Naval Food Management School, U.S. Navy
- **1985 -** Budget Management Course, U.S. Navy
- **1991** - Dietary Food Preparation Seminar, California State University Long Beach
- **1991 -** New York Culinary Arts School, (3 week course)
- **1997** - OBRA, JCAHO and HACCP Regulation Training
- **2014**- Certified Dietary Management (CDM) Training

CERTIFICATIONS

Information required should include: type of certification and date completed/received.

1988 - 1994 CPR Course

1992 - Total Quality Leadership Seminar (Instructor)

1993 - 1994 Sexual Harassment Course

1999 – ServSafe

2014- Certified Dietary Management

REFERENCES

A minimum of three (3) references are required, including name, title, organization, phone number, fax number and email address.

Illana Grossman, Administration, Jewish Home for The Aging, (818) 290-9665

Deanna McHale, Director of Environmental Services, Whittier Hospital, (562) 522-3327

Shelly Ryan, Vice President, Jewish Home for The Aging, (818) 335-4137

Personal Reference: Carolyn Roddy, Owner, Pampered Lady Florist, (626) 399-4683