

DRAFT Request for Proposal No. DE-SOL-0008418

Section L - Attachment F - Past Performance Cover Letter and Questionnaire

Date: _____

Dear _____:

Our firm is submitting a proposal for a Department of Energy (DOE)/National Nuclear Security Administration (NNSA) Contract for the management and operation of the Nevada National Security Site with an estimated value of approximately \$550M per year. Our firm is seeking your assistance. We are asking you to complete the attached questionnaire evaluating our performance on _____. Please return your written evaluation directly to the NNSA Contracting Officer, at the email address below, by TBD so it can be evaluated by NNSA as part of our firm's past performance. You may be contacted by NNSA as part of this evaluation process.

Email: SEB5@nnsa.doe.gov.

Attn: Ariane S. Kaminsky
Contracting Officer
Telephone Number: (202) 586-9713

DRAFT

Past Performance Questionnaire

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The purpose of this questionnaire is to obtain your feedback on the performance of the Contractor identified in the cover letter to this questionnaire.

Please use the following definitions to provide your ratings:

E = Exceptional. Performance was substantially and consistently above contract requirements. Contractor displayed an overall superior understanding of contract requirements, and used innovative approaches leading to enhanced performance.

VG = Very Good. Performance was above contract requirements. Contractor displayed a thorough understanding of contract requirements.

S = Satisfactory. Performance met contract requirements.

M = Marginal. Performance was below contract requirements. Contractor displayed a lack of thorough understanding of contract requirements in one or more significant performance areas.

U = Unsatisfactory. Completely failed to meet the contract requirements. Contractor displayed a total lack of understanding of contract requirements.

NA = Not applicable

DK = Don't know. No knowledge to rate this question.

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Please complete the following:

Respondent Information	
Name:	
Title:	
Organization:	
Organization Address: (including City, State, Zip)	
Telephone Number (w/area code):	
Facsimile Number (w/area code):	
Email Address:	

Contract Reference Information	
Contract Number:	
Date of Contract Award:	
Contract Type (Fixed Price, Cost Reimbursement, etc.):	
Date Contractor Started Performance:	
Date Work Ended:	
Initial Contract Price/Cost and Fee:	
Final Amount Invoiced/Amount Invoiced to Date:	

For the following questions, provide your rating by marking the corresponding column with an "X". Rating definitions can be found on page 1. Any explanatory narrative you would like to provide in addition to a rating would be very much appreciated and can be made under the Remarks Section.							
	E	VG	S	M	U	NA	DK
Scope of Work Performance							
1) How well did the Contractor manage high hazard facilities, experiments and operations?							
2) How well did the Contractor manage nuclear facilities, experiments and operations?							
3) How well did the Contractor establish and maintain a cooperative working relationship with the National Security Laboratories or Government Agencies and their associated Contractors?							
4) How well did the Contractor provide laboratory and field capabilities to assess threats and manage radiological emergencies involving a variety of hazardous situations?							
5) How well did the Contractor provide expertise, remote sensing and site safety management of active tunnel systems?							

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6) How well did the Contractor provide expertise, remote sensing and site safety management of chemical/biological simulant and radiological controlled releases?							
7) How well did the Contractor design and implement diagnostic techniques that provide high quality data for nuclear experimental and research programs?							
8) How well did the Contractor provide response and detection for a broad array of ground and airborne capabilities?							
9) How well did the Contractor perform onsite physical environmental and waste management programs including staging, storage, treatment, transportation, and disposal of wastes, including classified waste?							
10) How well did the Contractor perform construction activities for your scope of work?							
11) How well did the Contractor adhere to delivery schedules/response times/cost estimates/budgets?							
12) How well did the Contractor manage the Environment Safety & Health program, comply with contract requirements, and protect workers, public, and the environment?							
13) How well did the Contractor establish and maintain the Nuclear Safety Basis for nuclear activities?							
14) How well did the Contractor provide air space management coordination and support for “Special Use” airspace for all air traffic?							
15) How well did the contractor execute or oversee mining activities?							
16) How well did the Contractor manage your information technology and cyber security program?							
17) How well did the Contractor demonstrate a culture of continuous improvement for required disciplines and the associated metrics to demonstrate performance?							
18) How well did the Contractor comply with the administrative aspects of your contract including cost accounting standards?							
19) How well did the Contractor recruit and retain well-qualified key personnel and personnel with critical skills throughout the contract?							
20) How well did the Contractor manage human resources to minimize work disruption?							
21) How well did the Contractor manage labor relations to minimize work disruption?							
22) How well did the Contractor manage workforce compensation and benefits?							
23) How well did the Contractor meet small business goals?							
24) How well did the Contractor award & manage subcontracts?							

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	E	VG	S	M	U	NA	DK
25) How well did the Contractor establish/monitor/measure/report cost performance against established baselines for direct (Program) and indirect (indirect activities) baselines?							
26) How well did the Contractor maintain baseline change control for Direct Costs (Program) and Indirect Costs (indirect activities)?							
27) How well did the Contractors’ corporate office support your contract?							
28) How would you rate the Contractor’s overall performance?							

Integration of Programs, Operations, & Management							
29) How well did the Contractor integrate all activities for your work scope, including partners and subcontractors, as applicable?							
30) How well did the Contractor improve integration, partnering, and support to promote early on-site problem solving?							
31) How well did the Contractor safely provide the nuclear, facilities, infrastructure, operations, and appropriate scientific, engineering, and technical staff to support your work scope?							
32) How well did the Contractor safely provide the non-nuclear or high hazard facilities, infrastructure, operations, and appropriate scientific, engineering, and technical staff to support your work scope?							
33) How well did the Contractor demonstrate innovations in performing the work, including obtaining cost efficiencies and continuous improvement activities?							
34) How well did the Contractor achieve cost efficiencies while continuing to meet mission requirements?							
35) How well did the Contractor demonstrate workforce flexibility and mobility across multiple facilities and integrate operations with multiple Contractor/Government Agency/stakeholder interfaces?							
36) How well did the Contractor develop and execute Conduct of Operations/Formality of Operations for their project and facility operations?							
37) How well did the Contractor efficiently and effectively implement and conduct work planning and control?							
38) How well did the Contractor perform and manage a large user complex Safeguards and Security program? (Not including Protective Guard Forces)							
39) How well did the Contractor manage the Quality Assurance (QA) Program and the QA tenets?							
40) How well did the Contractor manage regulatory compliance programs and regulatory interfaces?							
41) How well did the Contractor integrate their teaming/partnering/relationships to achieve overall organizational							

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performance and goals?								
42) How well did the Contractor identify relevant interfaces and demonstrate an integrated approach to managing interfaces in collaborations with multiple Contractors, Government entities, and other Stakeholders?								
43) How well did the Contractor ensure that the principles of ISM, ISSM, EMS, and QAS were integrated into its operations?								
44) How well did the Contractor ensure its Contractor Assurance System (set of tools used by the Contractor Management to measure, improve, and demonstrate performance and ensure that mission objectives and contract requirements are met) was effective and reflected integrated performance?								
45) How well did the Contractor use performance measures and metrics to guide actions and motivate high performance?								
46) How well did the Contractor develop and deploy effective strategic planning for the mission in the environment of changing budgets and technical and regulatory requirements?								
47) How well did the Contractor perform risk management?								
48) How well did the Contractor provide client transparency into financial and technical reporting systems and provide overall visibility into program and cost management?								

For the following questions, provide your answer by marking the corresponding column with an "X".		
	Yes	No
49) Did the Contractor have any criminal or civil penalties, fines or administrative actions, such as a consent order? If yes, please explain.		
Explanation (if applicable):		
50) Were there any significant safety incidents resulting in serious injury or death? If yes, please explain and answer 50a.		
Explanation (if applicable):		

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For the following questions, provide your answer by marking the corresponding column with an "X".		
	Yes	No
50a) Did the Contractor correct the deficiencies that led to serious injury or death? If no, please explain.	<input type="checkbox"/>	<input type="checkbox"/>
Explanation (if applicable):	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
51) Would you hire the Contractor again? If no, please explain.	<input type="checkbox"/>	<input type="checkbox"/>
Explanation (if applicable):	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

Signature of Evaluator (use "/e/name/" or similar for electronic)	
Date Signed	

If you would like to provide any explanatory narrative, please do so under Remarks. When providing information with regards to a particular question above, please reference the question number. If more space is needed, please attach additional pages. Thank you for your time and assistance in completing this questionnaire.

Remarks:

End of Questionnaire