**SOI0001 – OSC STAY INTERVIEWS**

**ATTACHMENT 1**

**SOI CHECKLIST**

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| --- | --- |
| **PROPOSER**:  |  |
| **Contact Name and Email:** |  |
| **Business Categories:****(Check all that apply)** | [ ]  Minority- and/or Women-Owned Business (M/WBE) certified by the NY Empire State Development Corporation [ ]  Service-Disabled Veteran-Owned Business (SDVOB) certified by the NYS Office of General Services [ ]  A NYS Small Business Enterprise (SBE) meeting all four criteria below:* Resident in New York State;
* Independently owned and operated;
* Not dominant in its field; and
* Employs one hundred or less persons.

[ ]  N/A  |
| **In the space provided below, identify whether your firm meets the minimum qualifications and can provide the services identified in the Solicitation of Interest.** |
| **Minimum Qualification** | **Vendor Response** |
| 1. Vendor has implemented the stay interview function for at least two organizations. Have implemented a stay interview function for at least two organizations.
 | [ ]  YES [ ]  NO |
| 1. Vendor has designed virtual and/or in-person stay interview training curricula for adult learners for at least two organizations.
 | [ ]  YES [ ]  NO |
| 1. Project Lead has two years of experience conducting, implementing, and evaluating a stay interview function in an organization with at least 300 employees
 | [ ]  YES [ ]  NO |
| 1. Consultant must be able to periodically work on-site at 110 State Street in Albany, NY
 | [ ]  YES [ ]  NO |
| **Services** |
| **Project Management** | **Vendor Response** |
| 1. Assign a lead staff member (“Project Lead”) who will be the main point of contact between the Consultant and OSC regarding this engagement
 | [ ]  YES [ ]  NO |
| 1. Schedule and attend a formal project kickoff meeting with the Committee’s and the Committee’s executive sponsor
 | [ ]  YES [ ]  NO |
| 1. Provide oversight and management of the Services, including scheduling, responding to and sending pre- and post-meeting correspondence, preparing for and following-up on training, and completing other related tasks to ensure the success of the Services.
 | [ ]  YES [ ]  NO |
| **Training** | **Vendor Response** |
| 1. Assist with, develop, and conduct training for OSC supervisors and managers on stay interview practices.
 | [ ]  YES [ ]  NO |
| 1. Design and finalize a stay interview training curriculum designed for OSC supervisors and managers.
 | [ ]  YES [ ]  NO |
| 1. Develop and facilitate training for OSC staff on how to effectively conduct stay interviews, including assisting in the development of a communication plan for the training.
 | [ ]  YES [ ]  NO |
| 1. Deliver training sessions to Committee members and others as identified by OSC, and provide training materials that can be used by members post-training.
 | [ ]  YES [ ]  NO |
| 1. Send post-training surveys to OSC staff who have attended the training, seeking feedback on the training content and delivery. Provide OSC with the survey results and feedback gathered.
 | [ ]  YES [ ]  NO |
| **Stay Interviews** | **Vendor Response** |
| 1. Assist the Committee with roll out of the stay interview survey and interview process.
 | [ ]  YES [ ]  NO |
| 1. Consult to and guide OSC on OSC’s efforts to design a stay interview process, including information capture and process structure.
 | [ ]  YES [ ]  NO |
| 1. Meet with the Committee to discuss stay interview data findings, and provide recommendations and resources to assist in addressing and remedying issues identified during the stay interview process including, but not limited to, best practices, methods, and frameworks.
 | [ ]  YES [ ]  NO |
| 1. Be available to discuss additional training strategies, survey results, and related topics that arise.
 | [ ]  YES [ ]  NO |
| **Results and Recommendations** | **Vendor Response** |
| 1. Develop and deliver a report summarizing findings based on interview data, including patterns found in positive and negative feedback, and provide recommendations on next steps.
 | [ ]  YES [ ]  NO |
| 1. Provide recommendations for OSC actions based on interview and survey results.
 | [ ]  YES [ ]  NO |
| 1. Present a review of the report document to the Committee and management.
 | [ ]  YES [ ]  NO |
|  **Metrics** |
| **Question** | **Vendor Response** |
| 1. Does the Vendor have metrics that show the success rate for their engagements where they have performed similar services? If so, provide supporting documentation if available.
 | [ ]  YES [ ]  NO |
| **Cost** |
| **Cost** | **Vendor Response** |
| Based on the information provided in the Solicitation of Interest, please provide any cost information possible (e.g., titles and associated hourly rates of staff it would assign to this engagement, rate cards, range based on estimated hours). |  |