



# HENDERSON COUNTY WELLNESS CLINIC

100 North King Street, Suite 500  
Hendersonville, NC 28792  
828.694.7991 / [www.hendersoncountync.org](http://www.hendersoncountync.org)

**Memorandum To:** *Interested Nutritionists/Dieticians*

**From:** *Jamie S. Gibbs, BSN, MSN, ANP-BC, ME  
Clinic Director*

**Subject:** *Request for Qualifications  
Nutrition/Dietician Services*

**Date:** *June 5, 2017*

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The Henderson County Board of Commissioners is soliciting services of a highly qualified Nutritionist/Dietician to assist in the provision of services within the Henderson County Wellness Clinic. Interested providers should submit Statements of Qualifications to the following address in accordance with the instructions and guidance provided for herein, by **June 21, 2017 at 5:00pm:**

*Jamie S. Gibbs, BSN, MSN, ANP-BC, ME  
Clinic Director  
County of Henderson  
100 North King Street, Suite 500  
Hendersonville, North Carolina 28792  
[jgibbs@hendersoncountync.org](mailto:jgibbs@hendersoncountync.org)*

## **Proposed Scope of Services:**

The Mission of the Henderson County Wellness Clinic is to provide quality, low cost health services, effectively tied to a work environment that promotes the health and well-being of all its members. To further this mission, and to provide enhanced wellness initiatives, the Clinic is seeking the services of a Nutritionist/Dietician. The Provider(s) selected for these services shall be able to meet the following requirements of the proposed scope of services:

1. To ensure that services are performed in accordance with Wellness Clinic protocols, the Provider shall work in conjunction with Wellness Clinic Staff toward the Clinic's mission of promoting the health and well-being of members of the wellness clinic. Nutrition should be a primary focus of the provider, approaching wellness from a position of balancing the many components that comprise a healthy individual.



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2. The Provider shall maintain data and records in such a format that County Staff will be able to review the effectiveness of this program for wellness purposes. In no circumstance would County Staff have access to any records subject to HIPPA privacy requirements. The sharing of data would be strictly for use in the evaluation of this program for efficiency and effectiveness.
3. The Provider shall be able to be present on-site at the Wellness Clinic as needed, or after coordinating an appointment, for the provision of evaluation, assessment and treatment of patients referred from staff practitioners in the Clinic.
4. The Provider shall also be able to provide services to Wellness Clinic patients within their private clinic setting.
5. The Provider shall further be able to provide health education to wellness members in groups, working with Staff on the scheduling of such group workshops. Such workshops may occasionally be outside of normal business hours.
6. By submitting a Statement of Qualifications, the Provider acknowledges that they understand that there is no financial relationship between the County and the Provider. The responsibility for payment shall be between the Provider and the employee, including but not limited to payment direct from the employee, through billing the employee's health insurance, or other arrangement.
7. The Provider must be licensed to practice in North Carolina.

## **Format for Statements of Qualifications:**

In responding to this Request for Qualifications, the responding individual or firm is expected to demonstrate knowledge, experience and ability to perform the scope of work and provide the services being requested. If the responder makes no response on an item, the evaluators will assume that the responder has no expertise in that area.

Each proposal submitted in response to this solicitation should address the following elements:

### Executive Summary

- A brief description of the firm and the services offered.



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## Identification of the medical professional/firm

- Legal name and address of the individual/firm
- Name, title, address and telephone number of the person to contact concerning the submission.

## Experience and Technical Competence

- Of critical importance is the composition of the professional(s) proposed to provide services on this project. Credentials and resumes of the person(s) responsible for providing the services must be provided. The responder shall specifically provide the following information about any person who will be providing services:
  - Copy of North Carolina License to Practice
  - Current resume
  - Description of education
  - Experience or education related to the RFQ project
  - A brief statement outlining the responder's knowledge of the Wellness Clinic, and the experience and skills that will be provided in support of its mission.
- Include any other information you believe to be pertinent but not required.

Please provide three (3) hard copies of the proposal to the address above. Copies may be mailed but must be received prior to the deadline of June 21, 2017 at 5:00pm for consideration.

From experience with the respondents and the above information, Staff will evaluate the Statements of Qualifications. The individual or firm(s) selected shall be notified prior to June 22, 2017 at 5:00pm.

Thank you for your consideration regarding this opportunity to work with Henderson County, and should you have any questions or concerns, please contact [jgibbs@hendersoncountync.org](mailto:jgibbs@hendersoncountync.org).

cc: Steve Wyatt, County Manager  
Amy Brantley, Assistant County Manager