



Contractor Performance Reports (CPRs) for Architect and Engineer Services and CPR Amendments in General

A Mandatory Reference for ADS Chapter 302

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POLICY

**USAID/General Notice
M/OAA/CAS
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Subject: Contractor Performance Reports (CPRs) for Architect and Engineer Services and CPR Amendments in General

TO: USAID Contracting Officers (COs) and Cognizant Technical Officers (CTOs) Worldwide

CPRs for Architect and Engineer Services

The National Institutes of Health (NIH) Contractor Performance System (CPS) is the multi-agency system that USAID uses to prepare and disseminate Contractor Performance Reports (CPRs) over a secure Internet connection. On November 29, 2006, NIH implemented its CPS Architect and Engineer (A&E) Report module for reporting the performance of A&E services; and USAID COs are hereby directed to use this module, in lieu of the previously utilized CPS Standard Report module, when they initiate CPRs for such services after the date of this notice.

This new module employs a different reporting methodology from the CPS Standard Report module that must be observed to effectively report contractors' performance for A&E services. Please carefully note the procedures for reporting A&E contract/task order performance below.

In lieu of separate interim CPRs that are made at least annually and a final CPR at the completion of the performance for a contract/task order, the CPS A&E Report module provides for a single, cumulative report that encompasses the entire performance under a contract/task order for A&E services. Within this cumulative report, COs and CTOs report, at least annually, in interim sub-reports on the contractor's performance at the conclusion of the following phases* :

- Pre-Design/Planning
- Concept Design
- Design Development
- Construction Documents
- Construction Administration

CPS will make the cumulative A&E CPR available online for Government-wide use upon the completion of each interim sub-report of one or more of the listed phases.

* To the extent that the contract/task order requires performance of the specified phase. Not all contracts and task orders will include all the listed phases.

Please note:

1. The phases must be reported in the order that they are listed above, to the extent that the contract/task order requires performance for the phases. Once a sub-report on a phase has been finalized in the CPS A&E Report module, the CO and the CTO will no longer have the option to report again on that phase or any prior specified phase in the above list. Consequently, the CO must not finalize the sub-report for the performance of a phase until that phase, or any prior specified phase for which the contract/task order requires performance, has been completed.

2. If more than one phase is completed within one year, a single, annual, interim sub-report may cover all the phases completed.

3. Prior to the completion of a phase, if the CO deems it necessary to impart important information concerning the contractor's performance that should be made immediately available to other COs for their consideration in source selection actions; the CO will contact the Evaluation Division (M/OAA/E). It will consider issuing a USAID Procurement Alert to inform all USAID COs of information that pertains to mismanagement, possible debarment or suspension, accounting deficiencies, or other items of comparable consequence.

4. The contractor will have at least 30 days to comment upon each interim sub-report, and CPS will maintain these comments as an addendum to the CPR, unless the contractor requests their revision or deletion prior to finalizing the sub-report. The CO and CTO will collaboratively consider the contractor comments prior to finalizing each interim sub-report.

5. Due to the reporting methodology that provides for reporting performance only once for an phase (see the first note above), a phase whose performance exceeds one year in duration constitutes an exception to the general rule that performance must be reported at least annually for contracts that exceed one year. The CO and CTO will promptly report the contractor's performance upon the completion of the phase. (Acquisition & Assistance Policy Directive (AAPD) 06-5 will be revised to reflect this exception.)

At the conclusion of contract/task order performance, the CO and CTO will provide an overall rating of the contractor's performance, and they will address the following fields, to the extent that they are applicable to the contractor's performance, for the first and only time for a contract/task order:

- Subcontracts
- Small Business Subcontracting Plan
- Small Business Participation in Bundled Contracts
- Small Disadvantaged Business Participation Plan
- Customer Satisfaction

- Contractor Key Personnel

The contractor will have at least 30 days to comment upon the overall rating and USAID's evaluation of its performance for the above fields, and CPS will maintain these comments as an addendum to the CPR, unless the contractor requests their revision or deletion prior to finalizing the CPR. The CO and CTO will collaboratively consider the contractor comments prior to finalizing the A&E CPR.

Upon the completion of the reporting for the contract/task order performance, the cumulative A&E CPR will display online the reporting for each phase plus the overall rating and the reporting on the above fields for use, Government-wide, in source selection actions and other acquisition decisions.

NIH will archive the A&E CPR six years after the last report date.

Additional Resources for Reporting the Performance of A&E Services:

This notice is only a summary of the procedures for using the CPS A&E Report module. Refer to the detailed procedures for using the module in the Contracting Officer A&E User Manual at: http://cps.od.nih.gov/files/A&E_CO_Manual.doc. You may practice reporting the performance of A&E services in the CPS Training Database at: <http://cpstraining.nih.gov/>. Please contact the USAID Past Performance Coordinator, listed below, to provide access to this database. We also expect NIH to offer training in the use of the A&E Report module in 2007, and when available, we will be posting information concerning this training at: http://inside.usaid.gov/M/OAA/SolutionsCenter/pastperf/cps_perf.html.

The Contractor Performance Report - A&E Evaluation Form (template) has been posted to the CPS Homepage, <http://cps.od.nih.gov/>, below the forms for the Standard Report and Construction Report. In source selection processes, COs, or their designees on technical evaluation committees, use this form, as they do the other two, to report information received from business references named in the offeror's proposal and from other sources, in the same format and covering the same data elements as the CPS A&E Report module. Use the Rating Guidelines - A&E Evaluation that have been separately posted to the CPS Homepage when using this form for an evaluation.

CPR Amendments in General

NIH is planning to end its practice of allowing changes to ratings or to the text comments of the CPRs that have been completed in CPS. If it should be necessary to revise them in a sub-report or a completed CPR that has been prepared in *any of the three above reporting modules*, the CO would, within 45 days, file an amended CPR that will be maintained along with the CPR that it amended. COs will be allowed to file up to two amended CPRs for each sub-report or interim report and for the final report for a contract/task order CPR.

A subsequent notice will inform COs and CTOs when the new CPR amendment procedure is implemented.

Until this amendment procedure is implemented, the Standard Report and the Construction Report may be amended by making a request to NIH, as before; but for any revision necessary in a completed A&E Report, the CO must request NIH to delete it--and then the CO must re-initiate the reporting process.

Reference: AAPD 06-05, Evaluation and Use of Contractor Performance Information, at: http://www.usaid.gov/business/business_opportunities/cib/pdf/aapd06_05.pdf

Point of Contact: Any questions concerning this notice may be directed to the USAID Past Performance Coordinator, Page Clark, M/OAA/CAS, at pclark@usaid.gov or (202) 712-0813.

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