



Division of Purchases Covid-19 Emergency Protocol for Bid Openings and ReOpening RI State of Rhode Island Self- Assessment Portal User Guide for entry to the Powers Building/Division of Purchases	Document No.	PURCHASES 2020-2
	Effective Date	April 29, 2020
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	Revision No.	1
	Page No.	Page 1
	Approval	<i>Nancy R. McIntyre</i>
<b>I. <u>Purpose</u></b>  To meet the procurement needs of the state and its economy during the Covid-19 emergency, bid openings shall be conducted by the Rhode Island Division of Purchases (Division of Purchases) via live streaming using the ZOOM website/application.  Under the guidelines of ReOpening RI, any vendor or member of the public entering the Powers Building at One Capitol Hill, Providence to visit the Office of the Division of Purchases can complete a verbal screening from the security guard or Capitol Police Officer on duty or utilize the state's new web-based Self-Screening Portal.		
<b>II. <u>Policy Statement</u></b>  To provide continuity of operations consistent with Covid-19 emergency social distancing requirements per the Governor's Executive Order(s) and Department of Health emergency regulations the Division of Purchases will begin live streaming of bid openings using the ZOOM website/application. On May 5, 2020 the Division of Purchases will begin piloting the live streaming of bid openings for Requests for Quotes. Commencing May 11, 2020 and until further notice all bid openings including Requests for Proposals will be live streamed. Relevant Zoom information will be provided as posted addenda for bid openings that were rescheduled due to the Covid-19 emergency and will be provided in new bid solicitations posted henceforth.  Vendors and the public seeking access to the Powers Building/Division of Purchases can utilize the state's web-based Self-Screening Portal, a copy of the User Guide is attached hereto and made a part hereof.		
<b>III. <u>Notification</u></b>  Vendors and the public are advised that due to Covid-19 emergency social distancing requirements bid openings at the Division of Purchases shall be conducted via live streaming on the ZOOM website/application. Vendors and the public shall not be permitted to enter the Division of Purchases to attend bid openings. Vendors and the public who attend bid openings via live streaming shall be required to identify themselves and a record of all such attendees shall be maintained by the Division of Purchases. Vendor bid proposals shall be opened and read aloud at the date and time listed herein.		

The results of bid solicitations requiring a public copy for public works projects shall be posted on the Division of Purchases website as soon as possible after the bid opening. For RFP solicitations only vendor names shall be read aloud at the opening.

Vendors and the public are further advised that visitor access to the Powers Building at One Capitol Hill, Providence, RI requires pre-screening at the entrance to the building, or by using the Self-Screening Portal that can be accessed from any mobile device or computer and contains the same [questions](#)<sup>1</sup> that have been asked during the in-person screening. See the attached user guide and watch a short tutorial video [here](#)<sup>2</sup> for instructions on how to use the Self-Screening Portal. In accordance with the Governor's Executive Order(s) and Department of Health emergency regulations all visitors to the Powers Building must wear a cloth mask which covers the nose and mouth and must adhere to current social distancing requirements.

Vendors delivering bid proposals to the Division of Purchases should allow enough time for the pre-screening process. The Division of Purchases assumes no responsibility for delays caused by the screening process or any other reason. Vendors are solely responsible for on time delivery of bid proposals. The Division of Purchases shall not accept late bids for any reason.

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<sup>1</sup> [https://reopeningri.com/wp-content/uploads/2020/05/COVID19\\_Screening\\_Tool\\_English-NEW.pdf](https://reopeningri.com/wp-content/uploads/2020/05/COVID19_Screening_Tool_English-NEW.pdf)

<sup>2</sup> <https://www.youtube.com/watch?v=gbKJsrAU5vY>



# Division of Purchases

One Capitol Hill | Providence, RI 02908 | (401) 574-8100  
Nancy R. McIntyre, State Purchasing Agent

Dear Vendors,

The health and well-being of everyone who comes to our facilities is of the utmost importance.

That is why we have implemented in-person health screenings in accordance with Department of Health [regulations](#) at our high-traffic facilities during the COVID-19 pandemic. Any member of the public or vendor entering high traffic facilities can complete a verbal screening from the security guard or Capitol Police Officer on duty or utilize the state's new web-based Self-Screening Portal at <https://selfscreening.ri.gov/>.

The Self-Screening Portal that can be accessed from any mobile device or computer and contains the same [questions](#) that have been asked during the in-person screening. See the attached user guide and watch a short tutorial video [here](#) for instructions on how to use the Self-Screening Portal.

Depending on your answers to the screening questions and list of symptoms, you will receive one of the following result screens: Approved or Denied. If you receive a **green**, approved screen, please show it to the security personnel upon entering the building to receive a sticker that you must wear while inside the building.

✓ ENTRY ALLOWED! If you are a State employee, please be prepared to show the electronic approval to your designated floor or division captain in order to receive a sticker. If you are a vendor or visitor, please be prepared to show the electronic approval to security upon entry.

Result Date/Time  
07/09/2020 09:27 AM EST

Approval active until 07/09/2020 11:59 PM EST

Vendor Name  
ABC

First Name\*  
Samantha

Last Name\*  
Burke

Email Address

If you receive a **red**, denial screen, you cannot enter the building. Please call the office you planned on visiting to reschedule.

Please note, the screening portal does not in any way, shape or form store your answers to the screening questions. It does store your name, email address and the result screen you receive after answering the questions in the event the Department of Health needs to contact you for contract tracing purposes.

If you do not have a smartphone with you, please see the security personnel to complete an in-person verbal screening. For office locations without security personnel please continue to [self-screen for symptoms](#) before entering.

Providing complete and accurate information is critical in helping stop the spread of COVID-19. We appreciate your continued cooperation to protect the health of everyone who works in and visits state facilities.

Lastly, if you have any questions about reopening your own offices or places of businesses please visit [reopeningri.com](https://reopeningri.com) for more information and helpful resources.

Sincerely,



Nancy R. McIntyre  
State Purchasing Agent



# **State of Rhode Island Self-Assessment Portal User Guide**

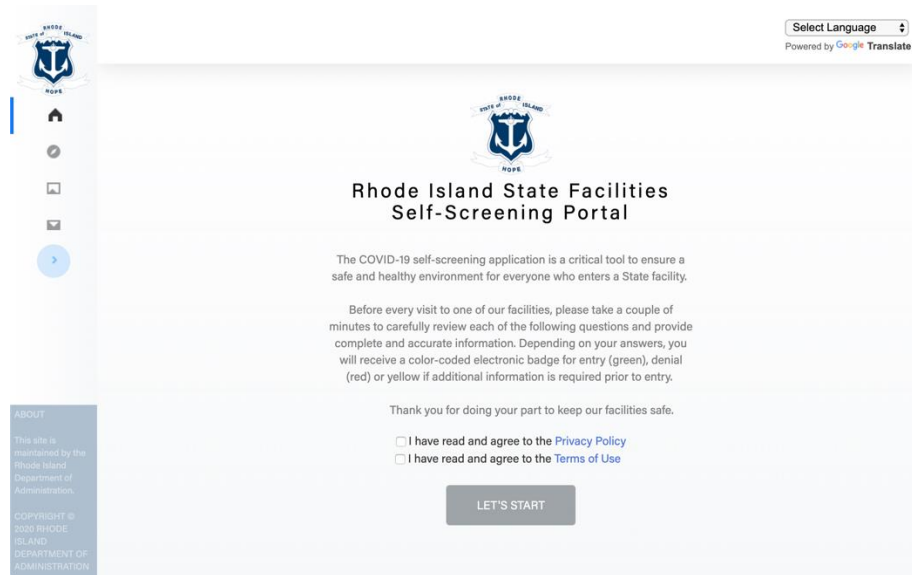
Employee/Public/Vendor

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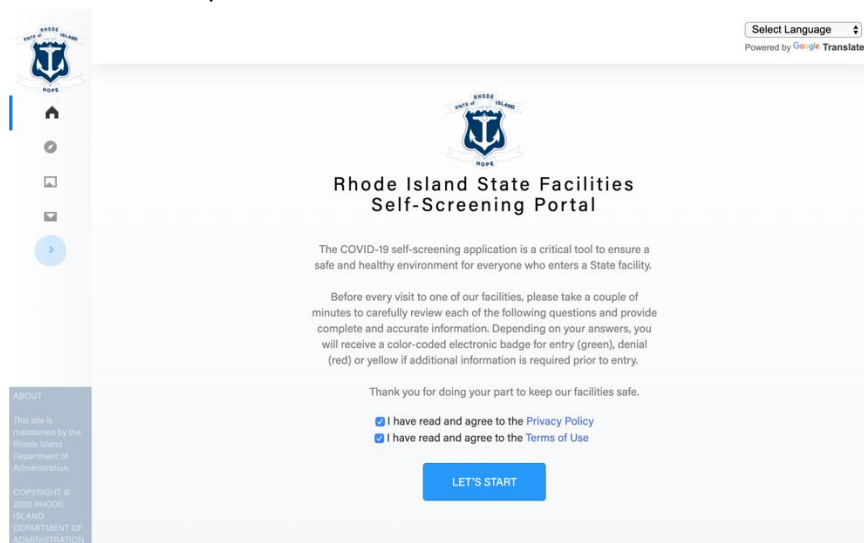
## PUBLIC FACING SELF-SCREENING

1. Go to the following URL: [selfscreening.ri.gov](https://selfscreening.ri.gov)
2. You will be directed to the Home Page.



## SELF-SCREENING ASSESSMENT

1. Review the introductory text, the Privacy Policy, and the Terms of Use. Once you have completed your review, select the checkbox to acknowledge acceptance. The "Let's Start" button will be enabled once you check both checkboxes.



2. Select the "Let's Start" button. You will be directed to the first page of the self-screening assessment.

## EMPLOYEE/VENDOR/PUBLIC

1. If you are a state employee, select the “Employee” tab on the first page of the self-screening assessment. If you are a Vendor or Public user, select the “Vendor/Public” tab.

The screenshot shows a web application interface for a self-screening assessment. On the left is a vertical sidebar with the state of Rhode Island logo at the top, followed by icons for home, a document, a location pin, and an envelope. Below these is a blue circular button with a right-pointing arrow. At the bottom of the sidebar is an 'ABOUT' section with text: 'This site is maintained by the Rhode Island Department of Administration. COPYRIGHT © 2020 RHODE ISLAND DEPARTMENT OF ADMINISTRATION.' The main content area has a header with 'EMPLOYEE' and 'VENDOR/PUBLIC' tabs; the 'EMPLOYEE' tab is selected and highlighted with a red box. Below the tabs are input fields for 'Employee ID\*', 'First Name\*', 'Last Name\*', 'Email Address\*', and 'Phone Number\*'. There are also dropdown menus for 'Primary Agency' and 'Site Location\*', both showing 'Select Some Options'. At the bottom of the form area, there is a link: 'Already have an account? Or click here to create one.' and two buttons: 'CANCEL' and 'NEXT'.

2. Enter the required fields: Employee ID, First Name, Last Name, Email Address, Phone Number, and Site Location. You can locate your Employee ID on your Paystub by logging into <https://www.ri.gov/app/DOA/payroll/>. It is located at the very top of your Paystub. In addition, the Site Location can be selected by searching the full or partial address of the facility and/or entering the facility name. The list of Site Locations can be narrowed down by selecting the corresponding Primary Agency in the above field, but this is not a required field.
3. Once the first page of the form is completed, select “Next”.
4. You will be directed to the second page of the self-screening assessment.
5. On the second page, answer the self-screening questions. Note: Your responses to these questions are **not** stored and cannot be seen by any administrator.



EMPLOYEE

Have you had any of the following symptoms in the past three days?

Cough*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Shortness of breath or difficulty breathing*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Fever*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Chills*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Muscle pain*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Sore throat*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Headache*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Nausea or vomiting*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Diarhea*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Runny nose or stuffy nose*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Fatigue*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Recent loss of taste or smell*	<input type="button" value="YES"/>	<input type="button" value="NO"/>
Loss of appetite*	<input type="button" value="YES"/>	<input type="button" value="NO"/>

If you selected Yes to any of the above, do you have a DMU clearance letter for the symptom(s)?\*

---

Have you been in close contact (less than six feet) with anyone with COVID-19 or symptoms of COVID-19 in the past 14 days?\*

Have you traveled anywhere outside the 50 United States in the past 14 days? \*

Have you traveled to Rhode Island for a non-work-related purpose from another city, town, county, or state that currently has a stay-at-home restriction, a shelter-in-place restriction, or a similar restriction, declaration, or announcement due to a COVID-19 outbreak?\*

Fields marked with an asterisk (\*) are required.

6. Once the assessment is completed, select “Next”.
7. If you selected “No” to all of the symptoms and questions, you will receive an approval screen to enter the building.

8. If you selected “Yes” to one or more of the symptoms but have a clearance letter from the Division of Human Resources’ Disability Management Unit (DMU), you will receive an approval that is contingent upon presenting your DMU clearance letter to your floor or division captain. If you are a vendor or a member of the public, you will not have this option.

✓ **ENTRY ALLOWED!** If you are a State employee, please be prepared to show the electronic approval to your designated floor or division captain in order to receive a sticker. If you are a vendor or visitor, please be prepared to show the electronic approval to security upon entry.

**NOTE REQUIRED!** Entry requires a clearance letter from the Division of Human Resources Disability Management Unit (DMU) to be presented before entry is allowed.

Result Date/Time

05/25/2020 07:10 PM EST

Approval active until 05/25/2020 11:59 PM EST

Employee ID\*

1

First Name\*

Shannon

Last Name\*

Condon

Email Address\*

Scondon@stonewallsolutions.com

Phone Number\*

(978) 760-3659

Primary Agency

Agriculture

Site Location\*

Athletics Lands & Grounds - Bldg. #1075, 5C West Alumni Avenue, South Kingstown, 2881

CLOSE EMAIL RESULTS

9. If you selected “Yes” to any of the symptoms and do not have the DMU clearance letter, or if you selected “Yes” to any of the screening questions, you will receive a denial screen.

⊘ **ENTRY DENIED!** Based on your entries, you are not allowed entrance to State buildings. If you are a State employee, please immediately call your supervisor and the Human Resources Disability Management Unit (DMU) at 401-574-8401 for guidance. If you are a visitor, please call the department or division that you were planning to visit to discuss rescheduling.

Result Date/Time

05/25/2020 07:18 PM EST

Recommended Guidelines

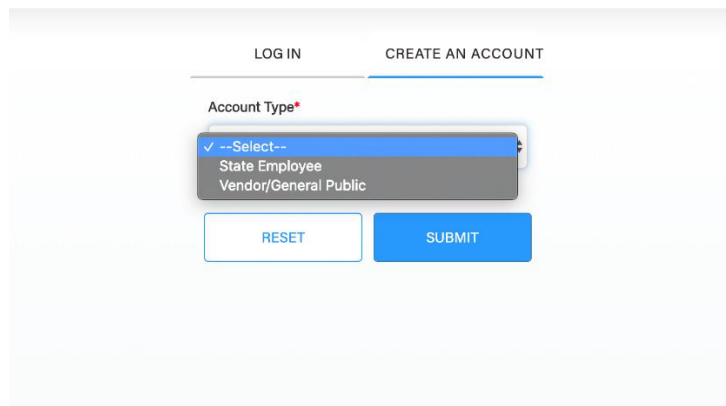
<https://cdc.gov>  
<https://ridepartmentofhealth.gov>  
<https://ricovidguidelines.gov>

CLOSE

10. Select “Email Results” to have your approval screen emailed to you, or your floor or division captain, or select “Close” to close the page. For a denial screen, select “Close” to close the page.

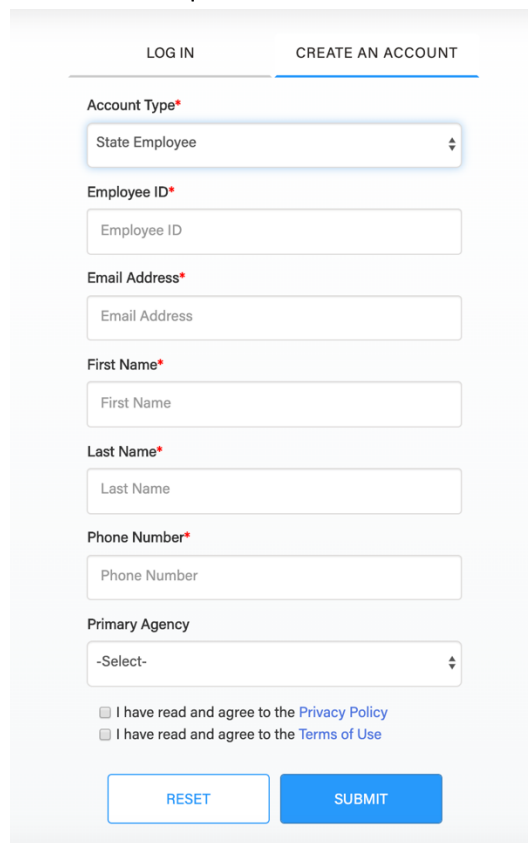
## CREATE AN ACCOUNT

1. To create an account, select the “Create an Account” tab.



The screenshot shows the 'CREATE AN ACCOUNT' tab selected. The 'Account Type\*' dropdown menu is open, displaying three options: '--Select--', 'State Employee', and 'Vendor/General Public'. Below the dropdown are 'RESET' and 'SUBMIT' buttons.

2. Select the Account Type and fill in the required fields.



The screenshot shows the 'CREATE AN ACCOUNT' form with the following fields filled: 'Account Type\*' is set to 'State Employee'; 'Employee ID\*' is filled with 'Employee ID'; 'Email Address\*' is filled with 'Email Address'; 'First Name\*' is filled with 'First Name'; 'Last Name\*' is filled with 'Last Name'; 'Phone Number\*' is filled with 'Phone Number'; and 'Primary Agency' is set to '-Select-'. At the bottom, there are two checkboxes: 'I have read and agree to the Privacy Policy' and 'I have read and agree to the Terms of Use', both of which are unchecked. Below the checkboxes are 'RESET' and 'SUBMIT' buttons.

LOG IN      CREATE AN ACCOUNT

Account Type\*

Vendor/General Public

State ID

State ID

Vendor Name

Vendor Name

Email Address\*

Email Address

First Name\*

First Name

Last Name\*

Last Name

Phone Number\*

Phone Number

Primary Agency

-Select-

☐ I have read and agree to the [Privacy Policy](#)

☐ I have read and agree to the [Terms of Use](#)

RESET      SUBMIT

3. You will receive an email to verify your account. Use the email to verify and then log in to your account.

## LOG IN

1. To log in, select the “Log In” tab.

Select Language

Powered by Google Translate

LOG IN      CREATE AN ACCOUNT

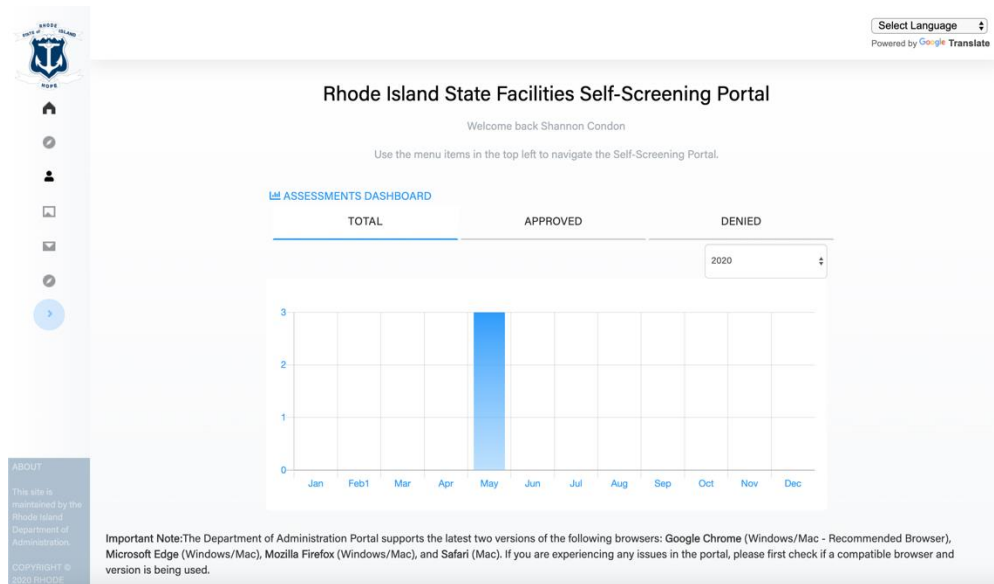
Enter Email Address

Enter Password

[Forgot Password?](#)

CONTINUE

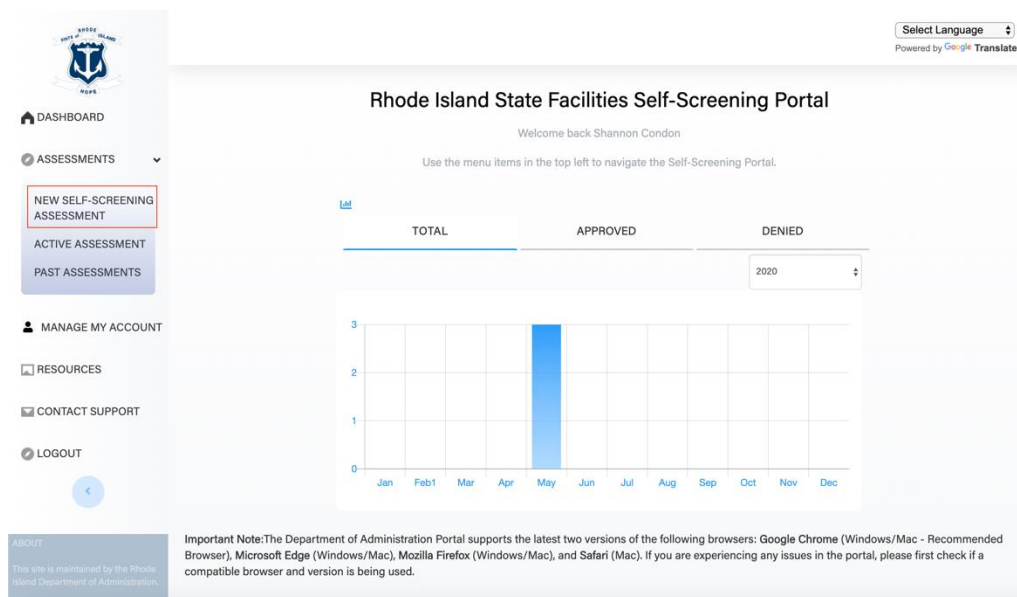
2. Enter your email address and password to log in, then select “Continue”.
3. You will be directed to the Dashboard page.



- To review your Total, Approved, and Denied assessments, toggle through the Dashboard tabs.

## NEW SELF-SCREENING ASSESSMENT

- To complete a new self-screening assessment, select “New Self-Screening Assessment” from the Assessments Menu.



- You will be directed to the first page of the self-screening assessment. Enter the site location and select “Next”.

### NEW SELF-SCREENING ASSESSMENT

---

**Employee ID\***

**First Name\***

**Last Name\***

**Email Address\***

**Phone Number\***

**Primary Agency**

**Site Location\***

3. You will be directed to the second page of the self-screening assessment.
4. On the second page, complete the answers to the self-screening questions.

### EMPLOYEE

---

Have you had any of the following symptoms in the past three days?

<b>Cough*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Shortness of breath or difficulty breathing*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Fever*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Chills*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Muscle pain*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Sore throat*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Headache*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Nausea or vomiting*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Diarrhea*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Runny nose or stuffy nose*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Fatigue*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Recent loss of taste or smell*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>
<b>Loss of appetite*</b>	<input type="button" value="YES"/>	<input type="button" value="NO"/>

If you selected Yes to any of the above, do you have a DMU clearance letter for the symptom(s)?\*

YES NO

---

Have you been in close contact (less than six feet) with anyone with COVID-19 or symptoms of COVID-19 in the past 14 days?\*

YES NO

Have you traveled anywhere outside the 50 United States in the past 14 days? \*

YES NO

Have you traveled to Rhode Island for a non-work-related purpose from another city, town, county, or state that currently has a stay-at-home restriction, a shelter-in-place restriction, or a similar restriction, declaration, or announcement due to a COVID-19 outbreak?\*

YES NO

*Fields marked with an asterisk (\*) are required.*

PREVIOUS NEXT

5. Once the assessment is completed, select “Next”.
6. If you selected “No” to all of the symptoms and questions, you will receive an approval screen to enter the building.

✓ ENTRY ALLOWED! If you are a State employee, please be prepared to show the electronic approval to your designated floor or division captain in order to receive a sticker. If you are a vendor or visitor, please be prepared to show the electronic approval to security upon entry.

Result Date/Time

05/25/2020 06:59 PM EST

Approval active until 05/25/2020 11:59 PM EST

Employee ID\*

1

First Name\*

Shannon

Last Name\*

Condon

Email Address\*

Scondon@stonewallsolutions.com

Phone Number\*

(978) 760-3659

Primary Agency

Administration

Site Location\*

Traffic Tribunal, 670 New London Avenue, Cranston, 2920

CLOSE EMAIL RESULTS



7. If you selected “Yes” to one or more of the symptoms but have the DMU clearance letter, you will receive approval results to enter the building, pending the disclosure of your letter to your division or floor captain. If you are a vendor or a member of the public, you will not have this option.

✓ ENTRY ALLOWED! If you are a State employee, please be prepared to show the electronic approval to your designated floor or division captain in order to receive a sticker. If you are a vendor or visitor, please be prepared to show the electronic approval to security upon entry.

NOTE REQUIRED! Entry requires a clearance letter from the Division of Human Resources Disability Management Unit (DMU) to be presented before entry is allowed.

Result Date/Time

05/25/2020 07:10 PM EST

Approval active until 05/25/2020 11:59 PM EST

Employee ID\*

1

First Name\*

Shannon

Last Name\*

Condon

Email Address\*

Scondon@stonewallsolutions.com

Phone Number\*

(978) 760-3659

Primary Agency

Agriculture

Site Location\*

Athletics Lands & Grounds - Bldg. #1075, 5C West Alumni Avenue, South Kingstown, 2881

CLOSE EMAIL RESULTS

8. If you selected “Yes” to any of the symptoms and do not have the DMU clearance letter, or if you selected “Yes” to any of the screening questions, you will receive a denial screen.

**ENTRY DENIED!** Based on your entries, you are not allowed entrance to State buildings. If you are a State employee, please immediately call your supervisor and the Human Resources Disability Management Unit (DMU) at 401-574-8401 for guidance. If you are a visitor, please call the department or division that you were planning to visit to discuss rescheduling.

Result Date/Time

05/25/2020 07:18 PM EST

Recommended Guidelines

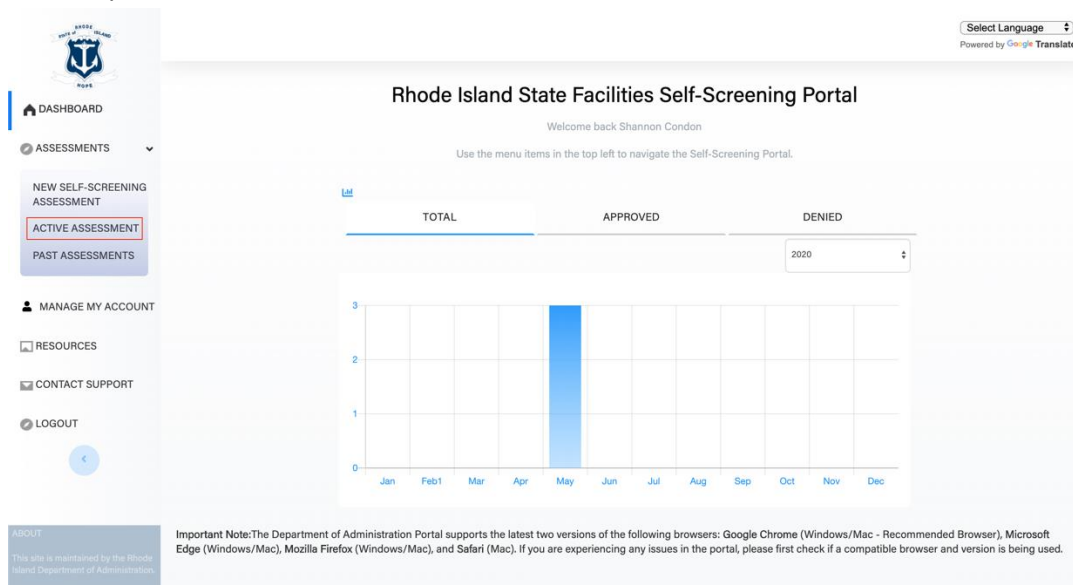
<https://cdc.gov>  
<https://ridepartmentofhealth.gov>  
<https://ricovidguidelines.gov>

CLOSE


9. Select “Email Results” to have your approval screen emailed to you, or your floor or division captain, or select “Close” to close the page. For a denial screen, select “Close” to close the page.

## VIEW ACTIVE ASSESSMENTS

1. To view your active assessments, select “Active Assessment” from the Assessments Menu.



2. If you have multiple assessments, select the assessment you would like to view.



Select Language

Powered by Google Translate

ACTIVE ASSESSMENT

Show 10 entries

Search:

Assessment Date	Expired Date	Site Location	Assessment Status	Action
05/25/2020 06:59 PM EST	05/25/2020 11:59 PM EST	Administration, Traffic Tribunal, 670 New London Avenue, Cranston, 2920	Approved	<a href="#">View Full Assessment</a>
05/25/2020 07:10 PM EST	05/25/2020 11:59 PM EST	Agriculture, Athletics Lands & Grounds - Bldg. #1075, 5C West Alumni Avenue, South Kingstown, 2881	Approved	<a href="#">View Full Assessment</a>

Showing 1 to 2 of 2 entries

Previous

1

Next

3. The assessment results will be populated.

ACTIVE ASSESSMENT

✓ ENTRY ALLOWED! If you are a State employee, please be prepared to show the electronic approval to your designated floor or division captain in order to receive a sticker. If you are a vendor or visitor, please be prepared to show the electronic approval to security upon entry.

Result Date/Time

05/25/2020 06:59 PM EST

Approval active until 05/25/2020 11:59 PM EST

Employee ID\*

1

First Name\*

Shannon

Last Name\*

Condon

Email Address\*

Scondon@stonewallsolutions.com

Phone Number\*

(978) 760-3659

Primary Agency

Administration

Site Location\*

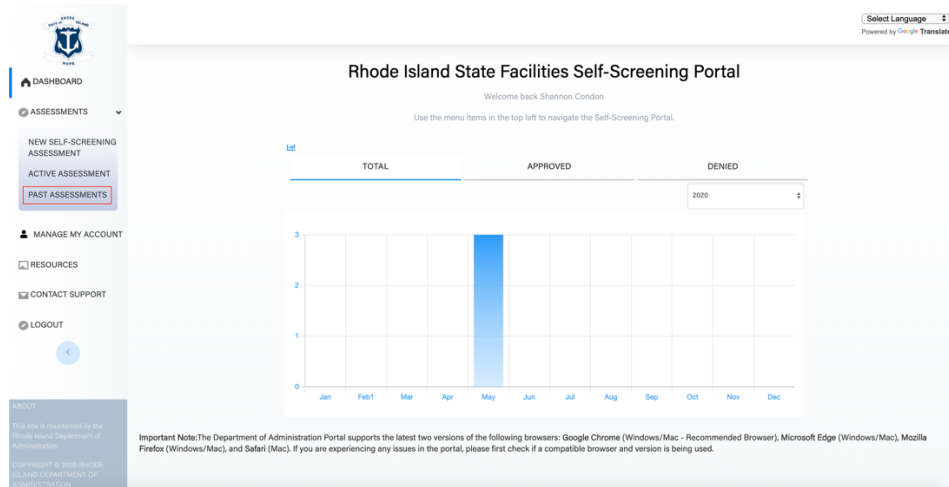
Traffic Tribunal, 670 New London Avenue, Cranston, 2920

CLOSE

EMAIL RESULTS

## VIEW PAST ASSESSMENTS

1. To view your past assessments, select “Past Assessments” from the Assessments Menu.



2. To narrow down the assessments, use the search fields and then select “View Assessment”.

**PAST ASSESSMENTS**

Result Form Date: MM/DD/YYYY  
Result To Date: MM/DD/YYYY  
Location: -Select-  
Status: --Select--

[Reset](#) [Search](#)

Show 10 entries

Result Date	Expired Date	Site Location	Status	Action
05/25/2020 07:18 PM EST		Department of Defense, RI National Guard Bldg. 8, Quonset Point, North Kingstown, 2852	Denied	<a href="#">View Full Assessment</a>

Showing 1 to 1 of 1 entries

Previous [1](#) Next

3. The assessment results will be populated.

PAST ASSESSMENT

**ENTRY DENIED!** Based on your entries, you are not allowed entrance to State buildings. If you are a State employee, please immediately call your supervisor and the Human Resources Disability Management Unit (DMU) at 401-574-8401 for guidance. If you are a visitor, please call the department or division that you were planning to visit to discuss rescheduling.

Result Date/Time

05/25/2020 07:18 PM EST

Recommended Guidelines

<https://cdc.gov>  
<https://ridepartmentofhealth.gov>  
<https://ricovidguidelines.gov>

CLOSE

## MANAGE MY ACCOUNT

1. To manage your account, select “Manage My Account” from the side navigation menu.

MANAGE MY ACCOUNT

Account Type

State Employee

Employee ID

1

Email Address

Scondon@stonewallsolutions.com

First Name

Shannon

Last Name

Condon

Phone Number

(978) 760-3659

Primary Agency

-Select-

User Status:

Active

Reset Password Edit

ABOUT  
This site is maintained by the Rhode Island Department of Administration.  
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Select Language  
Powered by Google Translate

2. To reset your password, select “Reset Password”.
3. To edit your account information, select “Edit” then select “Save”.

MANAGE MY ACCOUNT

Account Type

State Employee

Employee ID\*

1

Email Address\*

Scondon@stonewallsolutions.com

First Name\*

Shannon

Last Name\*

Condon

Phone Number\*

(978) 760-3659

Primary Agency

-Select-

User Status:


Active

Cancel

Save

## LOG OUT

1. To log out of the Facilities Self-Screening Application, select “Log Out” from the side navigation menu.
2. Confirm you would like to log out. You will be directed to the Home Page of the site.



RI  
STATE  
POLICE

Select Language

Powered by Google Translate

**DASHBOARD**

ASSESSMENTS

**MANAGE MY ACCOUNT**

RESOURCES

CONTACT SUPPORT

LOGOUT

MANAGE MY ACCOUNT

Account Type

State Employee

Employee ID\*

1

Email Address\*

Last Name\*

Condon

Phone Number\*

(978) 760-3659

Primary Agency

Sign Out

Are you sure you wish to Log Out from the RI Self Screening Portal?

Yes

No