

REVIEW OF CONTRACTOR'S SUBCONTRACTING PROGRAM

PART I - GENERAL INFORMATION

1.a. CONTRACTOR'S NAME	2. NAME OF SMALL BUSINESS LIAISON OFFICER (SBLO)
b. CONTRACTOR'S ADDRESS	3. NAME OF DOD SMALL BUSINESS SPECIALIST (SBS)
	4. NAME OF ADMINISTRATIVE CONTRACTING OFFICER (ACO)
	5. DLA/SBA JOINT REVIEW <input type="checkbox"/> Yes <input type="checkbox"/> No

6. NAME OF SMALL BUSINESS ADMINISTRATION (SBA) COMMERCIAL MARKETING REPRESENTATIVE (CMR) _____

7.a. DATE OF LAST REVIEW	8. DATE OF THIS REVIEW	9. TYPE OF REVIEW <input type="checkbox"/> Performance <input type="checkbox"/> Initial <input type="checkbox"/> Full Program <input type="checkbox"/> Follow-up	10. PERIOD COVERED BY THIS REVIEW: a. From: _____ b. To: _____
b. RATING OF REVIEW			

11. TOTAL DOD CONTRACT VALUE: a. \$ _____ b. DoD % _____

12. TYPE OF SUBCONTRACT PLAN(S)

Individual Plan(s): Number _____ Total Face Value \$ _____

Commercial Plan

Comprehensive Plan

Master Plan: Approving authority: _____ Period Covered _____

Other: Specify type _____

13. SCOPE OF THIS REVIEW

PART II - CONTRACTOR'S SMALL BUSINESS PROGRAM ADMINISTRATION PROGRAM ADMINISTRATION FACTORS

1. HAS A COMPANY-WIDE SB PROGRAM POLICY STATEMENT BEEN ISSUED BY CURRENT SENIOR MANAGEMENT AND DISSEMINATED THROUGHOUT THE COMPANY?

YES Issued By: _____ Title: _____ Date: _____

No

2. SBLO APPOINTMENT/AUTHORITY/PLACEMENT IN THE ORGANIZATION:

a. HAS THE SBLO BEEN FORMALLY APPOINTED BY SENIOR LEVEL MANAGEMENT?

Yes. Where are the duties and responsibilities defined: _____

No

b. IS THE SBLO APPOINTED AT AN APPROPRIATE LEVEL TO EFFECTIVELY ADMINISTER THE PROGRAM?

Yes

No. Give a brief explanation of why. _____

c. TO WHOM DOES THE SBLO REPORT? Name: _____ Title: _____

d. SBLO IS A- Corporate Division (If a division SBLO, describe relationship between this division and the corporate SBLO.) _____

3. WRITTEN PROCEDURES REGARDING SB PROGRAM ADMINISTRATION:

a. REVIEW AND DETERMINE THE ADEQUACY OF CONTRACTOR'S PROCEDURES THAT IMPLEMENT THE SMALL BUSINESS PROGRAM:

b. ARE THE PROCEDURES BEING FOLLOWED?

Yes

No. Identify deficiencies: _____

4. OUTREACH AND SUPPLIER ASSISTANCE:

a. CHECK THE APPROPRIATE BOX THAT INDICATES CONTRACTOR OUTREACH ACTIVITIES:

Source lists, guides, and data used to identify suppliers

Organizations contacted for additional Small, Small Disadvantaged, and Women-Owned Small Business (SB/SDB/WOSB) suppliers

Procurement conferences/seminars attended/sponsored

PART II - CONTRACTOR'S SMALL BUSINESS PROGRAM ADMINISTRATION (Cont'd)

b. CHECK THE APPROPRIATE BOX THAT INDICATES CONTRACTOR SUPPLIER ASSISTANCE ACTIVITIES:

- Documented successes in locating, utilizing, and developing new SB/SDB/WOSB sources
- Documented examples of counseling, management, technical, and financial assistance provided to suppliers
- Documented examples of mentoring, teaming, and developing SB/SDB/WOSB suppliers: *(Including Mentor-Protége Program, NIBINISH, HBCU/MI's, and WOSB programs)*

c. REVIEW AND DISCUSS CONTRACTOR'S OUTREACH AND SUPPLIER ASSISTANCE ACTIVITIES THAT ARE CONSIDERED EXTRA CONTRACTUAL (See FAR 52.219-9):

5. MONITORING SB PROGRAM REQUIREMENTS:

a. IS MANAGEMENT AND STAFF BRIEFED REGULARLY ON ACHIEVEMENTS AND/OR PROGRAM DEFICIENCIES?

- Yes
- No. **Explain:** _____

b. WHAT DOES CONTRACTOR DO TO IMPROVE PROGRAM PERFORMANCE IF OVERALL PROGRAM OBJECTIVES ARE NOT BEING MET? (Identify corrective actions implemented)

c. DOES THE CONTRACTOR'S PRACTICES INSURE ACCURATE REPORTING?

- Yes
- No. **Identify deficiencies:** _____

6. COMPLIANCE WITH RECORD KEEPING AND FLOWDOWN REQUIREMENTS:

a. DOES THE CONTRACTOR FLOWDOWN THE SUBCONTRACT PLAN REQUIREMENT ON SUBCONTRACTORS AS REQUIRED UNDER FAR CLAUSES 52.219-8 AND 52.219-9?

- Yes
- No

b. DOES THE PRIME CONTRACTOR'S SUBCONTRACTOR HAVE A PLAN IN PLACE?

- Yes. **What processes are in place to assure the subcontractor adheres to their plan?** _____

- No

c. ARE RECORDS MAINTAINED FOR PURCHASES OVER \$100,000 IN ACCORDANCE WITH FAR 52.219-9(d)(1 1)(iii)?

- Yes
- No

d. SAMPLE AT LEAST TEN PURCHASE ORDERS TO LARGE BUSINESS OVER \$100,000, INCLUDING, IF APPROPRIATE, SOME PURCHASE ORDERS OVER \$500,000, FOR SMALL BUSINESS CONSIDERATION AND FLOWDOWN. (DOCUMENT SAMPLE ON EXHIBIT I.)

e. ARE RECORDS MAINTAINED BY THE CONTRACTOR TO EVIDENCE CURRENT SUPPLIER BUSINESS SIZE AND STATUS? (Sample a reasonable number of certifications of SB/SDB/WOSB for those reported during the review period)

- Yes
- No. **Provide comments:** _____

f. IDENTIFY ANY ACTIVE CONTRACTS OVER \$500,000 THAT CONTAIN AN INCENTIVE FEE CLAUSE. (Identify with contract number.)

7. COMPANY SMALL BUSINESS TRAINING/RECOGNITION:

a. DOES THE CONTRACTOR HAVE AN EFFECTIVE TRAINING PROGRAM THAT REFLECTS TRAINING TO ALL EMPLOYEES THAT HAVE PROCUREMENT, REQUIREMENTS, AND SOURCE SELECTION RESPONSIBILITIES, AS WELL AS MANAGEMENT?

- Yes. **Describe:** _____

- No

b. IS THERE AN EFFECTIVE RECOGNITION PROGRAM THAT INCLUDES ALL FUNCTIONAL ELEMENTS OF THE ORGANIZATIONS INVOLVED IN THE PROGRAM?

- Yes. **Describe:** _____

- No

PART III - CONTRACTOR'S SUBCONTRACTING PERFORMANCE
SUBCONTRACTING PERFORMANCE FACTORS

1. OVERALL SUBCONTRACTING PERFORMANCE -- SF 295 SUBMISSION

a. WERE SF 295 REPORTS SUBMITTED ON TIME?

Yes

No. Identify late report(s): _____

b. VERIFY ACCURACY OF SF 295 REPORTS:

c. PERFORM TREND ANALYSIS OF PAST PERFORMANCE (*Last 5 years, if available*) AND DISCUSS TRENDS, POSITIVE OR NEGATIVE.

NOTE: Local spreadsheets, databases that contain the information are acceptable as attachment. (*Document in EXHIBIT II*)

DISCUSS:

d. COMPREHENSIVE PLANS: IN ADDITION TO THE ABOVE, PROVIDE ANALYSIS OF INDUSTRY TARGETED AREAS AS NEGOTIATED IN THE COMPREHENSIVE PLAN. (*Goals versus accomplishments*)

DISCUSS:

PART III - CONTRACTOR'S SUBCONTRACTING PERFORMANCE (Cont'd)

2. INDIVIDUAL SUBCONTRACT PLAN PAST PERFORMANCE -- SF 294 SUBMISSION

(Not Applicable to Commercial or Comprehensive Plans)

a. WERE SF 294 REPORTS SUBMITTED ON TIME?

Yes

No.

Identify late reports: _____

b. VERIFY ACCURACY OF SF 294 REPORTS:

c. PERFORM CURRENT SF 294 PERFORMANCE ANALYSIS AND ANNOTATE THE NUMBER OF PLANS MEETING OR MAKING SATISFACTORY PROGRESS OF ALL PERCENTAGE GOALS FOR THIS REVIEW PERIOD.

Total # of Plans: _____ #Goals Met: SB _____ SDB _____ WOSB _____

d. PERFORM PAST PERFORMANCE ANALYSIS OF **COMPLETED** CONTRACTS DURING THIS REVIEW PERIOD: (Document in EXHIBIT111)

(1) Total number of plans completed this period: _____

(2) Number of plans completed that met ALL percentage goals: _____

(3) Number of plans met Percentage Goals: SB _____ SDB _____ WOSB _____

(4) Discuss past performance level of previous reviews:

PART IV - SUMMARY AND RECOMMENDATIONS

1. PROGRAM RATING:

Outstanding
(Discuss exceptional areas below):

Highly Successful
(Discuss areas for improvement below):

Acceptable
(Discuss areas for improvement below):

Marginal
(Discuss deficiencies below):

Unsatisfactory
(Discuss deficiencies below):

2. EXIT INTERVIEW PARTICIPANTS:

PART IV - SUMMARY AND RECOMMENDATIONS (Cont'd)

3. SUMMARY, RECOMMENDATIONS, AND FOLLOW-UP OF CORRECTIVE ACTIONS:

4. SIGNATURE OF SMALL BUSINESS SPECIALIST

4. DATE

**OVERALL SUBCONTRACTING PERFORMANCE
FIVE YEAR TREND TABLE
EXHIBIT II**

CONTRACTOR				PERIOD COVERED	
\$ MILLIONS	FY _____	FY _____	FY _____	FY _____	FY _____
SB	\$	\$	\$	\$	\$
	%	%	%	%	%
LB	\$	\$	\$	\$	\$
	%	%	%	%	%
TOTAL	\$	\$	\$	\$	\$
SDB	\$	\$	\$	\$	\$
	%	%	%	%	%
WOSB	\$	\$	\$	\$	\$
	%	%	%	%	%
HBCU/MI	\$	\$	\$	\$	\$
	%	%	%	%	%

