Northeast Central Ohio Region Hospitals
Request for Proposal

FY12 NECO Regional
Hospital Emergency Response Training for Mass Casualty Incidents

September 13, 2012

Grant administered by:
Akron Regional Hospital Association
3200 W. Market Street, Suite 200
Akron, Ohio 44333
The Akron Regional Hospital Association, on behalf of the Northeast Central Ohio Hospital Planning Consortium (NECO), is requesting qualified candidates to submit a proposal to become eligible to facilitate the FY12 Northeast Central Ohio Regional Hospital Emergency Response Training for Mass Casualty Incidents (HERT) Training.

The Akron Regional Hospital Association (referred to hereafter as ARHA) is seeking a contractor to assist in conducting regional HERT Training(s) in the Northeast Central Ohio region as defined further in the Scope of Work: Exhibit B.

Questions regarding this project are to be directed in writing to Sarah Metzger, Administrative Director/Regional Hospital Coordinator, by email at smetzger@arha.org.

Three copies of your proposal should be delivered to the following office no later than:
5:00 p.m., EST, on October 15, 2012.

NECO/Akron Regional Hospital Association
3200 W. Market Street Suite 200
Akron, Ohio  44333
Attn:  Sarah Metzger

Sincerely,

Sarah Metzger
Administrative Director/NECO Regional Hospital Coordinator
REQUEST FOR PROPOSAL OF PROFESSIONAL SERVICE

FY12 Northeast Central Ohio Regional HERT Training

1. PROJECT INTENT

The Akron Regional Hospital Association intends to select and contract with a qualified candidate to ensure the success of this program. The successful candidate will receive a contract to perform the work for Akron Regional Hospital Association (ARHA) and NECO. The contract term terminates on June 30, 2013, unless such date is extended if additional funding becomes available.

2. PROJECT SCOPE

THE SCOPE OF WORK FOR THE PROJECT IS SET FORTH IN EXHIBIT B, ATTACHED HERETO AND FULLY INCORPORATED HEREIN.

3. PROPOSAL FOR PROFESSIONAL SERVICES

Your proposal must include at least the following:

a. Firm name and individual qualifications
   - Number of years in business
   - Qualifications and experience of personnel and résumés for each person who will work on the project
   - Role each person will hold (Project Manager, Project Leader, etc.)
   - Firm’s background
   - Conflict of Interest Disclosure

b. Geographical considerations
   - Number of offices
   - Proximity to the NECO hospitals

c. Capacity to perform work
   - Size/availability of staff
   - Firm’s equipment and facilities
   - Current projects in progress

d. References
   - Indicate other county governments or organizations for which you have performed similar work in the past three years.
   - Sample of previous work
4. PROPOSAL FORMAT

To help support the evaluation process, Proposals shall adhere to the following format.

a. Form of Proposal (See also pages 6-8)
The title page shall include the company name, address, contact and telephone number to call for information regarding the Proposal. The title page must bear the signature of an authorized representative of the Respondent and designates by name not more than two individuals authorized to negotiate and sign agreements with Akron Regional Hospital Association on behalf of the Respondent.

b. Executive Summary
This section shall provide an overview of the Proposal and the Respondent’s understanding of NECO hospital needs. Emphasis should be placed on the Respondent’s expertise in the area. It should also include any points the Respondent wishes to highlight, as well as any relevant conditions or restrictions.

c. Company Profile
The section shall provide a profile of the company, including the number of employees and their locations. Brief résumés shall be provided for each key project individual.

d. Scope of Work
The section shall specifically provide how the Respondent will fulfill the Scope of Work requirements set forth in this RFP.

e. Cost
Respondents are required to provide a costing plan for their services and a total not to exceed amount for the term of the contract. Costs must be submitted by line item as specified in Exhibit B.

5. SELECTION, EVALUATION AND AWARD CRITERIA

The proposal submitted by each contractor or contractor team will be evaluated according to the following factors:

a. Specialized experience and technical competence of the contractor(s) and assigned staff relative to the task requirements outlined in this RFP. Experience should include:
   i. an understanding of the principals of public health, hospitals, Emergency Management Agencies and private health care,
   ii. significant experience working with health care institutions and local or state public health agencies

b. Experience of the prime contractor and other staff members

c. Understanding of the nature of the project

d. Understanding of the proposed scope of work

e. Current workload

f. Willingness to comply with the Copeland “Anti-kick-back Act” (18 U.S.C. 874)

g. Respondent's proposed methodology and approach

h. General organization and clarity of the proposal
i. Project schedule and timeliness of products
j. Demonstrated company stability
k. Documented qualifications of assigned personnel
l. References reflecting the previous work experience of the project team and satisfactory accomplishment of contract responsibility
m. Quality of final products
n. Responsiveness to client input
o. Cost (firm fixed price).
   a. Total project cost and cost for individual components
   b. Project schedule and timeliness of products
   c. Total person-hour commitment

The Akron Regional Hospital Association will be the sole judges on which Response to the RFP is best.
FORM OF PROPOSAL

(Please Submit three originals to address below and an electronic version emailed to smetzger@arha.org)

The wording of the proposal shall be retained throughout, without change, alterations, or additions. Any changes in the wording may cause the proposal to be rejected.

To: NECO/Akron Regional Hospital Association
3200 W. Market Street
Suite 200
Akron, Ohio 44333
Attn: Sarah Metzger

Having read the project overview and examined the work required for the project titled:

FY12 Northeast Central Ohio Regional HERT Training

IN SUBMITTING THIS PROPOSAL, IT IS UNDERSTOOD THAT ARHA/NECO RESERVES THE RIGHT TO REJECT ANY AND ALL PROPOSALS AND WAIVE ANY IRREGULARITIES IN THE PROPOSAL PROCESS.

It is also agreed that this proposal, once submitted, may not be withdrawn for a period of thirty days (30) days from the opening thereof.

PROPOSALS MAY NOT BE AMENDED OR WITHDRAWN AFTER SUBMITTAL. All questions concerning the RFP shall be submitted in writing via email to ARHA/NECO at smetzger@arha.org. ARHA/NECO will not be responsible for oral clarifications. All written questions shall be answered and sent to all Respondents receiving this RFP package.

Every effort will be made to ensure all Respondents receive updates to this RFP. HOWEVER, IT IS YOUR RESPONSIBILITY TO ENSURE YOU HAVE RECEIVED ALL UPDATES TO THIS RFP. Please email if you have questions or periodically check our website for updates: http://web.arha.org/ProgramsServices/EmergencyPreparedness.aspx

Notice of the award shall be made in writing. Such notice will be forwarded to the Respondent at the address furnished in the proposal.

ARHA is expected to issue a "Notice to Proceed" to the selected Respondent upon the approval of ARHA’S Administrative Director, if necessary.

In the event that a contract is not entered into, even after the selection of a Respondent, ARHA will not reimburse the Respondent(s) for any expenses incurred.

The final contract will include the RFP and the successful Respondent’s responses thereto, as may be amended during the proposal/award process or the terms of the contract.
Costs for developing the proposals and any subsequent activities prior to contract award are solely the responsibility of the Respondents. ARHA will provide no reimbursement for such costs.

Respondents shall not offer any gratuities, favors or anything of monetary value to any officer, employee, agent, or director of ARHA for the purpose of influencing favorable disposition toward either their proposal or any other proposal submitted as a result of the Request for Proposal.

ARHA reserves the right to negotiate a contract, including the scope of work and contract price, with any respondent or other qualified party.

Respondent states that by signing below, Respondent has the full power, authority and capacity to execute, deliver and perform the obligations set forth in the RFP and the Contract, if selected. Respondent further states that the party signing below has the authority to bind Respondent.

Name of Respondent: _________________________________________________

If a business entity, organized under the laws of the state of: _________________

If an individual using a trade name, sign as follows: An individual doing business under the name of __________________________ and note whether the trade name is registered in their respective state.

Principal Place of Business Address:______________________________________

Date of Establishment of Place of Business: ________________________________

Federal Tax I.D. Number________________________________________

Telephone Number__________________________________

Respondent hereby certifies that this proposal complies with all minimum response requests and those requirements are hereby made part of the Respondent’s response and are incorporated herein.

SIGNATURE______________________________________________________________

BY_______________________________________________________________

TITLE: __________________________________________________________________

Date: __________________________________________________________________
CONTRACT TERMS

The successful Contractor will be expected to enter into a contract with the Akron Regional Hospital Association on behalf of Northeast Central Ohio Hospitals Planning Consortium. The following terms are indicative only, and not intended to be comprehensive, of the terms of the contract.

The contract will commence on the date agreed upon by both parties following the Written Notice of Award to the selected agency. The entire scope of work must be completed by June 30, 2013 unless this contract is suspended or terminated pursuant to the terms thereof.

1.0 Contract Administration

ARHA will administer the contract.

2.0 Invoices

Contractor is required to submit two copies of its invoice to ARHA, which invoice must include the following:

- Date
- Name & Address of Contractor
- Tax ID Number
- Remittance Address
- Billing Period
- Detail description of Services Rendered during the billing period.

Contractor’s invoices must detail Contractor’s costs and expenses in accordance with the Ohio Department of Health GAPP Manual (i.e., personnel, other direct costs, equipment and contracts).

The contractor must have all invoicing submitted to ARHA by COB on June 30, 2013. Contractor agrees to allow ten days for processing.

3.0 Termination of Contract

In the event that Contractor is in default of any of its obligations under the contract, ARHA may, without prejudice to any other right or remedy ARHA may have at law or in equity, immediately terminate the contract.

In addition, the Contractor understands that the contract will automatically terminate at such time that ARHA’s funding is terminated or expires.

In addition, ARHA reserves the right to terminate the resulting contract for its convenience by giving the Contractor fourteen (14) days written notice.

4.0 Independent Contractor Status/Responsibilities
Contractor shall be and remain an independent Contractor with respect to all services performed under this agreement and accepts full and exclusive liability for payment of any and all contributions of taxes for social security, worker’s compensation premiums, unemployment insurance, and any other tax or benefit imposed under any local, state or federal Law.

5.0 Ownership Rights and Copyright Protection

The Parties agree that Contractor retains ownership and copyright protection for written materials that were created by Contractor prior to the Effective Date of this Agreement and used by Contractor in performance of this Project.

Except as provided in the previous sentence, the Parties further agree that any items created or used by Contractor in performance of this Project, including, but not limited to, documents, data, photographs and negatives, electronic reports, records, software, source codes or other media (the “Materials”), shall become the property of ARHA. It is further agreed to by the Parties that ARHA shall have an unrestricted right to reproduce, distribute, modify, maintain and use the Materials. Contractor shall not obtain copyright, patent or other proprietary protection for such Materials. Notwithstanding the above, ARHA agrees that it will not use, directly or by implication, the name(s) or logo(s) of Contractor or the name of any employee thereof, without the prior written approval of Contractor.

6.0 Source of Funds

Contractor understands that the funds for payment under this Contract are provided in whole or part from Federal Funds. Therefore, Contractor agrees to comply with all requirements of the following that are applicable to the Contract.


In addition, in the event that Contractor fails to complete the Scope of Work on or before the contract’s expiration date, and/or fails to submit to ARHA the documentation required under the applicable federal regulations, Contractor may be required to return to ARHA all funds disbursed to Contractor, and Contractor further agrees that Contractor may not be required to receive any funds under the contract, notwithstanding the services that Contractor has provided or the expenses Contractor incurred in performing the Scope of Work.

7.0 Records and Audit

Contractor shall maintain accounts and records adequate to identify and account for all costs expended and Funds received and all other records that ARHA shall request Contractor to maintain from time to time. These accounts and records shall be retained for five (5) years after (i) expiration or termination of this Agreement; or (ii) final payment under this Contract, whichever is later, and during such period Contractor agrees to provide ARHA or ODH, or their designees, with access to and the right to examine any books and records involving transactions related to this Contract. Contractor further agrees that all such accounts and records shall be kept in an orderly and readily identifiable fashion. Notwithstanding the foregoing, if there is litigation, claims, audits, negotiations or other actions related to the Funds Contractor has knowledge of prior to the expiration of the foregoing retention period, then Contractor agrees to continue to maintain all accounts and records until the final resolution of such litigation, claims, audits, negotiations, or other actions.

8.0 Subcontractors and Assignment

This contract is based on the Contractor’s qualifications and responsibilities. Therefore, Contractor will not sublet or assign the contract nor shall any sub-contractor commence performance of any part of the work included in the resulting contract without the prior written consent of ARHA.
NECO Region 5 encompasses: Ashland County, Carroll County, Columbiana County, Holmes County, Mahoning County, Medina County, Portage County, Richland County, Stark County, Summit County, Trumbull County, Tuscarawas County, and Wayne County. The population figures for this exercise should be based on the most recent census estimate.

The training participants will represent approximately 32 regional acute-care hospitals and potentially approximately 12 other regional healthcare facilities (such as offsite emergency departments and others if deemed appropriate by the NECO Training and Exercise Design Team).

HERT Training has been offered by certified trainers multiple times through the region within the last few years. During a planning session in June, 2012 the NECO Hospital Planning Committee prioritized HERT training as a worthwhile capability and need of the NECO regional hospitals.
EXHIBIT B
SCOPE OF WORK

The candidate selected will be responsible for accomplishing, or causing to be accomplished the following. Contractors are encouraged to expand, improve and refine the Scope of Work, but not to change its intent. Contractors must address all aspects of the Scope of Work in their proposal. The contractor will be responsible for the following components:

I. General Requirements of the Contractor:

a) The contractor will adhere to the U.S. Department of Health and Human Services Office of the Assistant Secretary for Preparedness and Response (ASPR) FY2011 Continuation Guidelines and the Ohio Department of Health (ODH) Grant Administration Policies and Procedures Manual (GAPP). The contractor should use the latest TCL/UTL version.

b) All work will begin upon notice of award of the contract (on or around October 22, 2012) and the entire scope of work must be completed by June 15, 2013. The contractor must have all invoicing submitted to ARHA by COB on June 30, 2013.

c) Assign one project liaison to work with Client throughout the duration of the Project. Project liaison must be trained as a HERT trainer and must demonstrate certification with a certificate from the Center for Domestic Preparedness submitted with proposal.

d) Meet with Client at a minimum of one time to determine goals, objectives and scope of the training(s), identify variables, ensure appropriate participants are included, determine the best methods for information delivery, and develop a training schedule. These must be submitted to the Client in writing once developed.

e) Comply with FEMA and Center for Domestic Preparedness (CDP) guidelines required for certified HERT training courses or their equivalent (should the CDP decide to alter HERT training methods during the course of the contract.)

f) Use regional web portals such as necoep.org, BaseCamp, Constant Contact and potentially others, for project management, communications and information sharing with the NECO staff.

g) Conduct a brief overview (10 minutes) with the trainees on the Northeast Central Ohio Regional Disaster Planning Consortium. (Slides will be provided by NECO Regional Hospital Coordinator.)

h) All training materials will be compliant and updated with the most current Hospital Incident Command System (HICS IV or the most recent version), HSEEP, National Incident Management System (NIMS), Incident Command System protocol (ICS), CDP Hospital Emergency Response Team (HERT) and National Response Framework (NRF) procedures.

i) Contractor adheres to and bases training on OSHA Best Practices of Hospital-Based First Receivers document.

j) Regional trainings will not be specific to an individual hospitals’ system or equipment for Hospital Emergency Response. Instead, it will lay the groundwork for participants to learn and adapt the information and processes at their home hospitals. It will foster collaboration among the participants and a forum for sharing lessons-learned.
II. Project Deliverables

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<th>Deliverable</th>
<th>Cost</th>
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| a) Develop training objectives and complete the implementation of said training objectives by conducting the course as well as performing necessary pre and post assessments to gage learning activity. Objectives must include at a minimum the following as taken from the Center for Domestic Preparedness outline for HERT certified training (*exception-course does not have to be 3 days)*: Hospital Emergency Response Training for Mass Casualty Incidents (HERT) is a three-day course designed to provide medical operation guidance to hospitals, emergency medical services (EMS), healthcare facility personnel, and others who may become involved in a mass casualty incident (MCI). The course provides the healthcare emergency receiver with an understanding of the relationship between a Hospital Incident Command System (HICS), a scene Incident Command System (ICS), and other incident management systems used by municipal Emergency Operations Centers (EOC). The course also provides guidance for Hospital Emergency Response Team design, development, and training. This is a hands-on course which culminates with small and large groups practical applications. Therefore, participants must be physically and psychologically fit to wear personal protective equipment (PPE) during the training. Below are some, but not all, of the critical skill sets learned during this training program:  
  - Analyze the need for, composition of, and use of a Hospital Emergency Response Team during an emergency, MCI, or disaster situation  
  - Identify the criteria used for assessing patient medical attention priority using START and JumpSTART  
  - Recognize the step-by-step procedures for ambulatory and non-ambulatory decontamination performed in response to an MCI.  
  - Select and use the appropriate level of PPE as hospital first receivers in response to a disaster involving patient contamination  
  - Apply the proper techniques for monitoring or surveying patients for chemical, biological, or radiological contamination  
  - Conduct appropriate cut-out and decontamination operations for victims and staff during response to an MCI involving contamination |
| I. Addition: During classroom instruction the instructor will not only instruct on HICS principles but also talk about the role of the Incident Command Team during a HERT activation to manage and assist the HERT team and Emergency Department. |      |
II. Addition: During classroom instruction instructor should make some general recommendations on how to effectively management decontamination in cold weather.

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<th>b)</th>
<th>Work with the Federal Emergency Management Agency (FEMA) through the Center for Domestic Preparedness to acquire course materials and conduct course within their guidelines for HERT certification.</th>
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| c) | Facilitate promotion and registration for the course including but not limited to a “Save the Date” flier and email, invitation flier and email and registration information.  
  
i. Specify in the information that the trainees must have completed NIMS IS-700, IS-100 and IS-200 at a minimum and must provide documentation upon registration.  
  
ii. Specify that participants must be physically capable of wearing Class C PPE and they need to be able to handle the physical demands of wearing PPE during HERT operations. |
| --- | --- |

| d) | Conduct a two day HERT training course open to a minimum of 30 participants to be held no later than April 30, 2013 and no earlier than the execution of the contract with NECO. Secure meeting space, training space and AV equipment. Includes setting up/tearing down the facility and training equipment.  
  
i. Instructor should setup the equipment and walk the students through the setup process or have the students help set up the equipment and explain each and every component of setup. Students should then be walked through each section and given an awareness of the function of each piece of equipment (for example water heaters, soap injectors, collection pools and sump pumps, hoses, non-ambulatory rollers, tent lanes.) |
| --- | --- |

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<th>e)</th>
<th>Ensure appropriate equipment is provided to conduct hands-on training as specified in deliverable “a”. Contractor should require participants to bring their own Class C PPE including PAPR with filters and charged batteries, suit, boots 3 glove layers, and exam oe nitrile gloves. Students should bring PPE from their facility that they would actually use in a real incident.</th>
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<th>f)</th>
<th>Provide qualified trainers who are experienced, knowledgeable and certified as a HERT Trainers. This includes covering their travel expenses if applicable.</th>
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<th>g)</th>
<th>Provide lunch, snacks and beverages to the program attendees on both days of training. Determine delivery logistics if applicable.</th>
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<th>h)</th>
<th>Provide participants who qualify for certification with their certificate in hard copy format via the U.S. Postal Service. It should include certification of OSHA Awareness and Operations level training. Attach a syllabus to the certificate that is comprehensive of all training objectives learned.</th>
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| i) | Provide NECO with 12 or more photos of the hands-on portion of the training via CD or USB drive and with a copy of the sign-in sheet or participant list. |
| Total cost PER TRAINING: | |
III. **NECO Agrees to provide the following:**

a) Appoint a representative (Project Manager) who will work with Contractor  
b) Arrange for appropriate day and time for initial meeting to discuss Project  
c) Provide any regional documentation that will aid the Contractor in completing the Project  
   (including, but not limited to, FY11 Northeast Central Ohio Region Hospitals Multi-Year Training  
   and Exercise Plan and PowerPoint slides on the NECO Regional Disaster Planning Consortium)  
d) Distribute invitations for training to the NECO regional hospitals and other appropriate partners.

IV. **Materials**

*Training materials will be at the cost of the contractor and shall comply with Grants Administration  
 Policies and Procedure Manual Section 300.1: Property and Equipment. Any item produced under this  
 Agreement or with funds provided under this Agreement, including but not limited to any documents,  
 data, photographs and negatives, electronic reports/records, or other media rests with Ohio  
 Department of Health and title rests with the subgrantee agency.*