

# **JEFFERSON COUNTY GENERAL HEALTH DISTRICT**

## **REQUEST FOR PROPOSAL (RFP)**

Medical Mobile Unit

Jefferson County General Health District  
500 Market Street, 6th Floor  
Steubenville, OH 43952

ISSUANCE DATE:

May 25, 2021

CLOSING DATE:

Friday, June 11, 2021, 11 a.m. (EST)

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## **1. PROJECT PURPOSE**

Jefferson County General Health District (hereinafter referred to as JCGHD) is implementing a mobile community outreach program. The intent of the program is to offer immunizations, health screenings and education to those with limited access to health services: minorities, low-income families, underserved and rural communities.

## **2. PROJECT DESCRIPTION AND SCOPE**

The JCGHD is implementing an outreach program with funding received from a local foundation in conjunction with state grant funding. Proposals are currently being accepted for a new OR used mobile unit.

The scope of the project includes all design, construction, equipment training, and delivery of the mobile unit. The unit shall meet all applicable documents, publications, and standards in effect at the time of manufacture. These shall include, but not limited to, all U.S. Dept. of Transportation (DOT) and Federal Motor Vehicle Safety Standards (FMVSS), requirements as applicable.

The following criteria/equipment must be met to comply with our minimum specifications:

- New or used mobile unit, no CDL required
- Vehicle should be white in color
- Chassis shall be a Ford E-450, Ford F-550 or approved alternate
- One exam room
- Exam room door with locking ability
- Reception area with seating for at least one extra person
- 6.8L or larger gasoline engine
- Automatic transmission
- Commercial grade generator
- Hydraulic power brakes
- Antilock braking system
- Power steering
- LED lighting
- Blood draw chair
- Workstation/counter space for paper/computer work
- Storage Cabinets

- Exam Table
- Medical grade refrigerator
- Sink
- Back up camera
- Fire extinguisher
- First aid kit
- Vehicle Wrap, excluding cab

### 3. PROPOSAL SUBMISSION REQUIREMENTS

This Request for Proposal represents the requirements for an open and competitive process. **Proposals are required to be submitted on or before 11 a.m. EST, Friday, June 11, 2021.** Any proposals received after this date and time will be returned to the sender. An official agent or representative of the company **must sign all proposals by submitting a cover letter**. The cover letter must also include the primary contact's name, phone number, and email.

To be considered, all proposals must be completed and submitted following these instructions and utilizing the Cost Proposal Worksheet. Vendors may also submit any additional documentation they would like to support their proposal. Proposals not conforming to these requirements will not be considered.

The costs must be all-inclusive for parts, labor (internal and contracted), and fees for the delivered and fully equipped mobile clinic. If the organization submitting a proposal must outsource or contract any work to meet the requirements contained herein, this must be clearly stated in the proposal. Any proposals, which call for outsourcing or contracting work, must include a name and description of the organizations being contracted.

### 4. COST PROPOSAL REQUIREMENTS

Costs for the mobile clinic must appear on either the NEW or USED **COST PROPOSAL WORKSHEET that appear on the last two pages**. Vendors may include a more detailed cost proposal; however, the Cost Proposal Worksheet must be used showing the basic information requested.

**Scaled Drawing(s)** – At a minimum, provide detailed scale elevations of the unit that you propose, and a completely detailed scale floor plan, including cabinets, exam equipment, etc. (Interior and exterior images will suffice for used units.)

**Warranties** – All Vendor and manufacturer warranty information must be provided.

## 5. QUALITY AND WORKMANSHIP

The mobile clinic must be manufactured to high quality and workmanship standards such as, but not limited to:

- The mobile health unit shall be free from defects that may impair its serviceability or detract from appearance. The general appearance of the mobile health unit shall not show any evidence of poor workmanship.
- All bodies, systems, equipment, and interfaces with the chassis shall be done per the OEM's Body Builders Book.
- All components shall be new or free of defects. Parts, equipment, and assemblies, which have been repaired or modified to overcome deficiencies, shall not be furnished without the approval of the purchaser. Component parts and units shall be manufactured to definite standard dimensions with proper fits, clearances, and uniformity. Welded, bolted and riveted construction utilized shall be in accordance with the highest standards of the industry.

The following deficiencies shall be cause for rejection:

- Rough, sharp or unfinished edges, burrs, seams, corners, joints, cracks, and major dents.
- Non-uniform panels. Edges that are not raised, beveled, etc. Body panels or components that are uneven, unsealed, or contain cracks, dents or have voids.
- Paint runs, sags, orange peel, fish eyes, etc., and any other imperfection of lack of complete coverage of paints or coatings.
- Misalignment of body fasteners, glass, viewing panels, light housings, other items with large or uneven gaps, spacing, etc. such as door, body panels, and hinged panels.
- Hoses, wiring or harness routed through panels and bulkheads without grommeting or other protective insulation, routed across components in a manner allowing chaffing to occur or routed in such a manner to be damaged by the exhaust system.
- Improper electrical connections, or loose, vibrating, or abrading components.
- Interference of chassis components, body parts, doors, etc.
- Improperly supported or secured hoses, wiring harnesses, mechanical controls, etc., including interference with other components.
- Leaks of any gas, vacuum, or fluid lines (air conditioning, coolant, oil, oxygen, etc.).
- Inappropriate or incorrect use of hardware, fasteners, components, or methods of construction.
- Incomplete or improper welding, riveting, or bolting.
- Lack of uniformity and symmetry where applicable.
- Loose, vibrating, abrading body parts, components, subassemblies, hoses, wiring harnesses or trim. Noise, panel vibrations, etc.
- Improper body design that could cause injury during normal use or maintenance, and which fail to provide access to perform routine or mandatory repairs or maintenance on the mobile health unit electrical and mechanical systems. In addition, the improper combination of options which by their combination and installation are inherently incompatible regarding function or safety.

- Sagging, non-form fitting upholstery or padding.
- Incomplete or incorrect application of rustproofing.
- Equipment malfunctions.
- Inadequate welding, riveting, bolting, or attachment of components.
- Visual deformities.
- Unsealed appurtenances or other body components, leaking gaskets, etc.
- Delamination of plastic composition materials.
- Any deviation from specification requirements or manufacturer's standard production practice whether or not stipulated herein, that detracts from form, fit, function, durability, reliability, safety, performance, or appearance.

Any deviation from specification requirements or any other item, whether or not stipulated herein, that affects form, fit, function, finish, durability, reliability, safety, performance, or appearance shall be cause for rejection.

## 6. PROPOSAL EVALUATION CRITERIA

JCGHD will award this contract based on the most responsible and responsive proposal received. Price is important, but price alone will not be the sole determination for an award. The determination for the award is the absolute and complete responsibility of JCGHD personnel. Issues such as conformance to the specifications contained herein, reference feedback, experience at similar projects, length of time in business, the quality of construction proposed, design details, warranty, and many other factors including price will be judged. JCGHD reserves the exclusive right to reject, for any reason at its sole discretion, the proposal of any vendor. By signing your RFP response proposal, you agree to the award criteria and process stated in this paragraph.

JCGHD will evaluate all proposals based on the following criteria. To ensure consideration for this Request for Proposal, your proposal should be complete and include all the following criteria:

- Overall Proposal Suitability: proposed solution(s) must meet the scope and needs included herein and be presented in a clear and organized manner.
- Value and Cost: Bidders will be evaluated on the cost of their solution(s) based on the equipment produced and work to be performed in accordance with the scope of this project.
- Production Time and Delivery Date: Proposals will be evaluated based on the respondent's production time and the proposed delivery date.

## 7. REQUEST FOR PROPOSAL QUESTIONS

Each vendor must submit questions via email to Andrew Henry (ahenry@jchealth.com). The email subject line for all correspondence should read **RFP MOBILE MEDICAL UNIT (all caps)**. Questions will be answered within one business day via email with a return reply acknowledging receipt of the email requested.

## 8. SUBMISSION PROCEDURE AND PROJECT TIMELINE

Proposals must be submitted **on or before 11 a.m. (EST) on Friday, June 11, 2021.** All proposals should be submitted to:

**Jefferson County General Health District  
Attn: RFP Mobile Medical Unit  
500 Market Street, 6<sup>th</sup> Floor  
Steubenville, OH 43952**

Evaluation of proposals will be conducted within 5 days of the bid opening. If additional information or discussions are needed with any vendor during the evaluation period, the vendor(s) will be notified. Qualifying bids will be presented to the JCHGD Board of Health for discussion/review and selection.

Final contract terms and conditions will be negotiated with the selected vendor. All contractual terms and conditions will be subject to review by JCGHD Board of Health and/or legal department and will include scope, budget, schedule, and other necessary items pertaining to the project.

### **Equipment Construction Timeline**

The timeline/schedule for the vehicle build phase of the project is negotiable, but the desired delivery date for the mobile clinic is **August 30, 2021, or your earliest date thereafter.**

JCGHD reserves the right to waive irregularities and to reject any or all bids. RCMC also reserves the right to negotiate with the selected vendor in the event the price exceeds available funds.

JCGHD may consider informal any bid not prepared and/or not submitted in accordance with the provision hereof and may waive any informalities or reject any and all bids. Any bid may be withdrawn prior to the above scheduled time for the closing of bids or authorized postponement thereof. Any bid received after the time and date specified shall not be considered.

## 9. CHECKLIST OF ITEMS TO BE RETURNED

To be considered all proposals must be complete and submitted following these instructions and utilizing the Cost Proposal Worksheet. Vendors may also submit any additional documentation they would like to support their proposal. Proposals not conforming to these requirements will not be considered.

### **Due on or before 11 a.m. EST on June 11, 2021.**

- Cover Letter signed by an authorized company representative with respondent contact information

- Scaled Drawings and/or Interior/Exterior Images depicting the submitted proposal illustrating the layout
- Overview of end to end project timeline and major steps/checkpoints with the estimated delivery date specified
- Copy of the Standard Purchase Agreement which includes payment schedule and all terms and conditions
- Completed New OR Used Cost Proposal Worksheet which must be filled out in its entirety and contains:
  - Financial Quote
    - Base Vehicle cost, fees, standard equipment/features
    - Optional Accessories included in the proposal
    - Medical Equipment
    - Additional Options Offered
  - Warranty Information
  - Training Provided



# NEW VEHICLE

## MOBILE MEDICAL UNIT COST PROPOSAL FOR JEFFERSON COUNTY GENERAL HEALTH DISTRICT

All cost proposals must include the following, at a minimum. However, vendors may include a more detailed cost proposal.

<b>VEHICLE INFORMATION</b>	
Vehicle Brand and Model:	
Model Year:	
<b>BASE BID:</b>	
Vehicle Chassis	\$
Interior Options	\$
Exterior Options	\$
HVAC	\$
Plumbing (no bathroom, sink only)	\$
Generators & Power Supplies	\$
Custom Medical Equipment	\$
Graphics/Wrap Package	\$
Other Costs (title, delivery, etc. – specify):	\$
<b>Total Base Bid (Not to exceed)</b>	<b>\$</b>

**Cost Proposal Certification**

Bid is firm for \_\_\_\_\_ days (60 days minimum) and signed by the following individual authorized to certify pricing and enter into agreements.

Contractor Name:	
Contractor Address:	
City, State, Zip:	
Representative Name (Print):	
Representative Signature:	
Representative Title:	