



Sacramento Metropolitan Fire District

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RFFP13-13: Comprehensive ePCR System Question and Answers

10/21/2013 – Compilation of Questions and Answers from Prospective Proposers:

GENERAL INFORMATION:

Q: Will any addenda released relating to this RFP be sent via email?

A: Any addenda will be personally sent to the firms that have sent a notification of their intent to submit. Additionally, addenda will be posted on the District's website.

Q: Are you permitted to provide an editable version of the RFFP document for the purpose of reproducing the format for completion/submission?

A: We do not provide editable versions of our proposal documents. The Adobe Reader software has the ability to do a File, Save As. What we are unsure about, and cannot test for you, are whether or not Adobe requires that you login to their website and register and/or pay a fee for the service. You can attempt to just 'cut and paste' items from the Request for Proposal into your response document. The PDF file of the proposal is not saved as an image. Therefore, you can highlight selected text, and copy to your document.

Please remember that you are required to submit the original Request for Formal Proposal document (as amended) with all pages signed. Using the above referenced 'cut and paste' solution does not substitute for including the original Request for Formal Proposal document with your response.

RFFP SCHEDULE (Page 1):

Q: Would you kindly advise if an extension will be considered given the detailed nature of the answers requested in this RFP and the accompanying short deadline of October 25, 2013?

A: We will not be extending the closing date on this request for proposal.

Q: In the RFFP schedule, it notes in the 'published dates' section October 12 and October 17, 2013. Could you provide clarification to the meaning of this?

A: The published dates are a notification in our local newspaper of the bid opportunity. We usually put a notification about 5 days apart

QUALIFICATIONS (Page 4):

Q: We see that one of the hard requirements is that the vendor have at least one Client with a call volume greater than 30,000 calls per year. As we service a number of medium-to-large size departments, the biggest one falls short of 30K. As we do not wish to waste your or our time based on a technicality, does this completely eliminate our company's bid for your business?

A: The condition that a vendor has at least one client with a call volume of 30,000 or greater is indeed a hard requirement. We will not entertain proposals from vendors that don't meet this prerequisite.

PRODUCT DEMONSTRATION (Page 5):

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Question and Answers (Continued)

Q: With the proposal due 10/25 and the bid opening on 10/28, does this give the District adequate time to fully review proposals to determine who to select for demonstrations in time for 10/30 and 10/31?

A: We may be flexible on the demonstration dates. Product demonstration meetings will be tentatively scheduled between October 30, 2013 and November 15, 2013. All proposers selected for a product demonstration will be contacted by District personnel giving them the date and time they have been scheduled for. We will make adequate time to fully review all responsive bids.

BID SECURITY (Pages 5-6):

Q: The RFP requires proposers to submit a **10 percent security** (check or bond) with the proposal. *For established firms, can this requirement be waived, while*

(a) maintaining the performance bond?

(b) without the performance bond?

A: Bid Security will be payable to District in the amount of 10% of the Proposal price excluding any pricing for computer hardware. (Revised 10/22/2013)

Q: For established firms, can the **performance and payment bond** be waived?

A: A Performance and Payment Bond will not be required for this proposal. During Contract negotiations, milestones will be established to monitor performance. (Revised 10/22/2013)

Q: Related to the **security bond** (10 percent), the RFP states that the awarded proposer's security bond will be forfeited if the successful proposer fails to deliver the product **within 60 days of bid award**. While full project implementation can take between 45-60 days *once the project starts*, we often find that implementation may delay based on client schedules and the number of days between award, contract execution, and project start date. *Can this requirement (if the security bond remains as a requirement) be:*

(1) reworded to recognize "project start date" (vs. award) and

(2) conditioned on the Agency's ability to meet the proposed work plan as negotiated during contract negotiation?

A: The project start date will be at the time of a signed contract. The product delivery date will be determined during contract negotiations.

Q: Related to the **Performance and Payment Bond** (100 percent) and the **contract term** (five years/60 months). Is the amount of the performance and payment bond applicable for the first year contract costs or the total five years' cost?

A: A Performance and Payment Bond will not be required for this proposal. During Contract negotiations, milestones will be established to monitor performance. (Revised 10/22/2013)

Q: Related to the **Performance and Payment Bond**, and **performance**, and beyond *General Conditions, Sections 10 and 18*, how is performance specifically measured?

A: A Performance and Payment Bond will not be required for this proposal. During Contract negotiations, milestones will be established to monitor performance. (Revised 10/22/2013)

Q: In relation to both bonds, what cost categories should the bond amounts apply to:

- Software
- Service
- Hardware

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- Interfaces
- Training
- System Documentation
- Updates
- Custom Modifications
- Shipping Fees
- Taxes

A: Bid Security will be payable to District in the amount of 10% of the Proposal price excluding any pricing for computer hardware. (Revised 10/22/2013)

Q: The District is asking respondents to submit a Bid Security "in an amount of ten percent (10%) of the Proposer's maximum Bid price." Should we calculate the 10% Bid Security by using a bid price that includes the cost of hardware, or a bid price that just includes the cost of software?

A: Bid Security will be payable to District in the amount of 10% of the Proposal price excluding any pricing for computer hardware. (Revised 10/22/2013)

SUBMITTAL FORMAT (Page 6):

Q: How should respondents provide the "electronic copy?"

A: Please provide on a CD, or other portable device (i.e. flash drive).

VENDOR PROFILE (Pages 6-7):

Q: The RFP states the need for installation into 80 Units. How many of those units will need the ability to enter an unlimited number of PCR's vs. 500 or less per year? Please note a PCR is only counted on the unit that closes the PCR, a transferred PCR does not count against the total for the unit transferring the PCR.

A: Metro Fire will have 25 units that produce more than 500 PCRs per year and 55 units that will produce less than 500 PCRs per year. (Revised 10/22/2013)

Q: Regarding the **80 devices**, are these tablets and/or laptops? If so, what number of each?

A: The District would like to look at whatever hardware the vendor recommends for use with its ePCR program. We are not limited to tablets.

Q: Our test/training servers are not covered under our standard Service Level Agreement (SLA). Would the District accept our Beta/Test User Agreement for this purpose?

A: Submit the Beta/Test User Agreement for our review. (Revised 10/22/2013)

Q: Is your CAD integration experience requirement with a system greater than 30K calls specifically for Northrop Grumman? Or would similar CAD integrations over 30K calls be acceptable?

A: No, there is no expectation that the 30k calls must be with a Northrop Grumman

Q: What is your preference of application? Locally installed and hosted or ASP model?

A: Respondent should feel free to show us either or both if available

Q: Do you have your own procurement for hardware or are you looking to have hardware provided by the vendor?

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Question and Answers (Continued)

A: Respondent should feel free to show us either or both if they can provide both options

Information Technology (Page 7):

Q (1): We would like to have documentation of the MySQL database structure.

A: The District's CAD system is owned by the Sacramento Regional Fire Emergency Communications Center (SRFECC). Once a vendor is selected and signs an NDA with the Communications Center, they will have access to the database structure. (Revised 10/22/2013)

Q (1): Is the MySQL replication in real-time, or is there a delay? If there is a delay, how long is the delay? Is the delay until call-closed?

A: Real-Time (Revised 10/22/2013)

Q (1): Is a data dictionary to the database available?

A: Yes (Revised 10/22/2013)

Q (1): Will the successful proposer have access to the database on DMZ?

A: The District's CAD system is owned by the Sacramento Regional Fire Emergency Communications Center (SRFECC). Once a vendor is selected and signs an NDA with the Communications Center, they will have read-only access to the database in the DMZ. (Revised 10/22/2013)

Q (2): Can the District clarify the mapping feature? Is it a technical map for data, or a physical location map? Coordinate capture or base map display for incident capture?

A: This question refers to physical mapping of the incident address to direct the crew to the incident.

Q (3): Can the District provide an interface document for TeleStaff integration for our review?

A: The district does not have an interface document for TeleStaff.

Q (9): you state "Please provide a list of all billing interfaces with which your ePCR application can provide seamless, real-time integration that allows for billing the same day service is provided". - Is the same day service referring to the same day that service is provided to patients, or the same day that Sacramento Metro Fire decides to go live with the chosen ePCR vendor?

A: This refers to the date the patient received service

Q: With regard to hardware. If a vendor has multiple options for hardware, would you want to see all of these options (IE tablet, laptop, ruggedized laptop)?

A: Yes, we would like to evaluate any hardware you recommend for use with the ePCR program.

Q: Who does Sacramento Metro Fire currently use for their billing services and do you have any requirements for integration with them?

A: As stated in the RFP, Wittman Enterprises currently provides our billing services. Yes, we would like the ePCR to integrate with the biller.

Q (14b): When you reference tickets, are you talking about tickets/id number received data from CAD, assigning an ePCR number, a support ticket, or something else?

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Question and Answers (Continued)

A: Ticket refers to a Patient Care Report number for the incident. In our current system this would be the Master Incident Number generated by the CAD.

Q: Can the District provide an interface document for TeleStaff integration for our review?

A: The district does not have an interface document for Telestaff.

Q: How are you connected to the Internet in the field? Ambulance hot spots? In Motion gateway? Wireless cards? Other?

A: Hardware currently in use in the field have LTE and any new devices should have LTE capability as well.

Field Use (Pages 8-9):

Q (1e): When you talk about rules at a later date, are you asking for a method to run the rules against historical runs or just an additional validation (close call) step for future runs?

A: An additional close call rule for future runs.

Q (5b): When talking about previous ECG rhythms, are you talking about a history of the ECG rhythms based on the patient, the ability to show the ECG rhythms from a recently completed run, or simply the ability to show previous and current data to the hospital staff in any manner?

Q (5b): Will the software allow the mobile device to show paramedics and hospital staff running views of previous ECG rhythms and uploaded data from the LP-15? Could you please clarify what is meant by "running views of previous ECG rhythms..." (e.g. From the monitor, or bringing back a rhythm or reading from last month)?

A: Can your software display the LP-15 ECG of the patient on the mobile device the ePCR software is located? Using the "Code Stat Suite" software (Physio Control Software Development Kit) from Physio Control, some vendors have enabled the paramedic to view and replay every ECG viewed while the patient was connected to the LP-15. A "running view" means that every second the ECG was displayed on the LP-15 screen can be replayed once the LP-15 data is downloaded to the mobile device. If you answer yes, please explain how this occurs and give us an example of an agency that we can contact that is using this function. We use LP-15s with Titan Gateways.

Q (9): Please clarify "major body part". Does this suggest only, extremities, torso, head are the "major body parts" or to what extent does the specificity extend.

A: Head, torso, extremities.

Q (11): Is this asking about using zip codes to fill out city, state, and zip code? or something else?

A: If the crew enters an address, can the ePCR automatically fill in the zip code?

Q (13, part 2): When referring to typing in a medication, are you referring to medications currently being taken by the patient, or typing in a new medication that will be administered by the EMT?

A: This refers to the patient's medications and medications the medic may administer.

Q (17): What unit identifier are you talking about? pounds/kilograms, miles/Kilometers, Fahrenheit/Celsius, other?

A: The unit identification as identified in the CAD, for example Medic 53 is "M53", Engine 53 is "E53", Truck 109 is "TR109".

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Question and Answers (Continued)

Q (19): Does the wording "Within Normal Limits" need to be exact or do you consider it to be in line with the new NEMSIS v3 value of "Normal"?

A: The NEMSIS v3 value of "Normal" meets our needs.

Q (29): Please specify the type(s) of call that will be documented; time taken to complete a PCR can vary greatly depending on the call type.

A: A routine ALS EMS call that includes transport and at least 2 sets of vital signs, oxygen, cardiac monitoring, and IV.

Q: Are you using Physio-Control's LIFENET mobile gateway to transmit your 12 leads to the hospital?

A: Yes, we are using Physio-Control's LIFENET mobile gateway to transmit 12 leads to the hospitals.

HOSPITAL INTEGRATION (Page 10):

Q (1): Is it the intent to provide the same data output format to all hospitals? If so what format is needed? If not what format does each Hospital require?

A: We do not have agreements from any of the hospitals at this time. We will likely start off by faxing the PCR to the hospital.

Q (7 & 8): We can import multiple data formats; what data format will the hospitals be providing? Do all your receiving Hospital provide the same data format?

A: We have not yet exchanged data with any of the hospitals, but this is a goal we intend to pursue as soon as we acquired an ePCR system. In our county there are three hospital systems that use the Epic software (University California, Kaiser, and Sutter) and one hospital system uses Cerner (Dignity Health Care). We use Wittman Enterprises for billing. If you have you exchanged information with any of these hospital systems we would like to know.

Q: Are your hospitals committed to your move to an electronic format? Are they supporting you in the move to send and receive data?

A: No, there is no current plan to send and receive data with the hospitals

Additional comment regarding Hospital Integration: Metro Fire currently does not interface with local hospital systems since we are using paper PCRs. Metro Fire intends to pursue an integration of data with the hospital systems after an ePCR system is functioning smoothly. This request is for an anticipated future functionality. **Revised 10/22/2013**

CQI/QA (Page 10):

Q (5a): What is the definition of a platoon for SMFD?

A: A platoon refers to a shift. We have a 3 platoon system with A, B and C shift. Each platoon works a 48-hour shift, then has 96 hours off.

PROPOSAL SUBMISSION INSTRUCTIONS (Page 14):

Q: The proposer submission instructions on page 14 state "The proposal packet shall contain the following documentation: The "Request for Formal Proposal Document" with signature, title, date, printed name and company name at the bottom." *Should we include the original RFFP under these directions and as an attachment, or the proposal response under these directions? Since the intent is to assure that we have ready every page of the RFFP, is it the first scenario and not the latter?*

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A: The intent is exactly to make sure you have read the complete proposal as stated and signed each page. Your first scenario is correct.

PROPOSAL CHECKLIST (Page 20):

Q: The proposal checklist has a space for **workers' compensation and insurance forms**, *but those can be provided after award as provided in the RFFP?*

A: The requirement to provide insurance information has been removed from the checklist. The successful proposer will be required to submit insurance information after notification of award. **(Revised 10/22/2013)**