Inventory Management Project  
Request for Proposal (RFP)

December 9, 2014

SCOPE OF WORK
The Metropolitan Chicago Healthcare Council is soliciting proposals from prospective consultants to operate, maintain and monitor an electronic inventory management system/database. This database is used to track all assets purchased with Assistant Secretary for Preparedness and Response (ASPR) funding. Prospective consultants will also be responsible for the maintenance of 156 ventilators and IMS project expansion into healthcare facilities. Additionally contractor will be responsible for performing annual Chicago Healthcare System Coalition for Preparedness and Response (CHSCPR) visits including a warehousing facility storing ASPR/HPP assets to assure that stored and deployed equipment and supplies are maintained and in a ready state that, at a minimum, meets The Joint Commission standards and Good Manufacturing Practices (GMP) Guidelines for each type of equipment, materials and supplies.

Selected consultants will work with hospital healthcare system preparedness coordinators, CHSCPR preparedness committees/subcommittees, MCHC staff, and the Chicago Department of Public Health (CDPH). This collaborative approach will be utilized to ensure that all tasks are within standards and guidelines set forth by the aforementioned accrediting agencies and organizations.

Proposals must be post marked by January 8, 2015.

Please submit proposals to the following address:

Ms. Keneatha Johnson  
Clinical Services, Program Manager  
Metropolitan Chicago Healthcare Council  
222 S Riverside Plaza, Suite 1900  
Chicago, IL 60606

Late proposals will be returned unopened. Three hardbound copies and three (3) CD copies of the proposal are required. Faxed proposals will not be accepted. MCHC will post any supplemental information as necessary on the MCHC web site: www.mchc.com under Business Community. Please visit our website periodically to check for any additional information.

BACKGROUND
The events of September 11, 2001, and the anthrax attacks that followed, highlighted the importance of the local, state, and federal public health systems. In 2009-10, the H1N1 influenza pandemic again underscored the importance of communities being prepared for health threats. Preparing adequately for public health emergencies requires continual and coordinated efforts that involve every level of government, the private sector, non-governmental organizations, and individuals (January 21, 2013:http://www.cdc.gov/phpr/areweprepared.htm)
In order to support the ability to address a public event or incident such as a pandemic influenza, the Chicago Department of Public (CDPH) maintains and stores caches of medical assets that can be deployed to hospitals and/or emergency medical services (EMS) agencies if requested. In conjunction with CDPH, the Chicago Healthcare System Coalition for Preparedness and Response (CHSCPR) has implemented protocol for the direction and distribution of medical assets.

**DELIVERABLES**
The following products will be designed, conducted and evaluated:

- **Inventory Management System**
  - Support/technical guidance on logistics and software products of the Inventory Management System.
    - Ensures planning for the delivery of the necessary logistic components in compliance with industry and government standards.
    - Provide technical guidance to program and project managers.
  - Responsible for overseeing and managing the day-to-day operations of the ASPR/HPP asset program.
    - Identify potential issues and solutions through data analysis, reduction, and entry.
    - Provide identified point(s) of contact to be dedicated to assist MCHC and CDPH 24/7 in case of an emergency
    - Create protocol for requesting, moving (including putting away) and receiving stored equipment for use during an emergency event
  - Provide oversight and management of the day-to-day inventory management operations.
    - Assure that stored and deployed items are maintained as required by MCHC and are in a ready state for deployment that, at a minimum, meets The Joint Commission standards for each type of equipment.
    - Assure that all palletized items are appropriately stored and identified
    - Oversight of re-palletizing and labeling of stored assets
    - Creating/updating protocol/SOG for maintaining, receiving and moving stored assets
  - Track inventory based on:
    - Pallet requirements
    - Minimum order requirements
    - Expiration dates
    - Inventory on hand and;
    - Inventory on order.
  - Provide adequate resources to address
    - Quality assurance
    - Potential issues/risks and solutions that are based on data analysis, reduction, and entry.
  - Updates and maintains inventory and records including but not limited to:
    - Recording type and quantity of materials
    - Locating and moving materials
    - Determining overdue materials
    - Preparation of production records

- **Ventilator Maintenance**
Operational Qualification

- Quarterly operational verification recommended for all 156 ventilators. This operational check performed quarterly will serve as a periodic inspection and operational verification as prescribed by CDPH for all inventory and other supplies stored at the EAMC under existing inventory protocols.
  - Inspection of Vent for completeness
  - Confirm all needed ancillary materials present
  - Confirm “ready to deploy” condition of crate/case
    - Confirm location, serial, asset, and indicator tags
  - Dusting / wipe down / cleaning of exterior
  - Operational exercising/powering up unit
    - Perform manufacturer prescribed operational check (via HMI).
    - Confirm proper charging and battery fitness (load test)

Biannual Preventative

- The preventative maintenance that would fall in line with the manufacturer recommendations/CTS recommendations as outlined in the original ventilator contract for Ventilator Service/Maintenance.
  - Includes full annual PM kit and recalibration per manufacturer standards.

Documentation and QAQC for Equipment Accountability and Traceability

- Maintain equipment records in FDA compliant database approved form biomedical equipment maintenance
  - Update all records as work or maintenance if performed
  - Enter all equipment by serial numbers and schedule all maintenance and qualification in automated system
  - Utilize system to generate reports and update “readiness” availability in IMS

Annual Inventory Site Visits and CHSCPRT Partner locations

- Annual inventory allows for inventory validation of all materials purchased/account for where items have been issued/removed from the emergency cache.
- Review recommendations where product has been identified that should be rotated out of stock at locations/MCHC to discuss w/emergency POCS items identified that may be deemed unfit for use see “white paper” recommendations i.e. “glove fitness testing”.
- Review individual hospital recommendations upon close out to address issues identified where storage conditions may have caused product degradation/efficacy.

- Inventoried items will include but are not limited to:
  - Pharmaceuticals
  - Personal Protective Equipment (PPE)
  - Decontamination equipment and supplies
  - Evacuation equipment and supplies
  - Interoperable Communications equipment and supplies
  - Fatality Management equipment and supplies
  - Mobile Medical Equipment and supplies
  - Burn Cache supplies
  - Other miscellaneous emergency preparedness equipment and supplies

EAMC Annual Inventory

- City of Chicago’s Emergency Asset Management Cache warehouse (EAMC)
  - Inventory stored at the EAMC in designated storage areas should be counted/verified.
• IMS Project Expansion
  o Required to expand the IMS project and its capabilities to three organizations.

SCOPE OF WORK
MCHC has developed a general scope of work. Proposals should indicate that the respondent is proposing on the entire scope of work and deliverables indicated within the solicitation. Respondents may include further detail regarding methodologies or approaches being proposed.

CONTRACT PRICE
The contract will be awarded as a fixed fee. The proposal must indicate the cost of services to be provided. The proposal must also include a schedule, broken down by task and personnel hours or time commitment for each task. A project time line/schedule must also be included.

REQUEST FOR REFERENCES
Applicants must provide three current references for which similar work has been performed.

MINIMUM REQUIREMENTS
The responding applicant must:
• Have at least one staff with a minimum of five years of demonstrable experience in public health emergency planning
• Possess at least three staff with training and certification in HSEEP
• Provide demonstrable experience in the successful design and after action reporting of a wide range of emergency preparedness exercises.
• Hospital exercise experience in the City of Chicago is preferred

MANAGEMENT PROPOSAL
Provide a narrative description with a budget and schedule to each of the specifications below. Maximum two page response per each section.

• Experience, Knowledge and Expertise
  o At least 10 years of experience in bio pharm production controls, software/hardware integration, design, development, and testing.
  o Use of IMS for health care logistics and managing large scale bio repositories
  o Experience working with public health agencies
• Qualifications and Added Value
  o Describe in one page or less why you believe the experience, knowledge and expertise possessed by your organization would be the best choice for MCHC as the selected vendor for the projects described in the scope of work.
• Approach and Methodology
  o Provide a written response to the steps and related rationale your organization would utilize to successfully complete all deliverables specified in the scope of work.

EVALUATION CRITERIA
Proposals will be evaluated according to the following factors, in order of priority.
• Specialized experience and technical competence of the contractor and staff relative to the scope of work
• Understanding of the nature of the project
  o Understanding of Federal, state and local requirements and regulations
  o General understanding of regional conditions related to this project
• References reflecting previous work experience of the contractor and assigned staff and satisfactory accomplishment of contract responsibility
  o Ability to meet work schedules
  o Quality of work
• Project cost
  o Total project cost
  o Project schedule and timeline

SELECTION PROCEDURES
Vendors/Consultants will be selected by MCHC after analysis of all information submitted in the proposals. MCHC reserves the right to negotiate a contact, including the scope of work with any other qualified party.

This request does not commit MCHC to award a contract or pay any costs incurred in preparation of a response to this request. MCHC reserves the right to accept or reject any or all responses received as a result of this request.

Respondents shall not offer any gratuities, favors, or anything of monetary value to any officer, employee director of MCHC for the purpose of influencing favorable disposition toward their proposal.

All proposals submitted in response to this request become the exclusive property of MCHC.

ADDITIONAL INFORMATION
Please direct inquiries to Keneatha Johnson at kjohnson@mchc.com. In order to ensure that all potential respondents receive the same information relative to this solicitation, MCHC will post response for supplemental information requested on the website www.mchc.com.

  All work must be completed no later than June 1, 2015. No extensions will be granted.