UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA
BID NO. 2010-27
JANITORIAL SERVICES
ENTERPRISE HEALTHCARE BUILDING

December 29, 2010

ADDENDUM NO. 4

Please delete the following section(s) in its entirety and replace with the following:

I. INSTRUCTIONS TO BIDDERS

37. POLICY I-66:

Adherence to Policy I-66 Vendor Roles, Responsibilities and Credentialing **Exhibit G**.

III. SPECIAL CONDITIONS

6. HOURS OF SERVICE

A. Normal business hours for SUCCESSFUL BIDDER'S Service Station shall include at minimum Monday through Friday, 8:00 a.m. to 5:00 p.m. PST.

B. Individual Tenant/Pod Hours of Operation are as follows:

Pod 1 – UMC Physicals: 7:00 A.M to 7:00 P.M. Monday, Wednesday, Thursday; and 7:00 A.M. to 11:00 P.M. Tuesday and Friday

Pod 2 – Nevada Health Center: 7:00 A.M to 4:30 P.M. Monday – Friday

Pod 3 – Nevada Health Centers WIC: 7:30 A.M to 4:30 P.M. Monday - Friday

Pod 4 – UMC Quick Care: 8:00 A.M to 6:30 P.M. Monday - Sunday

IV. TECHNICAL SPECIFICATIONS

TS.1 Location

The Enterprise Healthcare Building is located at 1700 Wheeler Peak Drive, Las Vegas, Nevada, 89106.

The Successful Bidder shall be responsible for approximately 17,331 total square feet including common areas.

UMC manages the property for Clark County, Nevada, and occupies approximately 11,422 square feet.

Other tenant(s) occupy the balance (Pods) and each share in the Common Area cost of maintenance as shown below.

Pod 1 – UMC Physicals: 5,485 sq ft + 631.50 sq ft Common Area = **6,116.50 total s/f**

Pod 2 – NV Health Center: 2,733 sq ft + 631.50 sq ft Common Area = **3,364.50 total s/f**

Pod 3 – NV Health Centers WIC: 1,913 sq ft + 631.50 sq ft Common Area = **2,544.50 total s/f**

Pod 4 – UMC Quick Care: 4,674 sq ft + 631.50 sq ft Common Area = **5,305.50 total s/f**

Lobby/Common Area – 2,526 sq ft (equally divided between the 4 Pods = 631.50 sq ft each)

TS.4 Day Porter Services

Successful Bidder will provide personalized day porter services, at the direction of the Building Manager, five (5) days per week, Monday through Friday between **6:30 a.m. and 2:30 p.m**. Currently, this requirement is staffed with a single individual. While the day porter may be assigned cleaning duties as determined by the contractor, the primary purpose of this position is to address any immediate cleaning needs of the tenants. Day Porter Service hours may change as needed.

Please delete the following in its entirety and replace with the following:

1. **Exhibit G - POLICY I-66:**

   Please delete Exhibit G Policy I-179 in its entirety and replace the attached Exhibit G Policy I-66 (revised 12/29/10).

2. **Bid Form**

   Please delete the Bid Form section in its entirety and replace with the attached Bid Form (revised 12/29/10).

3. **Addendum 1 Floor Plans:**

   Q.17 May we obtain a copy of the floor plans?

   A.17 ~~See "Enterprise Floor Plan" as attached to email November 16, 2010.~~

   Please use the revised floor plans as attached to this Addendum #4 email as of 12.29.10.

Bid Opening Date

The Bid Opening date of Thursday, January 6, 2011 at 2:00:00 P.M. PST remains unchanged.

Should you have any questions, please contact me at (702) 207-8291 or via email at Rebekah.holder@umcsn.com.

Issued by:

Rebekah Holder
Sr. Contract Management Analyst

EXHBIT G

UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA
ADMINISTRATIVE POLICY AND PROCEDURE MANUAL

SUBJECT: **Temporary Staffing/Third-Party Equipment**		ADMINISTRATIVE APPROVAL**:**
EFFECTIVE: 9/96	REVISED: 6/99, 10/01, 4/07, **1/08**	
POLICY #: I-66		
AFFECTS: Organization wide		

PURPOSE:

To assure that contractual agreements for the provision of services are consistent with the level of care defined by Hospital policy.

To ensure the priority utilization of contracted services, staffing and equipment

POLICY:

1. All entities providing UMC with personnel for temporary staffing must have a written contract that contains the terms and conditions required by this policy.

2. All equipment provided and used by outside entities must meet the safety requirements required by this policy.

3. Contracts will be developed collaboratively by the department(s) directly impacted, the service agency and the hospital Contract Management Department.

4. Contracts directly related to patient care must be reviewed and evaluated by the Medical Executive Committee to ensure clinical competency.

5. The contract must be approved by the Chief Executive Officer prior to the commencement of services.

TEMPORARY STAFFING:

Contractual Requirements

The contract must require the Contractor to meet and adhere to all qualifications and standards established by Hospital policies and procedures, by The Joint Commission and by all other applicable regulatory and/or credentialing entities with specific application to the service involved in the contract.

In the event a contractor contracts with an individual who is certified under the aegis of the Medical and Dental Staff Bylaws, Allied Health, the contract must provide that the contracted individuals applicable education, training, and licensure be appropriate for his or her assigned responsibilities. The contracted individual must fulfill orientation requirements consistent with other non-employee staff members.

Records concerning the contracted individual shall be maintained by Hospital's Department of Human Resources (HR) and the clinical department directly impacted by the services provided under the contract. Human Resources will provide Employee Health and Employee Education with an on going list of these individuals and department in which they work.

Laboratory Services

All reference and contracted laboratory services must meet the applicable federal regulations for clinical laboratories and maintain evidence of the same.

Healthcare Providers

In the event a service agency employs or contracts with an individual who is subject to the Medical and Dental Staff Bylaws, or the Allied Health Providers Manual, the contract must provide that the assigned individual's applicable education, training, and licensure by appropriate for his or her assigned responsibilities. The assigned individual must have an appropriate National Provider Identifier (NPI).

Clinical Care Services

The contractor may employ such allied health providers as it determines necessary to perform its obligations under the contract. For each such allied health provider, the contract must provide that the contractor shall be responsible for furnishing Hospital with evidence of the following:

1. The contractor maintains a written job description that indicates:

    a. Required education and training consistent with applicable legal and regulatory requirements and Hospital policy.

    b. Required licensure, certification, or registration, as applicable.

    c. Required knowledge and/or experience appropriate to perform the defined scope of practice, services, and responsibilities.

2. The contractor has completed a pre-employment drug screen and a background check with UMC's contracted background check Vendor. Testing should include HHS Office of Inspector General (OIG), Excluded party list system (EPLS), sanction checks and criminal background. If there is a felony conviction found during the background check, UMC's HR department will review and approve or deny the Allied Health Practitioner access to the UMC Campus. University Medical Center will be given authorization to verify results on line by the contractor.

3. Double TB Skin Testing of the individual and, for individuals in Exposure Categories I and II, has offered the individual the option of receiving Hepatitis B vaccine or a signed declination if refused. Chicken Pox status must be established by either a history of chicken pox, a serology showing positive antibodies or proof of varivax and other required testing. Ensure these records are maintained and kept current at the agency and be made available upon request. Contractor will provide authorization to University Medical Center to audit these files upon request.

4. The contractor has completed a competency assessment of the individual, which is performed upon hire, at the time initial service is provided, when there is a change in either job performance or job requirements, and on an annual basis.

    - Competency assessments of allied health providers must clearly establish that the individual meets all qualifications and standards established by Hospital policies and procedures, by The Joint Commission and by all other applicable regulatory and/or credentialing entities with specific application to the service involved in the contract.
    - Competency assessments of allied health providers must clearly address the ages of the patients served by the individual and the degree of success the individual achieves in producing the results expected from clinical interventions.
    - Competency assessments must include an objective, measurable system and be used periodically to evaluate job performance, current competencies, and skills.
    - Competency assessments must be performed annually, allow for Hospital input and be submitted to Hospital's Department of Human Resources.
    - The competency assessment will include a competency checklist for each allied health provider position, which at a minimum addresses the individual's:

        a. Knowledge and ability required to perform the written job description;

        b. Ability to effectively and safely use equipment;

        c. Knowledge of infection control procedures;

        d. Knowledge of patient age-specific needs;

        e. Knowledge of safety procedures; and

        f. Knowledge of emergency procedures.

5. The contractor has conducted an orientation process to familiarize allied health providers with their jobs and with their work environment before beginning patient care or other activities at UMC inclusive of safety and infection control. The orientation process must also assess each individual's ability to fulfill the specific job responsibilities set forth in the written job description.

6. The contractor periodically reviews the individual's abilities to carry out job responsibilities, especially when introducing new procedures, techniques, technology, and/or equipment.

7. The contractor has developed and furnishes ongoing in-service and other education and training programs appropriate to patient age groups served by Hospital and defined within the scope of services provided by the contractor's contract.

8. The contractor submits to Hospital fro annual review:

    a. The level of competence of the contractor's allied health providers;

    b. The patterns and trends relating to the contractor's use of allied health providers; and

9. The contractor ensures that each allied health provider has acquired an identification badge from Hospital's Department of Human Resources before commencing services at Hospital's facilities. The contractor also ensures that the badge is returned to HR upon termination of service at the Hospital.

10. The contract requires the contractor, upon Hospital's request, to discontinue the employment at Hospital's facilities of an allied health provider whose performance is unsatisfactory, whose personal characteristics prevent desirable relationships with Hospital staff, whose conduct may have a detrimental effect on

patients, or who fails to adhere to Hospital's existing policies and procedures. The supervising department will complete an exit review form and submit to Human Resources for the individual's personnel file.

EQUIPMENT

In the event Hospital contracts for equipment services, documentation of a current, accurate and separate inventory equipment list must be required by the contract and be included in Hospital's medical equipment management program.

All equipment brought into UMC by service contractor is required to meet the following criteria:

1. All equipment must have an electrical safety check which meets the requirements of Hospital's Clinical Engineering Department.

2. A schedule for ongoing monitoring and evaluation of the equipment must be established and submitted to Hospital's Clinical Engineering Department.

3. Monitoring and evaluation will include:

    a. Preventive maintenance;

    b. Identification and recordation of equipment management problems;

    c. Identification and recordation of equipment failures; and

    d. Identification and recordation of user errors and abuse.

4. The results of monitoring and evaluation shall be recorded as performed and submitted to Hospital's Department of Clinical Engineering.

The contractor must present information on each contractor providing medical equipment to assure UMC that the users of the equipment are able to demonstrate or describe:

1. Capabilities, limitations, and special applications of the equipment;

2. Operating and safety procedures for equipment use;

3. Emergency procedures in the event of equipment failure; and

4. Processes for reporting equipment management problems, failures and user errors.

The contractor must provide the following on each contractor providing medical equipment to assure that the technicians maintaining and/or repairing the equipment can demonstrate or describe:

1. Knowledge and skills necessary to perform maintenance responsibilities; and

2. Processes for reporting equipment management problems, failures and user errors.

MONITORING:

The contractor will provide reports of performance improvement activities at defined intervals.

A contractor providing direct patient care will collaborate, as applicable, with Hospital's Performance Improvement Department regarding Improvement Organization Performance (IOP) activities.

Process for Allied Health Provider working at UMC Hospital Campus

A. All Allied Health Provider personnel from outside contractors monitored by Human Resources (Non-credentialed/licensed) working at UMC will have the following documentation on file in Department of Human Resources:

- Copy of the contract
- Copy of the Contractor's liability insurance
- Job description and resume
- Copy of current Driver's License **OR** One 2x2 photo taken within 2 years
- Specialty certifications, Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), etc.
- Current license verification/primary source verifications
- Specialty Certifications
- Competency Statement/Skills Checklist (Contractor's and UMC's)
- Annual Performance Evaluations
- UMC Department Specific Orientation
- Attestation form/letter from Contractor completed for medical clearances
- Director/Manager approval sign off
- Completion of Non-Employee specific orientation, RN orientation

B. Following documents can be maintained at the Contractor's Office:

- Medical Information to include: History and Physical (H&P), Annual Tuberculosis (TB)/health clearance test or Chest X-Ray, Immunizations, Hepatitis B Series or waiver Chicken Pox questionnaire, Health Card, Drug tests results and other pertinent health clearance records as required. The results of these tests can be noted on a one page medical attestation form provided by University Medical Center.
- Attestation form must be signed by the employee and the contractor. The form can be utilized to update information as renewals or new tests. The form must be provided to the Hospital each time a new employee is assigned to UMC. Once the above criteria are met, the individual will be approved to Orientation, receive identification badge and IS security.
- Any and all peer references and other clearance verification paperwork must be maintained in the contractor's office and be available upon request.

Non-Employee Orientation – To be provided by Employee Education Department

- Non-Employee orientation must occur prior to any utilization of contracted personnel.
- Orientation may be accomplished by attendance at non-employee orientation; or by completion of the "Agency Orientation Manual" if scheduled by the Education Department.
- Nurses must complete the RN orientation manual before working if Per Diem and within one week of hire if a traveler.
- Each contracted personnel will have a unit orientation upon presenting to a new area. This must be documented and sent to Employee Education. Components such as the PYXIS tutorial and competency, Patient Safety Net (PSN), Information Technology Services (IS), Glucose monitoring as appropriate and any other elements specific to the position or department.

Performance Guidelines

All Contractor personnel:

- Will arrive at their assigned duty station at the start of the shift. Tardiness will be documented on evaluation.
- Will complete UMC incident reports and/or medication error reports when appropriate using the PSN. The Contractual individual is to report to the Director of their employer all incidents and medication

errors for which they are responsible. UMC will not assume this responsibility. UMC agrees to notify the Agency when their employees are known to have been exposed to any communicable diseases.

Assignment Guidelines

All agency personnel:

a. Will be assigned duties by the Physicians, Department Manager, Charge Nurse/Supervisor that matches their skill level as defined on the competency checklist.
b. Will administer care utilizing the standards of care established and accepted by UMC.
c. Be responsible to initiate update or give input to the plan of care on their assigned patients,
    1. As defined in job description.
d. Will not obtain blood from the lab unless they have been trained by the unit/department to do so.
    1. This training must be documented and sent to Employee Education.
e. Will administer narcotics as appropriate to position and scope of practice.

V.
BID FORM
PRICE SHEET
(Revised 12/29/2010)

_____
Name of Firm

This bid is submitted in response to UMC'S Invitation To Bid and is in accordance with all conditions and specifications in this document.

DESCRIPTION (Pod Breakdown Cost)	**RATE Per Square Foot**		**TOTAL Square Feet**		**Per Month**	**MONTLY Total Cost**		**Per Year**	**ANNUAL Total Cost**
Pod 1 UMC Physicals	$	X	6,116.50	X	1	$	X	12	**$**
Pod 2 Nevada Health Center	$	X	3,364.50	X	1	$	X	12	**$**
Pod 3 Nevada Health Centers WIC	$	X	2,544.50	X	1	$	X	12	**$**
Pod 4 UMC Quick Care	$	X	5,305.50	X	1	$	X	12	**$**
						COMBINED MONTLY Total Cost (Pod 1 + Pod 2 + Pod 3 + Pod 4)			**$**
						COMBINED ANNUAL Total Cost (Pod 1 + Pod 2 + Pod 3 + Pod 4)			**$**