**ATTACHMENT A**

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1. **Detailed Scope of Work**

It is the intent of Community Healthcore to contract through the competitive bid process a Janitorial Contractor to provide janitorial staff and services at CHC locations.

**Definitions:**

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| **Term** | **Definition/ instruction** |
| Disinfectant/sanitize | Removal, neutralization of microorganisms causing infection to humans |
| Dusting | Free of dirt, including cobwebs; fixtures, ceilings, pipes. |
| Toilets | No scale, scum, mineral deposits |
| Sinks/ Counters | Sanitized, free of stains and debris, mineral deposits |
| Drains | Unclog, maintain, disinfect |
| Plumbing | Free of stains, films |
| Sweeping | Free of dirt, debris |
| Mopping | Sanitized, free of dirt, stains, and other debris |
| Carpeted Floors | Vacuumed, free of dirt, dust, lint; spots removed as needed; shampooing asrequested |
| Furniture | Cleaned and polished without spots or stains |
| Chairs | All surfaces wiped down, use sanitizer on arms seat and backrest of each |
| Entrances | Clean doors, entry ways, clean glass entry doors, polish metal, pick up debris |
| Wood surfaces | Treatment with wood cleaner and or polish to remove soil and preserve |
| Water Coolers | Disinfect, polish, no scales no stains |
| Glass | Surfaces without streaks, uniform and clean |
| Waste baskets/Trash cans | Emptied, lined with plastic bags and washed if needed. Also removed frombuilding and disposed of in proper waste container provided at each location |

Please note that not all items in chart below apply to every location. Visiting each location prior to making a proposal will ensure that the specification can be met since each location is very unique. Total square footage for each location can be provided upon request but areas to be cleaned will not be based on total square footage of the location. Areas to be cleaned will be provided during a required walk thru scheduled through the facilities department prior to deadline for proposals being submitted.

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|  | **Specification Requirement** |  |
| **Area Description** | **Specification Expectation** | **Frequency** |
| Restrooms | Clean/ sanitize all restroom countertop surfaces with disinfectant cleaner.Clean and scrub all porcelain surfaces including toilet bowls, urinals and sinks with disinfectant cleaner and spray with germicidal deodorant.Replenish supplies of consumables such as soap, paper towels, toilet tissue and toilet seat covers.Sweep and mop restroom floors.Empty trash receptacles and replace trash liners.Clean mirrors and glass/metal surfaces | Daily |
| Offices, Hallways | Sweep and spot mop all hard surface floor areas. Spot clean windows with glass cleaner.Clean and dust desks and furniture. Spot clean glass doors with glass cleanerClean and polish all water fountains and refill cup dispensersWipe down each chair with sanitizing agent – arms, seat, and back Empty trash receptacles and replace trash liners. | Daily |
| Waiting Areas | Sweep and spot mop all hard surface floor areas. Spot clean windows with glass cleaner.Clean and dust waiting area furnitureSpot clean glass with glass cleaner, clean entrance glass doors Clean and sanitize all water coolers and refill cup dispensers Wipe down each chair with sanitizing agent –arms, seat, and back Empty trash receptacles and replace trash liners | Daily |
| Kitchen/ Break room areas | Clean all countertops and tables.Clean microwave ovens and other appliances. Sweep and mop all floor areas.Empty all trash receptacles and replace trash liners. Clean sink areas with disinfectant.Spot clean window areas with glass cleaner. Clean all chairs and seating areas.Replace kitchen towels as needed | Daily |
| Trash | Vendor responsible for removal of trash to outside dispenserunless otherwise specified. | Daily |
| All areas | Clean and dust base boards in all areas. Clean and dust wall area around ceiling. Clean doors and molding around doors. Polish desks and furniture.Vacuum all carpeted areas.Mop with a vinegar or equivalent disinfecting solution ceramic tile areas.Clean and dust blinds | Weekly |
| All areas | Clean and dust all wall signs and pictures. | Monthly |

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|  | Clean with glass cleaner all glass doors. Clean with glass cleaner all windows.Clean and dust all window blinds |  |
| Emergency Work | Ability to provide emergency work and a rate for that work. Examples would include: unclog drains, floor drying and cleanupfrom leak, etc. | As required |
| Vents | Dust return and fresh air vents to free from debris | TwiceWeekly |
| Toys | All toys wipe down with sanitizer | As scheduledor weekly |

**Equipment supplied by Vendor** (space provided at each site for storage)

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| Floor polisher |
| Wet/ dry vacuum |
| Upright vacuum |
| Custodial cart |
| Mop, bucket/ ringer |
| Brooms and dust pans |
| Dusters |
| Bowl/ other surface brushes |
| Rags |

* 1. **Supplies supplied by Vendor** (space provided at each site for storage)

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| --- |
| Disinfectant/ sanitizer |
| Glass cleaner |
| Furniture Polish |
| Replacement mop heads (must be maintained as appropriate) |
| Stripper/ Wax/ Shampoo as needed for two times per year cleaning |

* 1. **Equipment supplied by Community Healthcore**

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| Storage/ Janitor closet |
| Janitorial Sink where appropriate |
| Dry goods storage |

* 1. **Consumables Supplied by either Community Healthcore**

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| --- | --- | --- |
|  |  |  |
| Toilet Paper |  |  |
| Paper Towels |  |  |
| Soap (for dispensers) |  |  |
| Sanitizer for Dispensers |  |  |
| Trash liners |  |  |

**Locations open for Bid:** Bidder may bid on all or selected properties/ locations.

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| **Longview, Texas** | **Frequency** | **Monthly** | **Annual** | **After Hours Rate** |
|  |  |  |  |  |
| 105 Woodbine Pl | 5 Days/week | $ | $ | $ |
| 107 Woodbine Pl | 5 Days/week | $ | $ | $ |
| 950 N 4th Street | 5 Days/week | $ | $ | $ |
| 1300 N 6th Street | 5 Days/week | $ | $ | $ |
| 3770 CR 3439 | 3 Days/week | $ | $ | $ |

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| **Marshall, Texas** | **Frequency** | **Monthly** | **Annual** | **After Hours Rate** |
|  |  |  |  |  |
| 1500 W Grand | 3 Days/week | $ | $ | $ |
| 204 N. Alamo | 1 Days/week | $ | $ | $ |

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| **Henderson, Texas** | **Frequency** | **Monthly** | **Annual** | **After Hours Rate** |
|  |  |  |  |  |
| 209 N Main St | 2 Days/week | $ | $ | $ |
|  |  |  |  |  |
| **Carthage, Texas** | **Frequency** | **Monthly** | **Annual** | **After Hours Rate** |
|  |  |  |  |  |
| 1701 So Adams | 2 Days/week | $ | $ | $ |

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| **Gilmer, Texas** | **Frequency** | **Monthly** | **Annual** | **After Hours Rate** |
|  |  |  |  |  |
| 101 Madison St | 2 Day/week | $ | $ | $ |
|  |  |  |  |  |
| **Tyler, Texas** | **Frequency** | **Monthly** | **Annual** | **After Hours Rate** |
|  |  |  |  |  |
| 114 Jordan Plaza # 306 | 3 Day/week | $ | $ | $ |
| 4603 Troup Hwy #209 | 1 Day/week | $ | $ | $ |
| 4503 Troup Hwy #4609 | 1 Day/week | $ | $ | $ |

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| **Texarkana, Texas** | **Frequency** | **Monthly** | **Annual** | **After Hours Rate** |
|  |  |  |  |  |
| 2435 College Dr. | 5 Days/week | $ | $ | $ |
| 1911 Galleria Oaks | 3 Days/week | $ | $ | $ |
| 4217 Hazel | 2 Days/ week |  |  |  |
| **Clarksville, Texas** | **Frequency** | **Monthly** | **Annual** | **After Hours Rate** |
|  |  |  |  |  |
| 107 MLK Drive | 3 days | $ | $ | $ |

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| **Atlanta, Texas** | **Frequency** | **Monthly** | **Annual** | **After Hours Rate** |
|  |  |  |  |  |
| 307 N Louise suite B | 2 days/ week | $ | $ | $ |
| 307 N. Louise suite G | 3 Days/week | $ | $ | $ |

1. **Instructions for Response**
2. **Site Visit**
	1. It is required that each responder visit each site to evaluate the scope of work. Each site is unique. Sites include the following types of services: Dayhab (daycare adults), administration, clinics, and both behavioral health and primary care. Some areas within a facility will be cleaned on a different frequency. A layout will be provided during the visit.
3. **Pricing**
	1. Site specific: Pricing for each site should be separated by each site. Please list each at a Monthly and an Annual “Yearly” rate on the chart provided.
	2. After hours rate: list rate for dealing with emergencies such as water on floor from leaks etc. List hourly rate if you can provide these services.
	3. **Contractor may bid on one property, multiple properties or all properties**.
4. **Staffing**
	1. Specify about how many employees will be at each site and how it will be supervised.
	2. Specify if employees work directly for your organization or if they are sub-contracted.
	3. Also specify how performance will be monitored and documented to meet spec.
	4. Specify how employees will be identified when in each facility i.e. uniform or badge.
5. **References**
	1. Community Healthcore requests Responder to supply, with this RFP, a list of at least three

(3) professional references where like services have been supplied by their firm. Include name of firm, address, telephone number and name of representative. References may only be checked on those responders with a high score that are in the final evaluation.

1. **Hours of Service**
	1. Most work will be completed between the hours of 5:00 pm – 7:00 am or as specified to accommodate hours of operations of Community Healthcore programs.
2. **Other**
	1. Proposal should provide a technical response to specification in detailed scope of work
	2. Affirm/demonstrate the Proposers to meet all of the Minimum Standards for all Prospective Responders.
	3. Acknowledgements of RFP and all RFP Addenda’s
	4. A minimum of three (3) references
	5. Other documents as included below
	6. Return signed Conflict of Interest Questionnaire (Attachment B)
	7. Responder shall provide in their proposal all documentation required by this RFP. Failure to provide this information may result in rejection of proposal.
	8. **MINIMUM STANDARDS FOR ALL PROSPECTIVE RESPONDERS:** A prospective Responder must affirmatively demonstrate / meet the following requirements:
		1. Have adequate financial resources, or the ability to obtain such resources as required; Please specify this within the proposal;
		2. Be able to comply with the required or proposed delivery schedule. Include all details as appropriate including staffing levels, supervision, and how Responder will monitor the service;
		3. Have a satisfactory record of performance evidenced by references;
		4. Have a satisfactory record of integrity and ethics;
		5. Have the ability to provide usage data on items ordered or delivered;
		6. Have the ability to package and mark items for specific Community Healthcore units;
		7. Be able to provide descriptive information as required, including detailed scope of work to be provided and frequency if applicable;
		8. Be otherwise qualified and eligible to receive an award; and,
		9. Meet any additional requirements specified in the RFP.
	9. **OTHER DOCUMENTS:** Responder shall provider with this proposal copies:
		1. Current workman compensation policy;
		2. Proof of insurance as required. See Attachment C, Exhibit A;
		3. Bank Reference letter or financial statement proving financial stability.
3. **Scoring of the RFP**
4. **Factors to be considered include:**
	1. Any installation cost;
	2. Delivery terms;
	3. Quality and reliability of respondents goods or services;
	4. The extent to which the goods or services meet the CENTER’s needs as described in this RFP;
	5. Past offeror performance, respondents financial resources and ability to perform, the respondent's experience and responsibility, and the respondent's ability to provide reliable service agreements
	6. The impact on the ability of CENTER to comply with laws and rules relating to historically underutilized businesses or relating to the procurement of goods and services from persons with disabilities;
	7. The total long term cost to the local authority of acquiring the respondent's goods or services;
	8. The cost of any CENTER employee training associated with the acquisition;
	9. The effect of the acquisition on CENTER’s productivity;
	10. Price
	11. Whether the respondent can perform the contract or provide the service(s) within the contract term, promptly provide the services, without delay or interference;
	12. Respondent’s history of compliance with the laws relating to its business operations and the affected service(s) and whether it is currently in compliance;
	13. Whether the respondent’s financial resources are sufficient to perform the contract and to provide the service(s);
	14. Whether necessary or desirable support and ancillary services are available to the respondent;
	15. The character, responsibility, integrity, reputation, and experience of the respondent;
	16. The quality of the facilities and equipment available to or proposed by the respondent;
	17. The ability of the respondent to provide continuity of services;
	18. The ability of the respondent to meet all applicable written policies, principles, and regulations;
	19. Any factor is relevant to determining the best value for Community Healthcore in the context of this procurement.
5. **Proposals will be scored using the following criteria:**

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| **Categories** | **Points** |
| 1-Organizational History and Experience | 100 |
| 2-Service delivery based on specifications | 250 |
| 3-Pricing and other cost | 300 |
| 4-Operational start date | 100 |
|  |  |
| total | 750 |

Please direct any questions you have about this specification to (903) 234-7001 or email Tom.Suess@communityhealthcore.com