



**MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
VALLEYWISE HEALTH**

**ADDENDUM #4 TO THE
REQUEST FOR QUALIFICATIONS
FOR
VENDOR/DESIGN PROFESSIONAL
480-90-20-004-RFQ**

COVER SHEET

BY SIGNING AND RETURNING THIS COVER SHEET, I CERTIFY RECEIPT OF ADDENDUM #4 TO THE VENDOR/DESIGN PROFESSIONAL (480-90-20-004-RFQ).

Printed Name of Authorized Individual

Name of Submitting Organization

Signature of Authorized Individual

Date

THE SIGNATURE PAGE OF THIS ADDENDUM FOUR MUST BE SIGNED AND RETURNED WITH YOUR QUALIFICATIONS.

VENDOR/DESIGN PROFESSIONAL

480-90-20-004-RFQ

ADDENDUM #4

The Maricopa County Special Health Care District (“District”) d.b.a. Valleywise Health is hereby issuing Addendum #4 to the Request for Qualifications to identify, qualify, and partner with an independent 3rd party to investigate the potential of developing a single universal mobile device that manages and orchestrates the flow of real time communication and information between patients, clinical staff and administrative personnel in a seamless manner.

Pursuant to the Procurement Code Clause HS-305, Addenda to Solicitations, Paragraph A (3), this Addendum Four will furnish to other Respondents information given to one Respondent to assist the other Respondents in submitting their responses.

1.	Question. Our question is in regards to the type of respondents that Valleywise is expecting to receive RFQ responses from. Is it the intent to have the manufactures respond directly to the RFQ and list their business/delivery partner as a sub-consultant or does Valleywise prefer responses to come from business partners with all the manufacture solutions they offer in one response. We are a Business Partner with multiple manufactures that supply mobility applications and mobility devises for healthcare solutions. Some of these manufactures application and devises are competitors of each other and some work with each other. On page 15, Section 12.01 it states that a respondent can only submit one response, but a sub-consultant can respond to more than one respondent. Can you tell us if Valleywise prefers responses to come directly from the manufactures or from the Business Partners and if possible can you describe what you expect.
Answer. The responses or proposals need to come from the entity that will be awarded the contract, the answers may be completed with collaboration from other parties.	

2.	Question. You ask us not to submit a solution, yet ask for pricing in the RFP. Is this an error?
Answer. This is an RFQ rather than RFP. Pricing is not being evaluated as part of this RFQ. Pricing section is to understand the cost drivers to the solution set being proposed.	

3.	Question. Solicitation No, 480- 90-20-004-RFQ Response Letter?
Answer. Please refer to Section VI.1.A pertaining to transmittal/cover letter requirements for this RFQ	

4.	Question. Section V: Scope of Services (page 18) Middleware-ESB Considerations, please specify what current middleware systems you have operationally related to the functional requirements (e.g. Patient Monitoring, Nurse-Call, Scheduling)
Answer. Please identify the ESB you work with.	

VENDOR/DESIGN PROFESSIONAL

480-90-20-004-RFQ

ADDENDUM #4

5.	Question. Attachment 15 (Page 47) Business Requirement Goal Alignment: Business Requirements, clarification on the comments section. Some of these are very subjective questions regarding requirements. Do we need to specify if we comply with the Business Requirements?
Answer. Specify whether you comply or meet these requirements.	

6.	Question. Attachment 15 Functional Requirements: Voice Features CC-FR-02 (Page 49) Voice Features, many of the Functional Requirements are hardware specific. We work with many VOIP device manufacturers (Zebra, Spectralink, Apple). Do we include these hardware capabilities are capable based on these hardware device companies?
Answer. Specify the manufacturers you work with including device specifications	

7.	Question. Attachment 15: User Scenarios/Use Cases (page 57) “Provide a summary of major functions that the solution will perform”, will these use cases be discussed during the interviews? Will we have an opportunity to “demonstrate” these capabilities? Do we just provide a short summary of each use case scenario?
Answer. You will be expected to demonstrate the capabilities of your solution specifically against each use case.	

8.	Question. Attachment 18: Budgetary Drivers (page 72) “Please indicate the unit cost drivers for your solution by completing the following matrix, we utilize “enterprise licenses” that reduces the unit cost. 1) How many total users 2) Total number of Non- VOIP “BYOD” users 3) Approximate total facility Square feet 3) How many facilities total 4) Should we include a middleware proposal for Patient Monitoring and other systems requesting integration
Answer. Indicate only cost drivers for your solution. Pricing is not part of the evaluation criteria for this RFQ. You may also include a middleware solution if it provides advantages to your solution set.	

9.	Question. We would like to ask for an extension for the following: 1. Clarification questions extended to a new due date Wed, January 8 by 10:00 AM AZ time and 2. RFQ extended to a new due date of Mon, February 10 no later than 1:00 PM AZ time.
Answer. This is addressed in Addendum #1.	

10.	Question. What are Valleywise’s expectations around deployment and training? Will you have dedicated resources for the project? In an ideal world, what would the deployment look like in your eye
-----	---

VENDOR/DESIGN PROFESSIONAL

480-90-20-004-RFQ

ADDENDUM #4

Answer. **Deployment and training would be a consideration for the vendor to propose and recommend.**

11. Question. Price per device will differ substantially based on each users use case, what is the use case for the device? Do needs vary per department? Ie clinical vs non-clinical staff (barcoding vs non-barcoding models, just voice vs smart phone capabilities). There are many different aspects that will affect the per device cost from accessories to professional services to software licenses and training needs. What are the needs in these 4 area – accessories, PS, licenses, and training?

Answer. **Provide a range based on the use cases provided and the requirements listed in the functional needs section. Note the question posed in the RFQ is to understand cost drivers not actual or absolute cost.**

12. Question. How do they plan on managing the devices and applications specific to the device?

Answer. **Mobile devices will be managed via an MDM engine.**

13. Question. While we are agnostic to the different workflow applications out there, it would be good to have an idea of which middleware software you are leaning towards using for alarm management and workflow management.

Answer. **By EMM you are referring to Enterprise Mobility Management solution? We are utilizing an MDM solution only viz. XENMOBILE.**

14. Question. What applications will be utilized on the handsets?

Answer. **It is based on the requirements listed in the RFQ. If unsure list the applications supported.**

15. Question. Has a wireless assessment for voice been conducted? If so, when?

Answer. **Wireless assessment has already been made when the entire network infrastructure was replaced. This occurred in 2018.**

16. Question. Are you guys looking for devices as well, or working with what you have (Zebra)?
We can bundle it into our response if there is a need?

Answer. **Yes, we will evaluate devices. Today we have no set standard, you may do this as a suggestion.**

17. Question. What is Valleywise Health's current Patient Monitoring System?

VENDOR/DESIGN PROFESSIONAL

480-90-20-004-RFQ

ADDENDUM #4

Answer. **GE.**

18. Question. What Nurse call vendor is Valleywise Health currently utilizing, and if Valleywise is transitioning to a new vendor for nurse call, what vendor will that be?

Answer. **There is a separate open RFQ released for Nurse Call.**

19. Question. We intend to offer a response that aligns as closely as possible with the details Valleywise is looking for in a response. What further clarifications and definitions can you provide on the terms included in Attachment 18?

Answer. **Provide information you feel best shows your capabilities matched against the requirements identified.**

20. Question. What specific directions can Valleywise health offer as to the response it is expecting to receive in the column labelled "Cost (\$)" in Attachment 18? for instance, is Spok to provide a general range of costs depending on different variables or qualifiers, or a specific cost for the given item or service listed under the column labelled "Functional Requirements" that most closely fulfills the business and functional requirements in Attachment 15?

Answer. **Once you have responded to the functional and non functional aspects your cost driver indicators would align with the capabilities you have identified. You are not submitting a solution you are identifying whether your capabilities align with Valleywise Health. Ultimately once the vendor - technology has been chosen a design workshop will ensue to design, phase and price the project.**

21. Question. What does Valleywise Health define as "SME Reviewed/Approved" as stated in Attachment 18? Can Valleywise Health elaborate on what SME it is referring to, and its expectations for responses in this column?

Answer. **This is for internal use only (SME - subject matter expert).**

22. Question. What are Valleywise Health's specific instructions or expectations for responses to the requirements as listed in Attachment 15? For instance, is Spok expected to answer "Complies, Does not comply, or N/A" and qualify or comment on non-compliant and N/A answers? Or is Spok expected to offer specific details and commentary on each business requirement?

Answer. **The response may be as simple as comply. Usually a qualification would be helpful if there are caveats to the answer.**

23. Question. The "Non-Functional Requirements" section of Attachment 15 includes a response column labelled "Category" which differs from the rest of Attachment 15 which includes a

VENDOR/DESIGN PROFESSIONAL

480-90-20-004-RFQ

ADDENDUM #4

	response column labelled "Comments." What expectations does Valleywise health have regarding responses to the Non-Functional requirements in this section and how do they differ from the rest of the responses/comments in Attachment 15?
	Answer. Non-functional speaks to the technical infrastructure supporting the capabilities you have identified. If you meet or do not meet the requirement.

24.	Question. What facilities will this RFQ include? If more than 1 facility do you have a timeline for implementation for each?
	Answer. The scope is initially one site, Valleywise Health Medical Center located at Roosevelt, Phoenix.

25.	Question. Can you estimate a total number of mobile users potentially included?
	Answer. Greater than 1,000 subject to project definition.

26.	Question. What are and how many current mobile/clinical device types are currently deployed and within what departments?
	Answer. Not relevant to this RFQ due to the construction of a new acute care facility under the Care Reimagined program

27.	Question. Does Valleywise currently utilize any existing 3rd party physician scheduling applications (Amion, QGenda etc.)
	Answer. Yes, but subject to review.

28.	Question. Does Valleywise currently deploy any 3rd party "Rounding" or "Patient Satisfaction" applications?
	Answer. Yes, subject to review.

29.	Question. Section III Instruction 5; page 11, item 5.02, is the Cover Letter to be included in hard copies or is it to be a separate and external document of the submission both hard copies and flash drives?
	Answer. Please include hard copies of the cover letter in the submission package.

30.	Question. Section III, Instruction 5, page 13, item 5.09, is a digital signature acceptable?
	Answer. Preferably not.

VENDOR/DESIGN PROFESSIONAL
480-90-20-004-RFQ
ADDENDUM #4

--

31.	Question. What source are you using to capture the wave forms?
Answer. This is part of the RFQ	

32.	Question. Do you currently have a middleware solution in place (Connexall, Bernoulli, capsule, etc.)
Answer. Can be part of the RFQ suggestion. Currently use CAPSULE (limited); TIBCO.	

33.	Question. Do you have plans to purchase and implement a middleware solution?
Answer. To be determined.	

34.	Question. Which make, model and version of the EMR portal are you using?
Answer. EMR is EPIC.	

35.	Question. Where are you currently publishing staff rosters? What system manages staff roster schedules? (Amion, Qgenda, lightning bolt)
Answer. KRONOS	

36.	Question. Is the responding vendor required to provide a middleware solution as part of the proposal?
Answer. You can recommend a middleware solution in your response.	

37.	Question. Are you sourcing the middleware from a different RFP?
Answer. No	

38.	Question. Section V – Scope of services – Nursecall Considerations, page 19: Which monitoring solution are you currently using? Does this monitoring software currently interface with middleware? if so, which middleware?
Answer. None	

VENDOR/DESIGN PROFESSIONAL

480-90-20-004-RFQ

ADDENDUM #4

39.	<p>Question. Section V – Scope of services – In Scope, page 19, please confirm the makes and models of the following solution in scope:</p> <ul style="list-style-type: none"> a. Alarm filtering and management b. Alarms and notifications, and other bedside system interfaces Bed management and patient throughput, and logistics interfaces Building control and monitoring system interfaces c. Clinician directory d. Electronic health record system interfaces Enterprise PBX and IP telephony system Interfaces e. Housekeeping, dietary, pharmacy and transition management interfaces Master, duty, patient and emergency pull stations f. Mobile device support (DECT phones, IP phones, smartphones, tablets, wearables) g. Patient event notifications h. Patient management and clinical system interfaces Patient satisfaction and quality metrics i. Person and asset tracking context Presence status j. Reporting and analytics Secure messaging k. Staff and scheduling system interfaces
-----	---

Answer.

a. None, you may include suggestion as part of this RFQ

b. None, you may include suggestion as part of this RFQ

c. None, you may include suggestion as part of this RFQ

d. AVAYA

e.

f. NA, may be part of this RFQ to define

g.

h.

i. CENTRAX RTLS

j. NA, may be part of this RFQ to define

k. NA, may be part of this RFQ to define

40.	<p>Question. Section V; page 19, there is a reference to “viz.” and also is referenced throughout this section, can you please define?</p>
	<p>Answer. Viz. is Latin for namely</p>

41.	<p>Question. Section VI: page 22, C. “Experience on Similar Projects” can a reference be used here or do “experiences on similar projects” have to be different from references?</p>
	<p>Answer. They can be the same. Identify a reference that may be used in the future.</p>

42.	<p>Question. Attachment 15, page 47, item CC-BG-001.3, this is not clear as to what exactly you need here, can you please provide direction as to what your goal is with this question?</p>
-----	--

VENDOR/DESIGN PROFESSIONAL

480-90-20-004-RFQ

ADDENDUM #4

Answer. This section speaks to Valleywise Health Business goals and objectives. It is an alignment question for you to comment upon.

43. Question. Attachment 15, page 47, item CC-BG-001.4, can you please provide more information as to what kind of access to knowledgebase needed to influence decision making for Valleywise Health?

Answer. This section speaks to Valleywise Health Business goals and objectives. It is an alignment question for you to comment upon.

44. Question. Is it possible to get an Excel or Word Document?

Answer. No.

45. Question. Can you list the other vendor's in consideration?

Answer. No.

46. Question. When is the expected Go Live date of this project?

Answer. Scope dependent. Estimated timeline in 2022.

47. Question. For Budgetary pricing can you answer the following:
Please confirm that this project will be for 2 in-patient sites (Health Center and Behavioral Health Center)

Answer. One site, Valleywise Health Medical Center (under construction).

48. Question. Please confirm the total number of Medicare beds is 522.

Answer. Circa 239 beds, subject to change.

49. Question. Please provide the total number of units to be supported.

Answer. To be finalized.

50. Question. Please provide total number or pool of users to be supported

Answer. To be finalized, circa >1,500

VENDOR/DESIGN PROFESSIONAL
480-90-20-004-RFQ
ADDENDUM #4

--

51.	Question. Please provide total number of physicians to be supported
Answer. To be finalized, circa >1,000	

52.	Question. Please provide the total number of phases to implement. With two sites, that would be the minimum recommended for such an Enterprise-wide project.
Answer. Design phase will not occur until a solution has been identified. Number of phases to be defined. Note initially a single site deployment with a view to cover other locations post 2024.	

53.	Question. Please provide total square footage to be supported for each of the two hospitals.
Answer. Note single site approximately 600,000 square feet, subject to verification.	

54.	Question. Page 11, under 5.01 Proposal Contents - DO NOT PROVIDE ANY SOLUTIONS FOR THIS PROJECT; THIS IS A QUALIFICATIONS BASED SELECTION. Please clarify this statement.
Answer. There is no information in the RFQ that allows one to define a solution. You are requested to answer the questions contained to the best of your ability. "Solutioning" is performed once the choice of vendor has been selected.	

55.	Question. Page 11, under 5.04C: Index tabs may contain photographs as long as there is no other identifying information contained thereon with respect to the photographs. If any photographs are included and identifiable as to their respective project the index tabs will be counted as a page and included in the page count. What type of photographs are you referring to and please define "identifying information".
Answer. Any photo/image you may want to include, "identifying information" would be any text that describes the photo/image in any way.	

56.	Question. How many beds would require streaming wave forms?
Answer. To be defined.	

57.	Question. What Units will require streaming wave forms?
Answer. To be defined.	

VENDOR/DESIGN PROFESSIONAL

480-90-20-004-RFQ

ADDENDUM #4

58.	Question. Please clarify how we are to respond to use cases – inserting comments within the Use Case Summary only under additional comments, or inserting comments within each use case?
Answer. You are to confirm you can support the use case and you are required to demonstrate this during the interview phase if successful.	

59.	Question. When Valleywise Health refers to a “standard contract,” is it referring to the General Conditions at https://valleywisehealth.org/community/care-reimagined/get-involved/#vendors ? [Under Section VII: Evaluation, Proposal Evaluation Process, Section F.1 (Negotiation), the RFQ states that “if negotiations are successful, Valleywise Health will request approval from the appropriate Valleywise Health Board of Directors to execute Valleywise Health’s standard contract for the Consultant Professional Design.”]
Answer. No, the General Conditions will be included in the “standard contract”.	

60.	Question. In Attachment 10 (to be submitted if chosen), do we need to provide a list of employees that provide technical/customer support services or other off-site services? It may be challenging to identify in advance which employees may work on Valleywise Health issues post-deployment. [Under Attachment 10: Contractor Employment Record Verification Requirement, we are being asked to identify and list all “employees who perform work under the contract on the attached Employee Verification Worksheet and has verified compliance with Federal Immigration and Nationality Act (FINA), all other Federal immigration laws and regulations, and A.R.S. 23-214.”]
Answer. Reference Attachment 10.	

61.	Question. For Question 6.f - what system type do you want us to integrate with? For instance, integration into RIV is different than R5. Phillips has different environments, etc.
Answer. Identify the systems you typically support in priority order.	

62.	Question. What other systems are in place or looking to be used? For instance, Ascom and Epic are referenced in the RFQ. Will you be using Rover and Haiku? What are you doing with Ascom?
Answer. Device technology standard for the future is unknown. Rover and Haiku are applications we will use with EPIC.	

63.	Question. Is there an ESB/Middleware solution in place today?
Answer. We use a subset of CAPSULE and TIBCO.	

VENDOR/DESIGN PROFESSIONAL

480-90-20-004-RFQ

ADDENDUM #4

64.	Question. Section VI: page 22, C.4.d. A reference to “See Section F below” is stated here and there was no Section F included in this RFQ, please provide.
Answer. F is on page 23.	
65.	Question. Page 55, Non-Functional Requirements: What type of response are we supposed to insert under the “Category” column?
Answer. Corrected in Addendum 3.	
66.	Question. Section VI: page 22, C.4.d. A reference to “See Section F below” is stated here and there was no Section F included in this RFQ, please provide.
Answer. Section F is on page 24.	
67.	Question. Attachment 17, page 71, there is a column header, “Category” assumed this is to be “Comments”, please advise here.
Answer. Corrected in Addendum 3.	
68.	Question. Attachment 18 Budgetary Drivers, page 73, appears to be some missing details as there is an incomplete sentence followed by a “7” that begins with “The certification....” Is there more terms or information for this document? If yes, please provide all.
Answer. Corrected in Addendum 3.	
69.	Question. Question 6: What Does Valleywise health define as a "Qualifier" to the listed functional requirements? What specific directions can Valleywise offer as to the response it is expecting to receive in the column labelled "Qualifier" in Attachment 18?
Answer. Corrected in Addendum 3.	
70.	Question. RFP attachment 16 is missing? Should part of Attachment 15 (User Scenarios/Use Cases) appropriately be labeled.
Answer. Corrected in Addendum 3.	

VENDOR/DESIGN PROFESSIONAL

480-90-20-004-RFQ

ADDENDUM #4

71.	<p>Question. Attachment 15, page 50, ReQ ID CC-FR-02.23, can you please define “scream paging assist”?</p> <p>Answer. Body alarm that makes a loud noise to alert others to respond quickly. For example, body alarm may be used when sitting with high risk behavioral patients. If they get aggressive or the sitter needs immediate help, they pull the string on the body alarm and it makes a loud “screaming” noise. The noise typically stalls the patient’s behavior and alerts staff of an urgent response needed.</p>
72.	<p>Question. 2.01 (Page 9) Professional License/Certification Registration: Please identify specifically which License and Certifications are requested</p> <p>Answer. This is construction-based requirement and is only required if applicable.</p>
73.	<p>Question. Section III Instruction 5; page 12, item 5.07, the “Contract and General Provisions”, appears to deal primarily with terms of a construction contract and this RFQ does not apply itself to construction services, is there another “Contract and General Provisions” that is more suitable to this RFQ? If yes, can you please provide?</p> <p>Answer. Our General Conditions that apply are located https://valleywisehealth.org/community/care-reimagined/get-involved/ under Documents.</p>
74.	<p>Question. Section VI: page 21, 1. A. references “Professional Consultant Agreement”. Is this part of the “Contract and General Provision” document (section 18) or is this a different document? If it is a different document? If yes, then can you please provide?</p> <p>Answer. This language has been removed in addendum 3</p>
75.	<p>Question. Do we need to be qualified/registered as a foreign corporation in Arizona? [Under Section VII: Evaluation, Item #1.A.1 (Mandatory Compliance), the RFQ states that “the Arizona Corporation Commission shall properly have certified the Design Professional for corporation and limited liability companies.”</p> <p>Answer. No</p>
76.	<p>Question. Section VI: page 22, C.1. Can you please define “adaptation projects”?</p> <p>Answer. Adaptation projects are classed as projects that significantly change the existing business and clinical processes and workflows - ie transformational.</p>