JOSH GREEN, M.D. GOVERNOR OF HAWAI'I KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAI'I



KENNETH S. FINK, M.D., M.G.A., M.P.H. DIRECTOR OF HEALTH

In reply, please refer to

# STATE OF HAWAI'I DEPARTMENT OF HEALTH KA 'OIHANA OLAKINO OFFICE OF HEALTH CARE ASSURANCE 601 KAMOKII A BOUI EVARD ROOM 337

601 KAMOKILA BOULEVARD, ROOM 337 KAPOLEI, HAWAII 96707

Release Date: July 10, 2023

REQUEST FOR QUOTE RFQ-24-01-OHCA

#### LIFE SAFETY INSPECTIONS

Offer Due Date and Time: July 18, 2023; 2:00 p.m. (HST)

The Hawaii Department of Health, Office of Health Care Assurance (hereinafter "Department") is seeking a part time life safety consultant (inspector) to conduct life safety code inspections (surveys) of health care facilities that are subjected to State Licensure.

Standard office hours are Monday through Friday, 7:45 a.m. to 4:30 p.m., closed on State holidays. Office of Health Care Assurance is located at 601 Kamokila Boulevard, Room 361, Kapolei, Hawaii 96707. The inspector is an independent contractor who provides flexible hours including evening or weekend hours and will work remotely by conducting onsite building inspections of licensed or certified health care facilities or care homes and work remotely from home and from time to time at a workstation at Office of Health Care Assurance.

## I. Scope of Services

Life safety consultant shall provide life safety services including life safety inspections and consultations for Hawaii Department of Health, Office of Health Care Assurance. The consultant shall conduct life safety inspections of approximately 600 health care facilities statewide where life safety inspections are required.

- 1.1. Inspections of the health care facilities on Oahu and the neighbor islands are for the following licensee categories:
  - a. Type I Adult Residential Care Homes (ARCH);
  - b. Type II ARCHs; Alternating with the City and County Fire Department (i.e., every odd year);
  - c. Type I Expanded ARCHs (E-ARCH);

- d. Type II E-ARCHs; Alternating with the City and County Fire Department (i.e., every odd year);
- e. Special Treatment Facilities ("STF") with less than eight (8) beds or upon request by the Department;
- f. Therapeutic Living Programs ("TLP") with less than eight (8) beds or upon request by the Department; and
- g. Developmental Disabilities Domiciliary Homes.
- 1.2. Life safety inspections to complement health, nutrition, and sanitation inspections completed for all appropriate health care providers in accordance with established State regulations and standards and current NFPA life safety regulations and standards. Upon completion of each inspection, the Contractor shall submit a written report within ten (10) working days to the Office of Health Care Assurance licensing section supervisor.
- 1.3. Annual and follow-up inspections are conducted to ensure compliance with fire safety regulations and codes. As necessary, inspections shall be conducted when complaints pertaining to fire safety are received.
- 1.4. Has responsibility of evaluating the compliance of health care facilities to appropriate State and Federal Life Safety Code standards through comprehensive assessment of the facilities' operation.
- 1.5. As required, provides life safety information to current and prospective licensees and Office of Health Care Assurance in all matters relating to fire safety. Consultant may be asked to accompany Office of Health Care Assurance staff to meetings with other state or county officials.
- 1.6. Maintains financial and personnel records pertaining to the fire safety inspections and surveys conducted on behalf of the Office of Health Care Assurance.
- 1.7. Submits monthly written reports of the life safety inspections conducted on behalf of the Office of Health Care Assurance.
- 1.8. Provides written recommendations to the Office of Health Care Assurance, State Licensing Section Supervisor, on methods to improve areas pertaining to life safety.

#### II. Time of Performance

The performance period under this RFQ is anticipated from August 1, 2023 to June 30, 2024. Unless terminated, the performance period may be extended for specified periods of time not to exceed three (3) additional years or for not more than three (3) additional twelve (12)-month periods upon mutual agreement between the Department and the Contractor and availability of funds.

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The agreement may be extended provided that the price may be increased or decreased upon mutual agreement between the Office of Health Care Assurance and Contractor and depending on availability of State Funds.

The Office of Health Care Assurance reserves the right to terminate the contract at any time due to funding limitations, failure to perform the requirements, or pursuant to the General Conditions.

When in the interest of the State, the Office of Health Care Assurance may terminate the Contract at any time and for convenience by providing eight (8) weeks prior written notice to the Contractor. Contractor may terminate the Contract at any time by providing eight (8) weeks prior written notice.

#### III. Qualifications

The contractor shall have a minimum of five (5) years experiences conducting life safety inspections utilizing State, County, and National Fire Protection Association ("NFPA") life safety regulations and standards in licensed health care and/or community-based facilities.

# IV: Compliance

- a. The interested offeror must register to do business in the State of Hawaii with Department of Commerce and Consumer Affairs and obtain necessary tax identification documents from the Department of Taxation and the Internal Revenue Service, and if applicable, register with the Department of Labor and Industrial Relations.
- b. Provide Certificate of Vendor Compliance ("CVC") obtained through Hawaii Compliance Express ("HCE"). The vendor's name on the CVC must match the vendor's name under which the quote for this solicitation is submitted. The vendor is responsible for maintaining CVC compliance. Non-compliance may result in a vendor not receiving an award, delay of payment, or cancellation of award or termination of the Contract.
- c. Contractor shall meet all conditions and requirements as set forth in the General Conditions, AG-008 103D attached to this solicitation and made a part of the Contract.

## V. Compensation and Payment

a. Contractor shall be compensated quarterly (3 months) at the amount equaling to a fourth of the total compensation upon completion of the services stated in Section 1 of this RFQ. Contractor shall submit quarterly invoice and supporting documents for payment to the Office of Health Care Assurance.

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**b.** Total annual compensation is estimated to be \$12,780.00 per year. Total actual compensation including initial contract and extended contracts shall not exceed \$49,900.00.

## VI. Submission of Quote

The total contract price which is equal to the total compensation in Section 5 above shall be inclusive of labor, travel costs, all applicable taxes, and insurances, and if any, other incidental costs.

In addition to the contract price, offeror shall also provide the following documents:

- a. Offeror's or Consultant's resume.
- b. A list of at least three (3) professional references that may be contacted by the OHCA as to past and current job experience.
- c. A summary listing of judgments or pending lawsuits or actions against; adverse contract actions, including termination, suspension, imposition of penalties, or other actions relating to failure to perform or deficiencies in fulfilling contractual obligations against the Offeror for the past 5 years. If none, so state.
- d. Certificate of Vendor Compliance (CVC); and
- e. Form W-9

The selection and award shall be contingent on the lowest, most responsible, and responsive quote and be based on qualification. There is no commitment by the Office of Health Care Assurance as to the award amount under the terms of this RFQ.

The Office of Health Care Assurance reserves the right to cancel this procurement or award at any time due to funding or non-performance. Proposals may be rejected in whole or in part, without liability, when it is determined to be in the best interest of the State or due to funding issues.

Please contact Keith R. Ridley at (808) 692-7227 or keith.ridley@doh.hawaii.gov if you have any questions regarding this RFQ.

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