

SEDGWICK COUNTY, KANSAS DIVISION OF FINANCE Purchasing Department 525 N. Main, Suite 823 ~ Wichita, KS 67203 Phone: 316 660-7255 Fax: 316 383-7055 https://www.sedgwickcounty.org/finance/purchasing/ requests-for-bid-and-proposal/

REQUEST FOR BID 19-0065 MEDICAL WASTE PICK UP AND DISPOSAL

October 11, 2019

Sedgwick County, Kansas (hereinafter referred to as "county") is seeking bids for medical waste pick up and disposal. If your firm is interested in submitting a response, please do so in accordance with the instructions contained within the attached Request for Bid. Responses are due no later than 1:45 pm CST, November 12, 2019.

<u>All contact concerning this solicitation shall be made through the Purchasing Section.</u> Bidders shall not contact county employees, department heads, using agencies, evaluation committee members or elected officials with questions or any other concerns about the solicitation. Questions, clarifications and concerns shall be submitted to the Purchasing Section in writing. Failure to comply with these guidelines may disqualify the Bidder's response.

Sincerely,

Lailer

Josh Lauber Purchasing Agent - Buyer

JL/ch

Table of Contents

- I. <u>Purpose</u>
- II. <u>Submittals</u>
- III. Scope of Work
- IV. Sedgwick County's Responsibilities
- V. <u>Bid Terms</u>
 - A. **Questions and Contact Information**
 - B. Minimum Firm Qualifications
 - C. Evaluation Criteria
 - D. <u>Request for Bid Timeline</u>
 - E. Contract Period and Payment Terms
 - F. Insurance Requirements
 - G. Indemnification
 - H. Confidential Matters and Data Ownership
 - I. <u>Bid Conditions</u>
- VI. <u>Required Response Content</u>
- VII. <u>Response Form</u>

I. <u>Purpose</u>

Sedgwick County, located in south-central Kansas, is one of the most populous of Kansas' 105 counties with a population estimated at more than 511,000 persons. It is the sixteenth largest in area, with 1,008 square miles, and reportedly has the second highest per capita wealth among Kansas' counties. Organizationally, the County is a Commission/Manager entity, employs nearly 2,800 persons, and hosts or provides a full range of municipal services, e.g. – public safety, public works, criminal justice, recreation, entertainment, cultural, human/social, and education.

This Request for Bid will be for the entire county. Currently we have 14 locations utilizing some sort of waste pick-up; other county departments may be added to the contract at a later date. If that situation occurs, a request for quote will be obtained and added to the contract. Below is a list of current departments, how many containers they currently have picked up, and the current pick up schedule.

II. Submittals

Carefully review this Request for Bid. It provides specific technical information necessary to aid participating firms in formulating a thorough response. Should you elect to participate, submit one (1) original **AND** one (1) electronic copy (PDF/Word supplied on a flash drive) of the entire document with any supplementary materials to:

Josh Lauber Sedgwick County Purchasing Section 525 N. Main, Suite 823 Wichita, KS 67203

SUBMITTALS are due **NO LATER THAN 1:45 pm CST, TUESDAY, November 12, 2019**. Responses must be <u>sealed</u> and marked on the lower left-hand corner with the firm name and address, bid number, and bid due date. Late or incomplete responses will not be accepted and will not receive consideration for final award.

Bid responses will be acknowledged and read into record at bid opening which will occur at 2:00 pm CST, on the due date.

III. Scope of Work

Sedgwick County is seeking a qualified contractor to provide Medical Disposal Services and disposal boxes. The successful contractor shall:

A. Provide at no additional cost all labels, packing materials, and some type of approved storage container (box). Either the disposable cardboard container with a red puncture resistant plastic liner of three (3) mil. thickness or an approved reusable plastic container. Containers and "red bags" must have all required identification including infectious waste symbol (biohazard).

B. Pick up, transport, safely treat, and properly dispose of the medical waste in accordance with the most current laws and regulations of the State of Kansas.

C. Provide pricing options based on a fixed monthly schedule of pricing per container and frequency of pick-up. Contractor shall also provide pricing for on-call services to other various County locations (by container), allowing for pick-up within 48 hours of call requesting service.

D. Be responsible for keeping complete documentation records. Providing shipment tracking numbers and shipment manifest which shall contain the date of service and the disposal site.

E. Be responsible for providing complete chain of custody documentation essential for accountability and regulatory compliance of bio-hazardous materials. Invoices shall serve as verification of disposal, however additional documentation shall be provided upon request of Sedgwick County or government entities.

IV. Sedgwick County's Responsibilities

- Provide information, as legally allowed, in possession of the county, which relates to the county's requirements or which is relevant to this project.
- Designate a person to act as the County Contract Manager with respect to the work to be performed under this contract.
- County reserves the right to make inspections at various points of the project. Contractor agrees to openly participate in said inspections and provide information to the county on the progress, expected completion date and any unforeseen or unexpected complications in the project.

V. <u>Bid Terms</u>

A. Questions and Contact Information

Any questions regarding this document must be submitted in writing to Josh Lauber at Josh.Lauber@sedgwick.gov by 5:00 pm CDT, October 25, 2019. Any questions of a substantive nature will be answered in written form as an addendum and posted on the purchasing website at <u>https://www.sedgwickcounty.org/finance/purchasing/requests-for-bid-and-proposal/</u> under the Documents column associated with this bid number by 5:00 pm CDT, October 30, 2019. Firms are responsible for checking the website and acknowledging any addenda on their bid response form.

B. <u>Minimum Firm Qualifications</u>

This section lists the criteria to be considered in evaluating the ability of firms interested in providing the service(s) and/or product(s) specified in this Request for Bid. Firms must meet or exceed these qualifications to be considered for award. Bids submitted must reflect in detail their inclusion as well as the degree to which they can be provided. Any exceptions to the requirements listed should be clearly detailed in proposer's response. Bidders shall:

- 1. Have proper certification(s) or license(s) for the services/product specified in this document.
- 2. Ensure that project work meets all local, state and federal laws, regulations and ordinances.
- 3. Have the capacity to acquire all required permits, bonds, escrows or insurances.
- 4. Provide appropriate project supervision and quality control procedures.
- 5. Have appropriate material, equipment and labor to perform job safely and efficiently. *All costs associated with meeting this requirement will be the sole responsibility of the vendor.*
- 6. Assure all staff have proper driver's license for the types of vehicles used for transporting.
- 7. Have provided services similar to those specified herein for a minimum of three (3) years.
- 8. Maintain ability to provide ongoing services in the manner described within bid response.

C. Evaluation Criteria

The selection process will be based on the responses to this solicitation document. The committee will be selecting one (1) vendor to provide service to the entire county.

The county will judge each response on the following criteria (listed in no particular order):

A. Meeting or exceeding all solicitation conditions and instructions as outlined herein to include clarity, completeness, and comprehensiveness of the response.

B. Ability to meet or exceed all requirements and scope of work.

- C. Proven ability to provide high quality service.
- D. Qualifications and expertise.
- E. The most advantageous and prudent methodology and costs as determined by the county.

D. <u>Request for Bid Timeline</u>

The following dates are provided for information purposes and are subject to change without notice. Contact the Purchasing Section at (316) 660-7255 to confirm any and all dates.

Distribution of Request for Bid to interested parties	October 11, 2019
Clarification, Information and Questions submitted in writing by 5:00 pm CDT	October 25, 2019
Addendum Issued by 5:00 pm CDT	October 30, 2019
Sealed Bid due before 1:45 pm CST	November 12, 2019
Board of Bids and Contracts Recommendation	November 21, 2019
Board of County Commission Award	December 4, 2019

E. <u>Contract Period and Payment Terms</u>

A contractual period will begin following Board of County Commissioners (BoCC) approval of the successful firm(s) for two (2) years with options to renew for three (3) additional one (1) year terms.

Either party may cancel its obligations herein upon thirty-day (30) prior written notice to the other party. It is understood that funding may cease or be reduced at any time, and in the event that adequate funds are not available to meet the obligations hereunder, either party reserves the right to terminate this agreement upon thirty (30) days prior written notice to the other. Payment will be remitted following receipt of monthly detailed invoice.

Payment and Invoice Provisions

https://www.sedgwickcounty.org/media/39239/payment and invoice provisions.pdf

F. Insurance Requirements

Liability insurance coverage indicated below must be considered as primary and not as excess insurance. If required, Contractor's professional liability/errors and omissions insurance shall (i) have a policy retroactive date prior to the date any professional services are provided for this project, and (ii) be maintained for a minimum of 3 years past completion of the project. Contractor shall furnish a certificate evidencing such coverage, with County listed as an additional insured including both ongoing and completed operations, except for professional liability, workers' compensation and employer's liability. **Certificate shall be provided prior to award of contract.** Certificate shall remain in force during the duration of the project/services and will not be canceled, reduced, modified, limited, or restricted until thirty (30) days after County receives written notice of such change. All insurance must be with an insurance company with a minimum BEST rating of A-VIII and licensed to do business in the State of Kansas (**must be acknowledged on the bid/proposal response form**).

<u>NOTE</u>: If any insurance is subject to a deductible or self-insured retention, written disclosure must be included in your proposal response and also be noted on the certificate of insurance.

It is the responsibility of Contractor to require that any and all approved subcontractors meet the minimum insurance requirements.

Workers' Compensation:			
Applicable coverage per State Statutes			
Employer's Liability Insurance:	\$500,000.00		
Commercial General Liability Insurance (on form CG 00 01 04	13 or its equivalent):		
Each Occurrence	\$1,000,000.00		
General Aggregate, per project	\$2,000,000.00		
Personal Injury	\$1,000,000.00		
Products and Completed Operations Aggregate	\$2,000,000.00		
Automobile Liability:			
Coverage shall include broadened pollution coverage	\$1,000,000.00		
Combined single limit	\$500,000.00		
Umbrella Liability:			
Following form for both the general liability and automobile			
Required/ <u>X</u> Not Required			
Each Claim	\$1,000,000.00		
Aggregate	\$1,000,000.00		
Professional Liability/ Errors & Omissions Insurance:			
Required/ <u>X</u> Not Required			
Each Claim	\$1,000,000.00		
Aggregate	\$1,000,000.00		
Pollution Liability Insurance:			
<u>X</u> Required/ Not Required			
Each Claim	\$1,000,000.00		
Aggregate	\$1,000,000.00		

Special Risks or Circumstances:

Entity reserves the right to modify, by written contract, these requirements, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances.

CONTRACTOR IS PROVIDING CONSTRUCTION SERVICES:

In addition to the above coverages, Contractor shall also provide the following:

Builder's Risk Insurance:	In the amount of the initial Contract Sum, plus the
	value of subsequent modifications and cost of materials
	supplied and installed by others, comprising the total
	value for the entire Project on a replacement cost basis
	without optional deductibles. Entity, Contractor, and all
	Subcontractors shall be included as named insureds.

G. Indemnification

To the fullest extent of the law, the provider, its subcontractor, agents, servants, officers or employees shall indemnify and hold harmless Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, from any and all claims brought by any person or entity whatsoever, arising from any act, error, or omission of the provider during the provider's performance of the agreement or any other agreements of the provider entered into by reason thereof. The provider shall indemnify and defend Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, with respect to any claim arising, or alleged to have arisen from negligence, and/or willful, wanton or reckless acts or omissions of the provider, its subcontractor, agents, servants, officers, or employees and any and all losses or liabilities resulting from any such claims, including, but not limited to, damage awards, costs and reasonable attorney's fees. This indemnification shall not be affected by any other portions of the agreement relating to insurance requirements. The provider agrees that it will procure and keep in force at all times at its own expense insurance in accordance with these specifications.

H. Confidential Matters and Data Ownership

The successful bidder agrees all data, records and information, which the bidder, its agents and employees, which is the subject of this bid, obtain access, remains at all times exclusively the property of Sedgwick County. The successful proposer agrees all such data, records, plans and information constitutes at all times proprietary information of Sedgwick County. The successful bidder agrees that it will not disclose, provide, or make available any of such proprietary information in any form to any person or entity. In addition, the successful proposer agrees it will not use any names or addresses contained in such data, records, plans and information for the purpose of selling or offering for sale any property or service to any person or entity who resides at any address in such data. In addition, the successful proposer agrees it will not sell, give or otherwise make available to any person or entity any names or addresses contained in or derived from such data, records and information for the purpose of allowing such person to sell or offer for sale any property or service to any person or entity named in such data. Successful bidder agrees it will take all reasonable steps and the same protective precautions to protect Sedgwick County's proprietary information. Proposer agrees that all data, regardless of form that is generated as a result of this Request for Bid is the property of Sedgwick County.

I. <u>Bid Conditions</u>

https://www.sedgwickcounty.org/media/31339/bid-terms-conditions.pdf

General Contract Provisions http://www.sedgwickcounty.org/purchasing/pdf_files/General%20Contractual%20Provisions.pdf

Mandatory Contract Provisions https://www.sedgwickcounty.org/media/31336/mandatory-contractual-provisions.pdf

Independent Contractor

https://www.sedgwickcounty.org/media/54780/independent-contractor-addendum.pdf

Sample Contract

https://www.sedgwickcounty.org/media/39236/sample-contract.pdf

VI. <u>Required Response Content</u>

A. State names, titles, and qualifications of lead professional personnel to be assigned to the county account.

B. Provide a brief description of your firm, including qualifications, experience, depth of staff, quality control, and the demonstration of your ability to be the provider of the outlined services.

C. Provide a list of any firm who will provide any sub-contracting services.

D. Provide a minimum of three (3) references from firms to whom are currently receiving services requested in this RFB. Include the dates service is being furnished and the name, address, phone number, and e-mail address of each person the County has your permission to contact.

E. Provide a statement discussing any current ongoing litigation, which may cause conflicts or affect the ability of the proposer to provide services.

PRICING INFORMATION RFB #19-0065 MEDICAL WASTE PICK-UP AND DISPOSAL

Location	Address	Estimated Number of Containers per Pick-up	Pick-Up Frequency	Cost per Container	Total per Pickup
Comcare-Sedgwick County Offender Assessment Program (SCOAP)	1720 E Morris St #101, Wichita, KS	1 each	Monthly		
Comcare – Adult Medical Services	1919 N Amidon Ave, Wichita, KS	1 each	Monthly		
Comcare - Community Crisis Center	635 N Main St, Wichita, KS	1 each	Monthly		
Comcare - Adult Services	4035 E Harry, Wichita, KS	1 each	As needed, will call		
Corrections - Adult Field Services	905 N. Main St, Wichita, KS	1 each	As needed		
Corrections - Adult Residential	622 E. Central Ave, Wichita, KS	1 each	4 weeks		
Corrections - Juvenile Detention Facility	700 S. Hydraulic Street, Wichita, KS	3 each	4 weeks		
Corrections - Drug Court & Pretrial	3803 E. Harry, Suite 121, Wichita, KS	2 each	As needed		
Corrections - Juvenile Field Services	3803 E. Harry, Suite 125, Wichita, KS	1 each	As needed		
Health Department	2716 E. W. Central Ave., Wichita, KS	8 each	4 weeks		
Health Department	1900 E. 9th Street North, Wichita, KS	4 each	8 weeks		
Regional Forensic Science Center	1109 N Minneapolis Wichita, KS	5 each	Weekly		
Sheriff's Office	830 Stillwell, Wichita, KS	2 each	Bi- Monthly; as needed		
Sheriff's Office - Investigations	525 N Main St, 2nd floor Wichita, KS	3 each	Bi- Monthly; as needed		
Sheriff's Office - Judicial	525 N Main St, 8th floor Wichita, KS	1 each	Bi- Monthly; as needed		

Price per additional box \$_____.

Price per additional location (within Sedgwick County geographic limits) if wishing to add additional location in the future based upon flat rate or mileage from service center address \$_____/box OR mile.

VII. <u>Response Form</u>

REQUEST FOR BID 19-0065 MEDICAL WASTE PICK UP AND DISPOSAL

The undersigned, on behalf of the Bidder, certifies that: (1) this offer is made without previous understanding, agreement or connection with any person, firm, or corporation submitting a bid on the same project; (2) is in all respects fair and without collusion or fraud; (3) the person whose signature appears below is legally empowered to bind the firm in whose name the bidder is entered; (4) they have read the complete Request for Bid and understands all provisions; (5) if accepted by the County, this bid is guaranteed as written and amended and will be implemented as stated; and (6) mistakes in writing of the submitted bid will be their responsibility.

NAME	
DBA/SAME	
CONTACT	
ADDRESS	CITY/STATEZIP
PHONE FAX	HOURS
STATE OF INCORPORATION or ORGANIZATION	
COMPANY WEBSITE ADDRESS	E-MAIL
NUMBER OF LOCATIONSNUMBER	OF PERSONS EMPLOYED
TYPE OF ORGANIZATION: Public Corporation H	Private Corporation Sole Proprietorship
Partnership Other (Describe):	
BUSINESS MODEL: Small Business Manufacturer _	Distributor Retail
Dealer Other (Describe):	
Not a Minority-Owned Business: Minority-Owne	d Business: (Specify Below)
African American (05) Asian Pacific (10) Sul	continent Asian (15) Hispanic (20)
Native American (25)Other (30) (Please specify)
Not a Woman-Owned Business: Woman-Owned	Business: (Specify Below)
Not Minority -Woman Owned (50) African Americ	an-Woman Owned (55)
Asian Pacific-Woman Owned (60)Subcontinent As	ian-Woman Owned (65)Hispanic Woman Owned (70)
Native American-Woman Owned (75)Other (Woma	an Owned) (80) Please specify
ARE YOU REGISTERED TO DO BUSINESS IN THE ST	ATE OF KS:YesNo
INSURANCE REGISTERED IN THE STATE OF KS WI	TH MINIMUM BEST RATING OF A-VIII:YesNo
 ☐ Yes, I would like to be on the emergency vendor list ☐ No, I would not like to be on the emergency vendo 	r list.
After Hours Phone #: Eme After Hours Fax #:	rgency Contact Name:
ACKNOWLEDGE RECEIPT OF ADDENDA: All a vendor's responsibility to check and confirm all addendu www.sedgwickcounty.org/finance/purchasing.asp.	ddendum(s) are posted to our RFQ/RFP web page and it is the um(s) related to this document by going to
NO, DATED; NO, D	OATED; NO, DATED
In submitting a response to this document, vendor ackno clearly delineated and detailed any exceptions. Signature	wledges acceptance of all sections of the entire document and hasTitle
Print Name	Dated

Bid Number 19-0065 Sedgwick County....Working for You