



## DIVISION OF FINANCE – PURCHASING DEPARTMENT

100 N. Broadway St, Suite 610 Wichita, KS 67202 • Phone (316) 660-7255 • Fax (316) 660-1839  
PURCHASING@SEDGWICK.GOV • SEDGWICKCOUNTY.ORG

### REQUEST FOR PROPOSAL RFP #26-0027 ON-CALL VETERINARY CLINIC SERVICES

March 3, 2026

Sedgwick County, Kansas (hereinafter referred to as “county”) is seeking a firm or firms to provide On-Call Veterinary Clinic Services. If your firm is interested in submitting a response, please do so in accordance with the instructions contained within the attached Request for Proposal. Responses are due no later than 1:45 pm CDT, March 24, 2026.

**All contact concerning this solicitation shall be made through the Purchasing Department.** Proposers 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 Department in writing. Failure to comply with these guidelines may disqualify the Proposer’s response.

Sincerely,

Jaimee O’Laughlin  
Purchasing Agent

JO/ch

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## **I. About this Document**

This document is a Request for Proposal. It differs from a Request for Bid or Quotation in that the county is seeking a solution, as described on the cover page and in the following Background Information section, not a bid or quotation meeting firm specifications for the lowest price. As such, the lowest price proposed will not guarantee an award recommendation. As defined in Charter Resolution No. 68, Competitive Sealed Proposals will be evaluated based upon criteria formulated around the most important features of the product(s) and/or service(s), of which quality, testing, references, service, availability or capability, may be overriding factors, and price may not be determinative in the issuance of a contract or award. The proposal evaluation criteria should be viewed as standards that measure how well a vendor's approach meets the desired requirements and needs of the county. Criteria that will be used and considered in evaluation for award are set forth in this document. The county will thoroughly review all proposals received. The county will also utilize its best judgment when determining whether to schedule a pre-proposal conference, before proposals are accepted, or meetings with vendors, after receipt of all proposals. A Purchase Order/Contract will be awarded to a qualified vendor submitting the best proposal. **Sedgwick County reserves the right to select, and subsequently recommend for award, the proposed service(s) and/or product(s) which best meets its required needs, quality levels and budget constraints.**

The nature of this work is for a public entity and will require the expenditure of public funds and/or use of public facilities, therefore the successful proposer will understand that portions (potentially all) of their proposal may become public record at any time after receipt of proposals. Proposal responses, purchase orders and final contracts are subject to public disclosure after award. All confidential or proprietary information should be clearly denoted in proposal responses and responders should understand this information will be considered prior to release, however no guarantee is made that information will be withheld from public view.

## **II. Background**

Sedgwick County, located in south-central Kansas, is one of the most populous of Kansas' 105 counties with a population estimated at more than 514,000 persons. It is the 16th 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 2,500 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.

Sedgwick County has a total population of 525,525, according to 2022 U.S. Census estimates. A majority of this population (396,192) live in Wichita, the largest city in Kansas. Sedgwick County Animal Control (SCAC) is a program within the Sedgwick County Health Department (SCHD), providing services to the residents of the unincorporated areas of Sedgwick County and contracted small cities within Sedgwick County ([www.sedgwickcounty.org/animal-control/](http://www.sedgwickcounty.org/animal-control/)).

The purpose of SCAC is to protect the public against zoonotic diseases and promote public safety through education and code enforcement. SCAC routinely obtains physical custody of (confines) a variety of companion animals, including but not limited to cats, dogs, small animals (such as guinea pigs and ferrets), as well as horses, goats, pigs and other livestock. Some of these animals come into the care and custody of SCAC with illness or injuries that require veterinary care during that animal's state-required stray holding period. An animal may need to be seen by a veterinary clinic for a variety of medical concerns such as broken bones or a need for medication for a potentially communicable illness like feline upper respiratory infection or ringworm diagnosis. The goal of the animal care is to reduce pain and treat basic illness or injuries. SCAC must observe the Kansas state mandated hold period of three (3) days as referenced in KSA 47-1710 and no animal should be euthanized before this period without the express written statement of a licensed veterinarian that this holding period would be inhumane for the individual animal. During the holding period, depending on circumstances of acquisition, SCAC may take different actions such as look for an animal's owner or investigate allegations of animal cruelty or inhumane treatment. The latter situation may extend SCAC's required custody of the animal.

In 2024, SCAC delivered more than 150 animals to contracted veterinary clinics in Sedgwick County with immediate euthanasia being the outcome for less than a third of presented animals. SCAC is responsible for the disposal of any remains resulting from the veterinary care of presented animals. In most cases, SCAC Officers bring animals to veterinary clinics for treatment. For about five (5) or fewer requests per year, SCAC Officers request veterinary clinics to visit locations other than their clinic (Farm Calls) to treat animals in SCAC custody.

Sedgwick County is seeking contracts with multiple veterinary clinics to provide veterinary services to sick or injured animals in custody of (confined by) SCAC. The intent of this Request for Proposal (RFP) is to procure services based on best overall value, considering qualification, responsiveness, and ability to meet the needs of SCAC and confined animals. Multiple veterinary clinics will be considered in, near, or at advantageous locations to SCAC. This will include clinics in Sedgwick County and could include clinics in other counties.

### III. Project Objectives

Sedgwick County, Kansas (hereinafter referred to as “county”) is seeking a firm or firms to provide On-Call Veterinary Clinic Services. The following objectives have been identified for this contract:

1. Acquire On-Call Veterinary Clinic Services that meet the parameters outlined in [Appendix A](#), the Firm Criteria, the Scope of Work, and the conditions and mandatory requirements presented in this document.
2. Develop a network of multiple veterinary clinics that can work with the county to reduce response time for sick or injured animals.
3. Establish contract pricing with multiple vendors that can provide basic services focusing on pain reduction, treatment of basic illness or injuries and possible euthanasia, if deemed necessary by the attending veterinarian.
4. Acquire On-Call Veterinary Clinic Services with the most advantageous overall cost to the county.

### IV. Submittals

Carefully review this Request for Proposal. It provides specific technical information necessary to aid participating firms in formulating a thorough response. Should you elect to participate with an electronic response, the RFP number must be entered in the subject line and email the entire document with supplementary materials to:

[Purchasing@sedgwick.gov](mailto:Purchasing@sedgwick.gov)

Should you elect to participate with a physical response, the response must be sealed and marked on the lower left-hand corner with the firm name and address, bid number, and bid due date. 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:

**Jaimee O’Laughlin**

Sedgwick County Purchasing Department  
100 N. Broadway, Suite 610  
Wichita, KS 67202

SUBMITTALS are due **NO LATER THAN 1:45 pm CDT, TUESDAY, March 24, 2026**. If there is any difficulty submitting a response electronically, please contact the Purchasing Technicians at [purchasing@sedgwick.gov](mailto:purchasing@sedgwick.gov) for assistance. Late or incomplete responses will not be accepted and will not receive consideration for final award. If you choose to send a hard copy of your proposal, Sedgwick County will not accept submissions that arrive late due to the fault of the U.S. Postal Service, United Parcel Service, DHL, FedEx, or any other delivery/courier service.

Proposal responses will be acknowledged and read into record at Bid Opening, **which will occur at 2:15 pm CDT on the due date**. No information other than the respondent’s name will be disclosed at Bid Opening. We will continue to have Bid Openings for the items listed currently. If you would like to listen in as these proposals are read into the record, **please dial our Meet Me line @ (316) 660-7271 at 2:15 pm**.

V. Scope of Work

1. The process SCAC will use with contracted veterinary clinics is as follows:
  - a. An SCAC Officer will obtain physical custody of an animal that needs to be seen by a veterinarian.
  - b. The Officer with custody of the animal will evaluate their location for the closest veterinary clinic that can provide the services needed for the type of animal in their care as well as the clinic best equipped to render the necessary medical intervention in a manner that considers both the relative time constraints, primarily of the animal's injury and secondarily the officer's schedule.
  - c. The Officer with custody of the animal will attempt to contact the veterinary clinic they deem the best fit for the animal in their current care.
  - d. If the Officer enroute to the clinic of their choice cannot contact the veterinary clinic, the Officer will notify Animal Control dispatch who will continue to attempt to contact the clinic.
  - e. The Officer may decide to go to the clinic even if no contact is made or the Officer may decide to go to another clinic.
  - f. Over the phone or when the Officer arrives at the veterinary clinic, the clinic may accept or refuse any animal from SCAC.
  - g. When an animal is taken into the care of a contracted veterinary clinic, the clinic has the responsibility to communicate with SCAC regarding the status and treatment approval of the animal in their care.
2. Contracted clinics are expected to respond to a request for service from the county during the clinic's business hours. If the clinic offers an emergency or after-hours response timeframe, that clinic would also be expected to respond to requests for service during their identified emergency or after-hours timeframe. This response may include a denial of service as SCAC recognizes that clinics have private clients scheduled with appointments.
  - a. SCAC recognizes that clinic hours will vary between clinics and could include weekdays, weekends, holidays, and clinic-specific in-service closures.
3. SCAC will make a reasonable effort to contact a contracted clinic by phone prior to arriving at their clinic to advise them of an animal control officer enroute to their location as well as the type of animal and extent of visible injury or illness.
  - a. If SCAC is unable to elicit a response via phone an officer may show up to a contracted clinic with an animal in need of care.
  - b. A contracted clinic has the right to advise SCAC if they are unable to facilitate evaluation and treatment of the described animal at any time-
4. SCAC may present multiple animals at the same time for evaluation, such as for animal cruelty or inhumane treatment cases.
5. SCAC's focus is that any provided veterinary care be rendered with the purpose of stabilizing any animal and alleviating pain. SCAC wants the animal in care to remain alive, if it is deemed humanely possible by the attending veterinarian and during this time it will be the responsibility of SCAC to attempt to contact the animal's owner.
6. The spending limit per animal must be no more than \$750.00 unless explicitly authorized due to extenuating circumstances.
  - a. Exceeding the \$750.00 limit must be authorized by the SCAC supervisor or most senior Officer on duty and verified by at least one (1) clinic employee (preferably two (2) if enough clinic staff are present). The authorization can be made over the phone or in person. Either way, authorization must be documented in writing by the most senior SCAC officer on duty within 24 hrs.
  - b. The clinic has the responsibility to contact SCAC if the amount of the care is nearing the maximum.

7. The veterinary clinic must work with the SCAC as they observe the Kansas state mandated hold period of three (3) days as referenced in KSA 47-1710 and no animal should be euthanized before this period without the express written statement of a licensed veterinarian that this holding period would be inhumane for the individual animal.
8. Protracted cruelty or inhumane treatment cases may require boarding services with a base level of care. If boarding is a service offered by a contracted clinic, a clinic may be asked to board animals requiring ongoing medical attention.
9. Any written documentation provided by any contracted clinic could be considered as part of a court case and the documentation may be read by a Sedgwick County legal representative and/or Sedgwick County judge with reference to the animals presented to that clinic.

### **Specific Activities**

1. Communication
  - a. The veterinary clinic must communicate with SCAC on all matters of veterinary treatment before treatment occurs, with the exception of time sensitive or life-saving interventions. If the latter, communication must occur directly after and no later than the next business day after the time-sensitive treatment.
2. Billing
  - a. The veterinary clinic must monitor expenses per animal and notify SCAC if nearing the \$750.00 maximum. A per animal exception amount may be authorized on a case-by-case basis with the process outlined previously in Scope of Work.
  - b. Payment for services must be invoiced per animal and submitted within 30 days from the date of service.
    - i. Properly submitted invoices will be paid within thirty (30) calendar days of receipt by county.
    - ii. Failure to submit billing in a timely manner will result in a delay of payment.
    - iii. Failure to include an identifying animal number or designation provided by SCAC on invoicing will result in a delay or denial of payment.
    - iv. Verbal invoicing will not be considered valid and will not be paid.
    - v. All invoices must be per animal and must contain:
      - A date of service.
      - The billing clinic's name, address, and a contact telephone number.
      - The text "Bill to: Sedgwick County Animal Control / 1015 Stillwell / Wichita, KS 67213 / 316-660-7070".
      - A description of the animal presented, including species and color.
      - The animal's numerical or unique name designation provided to the clinic by the SCAC Officer.
      - A description of all services rendered that incurred a fee, with a clear cumulative total for the specified animal to be paid by Sedgwick County.

### **Outcomes**

1. Provide care according to SCAC outlined scope of work and cost-effective service for animals in SCAC custody as needed for pain, injury or illness alleviation.
2. Achieve timely bi-directional communication between SCAC and contracted veterinary clinics regarding the treatment, comfort, cost, and medical needs of animals in care.

## VI. 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.

## VII. Proposal Terms

### A. Questions and Contact Information

Any questions regarding this document must be submitted via email to Jaimee O'Laughlin at [Jaimee.O'Laughlin@sedgwick.gov](mailto:Jaimee.O'Laughlin@sedgwick.gov) by 5:00 pm CDT, March 10, 2026. Any questions of a substantive nature will be answered in written form as an addendum and posted on the purchasing website at <https://www.sedgwickcounty.org/finance/purchasing/current-bids-and-proposals/> under the Documents column associated with this RFP number by 5:00 pm CDT, March 17, 2026. Firms are responsible for checking the website and acknowledging any addenda on their proposal response form.

### B. Minimum Firm Qualifications

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 Proposal. Firms must meet or exceed these qualifications to be considered for award. Any exceptions to the requirements listed should be clearly detailed in proposer's response. Proposers shall:

1. Have a minimum of five (5) years' experience in providing services similar to those specified in this RFP.
2. Have an understanding of industry standards and best practices.
3. Have an employee who is a licensed DVM on site during 50% or more of the clinic's business operating hours.
4. Have the ability, training, and appropriate licensure to euthanize animals as deemed necessary by the clinic's DVM.
5. Have staff that understand the SCAC primary objective of pain alleviation in treating animals presented from SCAC during the state mandated hold period of three (3) days as referenced in KSA 47-1710.
6. Have the means to invoice SCAC for any expenses incurred within 30 days of service.
7. Have experience in managing projects of comparable size and complexity to that being proposed.
8. Have knowledge of and comply with all currently applicable, and as they become enacted during the contract term, federal, state and local laws, statutes, ordinances, rules and regulations. All laws of the State of Kansas, whether substantive or procedural, shall apply to the contract, and all statutory, charter, and ordinance provisions that are applicable to public contracts in the county shall be followed with respect to the contract.
9. Municipal and county government experience is desired, however, the county will make the final determination based on responses received and the evaluation process.
10. Have the capacity to acquire all bonds, escrows or insurances as outlined in the terms of this RFP.
11. Provide clinic supervision and care of animals (as required) and quality control procedures.
12. Have appropriate material, equipment and labor to perform specified services.
13. Park only in designated areas and display parking permit (if provided).
14. Wear company uniform or ID badge for identification purposes.

C. [Evaluation Criteria](#)

The selection process will be based on the responses to this RFP. County staff will judge each response as determined by the scoring criteria below. Purchasing staff are not a part of the evaluation committee.

Component	Points
A. Qualifications ( <a href="#">Appendix A</a> )	30
B. Scope of Work ( <a href="#">Appendix B</a> )	25
C. Services and Availability ( <a href="#">Appendix C</a> )	15
D. Service Fee Estimates ( <a href="#">Appendix D</a> )	25
E. Completed proposal (all documents required were received by date RFP application was due)	5
<b>Total Points</b>	<b>100</b>

Assume the following cost proposals (**examples only**)

- A. \$50,000.00
- B. \$38,000.00
- C. \$49,000.00

Company B with a total price of \$38,000.00 is the low offer. Take the low offer and divide each of the other offers into the low offer to calculate a percentage. This percentage is then multiplied by the number of points available for the cost. In this case, 10 points are allocated to cost.

- A. \$38,000.00 divided by \$50,000.00 =.76                      .76\*10                      7.6 points
- B. \$38,000.00 divided by \$38,000.00 =1.00                      1.00\*10                      10 points
- C. \$38,000.00 divided by \$49,000.00= .77                      .77\*10                      7.7 points

Any final negotiations for services, terms and conditions will be based, in part, on the firm’s method of providing the service and the fee schedule achieved through discussions and agreement with the county’s review committee. The county is under no obligation to accept the lowest priced proposal and reserves the right to further negotiate services and costs that are proposed. The county also reserves the sole right to recommend for award the proposal and plan that it deems to be in its best interest.

The county reserves the right to reject all proposals. All proposals, including supporting documentation shall become the property of Sedgwick County. All costs incurred in the preparation of this proposal shall be the responsibility of the firm making the proposals. Sedgwick County reserves the right to select, and subsequently recommend for award, the proposed service which best meets its required needs, quality levels and budget constraints.

D. [Request for Proposal Timeline](#)

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

Distribution of Request for Proposal to interested parties	<b>March 3, 2026</b>
Questions and clarifications submitted via email by 5:00 pm CDT	<b>March 10, 2026</b>
Addendum Issued by 5:00 pm CDT	<b>March 17, 2026</b>
Proposal due before 1:45 pm CDT	<b>March 24, 2026</b>
Evaluation Period	<b>March 25, 2026 – May 6, 2026</b>
Board of Bids and Contracts Recommendation	<b>May 7, 2026</b>
Board of County Commission Award	<b>May 13, 2026</b>

E. Contract Period and Payment Terms

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

County 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/55477/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 three (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**).

**NOTE:** 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.

<b>Workers’ Compensation:</b>	
Applicable coverage per State Statutes	
<b>Employer’s Liability Insurance:</b>	\$500,000.00
<b>Commercial General Liability Insurance (on form CG 00 01 04 13 or its equivalent):</b>	
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
<b>Automobile Liability:</b>	
Combined single limit	\$500,000.00
<b>Umbrella Liability:</b>	
Following form for both the general liability and automobile	
<input checked="" type="checkbox"/> <b>Required</b> / <input type="checkbox"/> <b>Not Required</b>	
Each Claim	\$1,000,000.00
Aggregate	\$1,000,000.00
<b>Professional Liability/ Errors &amp; Omissions Insurance:</b>	
<input checked="" type="checkbox"/> <b>Required</b> / <input type="checkbox"/> <b>Not Required</b>	
Each Claim	\$1,000,000.00
Aggregate	\$1,000,000.00
<b>Pollution Liability Insurance:</b>	
<input type="checkbox"/> <b>Required</b> / <input checked="" type="checkbox"/> <b>Not Required</b>	
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.

**IF CONTRACTOR IS PROVIDING CONSTRUCTION SERVICES:**

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

<b>Builder's Risk Insurance:</b>	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 insured's.
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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 proposer agrees all data, records and information, which the proposer, its agents and employees, which is the subject of this proposal, 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 proposer 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 proposer agrees it will take all reasonable steps and the same protective precautions to protect Sedgwick County's proprietary information from disclosure to third parties as with successful proposer's own proprietary and confidential information. Proposer agrees that all data, regardless of form that is generated as a result of this Request for Proposal is the property of Sedgwick County.

I. Proposal Conditions

<https://www.sedgwickcounty.org/media/31338/proposal-tc.pdf>

Sample Contract

<https://www.sedgwickcounty.org/media/67402/sample-contract-kws-13024.pdf>

Contract Provisions for FEMA Projects (If Applicable)

<https://www.sedgwickcounty.org/media/67302/sedgwick-county-federal-grant-contract-provisions.pdf>

Suspension and Debarment

<https://www.sedgwickcounty.org/finance/purchasing/suspension-and-debarment/>

Protest Procedure

Any protests and/or challenges to the bid process must be filed timely and pursuant to Sedgwick County's protest procedure.

[www.sedgwickcounty.org/media/68789/protest-procedure-rev-4225.pdf](http://www.sedgwickcounty.org/media/68789/protest-procedure-rev-4225.pdf)

**VIII. Required Response Content**

All proposal submissions shall include the following:

1. Firm profile: the name of the firm, address, telephone number(s), contact person, year the firm was established, and the names of the principals of the firm.
2. The firm's relevant experience, notably experience working with government agencies.
3. At minimum, three (3) professional references, besides Sedgwick County, with email addresses, telephone numbers, and contact persons where work has been completed within the last three (3) years.
4. A disclosure of any personal or financial interest in any properties in the project area, or any real or potential conflicts of interest with members of the Sedgwick County Board of County Commissioners or county staff.
5. A description of the type of assistance that will be sought from county staff, including assistance required from the county to lessen the costs of this project.
6. Proof of insurance meeting minimum insurance requirements as designated herein.
7. Completed Appendices A, B, C, and D.
8. Those responses that do not include all required forms/items may be deemed non-responsive.

IX. Response Form

**REQUEST FOR PROPOSAL**

**RFP #26-0027**

**ON-CALL VETERINARY CLINIC SERVICES**

The undersigned, on behalf of the proposer, certifies that: (1) this offer is made without previous understanding, agreement or connection with any person, firm, or corporation submitting a proposal 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 proposer is entered; (4) they have read the complete Request for Proposal and understands all provisions; (5) if accepted by the county, this proposal is guaranteed as written and amended and will be implemented as stated; and (6) mistakes in writing of the submitted proposal will be their responsibility.

NAME \_\_\_\_\_

DBA/SAME \_\_\_\_\_

CONTACT \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ HOURS \_\_\_\_\_

STATE OF INCORPORATION or ORGANIZATION \_\_\_\_\_

COMPANY WEBSITE ADDRESS \_\_\_\_\_ EMAIL \_\_\_\_\_

NUMBER OF LOCATIONS \_\_\_\_\_ NUMBER OF PERSONS EMPLOYED \_\_\_\_\_

TYPE OF ORGANIZATION: Public Corporation \_\_\_\_\_ Private Corporation \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_

Partnership \_\_\_\_\_ Other (Describe): \_\_\_\_\_

BUSINESS MODEL: Small Business \_\_\_\_\_ Manufacturer \_\_\_\_\_ Distributor \_\_\_\_\_ Retail \_\_\_\_\_

Dealer \_\_\_\_\_ Other (Describe): \_\_\_\_\_

Not a Minority-Owned Business: \_\_\_\_\_ Minority-Owned Business: \_\_\_\_\_ (Specify Below)

\_\_\_\_\_ African American (05) \_\_\_\_\_ Asian Pacific (10) \_\_\_\_\_ Subcontinent 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 American-Woman Owned (55) \_\_\_\_\_ Asian Pacific-Woman Owned (60)

\_\_\_\_\_ Subcontinent Asian-Woman Owned (65) \_\_\_\_\_ Hispanic Woman Owned (70) \_\_\_\_\_ Native American-Woman Owned (75)

\_\_\_\_\_ Other – Woman Owned (80) – Please specify \_\_\_\_\_

ARE YOU REGISTERED TO DO BUSINESS IN THE STATE OF KS: \_\_\_\_\_ Yes \_\_\_\_\_ No

UEI (UNIQUE ENTITY IDENTIFIER) NO. \_\_\_\_\_

INSURANCE REGISTERED IN THE STATE OF KS WITH MINIMUM BEST RATING OF A-VIII: \_\_\_\_\_ Yes \_\_\_\_\_ No

**ACKNOWLEDGE RECEIPT OF ADDENDA:** All addendum(s) are posted to our RFB/RFP web page and it is the vendor's responsibility to check and confirm all addendum(s) related to this document by going to <https://www.sedgwickcounty.org/finance/purchasing/>.

NO. \_\_\_\_\_, DATED \_\_\_\_\_; NO. \_\_\_\_\_, DATED \_\_\_\_\_; NO. \_\_\_\_\_, DATED \_\_\_\_\_

In submitting a proposal, vendor acknowledges all requirements, terms, conditions, and sections of this document. Proposal submission format should be by order in which sections are listed throughout the document. All minimum and general requirements should be specifically addressed and detailed in proposer's response. **Exceptions to any part of this document should be clearly delineated and detailed.**

Signature \_\_\_\_\_ Title \_\_\_\_\_

Print Name \_\_\_\_\_ Dated \_\_\_\_\_

**REQUEST FOR PROPOSAL**  
**RFP #26-0027**  
**ON-CALL VETERINARY CLINIC SERVICES**

Consistent with the guidance provided in Section 1 of this Request for Proposal, Sedgwick County is subject to the Kansas Open Records Act (K.S.A. 45-215 *et seq.*). As such, portions, and potentially all, of your proposal may become accessible to the public through records requests even if it is not awarded the contract.

If you are claiming some of the submitted documentation should not be disclosed, indicate the associated information and the basis for such claims of privilege in the spaces below. In the event records requests are submitted for information identified as privileged, proprietary or confidential, Sedgwick County may attempt to coordinate a response and would expect for you to be available to defend your claims in court. Failure to provide information in the spaces below shall constitute a waiver of any claims of violation of privileged, proprietary or confidential information resulting from the production of these records, regardless of other language or claims within your Response.

<b>PRIVILEGE LOG</b>		
<b>Page and/or Section of Information Not Subject to Disclosure</b>	<b>Description of Information that You Claim are Privileged or Confidential. Do not include specific details, but rather categories or general descriptions of the information in question.</b>	<b>Basis for the Claim of Privilege. Please include the Applicable Federal or State Law Cite and Rationale</b>

**Appendix A: Eligibility Criteria**

Use the following checklist to determine your eligibility for the Request for Proposal.

Clinic Name: \_\_\_\_\_

**CHECKLIST OF NECESSARY QUALIFICATIONS**

<p>1. Our Clinic has an employee with a DVM license on site fifty percent or more of business operating hours.</p>	<p><input type="checkbox"/> YES Continue to question 2</p>	<p><input type="checkbox"/> No <b>STOP HERE</b> SKIP TO BOX 5</p>
<p>2. Our clinic has the ability, training, and appropriate licensure to euthanize animals as deemed necessary by our staff DVM.</p>	<p><input type="checkbox"/> YES Continue to question 3</p>	<p><input type="checkbox"/> No <b>STOP HERE</b> SKIP TO BOX 5</p>
<p>3. Our clinic is comfortable with a primary objective of pain alleviation in treating animals presented from Sedgwick County Animal Control during the state mandated 72hr hold period mandated under KSA 47-1710.</p>	<p><input type="checkbox"/> YES Continue to question 4</p>	<p><input type="checkbox"/> No <b>STOP HERE</b> SKIP TO BOX 5</p>
<p>4. Our Clinic has the means to invoice Sedgwick County Animal Control for any expenses incurred within 30 days of service.</p>	<p><input type="checkbox"/> YES If you answered yes to all questions 1-4 <b>you are eligible for this RFP.</b> Please continue with this form and complete all further attached appendices</p>	<p><input type="checkbox"/> No READ BOX 5</p>
<p>5. If your clinic has answered no to any of the above questions, you are not eligible for this RFP.</p>	<p><input type="checkbox"/> YES I answered YES to all of the above questions. Proceed to question 6 to acknowledge the firm requirements.</p>	<p><input type="checkbox"/> No I answered No to one or more of the above questions. <b>STOP HERE</b></p>
<p>6. Follow industry standards and best practices.</p>	<p><input type="checkbox"/> YES Continue to question 7</p>	<p><input type="checkbox"/> No Please add an explanation on a separate sheet of paper.</p>
<p>7. Have the capacity to acquire all bonds, escrows or insurances as outlined in the terms of this</p>	<p><input type="checkbox"/> YES Continue to question 8</p>	<p><input type="checkbox"/> No</p>

RFP.		Please add an explanation on a separate sheet of paper.
8. Provide clinic supervision and care of animals.	<input type="checkbox"/> YES Continue to question 9	<input type="checkbox"/> No Please add an explanation on a separate sheet of paper.
9. Have appropriate material, equipment and labour to perform specified services.	<input type="checkbox"/> YES Thank you for completing this appendix. Please proceed to <a href="#">Appendix B</a> .	<input type="checkbox"/> No Please add an explanation on a separate sheet of paper.



**Appendix B: Scope of Work Checklist**

Complete this table, answering “Yes” or “No” in the middle column. If “No,” describe the reason in the third column.

**Clinic Name:** \_\_\_\_\_

Scope of Work Item	Indicate “Yes” if your clinic can do this work. Indicate “No” if you disagree or if your clinic could not comply with this work.	If No, describe the reason.
1. Respond to a request for service from the county during the clinic’s normal business hours.		
2. When an SCAC officer contacts the clinic enroute to the clinic location and describes the type of animal and extent of visible injury or illness, advise SCAC if the clinic is unable to facilitate evaluation and treatment of the described animal at the time of contact.		
3. Treat multiple animals at the same time for evaluation such as for animal cruelty or inhumane treatment cases.		
4. Provide care to animals with the purpose of stabilization and pain prevention. SCAC wants the animal in care to remain alive, if it is deemed humanely possible by the attending veterinarian.		
5. Comply with the spending limit per animal of no more than \$750 unless explicitly authorized by the SCAC supervisor or most senior officer on duty and verified by one (preferably two) clinic employees over the phone or in writing by the most senior SCAC officer on duty.		
6. Contact SCAC if the amount of the care is nearing the maximum of \$750 per animal.		

7. Provide boarding services with a base level of care.		
8. Provide boarding services with a base level of care for a protracted period such as for cruelty or inhumane treatment cases.		
9. Board animals requiring ongoing medical attention.		
10. Provide any written documentation to SCAC to be used as part of a court case. This documentation may be read by a Sedgwick County legal representative and/or Sedgwick County judge with reference to the animals presented to that clinic.		

**Appendix C: Services and Availability (Multiple pages)**

Complete this document to identify your clinic’s contact information, hours of operation, services, and court availability. If you need the Appendices sent in an electronically fillable format, contact [Purchasing@sedgwick.gov](mailto:Purchasing@sedgwick.gov).

**Contact information – NORMAL BUSINESS HOURS**

Clinic Name	
Clinic Address	
Clinic County	
Clinic Phone Number	
Clinic General Email	
Clinic Website	

**Hours of Operation**

A. Hours of Operation with an on-duty staff member who is a licensed DVM. Please specify days of the week and daily hours. e.g., M-F 9am-5pm Sa Su 9am-12noon.	
B. List any after-hours response or emergency response your clinic may have available to SCAC officers. If none, respond ‘none.’	
C. If after-hours response is available, list hours of on-call and specify normal procedures to reach the on-call personnel. If this does not apply to your clinic, respond ‘N/A.’	
D. If your clinic has planned yearly holidays or standard vacation periods, specify which times of the year your clinic is closed. e.g., Christmas, Thanksgiving	
E. If your clinic regularly experiences unexpected closures that may limit access to a staff DVM, please specify here. <i>This WILL NOT disqualify your clinic to contract with the county and is only intended for the purposes of documenting advanced knowledge of officer accessibility to animals in boarding.</i>	

**Services – Species**

Sedgwick County Animal Control works with a variety of animals. Answers to these questions will help Sedgwick County Animal Control determine which veterinary clinics can assist with the animals in custody.

F. Specify all species your clinic’s DVM and staff are available to treat. For example: cats, dogs, livestock (please specify type), exotics (please specify limitations), fowl, and wildlife. If your clinic provides farm call services please note in this box as well.	
G. Specify any species that your clinic’s DVM or onsite staff would not treat under any circumstances.	

H. Are there any further services about species for which your clinic wants to specify and/or provide price comparisons? If no, please answer 'No.'	
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**Services – Boarding**

On occasion, Sedgwick County Animal Control has a need to board companion animals and livestock for treatment or an ongoing cruelty case.

I. Could your clinic provide boarding to animals in custody of Sedgwick County Animal Control? <i>If the answer is NO, this WILL NOT disqualify your clinic to contract with the county.</i> If the answer is No, skip to question L.	
J. If your clinic can provide boarding, specify species and duration constraints. e.g., “We can board dogs for 3-7 days based on cage availability” or “We do not board livestock.”	
K. If your clinic can provide boarding, specify daily cost per species listed in question of this section. <i>Alternatively, your clinic may choose to attach a list of boarding costs to this application instead of writing in the space provided. If a cost list is attached, please indicate in the box to the right.</i>	

**Court Availability**

For the purposes of court hearings, licensed DVMs at contracted clinics may be asked to provide a written opinion or testify in court on a case of animal cruelty or inhumane treatment.

L. Is your clinic’s DVM comfortable providing a written opinion on an animal cruelty or inhumane treatment case? <i>If the answer is NO, this WILL NOT disqualify your clinic to contract with the county.</i>	
M. Is your clinic’s DVM available to testify in court if given enough advance notice? <i>If the answer is NO this WILL NOT disqualify your clinic to contract with the county.</i>	
N. If your clinic’s DVM is available to testify in court, how much would your clinic charge for your DVM’s time to be out of clinic to testify? <i>If your clinic’s DVM is not available to testify, enter ‘N/A.’</i>	

**Additional information**

O. Include any additional information about services or availability.

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[Appendix D: Service Fees Estimates \(Two Pages\)](#)

Tables 1 and 2 list standard services that Sedgwick County Animal Control is most likely to utilize. To the best of your estimation, specify cost per service type.

- Complete Table 1 for dogs, cats, and other small mammals
- Complete Table 2 for livestock and other animals

Notes:

- Sedgwick County recognizes that costs may increase over the duration of a contract period.
- This is not a quote and estimates below will not be held as irrefutable. This is only intended to give estimations on cost for common services and potential gaps in need. If you do not offer a specific service, enter “N/A.”
- Not offering a particular service does not disqualify your clinic to contract with Sedgwick County.
- The service prices can be listed as a range. For example, X-ray 1 view: \$50-65.

**Clinic Name:** \_\_\_\_\_

**Table 1. Services by Dog, Cat, and Small Mammals**

Service	Large Breed Dog	Small Breed Dog	Cat	Other Small Mammals
Stray Exam Fee				
Euthanasia				
Hospitalization (cost per day)				
One View Radiograph (please specify additional cost of additional views)				
Interpretation of Radiographs; if applicable.				
IV Fluids Setup				
Each additional bag of IV Fluids				
Antibiotics				
Anti-nausea Medication				
Pain Medications				
Sedation				
Irrigation of wound under 2in and closure w/o need for general anesthesia				

**Table 2. Services – Livestock and Other Animals**

*Specify species in the Notes Section*

Services	Notes
Stray Exam Fee	
Euthanasia	
Hospitalization (cost per day)	
One View Radiograph (please specify additional cost of additional views)	
Interpretation of Radiographs; if applicable.	
IV Fluids Setup	
Each additional bag of IV Fluids	
Antibiotics	
Anti-nausea Medication	
Pain Medications	
Sedation	
Irrigation of wound under 6in and closure w/o need for general anesthesia	
Describe anything specific your clinic offers for livestock or other animals of which you would like to make us aware.	