

Missouri Hospital Association

Request for Proposals

**RFP Submission:
Active Shooter Functional Exercise**

July 9, 2010

Missouri Hospital Association
573/893-3700

NATURE OF SERVICES REQUIRED

The Missouri Hospital Association (MHA) administers the Assistant Secretary of Preparedness and Response (ASPR) Hospital Preparedness Program (HPP) grant CFDA 93.889 as a subcontractor for the Missouri Department of Health and Senior Services. MHA is seeking the services of a qualified disaster consultant (vendor) to coordinate and facilitate two regional hospital functional exercises in conjunction with other healthcare provider organizations as necessary. The Vice President of Health Planning and disaster preparedness staff, (referred to hereafter as “MHA Staff”) who will oversee this project, are seeking quotes for this Request for Proposal (RFP).

The MHA currently is in the eighth year of appropriations administering the Assistant Secretary of Preparedness and Response (ASPR) Hospital Preparedness Program (HPP) grant as a subcontractor to the Missouri Department of Health and Senior Services. Over the last several years, MHA staff has worked closely with hospitals in the areas of equipment acquisition, training, exercises and hospital plan development to continually increase the capacities and capabilities of each facility.

The MHA staff has identified the need for additional expertise to coordinate functional exercises to comply with both the Joint Commission and ASPR grant requirements.

The project objective is to develop and conduct two functional exercises in Missouri Regions H and I that test the capabilities listed below to identify strengths and opportunities in existing regional plans and individual hospital plans, capacities and capabilities related to an active shooter incident in hospitals. The exercises must occur between May 15 and June 15, 2011. Each exercise must include an active shooter in at least one hospital with staff and citizen injuries and deaths and credible threats at 2-3 more hospitals; the immediate response including local law enforcement response (at least at the discussion level); surge of real or paper patients; and request for staffing assistance from regional partners because of staff injuries and/or emotional trauma following the event, and other post event considerations. Both exercises will test the Missouri ESAR-VHP program, “Show Me Response” with the Missouri Department of Health and Senior Services, Department Situation Room. EMResource® will be used for posting alerts and collecting hospital information including HAvBED and EMTrack® will be used for the tracking of patients.

Each exercise needs to test the operational capability of the following Medical surge components:

- Interoperable Communication Systems including ESAR-VHP activation
- Bed Tracking Systems (HAvBED)
- Fatality Management
- Medical Evacuation/shelter in place
- Mutual Aid Agreements for partnerships/coalitions within the area (at least at the table top level)

Activities must include:

- planning and conducting all planning conferences, and provide written agendas and minutes of those conferences. This includes minimum number of conferences to be held, venue (teleconferencing or in-person)
- developing a planning committee that represents the various entity types participating in the exercise
- consulting with lead participants either in person or by phone to assure realistic and site specific exercise scenarios
- consulting with participants to recruit community partners, such as law enforcement, local emergency operations, first responders, etc
- developing the final HSEEP compliant documents to plan, conduct and evaluate the exercise and create the after action report/improvement plan for the participants
- providing at least one lead evaluator/coordinator for each venue of the exercise
- providing qualified staff for each SIMCELL
- facilitating after action meetings at each venue
- conducting a regional hot wash for appropriate participants

The proposal submitted should include a detail exercise planning and implementation process. This information submitted in an excel/table format is preferred for all exercise related activities. Details to be included but not limited to:

- specific activity/task
- the specific individual(s) that will perform the task and the expertise or experience that makes them qualified for the task
- estimated number of hours to complete activity
- activity planning start date
- activity completion date
- estimated number of hours for activity to be completed
- vendor role/ responsibility with each activity
- MHA role/responsibility with each activity
- hospital role/responsibility with each activity

MHA will provide a point person to work closely with the vendor, to develop the goals and objectives for the exercise, review the current progress of the exercise development and related documents, and approve the final documents.

MHA staff will coordinate this contract as well as facilitate a formal review process among eligible Vendors responding to this RFP in coordination with the MHA statewide disaster preparedness advisory committee convened to provide guidance to MHA on implementation of ASPR HPP grant requirements. (referred to hereafter as “Advisory Committee”)

The successful Vendor will contract directly with the Missouri Hospital Association. MHA staff will facilitate communication between the successful Vendor and each hospital participating in the exercises. MHA staff will assist with the coordination of exercise planning meetings and necessary conference calls. MHA staff will serve as the key contact throughout the contract period.

- A. Specific objectives that the successful Vendor will be required to perform.
1. The successful Vendor must be familiar with national exercise requirements. This is to include at a minimum the ASPR Hospital Preparedness Program exercise requirements, National Incident Management System, and the Joint Commission (JC) standards for exercise design, documentation and evaluation. **All exercise activities will comply with national Homeland Security Evaluation Program guidelines.**
 2. The successful Vendor must outline the strategy for developing exercises that test the capabilities of the participating facilities and include a time line for the exercise planning activities and tasks. See Activity/task list requirements page 2.
 3. The successful Vendor must hold at a minimum two face-to-face regional meetings in each of the two targeted areas; one meeting will be a visit to better understand the unique qualities of each participating facility for exercise development purposes; the other is the final evaluator/coordinator training prior to the exercise. Other planning conferences can be held via phone or webinar.
 4. The successful Vendor must commit to submitting monthly progress reports outlining the following:
 - activities (Calls, meetings, communication,)
 - expenses including all receipts for travel and travel-related expenses
 - exercise planning progress to include completed tasks and future action items
 - updated action plan (can be included in planning meeting minutes)
 5. The successful Vendor must provide a final After Action Report and Improvement Plan for each exercise based upon information gathered from post exercise meetings with the evaluators and other interested parties as recommended by the HSEEP model.
- B. Preference will be given to Vendors who have previous experience with total responsibility for exercise development, implementation and evaluation for healthcare

systems in multiple geographical areas around the nation and are able to provide positive reviews and recommendations.

- C Further, preference will be given to Vendors who are familiar with the current Missouri Tier 2 healthcare regional planning approach and status.
- D MHA staff in collaboration with the Advisory committee will select from among the submitted proposals. One or more Vendors may be asked to make formal presentations by webinar to a select group of subcommittee members.

ADDITIONAL INFORMATION

There is no express or implied obligation for MHA to reimburse responding Vendors for any expenses incurred in preparing proposals in response to this request.

Submission of a proposal indicates acceptance by the Vendor of the conditions contained in this request for proposal, unless clearly and specifically noted in the proposal submitted and confirmed by MHA and the Vendor selected.

TIME REQUIREMENTS FOR THE PROJECT

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| A. Request For Proposals Calendar | |
| RFP Issued | July 9, 2010 |
| RFP Due Date | August 6, 2010 |
| B. Vendor Presentation to MHA Staff/Selection | |
| Notification of Invitation to Present | August 15, 2010 |
| Estimated Selection Date | September 1, 2010 |
| Begin Engagement | October 1, 2010 |

REQUEST FOR PROPOSALS

Inquiries concerning the request for proposals may be made to:

Lois Kollmeyer
 Director, Disaster Preparedness Planning Systems
 Missouri Hospital Association
 573/893-3700 (toll free)
 573/893-5479 (fax)
lkollmeyer@mail.mhanet.com

SUBMISSION OF PROPOSALS

The proposals must be received by 5 p.m., CDT, Friday, August 6, 2010, for a Vendor to be considered. Vendors should send the completed proposals via electronic mail, with a request to confirm electronic receipt of proposal, to:

Leslie Porth RN, MPH
Vice President, Health Planning
lporth@mail.mhanet.com

The email should be sent High Priority with the following subject line:

“RFP Submission: Active Shooter Functional Exercise”

Each submitted proposal must be limited to twenty pages in length (12 point font/1.5 line spacing) and include the following information:

A. Information about the Vendor

Each bidder will provide information about their organization, including the name, address, telephone number and e-mail address of the principal contact person for this proposed engagement.

Include the number of years the Vendor has been in the business of providing the type of services desired by MHA, as well as the Vendor’s specific experience in Healthcare Readiness Planning and Facilitation.

Please list all relevant disaster planning projects your firm has performed over the past three years, including outcomes for each. Please include sample work, specifically disaster response plans written for healthcare organizations and regional response systems. Please include three references of communities that have engaged the Vendor for similar services.

B. Staff Expertise in Disaster Response Planning

Each bidder will include a brief statement regarding current qualifications of senior or lead consulting staff and their ability to perform desired consulting services, including the number of qualified support staff who would assist in performing the described tasks.

It is essential that all project personnel are listed by name and credential in the submitted proposal. After the contract is awarded, all additional staff added to the project will require formal approval from the Vice President of Health Planning. Failure to do so will result in termination of the contract.

C. Contract Period

Planning must begin no later than November 1, 2011. The two exercises completed by June 15, 2011 with After Action Reports and Improvement Plans completed and approved by August 15, 2011. Final invoices must be submitted by July 15, 2011.

D. Fees

Each submission will detail a bid for the complete project; included in that bid please delineate a cost estimate for each exercise. This bid will include all related consulting expenses to develop, conduct and evaluate the two exercises.

The bid shall include all related and miscellaneous expenses to perform the described services, including per hour costs for:

- subject matter experts
- coordination
- travel time
- exercise participation time

All payments to the contractor will be based upon reimbursement.

EVALUATION PROCEDURES AND REVIEW OF PROPOSALS

Submitted proposals will be evaluated using the following criteria:

- qualifications of the Vendor and their lead consulting staff
- depth of specific disaster planning experience
- success of previous outcomes
- proposed fee structure to perform the described services
- recommendations
- overall strength of proposal

The MHA staff will review submitted proposals and may contact vendors for additional clarification.

MHA reserves the right to reject any or all proposals submitted.

During the evaluation process, MHA reserves the right, where it may serve their best interests, to request additional information or clarifications from Vendors, or to allow corrections of errors or omissions.

FINAL SELECTION

MHA will select one Vendor based upon the recommendation of the proposal reviewers.

Following notification of the successful Vendor, a contractual agreement will be executed between the MHA and the selected Vendor.

MHA reserves the right to reject any or all proposals that do not meet the needs outlined in this request for proposal.