



City of Richmond

Sole Source Justification

THIS FORM MUST BE COMPLETED AND APPROVED PRIOR TO ANY PURCHASE

Contact the Purchasing Division and discuss your rationale before completing this form. If Purchasing can help you make this a competitive purchase, then this form will not be required.

Attach this completed/approved form to requisitions when competitive quotes/bids/proposals are not solicited. (Required for requisitions > \$3,000)

Requested Sole Source Supplier:

Company Name: The Permanente Medical Group **Contact Name:** Ann Conover

Address: 1800 Harrison St., 9th floor

City: Oakland **State:** CA **Zip Code:** 94612

Phone Number (707) 303-0670 **E-Mail** ann.conover@kp.org

Duration of Contract: 1/1/22 - 12/31/2024

Estimated Cost: \$ 170,000 **Funding Source (Account String)** 11305022 400201 25H04

Is the product/service IT related? Yes ☐ No ☒ **If Yes, please attach the approved IT Authorization Form**

For Product: Is the recommended company the manufacturer of the product? Yes NA No ☐

For Product: Does the manufacturer sell the item(s) through distributors? Yes NA No ☐

Description of Product or Service:

Describe the full scope of work or service contemplated including installation if required; items should include brand, model and part number if applicable; (if additional space is needed, include them in a separate page)

Kaiser provides pre-employment and annual medical exam/surveillance services for Richmond Fire personnel to include titer and vaccination services, hearing exams, respirator clearance forms and medical exams in compliance with NFPA standards.

Most of the cost is covered through the Hazardous Materials Agreement with Contra Costa County (11305022 25H04), a small amount is covered through the Measure H Agreement with CCC (10706022), and a small amount would be covered by the general fund (preplacement services, 01204022).

Sole Source Rationale: PLEASE ANSWER ALL THE FOLLOWING QUESTIONS: Explain why the recommended company is the only company that can meet the requirement. Address the following: Are there any other companies who can do this job? What condition (e.g. technological superiority, or performance risks, etc.) exists so that the recommended company has a significant advantage over any other company who can do this job? It is important to sufficiently address the key reason for awarding an order/contract without soliciting competitive bids. The rationale must be clear and convincing, avoiding generalities and unsupported conclusions.

Kaiser is centrally located to 5 of our 7 fire stations, thus keeping out of service time to a minimum. In addition, many members have Kaiser coverage as their medical insurance and they are an approved workers compensation treater. As a result the care they receive is more seamlessly integrated between their personal health records, on-site physicians, and occupational clearance forms and visits. Also, because the dep. has utilized Kaiser since 2008, they have significant baseline medical testing records on our employees over time that are needed to maintain a more comprehensive evaluation program and expedite post-exposure prophylaxis in the event of occupational exposure. In the event of a medical condition discovered during the examination, immediate access to medical records can be crucial in allowing the medical personnel to make quicker decisions. Lastly, they are the only hospital with an Emergency Room in Richmond necessary for immediate care.

(if additional space is needed, include them in a separate page)

Complete the following checklist

A specific contractor is the only source of the required item because (check all that apply):

- ☒ The required items are **proprietary to the Contractor**, and contractor solely transacts (sells) direct to the customer. (There are no dealers or distributors for contractor).
- ☐ The required items are **proprietary to the Contractor**, and **contractor does not sell direct to the customer**. Contractor solely distributes the item or service through only one dealer or distributor in the United States. (There are no dealers or distributors for contractor).

Note: If item or service is available from more than one source, the item or service may be treated as proprietary, but must be competitively solicited from multiple (two or more) sources.

- ☒ A specific item is needed:
 - ☒ To be compatible or interchangeable with existing hardware
 - ☐ As spare or replacement hardware ☐ For the repair or modification of existing hardware
- ☐ Federal or state grant names vendor as condition of funding. (Attach copy of grant that names vendor)
- ☒ There is a **substantial risk** in contracting with any other contractor, (e.g., only one contractor has been successful to date in implementing a difficult manufacturing process or the **services sought**). *In a brief explanation, provide supporting evidence of why other contractors are considered to be unable to overcome the substantial risk.*

The department used Vista Oaks of Martinez in the past and found it was too logistically difficult to send on-duty personnel so far out of City limits and can result in overtime. The department previously used Concentra but discovered several issues with scheduling and the quality of exams, and there is no integration to previous personal and occupational records. Neither facility has an emergency department in case emergencies arise. Due to the fact that Kaiser has over 10 years of occupational records on our employees, plus additional records through personal insurance and workers compensation injuries, contracting with any other vendor would be a disadvantage to our medical surveillance program.

- ☐ **Continuation of prior Work** – Additional item, service or work required, but not known to have been needed when the original order was placed with vendor, and it is not feasible or practicable to contract separately for the additional need. *Provide brief explanation and supporting evidence.*

(if additional space is needed, include them in a separate page)

I acknowledge the City's requirements for soliciting competitive quotes/bids for purchases over \$3,000.00 and the criteria for justification for Sole Source purchases. I have gathered the required information, have made a concerted effort to review comparable/equal equipment/services (e.g., market research), and further affirm that there is no conflict of interest involved in the selection made.

Department: Fire

Requester Name and Title: Aaron Osorio, Battalion Chief

Note: Requester must be able to defend this justification.

Date: 11/23/2021

Phone: 510-730-9891

Department Director (Print) Angel Montoya

(Sign) Angel Montoya

Date: _____

Submit completed form to the Purchasing Division (Prior to submission to City Manager)

Finance Director:

APPROVED: 

DATE: 12/01/21

NOT APPROVED: _____

COMMENTS:

City Manager
(Under \$10,000.00)

City Clerk Attesting to Council Approval
(Over \$10,000.00) (Copy of Minutes may be substituted)

Note: Richmond Municipal Code Section 2.52.326 Sole Source Procurement requires final approval by the City Manager and/or City Council. Sole Source must be approved by Finance Director, **PRIOR** to Council Approval.

PROCEDURE

Sole Source purchase/service are exceptions to the normal bidding process and require a detailed justification. In processing Sole Source requests for supplies, services and/or equipment, the Purchasing Division adheres to and is governed by the principles set forth in City of Richmond Municipal Code Section 2.52.326 Sole Source Procurement.

If you are requesting a particular vendor, brand or product, you must make this fact clear on your Sole Source form. Your request will then be restrictive and non-competitive, and will fall into a sole source category. If the sole source justification is approved, the requisition can be expedited without the normal bidding requirements.

Such a request should not be made unless you are confident that your request is reasonable and appropriately justified to meet the City's requirements and withstand any possible audit. The City's requirements and the format for submitting such requests are contained herein. Sole Source form must be signed by authorized department representative(s). The certification will remain on file for audit purposes.

The following factors **DO NOT** apply to sole source requests and should not be included in your sole source justification. They will not be considered and only tend to confuse the evaluation process.

1. Personal preference for product or vendor.
2. Cost, vendor performance, and local service (these are generally considered award factors in competitive bidding).
3. Features which exceed the minimum department requirements.