

Request for Qualifications (RFQ) for Firefighter, Public Works Department and Pre-Employment Physicals

Issue Date: As listed on crcog.bonfirehub.com

Deadline for Questions: As listed on crcog.bonfirehub.com

Response Date/Time: As listed on crcog.bonfirehub.com

Response Location: crcog.bonfirehub.com

TABLE OF CONTENTS

1		Introduction and Intent2
2]	Background and Overview3
3	,	Scope of Services 3
4]	PRICING8
5]	Minimum Qualifications100
6]	Preparing a Response10
	A.	Questionnaire11
	В.	Project Understanding / Approach and Relevant Experience11
	C.	Fee Proposal
	D.	Insurance12
	E.	Additional Required Data12
7	(Questions12
8]	RFQ General Terms and Conditions13
	A.	Acceptance or Rejection by the Capitol Region Council of Governments13
	В.	Ownership of Proposals13
	C.	Changes to Proposals13
	D.	Amending or Canceling Request13
	E.	Waiver of Informalities13
	F.	Collusion13
	G.	Assigning/ Transferring of Agreement13
	H.	. Termination14
	I.	Severability14
	J.	Affirmative Action14
	K.	Insurance Requirements14
	L.	Hold Harmless and Indemnification15

1 INTRODUCTION AND INTENT

CRCOG, on behalf of its municipalities, is seeking responses from qualified and experienced physicians or health care organizations to perform firefighter (both volunteer and paid), public works employees, and pre-employment physicals in accordance with National Fire Protection Associate (NFPA) Standards 1582 and 1500, Occupational Safety and Health Administration (OSHA) requirements 1910.120, 1910.134 and 1910.156, general firefighter health considerations, and any local, state or federal regulations regarding the same.

Successful respondents will be placed on a list of qualified medical providers to conduct firefighter physicals, and pre-employment and employee physicals and additional testing/medical services as needed. The list will be available to CRCOG and Capitol Region Purchasing Council (CRPC) members for their use in retaining the services of successful Respondents of their choice.

Any contract entered pursuant to this solicitation will be between the medical provider and member. CRCOG will not be a party to any contract, nor will CRCOG be responsible in any way for contract performance including payment terms. Nothing herein, or in any contract resulting from this solicitation should be construed as a guarantee by CRCOG of contract performance.

2 BACKGROUND AND OVERVIEW

The Capitol Region Council of Governments (CRCOG) is a voluntary Council of Governments formed to initiate and implement regional programs of benefit to the towns and the region. It is guided by the chief elected officials of our 38 Metro Hartford municipalities. The mayors, first selectmen, and town council chairmen who make up our governing Policy Board recognize that the future of our individual members is tied to the future of our region. Our members have collaborated for more than 50 years on a wide range of projects to benefit our towns individually and the region as a whole. CRCOG serves the Capitol Region and all our municipalities by:

- Helping members improve governmental efficiency and save tax dollars through shared services and other direct service initiatives:
- Promoting efficient transportation systems, responsible land use and preservation of land and natural resources and effective economic development;
- Strengthening the Capitol Municipality of Hartford as the core of a strong region, and as our economic, social and cultural center;
- Advocating for the region and its towns with the State and Federal governments;
- Strengthening our regional community by helping coordinate regional agencies and programs; and
- Assisting local governments and citizens in articulating, advocating, and implementing the vision, needs and values of their regional community;
- Offering centralized purchasing through the CRPC, a consortium made up of more than 124 member municipalities, non-profit organizations, and other government agencies across Connecticut.

3 SCOPE OF SERVICES

General Requirements

Successful Contractor(s) shall review and understand the essential functions of all positions with the MEMBER municipality or organization. This is critical for both pre-employment examinations, biennial examinations for Fire personnel disability examinations, and independent medical examinations.

The contracted medical services provider (physicians/physician assistants) shall have the necessary credentials to perform these types of evaluations. At a minimum, a medical doctor or physician, board certified in Occupational Health Medicine and licensed to practice medicine without restrictions in the State of Connecticut shall perform or oversee

all services. All support staff shall be knowledgeable of occupational health and safety practices. All medical staff shall have a clear understanding of the appropriate OSHA standards that apply to fire service personnel and NFPA Standard 1582-2022 edition medical recommendations as well as public works employees, and general employees.

Physicians/Physician Assistants shall hold unrestricted licenses to practice medicine in the State of Connecticut and possess current Drug Enforcement Administration (DEA) registration numbers.

Physicians and Physician Assistants shall be practicing adult primary care physicians/physician assistants with ten (10) years' experience performing medical evaluations of applicants/employees for essential job functions, fit for duty evaluations, and for occupational disability determination. Services for the firefighters and public works employees will be provided annually, and services for pre-employment/new hires will be provided as needed.

LOCATION AND HOURS OF MEDICAL SERVICE /TESTING: Services for the volunteer firefighter departments will be performed annually at the provider's facility or at location of MEMBERS workplace (to be determined once upon contract negotiation). The Contractor shall be available during normal business hours Monday thru Friday 8am – 4pm for all medical services, and one evening per week for public safety and volunteer fire department personnel. Any optional/necessary testing that must be performed offsite shall be facilitated by the medical provider and shall be conducted at a medical facility that is within twenty-five (25) mile radius from the participating member headquarters.

GENERAL PRE-EMPLOYMENT MEDICAL EXAMINATIONS (non-public safety):

Successful contractors shall review medical history questionnaires, perform medical examinations, and complete medical reports. Drug screens shall be included in all pre-employment physicals (either DOT or non-DOT). The Contractor shall be certified as a Medical Review Officer.

When the essential functions of the position require physical activity, a limited functional capacity examination is included in the examination.

For Board of Education positions, a Purified Protein Derivative (PPD) is included.

For health care workers, a PPD is included. If applicant tests positive for tuberculosis or has been immunized with BCG, a chest x ray and evaluation will be performed.

PRE-EMPLOYMENT AND ANNUAL/BIENNIAL PHYSICALS FOR PUBLIC SAFETY (Fire Personnel)

Examinations will include:

- Review of individual health questionnaires on all applications
- Completion of medical examination records, summary of findings and determination if applicant is physically capable of performing the essential functions of the position
- Stress tests
- PPD tests, when needed
- OSHA respiratory exam, when needed
- Drug screen (Fire, pre-employment, public works/DOT)
- PSA for individuals over 40 years of age

FITNESS FOR DUTY/DISABILITY/INDEMEPDENT MEDICAL EVALUATIONS

Successful contractor(s) shall conduct medical evaluations of employees and/or fire personnel for a Fitness for Duty and/or functional analysis and assessment, or an evaluation due to application for disability retirement. The MEMBER will provide physician with medical documentation regarding the injury or condition as well as a list of essential job functions and additional information that may be pertinent.

Examinations will include, but will not be limited to, the following:

- Access to medical history and medical records as well as access to employee's medical providers when necessary
- Intake medical history and review of medical records, and conduct interviews with relevant individuals
- Performance of medical examination on referral, including any of the following tests deemed necessary to make a determination: vision and hearing, cardiovascular system at rest and after exercise, musculoskeletal, laboratory, etc.
- Complete functional assessment report. This report may include any restrictions
 and limitations on the employee's physical ability to perform essential functions of
 the job, duration of those restrictions, and reasons supporting the findings. The
 report may also recommend the employee resume the full range of duties and
 responsibilities.

CONSULTATIONS: Successful contractor(s) shall provide consultation services upon request.

Results Reporting

All test results and interpretations shall be treated as confidential medical records. The distribution of results will be at the direction of municipal administration and/or Fire Department management. Medical clearance summary reports shall be provided to the Fire

Chief within thirty (30) days of the test date. The vendor shall be able to provide the Fire Department or member municipality with executive summaries at the direction of municipal management (i.e., fire chief, town administrator/manager, chief elected official). Upon request, the vendor shall have the capacity to integrate historical data into its medical database.

All record keeping shall be in compliance with the Health Insurance Portability and Accountability Act (HIPAA). The vendor shall provide each participating member with a written notification describing all test results and offering remedial recommendations when indicated.

TIMEFRAME FOR PROVISION OF SERVICES AND TEST RESULTS

The contractor(s) shall provide all medical services within five (5) business days of request by MEMBER.

The contractor(s) shall provide all test results to MEMBER within five (5) business days of testing.

Essential Firefighter Job Tasks (condensed from NFPA Standard 1582)

- 1. Firefighting tasks including, but not limited to, hose handling, lifting, crawling, carrying heavy objects, all performed under stressful conditions while in full personal protective equipment (PPE).
- 2. Wearing a self-contained breathing apparatus (SCBA) in all potential circumstances.
- 3. Exposure to all forms of potentially toxic environments despite the use of PPE and SCBA.
- 4. Climbing up to and beyond six (6) flights of stairs in full PPE. Wearing encapsulating/insulated gear causing raised internal temperatures and dehydration.
- 5. Performing search and rescue of victims, possibly weighing more than 200 pounds.
- 6. Advancing water filled hose lines up to $2\frac{1}{2}$ diameter, upstairs and around corners.
- 7. Climbing ladders, working from heights, working in poor visibility, and operating around electrical and other hazards.
- 8. Operating in unpredictable emergencies for prolonged periods in extreme conditions without warm- up, rest, nutrition/hydrations, or access to medications.
- 9. Operating fire apparatus in "emergency mode" (vehicles and equipment).
- 10. Performing complex problem solving in extreme conditions.
- 11. Communicating under very poor conditions in full PPE.
- 12. Functioning as part of a firefighting team where there are great risks of injury and/or death to emergency responders and civilians.

Medical Evaluation

The medical evaluation shall minimally include the following:

1. A comprehensive medical history

- 2. A baseline occupational history, including significant past exposures and training experience with PPE.
- 3. Height and weight
- 4. Vital signs: pulse, respiration, blood pressure, and, if indicated, temperature.
- 5. Dermatological system
- 6. Ears, eyes, nose, mouth, and throat
- 7. Cardiovascular system
- 8. Respiratory system
- 9. Gastrointestinal system
- 10. Endocrine and metabolic systems
- 11. Musculoskeletal system
- 12. Neurological system
- 13. Mental status evaluation
 - a. Based on the severity, diagnosis and impairment of any identified behavior or condition, the initial examiner is encouraged to consider the applicant to a doctoral level mental health professional for further evaluation. In general, the current or recent use of psychotropic medications shall be reviewed by a board-certified psychiatrist.
- 14. Audiometry
 - a. Audiometry shall be performed in an ANSI Standard SANSI Standard 3.1 1997 approved "soundproof" booth with equipment calibrated to ANSI Standard S3.6-1973. If a booth is unavailable, the test room sound pressure levels should not exceed those specified in the Federal OSHA noise regulations (29 CFR 1910.25)
- 15. Visual acuity and peripheral vision testing.
- 16. Pulmonary function testing
 - A baseline test should be administered by an experienced individual. Only a spirogram that is technically acceptable and demonstrates the best efforts by an individual should be used to calculate the Forced Vital Capacity (FVC) and Forced Expiratory Volume in one second (FEV 1.0)
- 17. Review of Hepatitis B immunization status including Hepatitis B surface antibody titer if immunized, offer of Hepatitis B vaccine if not fully immunized or HbsAb titer less than 10 and documentation of declination if vaccination is refused by the examinee
- 18. A Purified Protein Derivative (PPD) test for tuberculosis, based on individual departmental infection control plans.
- 19. Review of tetanus immunization status
- 20. Other diagnostic testing where indicated.

4 PRICING

CAPITOL REGION COUNCIL OF GOVERNMENTS REQUEST FOR QUALIFICATIONS PHYSICALS/MEDICAL SERVICES – FIREFIGHTERS, PRE-EMPLOYMENT, DOT/PUBLIC WORKS

RFQ #2023-03-29

PRICING

The Respondent shall provide pricing below for the various services to be provided. General pre-employment medical examinations – non-public safety, to include drug screens and a limited functional capacity examination when a position includes physical activity.	
PPD	\$
Chest X-Ray and evaluation	\$
Pre-employment and annual/biennial physicals for Public Safety Fire Candidates	\$
Stress tests	
Echocardiogram	\$
Respirator Form review, OSHA respiratory exam	\$
PSA	\$
OSHA compliance examinations for Firefighters	\$
Blood typing	\$
Fitness For Duty/Disability/Independent Medical Evaluations to include description	
as given in RFQ	\$
Consultations	\$
Non-DOT random drug and alcohol testing program administration	\$
Random NIDA and breath alcohol testing	\$
DOT new physical	\$
DOT renew physical	\$
Preplacement drug and alcohol screening only – for those in safety sensitive positions, i.e., boat crew and lifeguards	\$
Healthcare worker pre-employment physical with functional capacity	\$
Healthcare worker pre-employment physical with functional capacity, chest x-ray and evaluation	\$
RESPONDENT'S COMPANY NAME: AUTHORIZED SIGNATURE:	

RFQ: Firefighter, DOT/Public Works, and Pre-Employment Physicals

RESPONDENT'S COMPANY NAME:	
If "Yes," what is the charge for a No-Show?	\$
Is there a charge for a No-Show?	YN
Cancellation Policy:	
#3	\$
#2	\$
#1	\$
Additional pricing, if any, to be inserted by the Respondent:	
Pertussis	\$
Tdap	\$
PPD	\$
Flu	\$
Нер В	\$
Hep A	\$
Charge for Vaccines:	
Pre-offer candidate limited functional capacity evaluation, generally full or half day – per description given in RFQ	\$
Breath alcohol test	\$
DOT Drug Screen (collection only)	\$
Non-NIDA urine drug screen with MRO	\$
NIDA urine drug screen with MRO	\$

5 MINIMUM QUALIFICATIONS

The following minimum qualifications must be present for a medical services provider to be considered for award of a contract under this RFQ:

- The contracted medical services provider shall have the necessary credentials to perform these types of evaluations. At a minimum, a medical doctor, board certified in Occupational Health Medicine and licensed to practice medicine without restrictions in the State of Connecticut shall perform or oversee all services. All support staff shall be knowledgeable of occupational health and safety practices. All medical staff shall have a clear understanding of the appropriate OSHA standards that apply to fire service personnel and NFPA Standard 1582-2022 edition medical recommendations as well as DOT/public works employees, and general employees.
- All required licensures, registrations, and certifications to do business in the State of Connecticut.
- Experience working with public entities to provide firefighter, and employee physicals and health care services.

6 PREPARING A RESPONSE

By submitting a response, respondents represent that they have thoroughly examined and become familiar with the scope of services outlined in this RFQ and can perform the work to achieve the objectives. * Responses may be for individual service(s), or all services requested in this RFQ. *

Responses submitted in response to the RFQ will be publicly available. All documents that the proposer believes to be confidential trade secrets and/or commercial or financial information and except under the above statutes should be clearly marked as such to preserve the Freedom of Information Act exemption for confidential trade secrets pursuant to Connecticut General Statutes (5)(A) and (5)(B).

CRCOG may provide reasonable accommodations, including the provision of informational material in an alternative format, for qualified prospective vendors with a disability. Prospective vendors requiring accommodation shall submit requests in writing, with supporting documentation justifying the accommodation, to CRCOG at the following address:

CRCOG

Re: Accommodation for RFQ #2023-03-29 241 Main Street, 4th Floor Hartford, CT 06106 Requests for accommodation must be received by the Deadline for Questions as listed on www.crcog.bonfirehub.com . CRCOG reserves the right to grant or reject any request for accommodation.

Respondents are asked to submit all responses to the location outlined on the coversheet. Respondents must submit electronic versions of all documents in their entirety at www.crcog.bonfirehub.com

Receipt of sealed responses for furnishing the services described herein is due **no** later than the due date and time listed on www.crcog.bonfirehub.com
. The clock which will be used for the submission deadline will be as listed on the Bonfirehub portal.

A. Questionnaire.

All vendors are required to fill out the questionnaire for this RFQ. This questionnaire has 3 tabs that need to be completed. They are as follows:

- Company Information.
- Current Users and References. Submit five current clients (Note: Government references are strongly preferred). If you have additional references you would like to submit, please submit it as a separate document under Relevant Experience.
- Project Team. A list of three personnel who will be assigned to the contract. Please describe the roles and responsibilities of each team member.

B. Project Understanding / Approach and Relevant Experience

This is a document the vendor should submit (pdf format, please). Describe in detail your understanding of the scope of services required and your vendor's ability to provide the full spectrum of needs outlined in the Scope of Service as well as your vendor's relevant experience in fulfilling those needs. Describe in detail your approach to providing the desired services and highlight any relevant special services your vendor provides that could be beneficial, particularly those that may not be offered by other vendors. As part of your response, please specifically address:

- Describe experience conducting medical services such as physicals to firefighters, and DOT/public works employees as well as preemployment physicals and additional services. i.e., drug testing, etc.
- What makes your vendor uniquely qualified to provide the services described in this RFQ.

Please note, alternate proposals will be accepted for this section.

C. Fee Proposal.

This should be completed in its entirety **SECTION 4. PRICING** of this document. Additional pricing proposals may be submitted as Excel

spreadsheet (.xls or .xlsx). A template is not provided.

CRCOG reserves the right to negotiate fees and project scope with the successful respondent if it is deemed to be in the agency's best interest. All proposals submitted shall be considered valid for at least one hundred and twenty (120) days from the opening date.

Please note, alternate responses will be accepted for this section.

D. Insurance.

All respondents are required to submit, with their responses, a copy of the cover sheet from their insurance policy(ies) (or an equivalent piece of documentation) which demonstrates the vendor's current coverages and limits for General Liability, Automobile Liability, Professional Liability and Worker's Compensation Insurance as appropriate for the project work required herein.

E. Additional Required Data.

The vendor should also submit the following:

- A statement accepting all terms, conditions and requirements contained in the RFQ. If you do not accept all terms, conditions, and requirements, please submit a separate document that details an explanation.
- Statement stating you are legally licensed/registered to do business in Connecticut.
- Non-Collusion Certification: The company should certify that this RFQ is being submitted without any collusion, communication, or agreement as to any matter related to the RFQ with any other respondent or competitor.

Responses must be submitted no later than the time and date outlined on the coversheet. Responses should be submitted as outlined on the coversheet.

Any responses received after this date and time will not be considered.

7 QUESTIONS

Questions shall be submitted only via CRCOG's bonfire portal at crcog.bonfirehub.com by the time and date listed at www.crcog.bonfirehub.com. No oral interpretations shall be provided. Responses shall be posted as addenda at crcog.bonfirehub.com. It is the respondent's responsibility to check the website for addenda prior to submission of any proposal.

Prospective vendors shall not attempt to communicate with, in writing, electronically or orally, any CRCOG official, employee or member town other than the method listed in this section, above. Prospective vendors shall not contact any other CRCOG officials or member towns in an attempt to gather information regarding this RFQ, or in an attempt to influence CRCOG's consideration of its proposal. All inappropriate communications with CRCOG

employees, officials or member towns will be forwarded to the proposal evaluation team. Inappropriate communications by a prospective contractor may, at the discretion of the evaluation team, constitute grounds for disqualification of that prospective vendor's proposal. Alternatively, the evaluation team may, at its discretion, consider such inappropriate communications when evaluating and scoring proposals.

8 RFQ GENERAL TERMS AND CONDITIONS

A. Acceptance or Rejection by the Capitol Region Council of Governments

The CRCOG reserves the right to accept and or reject any or all responses submitted for consideration or to negotiate separately in any manner necessary to serve the best interests of the CRCOG and its members. Respondents whose proposals are not accepted shall be notified in writing.

B. Ownership of Proposals

All proposals submitted in response to this RFQ are to be the sole property of CRCOG and shall be subject to the provisions of Section 1-210 of the Connecticut General Statutes (re: Freedom of Information).

C. Changes to Proposals

No additions or changes to the original response will be allowed after submittal.

D. Amending or Canceling Request

CRCOG reserves the right to amend or cancel this RFQ, prior to the due date and time, if it is deemed to be in its best interest to do so.

E. Waiver of Informalities

The Capitol Region Council of Governments reserves the right to accept or reject any and all responses to this Request for Qualifications, or any part thereof, and to waive any informalities and/or technicalities that are deemed to be in its best interest.

F. Collusion

By responding, the vendor implicitly states: that his/her proposal has not been made in connection with any other competing vendor submitting a separate response to this RFQ; is in all respects fair; and has been submitted without collusion or fraud. It is further implied that the vendor did not participate in the RFQ development process, had no knowledge of the specific contents of the RFQ before its issuance, and that no employee of CRCOG either directly or indirectly assisted in the vendor's proposal preparation.

G. Assigning/Transferring of Agreement

Any successful vendor is prohibited from assigning, transferring, conveying, subletting, or otherwise disposing of the resulting agreement or its rights, title, or interest therein or its power to execute such an agreement to any other person,

company or corporation without prior consent and approval in writing from the Participating Member.

H. Termination

Participating Members may terminate any contract(s) or any part of any contracts resulting from this process at any time for: cause, default, or negligence on the part of the vendor; or if the vendor fails, in the opinion of the Agency, to meet the general terms and conditions of any resulting contract or to provide a level of service that is deemed to be in the best interest of the Agency.

I. Severability

If any terms or provisions of this Request for Qualifications shall be found to be illegal or unenforceable, then such term or provision shall be deemed stricken and the remaining portions of this document shall remain in full force and effect.

J. Affirmative Action

The Towns participating in this RFQ are equal opportunity employers and require an affirmative action policy from all vendors and vendors as a condition of doing business with the towns, as per Federal Order 11246. By signing the proposal sheet for this bid, all vendors and contractors agree to this condition of doing business with the towns and should the towns choose to audit their compliance, the vendor agrees to cooperate fully.

K. Insurance Requirements

The Respondent shall, at its own expense and cost, obtain and keep in force during the entire transition and contract period the following insurance coverages covering the Respondent and all its agents, employees and sub-vendors and other providers of services, and shall name the Participating Members and its employees and agents as an Additional Insured on a primary and non-contributory basis to the Respondent's Commercial General Liability and Automobile Liability policies. These requirements shall be clearly stated in the remarks section on the Respondent's Certificate of Insurance. In addition:

- 1. All policy forms shall be on the occurrence form.
- 2. Acceptable evidence of coverage will be on the ACORD form or a form with the same format.
- 3. All renewal certificates shall be furnished at least 10 days prior to policy expiration.
- 4. Each certificate shall contain a 30-day notice of cancellation.
- 5. Insurance shall be issued by an insurance company licensed to conduct business in the State of Connecticut which has at least an "A-"policy holders rating according to Best Publications latest edition Key Rating Guide.

Required insurance coverage:

1. **Professional Liability Insurance** with limits up to \$2,000,000 aggregate limit issued on claims made basis for the term of the contract

- and continuing for two years following the completion of the contract at the Vendor's cost.
- 2. Comprehensive General Liability Insurance: Vendor shall, at its own cost and expense, obtain and keep in force during the Term of the Agreement general liability insurance with minimum limits of 1 million per occurrence/ 2 million aggregate and shall name the CRCOG and their respective officers, officials, employees, agents, boards, and commissions as Additional Insureds on a primary and non-contributory basis. There shall be no special limitations on the scope of protection afforded to the CRCOG. Vendor shall assume any and all deductibles in the described insurance policies and Vendor's insurer shall have no right of recovery or subrogation against CRCOG. These requirements shall be clearly stated in the remarks section on Vendor's Certificate of Insurance. Insurance shall be written with insurance carriers approved in the State of Connecticut and with a minimum Best's Rating of A- and all deductibles, if any, are the sole responsibility of Vendor.
- **3. Automobile Liability Insurance** including non-owned and hired vehicles in the same limits as indicated above.
- **4. Workers' Compensation Insurance** at the Connecticut statutory limit including Employers' Liability with limits of \$100,000 each accident, \$500,000 for each disease/policy limit, and \$100,000 for disease for each employee.
- **5. Excess Liability Umbrella Form** over sections B, C, and D-Employers' Liability with limits up to \$4,000,000.

L. Hold Harmless and Indemnification

In addition to its obligation to provide insurance as specified above, the Vendor, its agents and assignees shall indemnify and hold harmless the Capitol Region Council of Governments and its member municipalities, including but not limited to, its elected officials, and its officers, from any and all claims made against the CRCOG, including but not limited to, damages, awards, costs and reasonable attorney's fees, to the extent any such claim directly and proximately results from the negligent acts, errors, or omissions in performance of services by the Vendor during the Vendor's performance of this Agreement or any other Agreements of the Vendor entered into by reason thereof. CRCOG agrees to give the Vendor prompt notice of any such claim and absent a conflict of interest, an opportunity to control the defense thereof.