

TECHNICAL QUESTION AND RESPONSE TRACKING SHEET


SOLICITATION #

36E77620R0004

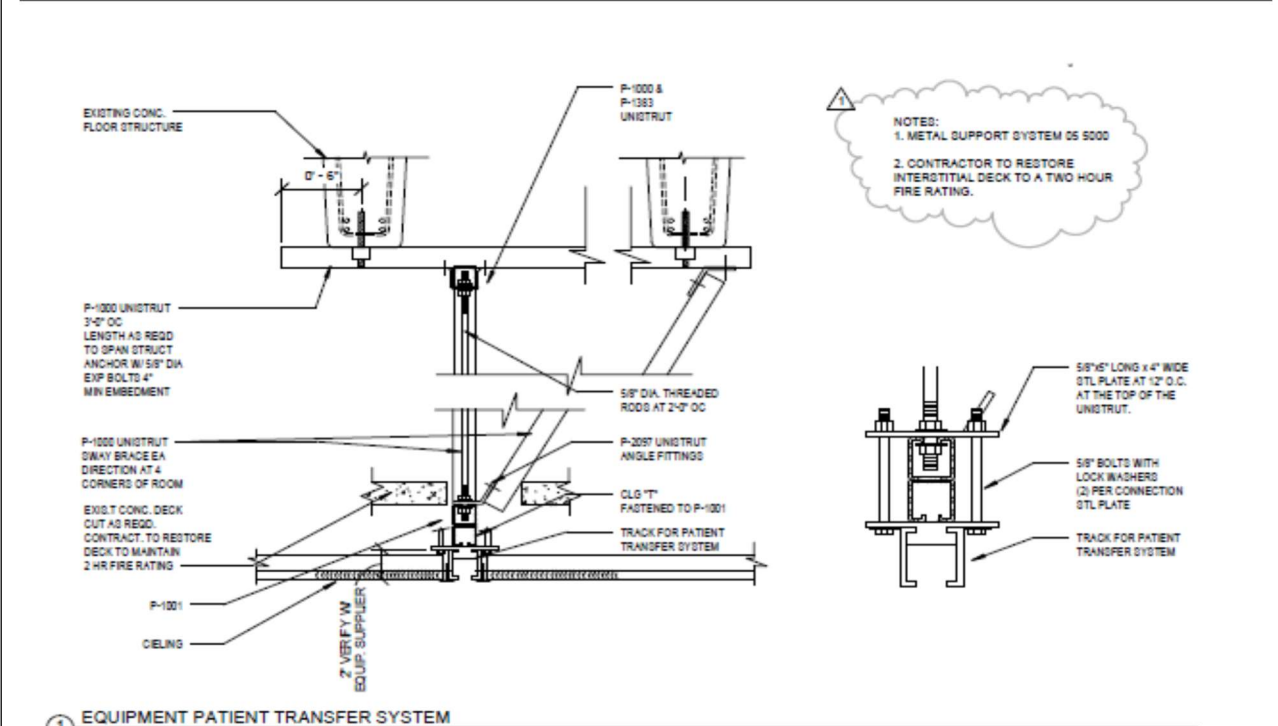
PROJECT TITLE

Minneapolis Replace Patient Lift System

QUESTION RECEIVE DATE	QUESTION ANSWERED DATE	CONTRACTOR QUESTIONS	VA RESPONSES TO QUESTIONS
1.16.20	1.16.20	Are the cost of motors and Ceiling Lifts priced together or are they individually priced?	They cost of the motors and Lifts should be individually priced, they are not priced as a whole.
1.31.20	2.6.20	Pursuant to Solicitation – 2.7 – B. – 2. – i., it states “Provide a minimum of one (1) and a maximum of three (3) projects completed within the last five (5) years of the date of issuance of this RFP, in which the Offeror’s proposed design-build team has worked together on previous design-build contracts similar in size, complexity and scope to this project.”	<p>Based of the technical questions, the VA has now revised technical factor 1 for the project, the updated requirement is as followed:</p> <p>Factor 1, Experience: Provide a minimum of one (1) and a maximum of three (3) projects completed within the last five years (5) years of the date of issuance of this RFP, in which the Offeror’s proposed design-build team has worked together on previous design-build contracts similar in size, complexity and scope to this project. Projects must demonstrate an offeror’s design build experience as a prime construction contractor directly responsible to the owner and managing multiple subcontractors. If the contractor does not possess D-B experience, provide a minimum of (1) and a maximum of two (2) projects completed by the A-E firm similar in size, complexity, and scope to this project in addition to the one (1) to three (3) projects submitted for the prime contractor. For purposes of this evaluation, a relevant project is further defined as “design-build, design and/or construction completed in a clinical, hospital or other medical related use space similar in size and scope to this project.” Project(s) shall have a minimum value of \$200,000 and be 100% completed for D-B or D-B-B. Projects shall have a minimum value of \$50,000 and be 100% completed for designs completed by the A-E firm in support of D-B or D-B-B.</p> <p>A project is defined as a design build project performed under a single task order or contract. For multiple award and indefinite delivery/indefinite quantity type contracts, the contract as a whole shall not be submitted as a project; rather Offerors shall submit the work performed under a task order as a project. If the Offeror is a Joint Venture (JV), relevant project experience should be submitted for projects completed by the Joint Venture entity. If the Joint Venture does not have shared experience, projects shall be submitted for each Joint Venture partner. Offerors who fail to submit experience for all Joint Venture partners may be rated lower.</p> <p>The Offeror’s submission should include at a minimum:</p> <ul style="list-style-type: none"> • Provide the Project Title and Description, Project Location (Physical Address); Contract Type (Example: Design-Build, Design Bid Build). • Provide the project owner name and telephone number of the owner’s contact person. • Provide a brief description of the scope of work. • Provide project prime contractor and major subcontractors.

			<ul style="list-style-type: none"> • Provide project statistics including start and completion dates (original vs actual) and project cost (original vs actual). If original vs actual completion dates and project cost differ, please explanation as to why they differ.
PHASE II			
3.16.20	3.16.20	Please Confirm if lifts in SVC area will still extend into the bathrooms.	<p>SCI/D Bld 76 - Removal of the patient lifts going into the bathrooms. The design intent for the Patient Lifts is to remain in the room itself and eliminating the track in the bathrooms. The 24 total bathrooms affected are as follows: (SC-104, SC-105, SC-109, SC-113, SC-114, SC-116, SC-117, SC-119, SC-120, SC-121, SC-122, SC-123, SC-124, SC-105, SC-165, SC-166, SC-167, SC-170, SC-173, SC-174, SC-176, SC-178, SC-180, and SC-181). Refer to the attached - 2017 03 01 Design guide ceiling track modification, which eliminates the ceiling lift and track from patient bedrooms to patient bathrooms.</p> <p style="text-align: center;"> 2017_03_01_Design Guide Ceiling Track</p>
3.16.20	3.23.20	Confirm in SVC where existing lifts are being replaced that the location of the lift rails will not change from existing locations.	SCI/D Bld 76 – The design intent is to use the existing supports above the ceiling in the bedrooms only (see above response- removal of track in the bathrooms & the 2 to 3 feet transition space from bedroom rails to bathroom). Minimal changes (if any) to existing layout is the design direction for this project.
3.20.20	3.23.20	Will the VAMC require all Patient Bed lift charging stations to be on EM power and Dedicated circuits?	Correct – Medicare lifts to have Emergency Power for the lift charging stations.
3.20.20	3.23.20	Please confirm extent of ceiling renovation in both patient rooms and toilet rooms. Replace ACT to match existing only at affected areas, or patch gypsum board ceilings to match existing only at affected areas, or complete ceiling replacement in these rooms?	Contractor shall take precautions to protect ACT during construction. Replace ACT to match existing only at affected areas. Emergency Dept-To replace with Armstrong #755B Fissured, 24”x24” tile. SCI/D-To replace with Armstrong #755 Fissured, 24”x48” tile. Patch gypsum board ceiling to match existing areas. Complete ceiling replacement is NOT the intended design direction.
3.20.20	3.23.20	Are existing structural drawings available for SCI to include above ceiling patient lift supports?	As Built plans - Available structural plans are attached – S1.21 & S1.22 show lifts layouts. The attached As-Built plans are for planning and will require field varification. File is 5 MB in size.
3.20.20	3.23.20	Please confirm desired changes to patient toilet room (litter) door and wall above where patient lifts to the toilet room are removed?	See question 1 of 3.16.20 question above for more information. SCI/D Bld 76 - Removal of the patient lifts (24 bathrooms total) going into the bathrooms. The design intent for the Patient Lifts is to remain in the bedroom itself and eliminating the track in the bathrooms. Doors and wall above to the toilet rooms are to remain as is, any replacement/repair/modification to this NOT the design intent.

3.20.20	3.23.20	Please confirm all double bed patient rooms are to remain so and will be not converted to a single room.	Double rooms to remain double rooms with 2 lifts in each double room or 1 lift per bed. Double rooms are NOT being converted.
3.20.20	3.23.20	Please confirm patient room numbered SC-181 is to the left to SC- 150.	SC-181 is located between SC-150 room and SC-180 room. The door for SC-181 is closer to SC-180 room.
3.20.20	3.23.20	Please confirm if any remodeling is required in the patient toilet rooms (per dAlert 137) other than removal of patient lifts and repair/patching of ceilings, and infilling wall above toilet room door?	No further remodel to bathrooms – just removal of lifts & track & replacing the Ceiling tile in the bathroom. Ceiling tile is original to 2008 – existing ceiling tile is 5/8” drywall w/ FRP(fiberglass reinforced panel as moisture barrier.
3.20.20	3.23.20	Please confirm if the overhead lights in ED will need to be removed and replaced with different fixture to accommodate patient lift track configuration to meet both sides of the bed standard layout?	See the attached documents (2 total) to clarify the 11 rooms of the 15 rooms where the swing arm lights will need to be relocated.
3.20.20	3.20.20	Please confirm that all FF&E will be removed from the rooms before contractor takes possession?	The Furniture, Fixtures, & Equipment (FF&E) will be removed from each room prior to contractor takes possession.

<p>3.20.20</p>	<p>3.20.20</p>	<p>Will the Phase 2 contractors be able to visit interstitial space above ED to evaluate the extent of obstructions to installation of lift structural systems connections to concrete upper deck?</p>	<p>No further site visits are approved due to the current global scenario. Below is an example of structural connections to the concrete deck. This drawing is not to be considered final structural design for the SCI_ED Patient Lift project, only an example of other, similar projects.</p>  <p>① EQUIPMENT PATIENT TRANSFER SYSTEM 1 1/2" = 1'-0"</p>
<p>3.20.20</p>	<p>3.20.20</p>	<p>The question dated 1.16.20 clarifies pricing for the lift system (track) shall be separate from the motor pricing. The response indicates pricing should be separate.</p> <p>Further define question: "Patient Lift Motors are assumed to be equipment. Are the Med-Care Patient Lift Motors to be procured by the VA and installed by the Contractor? (VC)"</p>	<p>YES. The Med-Care Patient Lift Motors will be procured by the VA and installed by the contractor. The DB-AE is to include the new Med-Care motors in the design, install the new Med-Care motors, and test the new Med-Care motors. The SOW included in the solicitation indicates the DB contractor is to provide the complete and functional Med Care patient lift systems. This is ambiguous and shall not include the Med Care motors.</p> <p>The Statement of Work has been updated with the following: Part III, B.3.a. shall be amended to read: DB General Contractor will provide complete and functional Med Care patient lift systems; with the exception of the lift motor units, in the specified 6 locations and as detailed by the drawings and specifications developed by the DB AE firm. The lift motor unit is VC; VA provided; contractor installed.</p> <p>Add Part IV, B.3.: The VA will procure and provide to the contractor the patient lift motor units for each patient lift system.</p>