

MACON-BIBB COUNTY, GEORGIA

Request for Qualified Contractor (RFQC)

FOR

SPAY/NEUTER CLINIC AT BCSO ANIMAL SHELTER

21-049-LH

962-06



MACON-BIBB COUNTY

ISSUE DATE: **May 3, 2021**

DUE DATE: **May 20, 2021**

MBE/WBE/DBE Participation: Minority, Women Owned, and other Disadvantaged Business Enterprises are encouraged to participate in the solicitation process. Additionally, respondents are encouraged to use M/W/DBE sub-consultants where possible.

GENERAL

A. INVITATION

Notice is hereby given that Macon-Bibb County will receive responses from organizations to the Request for Qualifications and Proposals (original copy plus **5** copies) in the Procurement Department, 700 Poplar Street, 3rd Floor, Macon, Georgia 31201, until 12:00 o'clock NOON at the time legally prevailing in Macon, Georgia on **Thursday, May 20, 2021** for Spay/Neuter Clinic for Macon- Bibb County.

NO LATE RESPONSES WILL BE CONSIDERED

The names of respondents will be publicly read on **Thursday, May 20, 2021, at 2:00 P.M.** in the Macon-Bibb County Macon Bibb Commissioner's Chamber Room, located on the 2nd Floor of the Government Center Building at 700 Poplar Street, Macon Georgia 31201.

B. DEFINITIONS

Wherever the term "Owner", "County", or "Macon-Bibb County" occur in this document, it shall mean Macon-Bibb County, a political subdivision of the State of Georgia acting through the Macon-Bibb County Board of Commissioners.

C. SOLICITATION DOCUMENTS

Announcement of this Request for Qualified Contractors (RFQC) may also be posted on the Macon-Bibb County website at www.maconbibb.us/procurement and on the Georgia Procurement Registry website https://ssl.doas.state.ga.us/PRSapp/PR_index.jsp

D. INSURANCE REQUIREMENTS

A copy of the respondent's insurance shall be included with the submission. Insurance coverage shall be carried with an insurance company licensed to do business in the State of Georgia. All coverage should be written with insurance company with a Best Rating of A or better. Insurance shall be obtained prior to commencement of work and shall remain in force throughout the period of the contract. Macon-Bibb County shall be named as additional insured on the policy.

Workers' Compensation: Statutory
Errors and Omission: \$1,000,000
General Liability: \$1,000,000
Automobile Liability: \$1,000,000

E. PRE-BID MANDATORY CONFERENCE

A pre-bid conference is scheduled for 10:00 o'clock a.m., **May 11, 2021** at the Bibb County Sheriff's Office Animal Services facility located at 4214 Fulton Mill Road, Macon, GA 31216. This pre-bid is mandatory; contractor must be present in order to submit a response. Social distancing and mandatory mask wearing measures will be enforced.

F. INTRODUCTION

Bibb County Sheriff's Office (BCSO) Animal Services is middle Georgia's largest municipal shelter for cats and dogs. The shelter facility is located at 4214 Fulton Mill Road, Macon, GA 31216.

BCSO Animal Services averages over 4,500 intakes annually and is proud of our low-kill status. We have excellent working relationships with over thirty local rescues and have partnerships with several out of state rescues and shelters. We build these partnerships to transport adoptable animals to areas of the country with lower unwanted pet populations to give the adoptable pets a better chance to find loving homes.

BCSO seeks a dedicated, caring, and compassionate organizations to utilize BCSO Animal Services' surgery room to operate a spay/neuter clinic. We are seeking an organization capable of funding operations to humanely, safely, and effectively operate the spay/neuter clinic.

G. SUBMITTALS

Responses must be sealed and identified on the outside of the package as and delivered to:

“21-049-LH Spay/Neuter Clinic at BCSO Animal Shelter”

Macon-Bibb County Procurement Department

700 Poplar Street

Suite 308

Macon, Georgia 31201

Lhardwick@maconbibb.us

Submissions may not be withdrawn for a period of one hundred-twenty (120) days after the deadline on date of closing. Macon- Bibb reserves the right to reject any and all submissions and to waive technicalities and formalities. Respondents shall carefully read the information contained herein and submit a complete response to all requirements and questions as directed. Submittals and any other information submitted by organizations in response to the RFQC shall become the property of Macon-Bibb County.

Any questions related to this Request for Proposal shall be directed to the following contact person. No contact is to be made to anyone other than the contact listed. Such contact may result in disqualification from the proposal process. Email: Lhardwick@maconbibb.us

All questions or concerns regarding the RFQC should be made via email only.

The Deadline for questions is May 12, 2021 at 5:00 PM EDT.

H. RESPONSIVENESS

Any “Attachment A” documents which are not applicable to a vendor shall be marked “Not applicable” and submitted with all other “Attachment A”. **In order to be considered “responsive” the submission must include completed copies of the following documents:**

1. Attachment “A” Forms
 - a. Acknowledgement of Addendum Form
 - b. Proposer Qualification Form
 - c. Minority Participation Goal
 - d. Financial & Legal Stability Statement
 - e. Georgia Security and Immigration Compliance Act (E-Verify) Affidavit

I. RESPONSIBILITY

In order to be considered “*responsible*” the respondent must meet the following minimum qualifications:

1. Funding Structure:
 - f. Each entity should detail the fee structure of the clinic including any and all funding sources.
 - g. All funding source proposals must include written and signed commitment letters specifying both the amount and duration of the funding.
 - h. The entity should include a five (5) year sustainability plan for the clinic. The information required in the plan includes but is not limited to cost projections with support for these projections along with funding sources.
2. Relevant Experience: Qualifications and experience of the organization in the past five (5) years that is applicable to operate a spay/neuter clinic effectively.
3. References: Contact name, electronic mail, and telephone number of at least three (3) veterinarians.
4. Operation plans for the Spay/Neuter Clinic. Operation plans shall include emergency contingency plan for care of animals whom are seriously injured during surgery, are slow to recover from surgery, need extended/overnight care, or are otherwise incapacitated as a result of the spay or neuter procedure.

J. SCORING (total possible number of points = 100)

Experience	10 pts
Project Approach	15 pts
Project Timeline	10 pts
Financial Resources to Sustain Clinic Operations	30 pts
Operating plan	30 pts
References	5 pts

K. SCOPE OF SERVICES

1. Guidelines:

- a. The Clinic will operate at a maximum of two (2) days per week. The days will be the same each week and will be determined with the approval of Animal Shelter personnel. Wednesdays will not be available for clinic operations. Macon-Bibb County will make designated space available to the organization to whom Macon-Bibb County may offer the award.
- b. The operating hours of the clinic shall not begin prior to 9:00 am and shall not extend beyond 5:00 pm.
- c. The surgery area will contain 5 recovery kennels which may be utilized for animals after their surgery. There are only two (2) kennels that are sized for large dogs up to 60 pounds. There will need to be other accommodations made for animals greater than 60 pounds. The kennels are not for long term stays and should not have food, water or a litter box placed in them. Once the animal has recovered from anesthesia and there are no medical issues the animal should be discharged.
- d. Only five (5) clinic animals at the time will be allowed inside the clinic/building.
- e. Should the organization desire to have more animals than this in recovery at any one time they will need to supply A Mobile Recovery Unit to house the animals until they can safely be discharged.
- f. The clinic area will be subject to inspection by the State under the consent order. Animal Shelter management reserves the right for management level shelter staff to enter the clinic at any time for inspection purposes.
- g. The entity will be required to employ a Licensed Veterinarian and sufficient support personnel to adequately staff the clinic and the Mobile Recovery Unit should one be needed.
- h. Macon-Bibb County shelter personnel will not be used for any duties including but not limited to scheduling for the spay/neuter clinic.
- i. The telephone number for the Macon-Bibb County Animal Shelter will not be given out to the public for any purposes related to the spay/neuter clinic.
- j. All employees of the entity must pass a background (paperwork check only, no polygraph, no references) check and pass a mandatory drug test.
- k. The entity will work exclusively with the shelter Director/Manager to resolve any and all issues. Should there be any issues that cannot be resolved at this level the Director/Manager of the shelter will be responsible for informing the Division Head of the issue and seeking a resolution. No representative of the entity nor any member of their staff will take issues directly to any member of the Bibb County Sheriff's Office in a position of Division Head or higher.

2. Organization Responsibilities:

- a. Organization must supply any and all equipment and supplies required to operate the clinic. Should the clinic cease operations in the future, the equipment may not be removed should this cause any structural damage to the building.
- b. Organization should provide a detailed outline of daily operating procedures.

- c. Organization will be required to provide their own DEA number and to purchase any and all drugs to be used in the clinic.
- d. Organization will be required to store all drugs off site.
- e. All moneys collected by or paid to the organization will be deposited to an account maintained solely by the entity.
- f. The organization is responsible for paying all expenses of the Clinic.
- g. Organization will be responsible for cleaning and sanitizing of the surgery center at the end of each day of use.
- h. Once a stray hold is lifted on a shelter animal, the Clinic staff at the request of Macon-Bibb County shelter staff will perform spay/neuter procedures on the animal at no cost to the shelter.
- i. The organization will only perform spay/neuter services to the public or Animal Rescue Agencies. No wellness or basic vet care will be provided. This does not include vaccinations required for the spay/neuter procedure.
- j. The organization will not provide medical services to shelter animals other than spay/neuter or vaccinations at the time of surgery.
- k. The organization will be responsible for any and all reporting requirements related to grants or clinic operations.
- l. The organization agrees to comply with any and all licensing requirements as established by the Georgia Department of Agriculture Animal Protection Division. The organization will be responsible for any costs associated with obtaining necessary licenses.

L. RESERVATIONS

Macon-Bibb County makes no guarantee that an award will be made as a result of this RFQC and reserves the right to accept or reject any or all submittals, with or without cause, waive any formalities or minor technical inconsistencies, or delete any item/requirement from this RFQC or contract when deemed to be in Macon-Bibb County's best interest.

Macon-Bibb County will not provide compensation to respondents for any expenses incurred by the Respondent(s) for submittal preparation or for any demonstrations that may be made, unless otherwise expressly stated or required by law.

Each submission should be prepared simply and economically, providing a straightforward, concise description of your organization's ability to meet the requirements of this RFQC. Emphasis should be on completeness, clarity of content, responsiveness to the requirements, and an understanding of the Owner's needs.

Macon-Bibb County will consider only representations made within the submission in response to this RFQC. Owner will not be bound to act by any previous knowledge, communication or submission by the firms other than this RFQC.

Failure to comply with the requirements contained herein may result in the submission being deemed "nonresponsive" or "non-responsible". Non-responsive submissions will not be reviewed for potential award.

ACKNOWLEDGMENT OF ADDENDUM

The undersigned Proposer acknowledged receipt of the following addendum, if issued, to the RFP. If none received, write "None Received."

Addendum No.	Dated:
Addendum No.	Dated:
Addendum No.	Dated:
Addendum No.	Dated:
Addendum No.	Dated:

Organization	
Signature	
Print Name	
Title	
Date	