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## ADDENDUM NO. 5

**January 14, 2021**

**Title: CCH-Food and Nutritional Services (FANS)**

**RFP # H20-0026**

### **1. General**

This addendum revises RFP documents. This addendum is issued to respondents of record prior to execution of contract and forms a part of contract documents and modifies previously issued documents. Insofar as previously issued contract documents are inconsistent with modifications indicated by this addendum, modifications indicated by this addendum shall govern. Where any part of the contract documents are modified by this addendum, all unaltered provisions shall remain in effect.

### **2. Addendum Acknowledgement Form**

Acknowledge receipt of this addendum in the space provided on the Addendum Acknowledgement Form. Proposers must include the signed form with their response. Failure to do so will subject Proposers to disqualification.

### **3. Changes and Clarifications**

#### **A. Proposal Due Date changed from 1/15/21 by 2:00p.m. to 02/03/21 by 2:00 p.m.**

### **4. Attachments**

Attached as a paperclip to this pdf file:

A. Attachment A - Stroger Hospital and Provident Hospital Cafeteria Layout

### **5. Response to Questions**

## Responses to Vendor Questions

|   | Section of the RFP                                      | Question   | CCHHS Response   |
|---|---|--|--|
| 1 | 5. Scope of Services<br>5.1 Current Operations<br>5.1.1 | What is your Staffed Bed count?<br>What is your % occupancy of the beds described in this section (i.e., pediatrics, ICU)?<br>What is your total employee count at each facility?<br><br>Please clarify what is in the 358,617 annual meals. Can you advise what else is included?<br>Also, provide number of meals served in <ul style="list-style-type: none"><li>• ER?</li><li>• O/P?</li></ul> | Patient Days<br>Provident - 4,027<br>Stroger - 95,034<br><br>Based on 320 meals 3 meals a day 365<br><br>15 meal x 2 times a day x 365 (10,950 meals)                                      |
| 2 | 5.1.2   | What is the HCAHPS target? As referred to in<br><br>f. CCH achieves targeted Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) scores;<br><br>Can you estimate how many hours of community service? Any large events?  | Meals Overall<br>Temperature of Food<br>Quality of Food<br>Courtesy of person served food  |
| 3 | 5.1.2<br>Clinical Nutrition                             | <i>Nutrition assessment completed by Registered Dietitian within the required number of hours (per CCH policy) ...? Can the policy be shared?</i>  | Yes. Can be shared upon contract award.  |
| 4 | 5.1.5   | Who keeps the retail cash?<br><br>Is there an Employee Discount?<br><br>Do food service employees get free meals? OR any free meals provided?  | CCH, however, the awarded Vendor will maintain the cash and reconcile the payment to CCH monthly.<br>No.<br>If indicated in a Collective Bargaining Agreement and current practice.<br>No. |
| 5 | 5.1.6   | Any offsite caterings? Large events? Or holiday meals? How are these billed?<br><br>Observation at JSH - 6 large insulated food carriers were observed in kitchen what are they utilized for? (4 near kettles, two in coolers with food)   | No. Not Applicable<br><br>Travel carriers for transporting meals.  |

|    | <b>Section of the RFP</b>  | <b>Question</b>  | <b>CCHHS Response</b>   |
|----|----------------------------|--|---|
| 6  | 5.1.8.2 Maintenance        | Does the hospital purchase the cleaning chemicals? <i>"All kitchen and cafeteria equipment is owned by CCH and all cleaning chemicals are premixed prior to arrival"</i>   | Yes, CCH provides the cleaning chemicals.   |
| 7  | 5.1.8.2 Maintenance        | <i>Vendor is responsible for the cleaning of pantry refrigerators and floors.</i> Please clarify. Does Pantry refer just too patient units or all stocked refrigerators?   | Pantry refers to all stocked refrigerators.<br>CCH staff will perform cleaning per the direction of the chosen contractor.  |
|    |                            | Validate that FANS is to clean floors in the pantries on patient units in lieu of EVS.   | CCH staff will perform cleaning per the direction of the chosen contractor.   |
| 8  | 5.1.8.2 Maintenance        | To what extent is Vendor responsible to clean floors/carpets in the Dining Area?   | CCH Environmental Services (EVS) is responsible for cleaning the Dining Area  |
|    |                            | Does this refer to daily debris pick-up or deep cleaning of tile and carpet surfaces?  | Deep cleaning (4) times a year performed by vendor.   |
|    |                            | Is vendor responsible to clean walls to ceiling in locations not designated by "up to six feet" i.e. storage room and cafeteria serving line? If yes are employees allowed to utilize a ladder?  | No. CCH performs a Daily cleaning and walls.  |
| 9  | 5.1.9 CCH Responsibilities | <i>Promotions are the responsibility of CCH.</i> Please define Promotions. Are these café specials?  | Promotions are the activities which communicate the Food and Nutritional Services at Stroger and Provident Hospitals to attract and induce customers to buy product (i.e., Restaurant of the week, Ethnic Food Week).<br><br>Café specials responsibility of Vendor |
| 10 | 5.2 Scope of Work          | <i>In addition, Contractor must provide the following:</i><br><i>b. Must include on demand food service delivery to patients.</i><br>Please validate that you want on-demand room service for patients; at both locations or just Stroger? | On-Demand meals may be required for delivery to patients at Stroger & Provident.  |

|    | <b>Section of the RFP</b>                        | <b>Question</b>  | <b>CCHHS Response</b>  |
|----|--|--|--|
| 11 | 5.2.1 Required Services                          | <p><i>CCH will be responsible for actual delivery and service to the patients, once meals are delivered to nursing stations.</i> Does this mean Nursing will be passing trays?</p> <p>This seems to contradict <i>5.1.3 Patient Meal Preparation and Delivery Process: Trays delivered to the room by Food Service and 5.2.4.3 Performance Credits #5.</i> Please clarify.</p>                                     | CCH Nursing will deliver to COVID-19 patients or patients under restricted isolation. Contractor will deliver to all others. |
| 12 | 5.2.1 Required Services                          | <p><i>Contractor is to provide grill service seven (7) days a week from 7:00 a.m. until 7:00 p.m.</i> Validate that this requirement is for Stroger only.</p>  | 10:30 a.m. through 6:30 p.m.   |
| 13 | 5.2.1 Required Services                          | <p><i>Breakfast may be required for very small number of patients at or about 5am.</i> Please clarify, are these outpatients i.e. from sleep lab etc. and fed in café?</p>   | Yes, In-Patients and on occasion Outpatients.  |
| 14 | 5.2.1 Required Services                          | <p><i>4. Contractor will provide weekday dinner and weekend lunch and dinner in the staff cafeteria for appropriate patients while providing on-unit meals for patients unable to go to the cafeteria.</i></p> <p>Please clarify the above statement. Is there a separate café for Hospital Staff? Do some patients eat in it? Please provide more details.</p>  | <p>This was a typo; CCH does not have a staff cafeteria.</p> <p>In room dinning only for patients.</p>                       |
| 15 | 5.2.1 Required Services                          | <p><i>Contractor will provide additional snacks as needed for patients on weekends.</i> Please explain the need for extra weekend snacks.</p>  | <p>On unit sandwiches as needed.</p> <p>Ex: Emergency Room surge</p>   |
| 16 | 5.2.1 Required Services<br><br>5.1.8.1 Inventory | <p><i>All food inventories are owned by the Contractor.</i></p> <p><i>CCH provided the initial inventory equipment, small wares, food, beverages and supplies) to the FANS vendor and therefore CCH owns the current inventory. Vendor is responsible for upkeep and replacement of supplies/equipment and will be reimbursed for approved replacements.</i></p> <p>Please clarify who will own the inventory.</p> | CCH owns inventory once billed.  |

|    | Section of the RFP   | Question   | CCHHS Response  |
|----|--|--|---|
| 17 | 5.2.1.3 Facilities Equipment, Maintenance, Replacement, Renovations, and Alterations | <i>Plumbing maintenance costs will be the responsibility of the Contractor. Invoices for plumbing repair/service will be forwarded to Contractor for payment.</i><br>Assume these costs will be passed along to CCH.   | The award vendor and CCH will work in collaboration to determine the severity of the issue. If the work can be done by CCH Plumbers there will be no cost to vendor.<br><br>If it is addressed by the Vendor, the cost would be billed back to CCH. |
| 18 | 5.2.1.3 Facilities Equipment, Maintenance, Replacement, Renovations, and Alterations | <i>The Contractor will be responsible for all costs associated with cleaning of all kitchen premises, serving area (except waxing and buffing), equipment and related fixtures.</i><br>Assume this responsibility is limited by the prior outline that the CCH is responsible for ceilings, etc. as outlined in 5.1.8.2 Maintenance. | Yes   |
| 19 | 5.2.2 General Responsibilities Requirement   | <i>Proposer acknowledges that if awarded it would have to retain certain key personnel currently under contract to ensure service continuity and avoid impact to patient care.</i><br>Please clarify to whom this refers.  | CCH Employees   |
| 20 | 6.3.5 Subcontracting or teaming and MBE/WBE Participation                            | <i>CCH has established a goal that MBE/WBE firms retained as subcontractors receive a minimum 35% of this procurement.</i><br>Is it 35% of total contract value or of food and direct expense only?  | The Cook County Office of Contract Compliance has set a goal of 25% MBE and 10% WBE for participation for the FANS RFP. The percentage (%) participation is based on the Total Contract Value.  |
| 21 | Kitchen Equipment  | <i>Please provide schematic drawings for Stroger and Provident kitchens.</i><br><br><i>Can a list of equipment purchased in the last 3 years be provided?</i>  | See Attachment A of this Addendum 5.  |
| 22 | CBA  | <i>Can you please provide copies of any relevant CBA's for the food service associates?</i>  | N/A   |
| 23 |  | <i>Are the 87 CCH employees listed in the RFP "productive" employees or total employees?</i>   | Total Employees   |
| 24 |  | Is the MBWE purchase requirement strictly on food purchases or is it on all purchases and/or labor?  | Please reference answer to Inquiry #20.   |

|    | <b>Section of the RFP</b> | <b>Question</b>   | <b>CCHHS Response</b>  |
|----|---------------------------|---|--|
| 25 |                           | Is FANS responsible for the cleaning of the floors on the unit pantries?  | We do not have pantries on the units.  |
| 26 |                           | <p>Please explain the request for strategic plans to increase revenue 20% each year. Is it the intent for the chosen vendor to increase cash sales by this amount each year?</p> <p>a. Can the profit share portion that was brought up during the walk-through be explained?</p> <p>b. Does the 20% also reflect Provident retail?</p> | <p>Yes, it is the intent that the selected vendor will provide plans to increase revenue for the CCH food services at the John H Stroger, Jr. and Provident Hospitals.</p> <p>a. This is not a profit sharing type agreement.<br/>b. This is combined.</p> |
| 27 |                           | In section 5.1.1 the staffing model does not indicate an "Executive Chef", but in section 5.2.1.2 it is indicated that the contractor will provide an Executive Chef. Is this in addition to the staffing model shown in 5.1.1?   | Contractor must provide an Executive Chef.   |
| 28 |                           | Section 5.2.1.2 indicates that the contractor will also provide sufficient dietitian services to meet the hospital need. Are the clinical dietitians to remain on the CCH payroll and the Clinical Nutrition Manager to be provided by the contractor?  | Yes  |
| 29 |                           | GC-26 (2) Can you explain if the contractor is "Maintenance" or "Support" services?   | Support Services   |
| 30 | General                   | Please provide your total patient days by location  | See response to question 1.  |
| 31 | General                   | Please provide any CAD / floor plan drawings for both locations.  | See response to question 21.   |
| 32 | General                   | Please provide patient satisfaction scores (overall, top box), preferably last 1-2 years by quarter.  | To be provided upon contract award.  |
| 33 | General                   | Does the current vendor have any undepreciated capital that would need to be covered by new contractor?   | No   |
| 34 | 5.1 #1                    | How is a "meal" determined in Retail?   | To be determined by Contractor.  |
| 35 | 5.1.1                     | Staffing Structure mentions "87 CCH employees". Please provide the current "budgeted FTE's by location" and the current number of vacancies by location.  | CCH has 87 FTE's.<br>Provident's FTE's is to be provided by Contractor.  |

|    | <b>Section of the RFP</b> | <b>Question</b>   | <b>CCHHS Response</b>  |
|----|---------------------------|---|--|
| 36 | 5.1.3                     | States trays are delivered to the room by food service. However, 5.2.1.1 states "CCH will be responsible for actual delivery and service to the patients once meals are delivered to nursing stations". Please clarify which is accurate. | This is COVID-19 related.<br>All other Non-COVID patient trays are delivered to the Patient by FANS staff. |
| 37 | 5.1.3                     | Indicates Trays removed from room by Nursing / and or Food Service. Please specify which we should base our proposal.   | Please reference answer to Inquiry #11.  |
| 38 | 5.1.3                     | Please provide the patient meal participation rates (%)   | Do not understand the question.  |
| 39 | 5.1.5                     | Indicates a self-serve soup/ salad bar? Is this still an option today given Covid?  | No.  |
| 40 | 5.1.5                     | Who receives meal cards and meal tickets? What is the value? Is it included in total retail sales?  | To be determined upon contract award.  |
| 41 | 5.1.5                     | Can we propose franchising retail? Subcontract retail?  | Yes.   |
| 42 | 5.1.5                     | Following recent layoffs, please share the number of employees working at each facility that might utilized the retail space (i.e. including staff, doctors, volunteers, residents)   | Provident -300<br>Stroger - 2000   |
| 43 | 5.1.5.1                   | Please provide the cafeteria revenues for a 12 month period pre-Covid and the current Covid average (April-Sept).   | To be discussed upon contract award.   |
| 44 | 5.1.5.1                   | Please provide the retail item price list.  | N/A  |
| 45 | 5.1.5.1                   | Please provide the average customer counts by meal period for retail M-F and weekends for each location   | To be discussed upon contract award.   |
| 46 | 5.1.6.1                   | Floor Supplies, How many units are delivered by hospital? What is the value?  | Approximately 25 units. Value N/A.   |
| 47 | 5.1.8.2                   | Cleaning Chemical premixed prior to arrival does that preclude dispensing towers?   | Do not understand question.  |
| 48 | 5.1.9.k                   | Vehicle expense. Who Owns Vehicles? How Many? Leased? Are Union employees allowed to drive? Are the Vehicles shared with other departments? Is there a courier between CCH and Provident Hospital?  | No Vehicles assigned to FANS<br><br>No Courier assigned to FANS  |

|    | <b>Section of the RFP</b> | <b>Question</b>  | <b>CCHHS Response</b>   |
|----|---------------------------|--|---|
| 49 | 5.1.9.k                   | Maintenance Contracts – What contacts are in place? What is the value?   | To be discussed upon contract award.  |
| 50 | 5.2                       | Plan to increase retail revenue by 20% each year. It was stated this is a "goal". Please clarify the specific requirement. Additionally, what are baseline revenues? (Similar to Q14 above)  | The 20% is a target goal.   |
| 51 | 5.2.1                     | This section states that Grill Service will be provided 7 days a week 7:00am – 7:00pm. However, 5.1.5 indicates "limited food options between meal periods", and the Hours of Cafeteria Services outlined in 5.1.5.2 indicates that café is closed at various periods of the day between 7am and 7pm. Please clarify.  | 10:30 a.m. through 6:30 p.m.  |
| 52 | 5.2.1.1                   | Indicates Breakfast may be required for a very small number of patients at or about 5am? If possible, please provide a more exact number of patients.  | Dialysis Patient<br>No exact number available under 15  |
| 53 | 5.2.1.1 #8,9              | Reference to "Choices Meal Option" and "Choices Alternative" – please clarify and define what these are.   | To be determined by Contractor.   |
| 54 | 5.2.1.2 #6                | States that management and non-management staff will be employees of the contractor and shall pay all food service employees directly. However, section 5.1.9b states that wages and salaries of CCH employees are the responsibility of CCH. During the pre-proposal meeting (10/15), it was stated that at John Stroger Hospital front line employees will remain on CCH payroll, and that at Providence Hospital, all hourly front line employees would be shifted to Contractor payroll. Please verify this. | Provident Employees are employed by the Vendor<br>Stroger employees are CCH employees   |
| 55 | 5.2.1.4                   | Which Patients are eligible to go to the café? What site? How many   | None  |
| 56 | 5.2.1.3 #1                | Section states "must include \$500,00 for renovation". Please verify this is intended to read "\$500,000"? How would this investment be spent? And does the current vendor have any undepreciated capital that would need to be covered by a new contactor?  | Correct, this Section should read \$500,000.00.<br>CCH and awarded Contractor would determine use for investment.<br>Current capital equipment is owned by CCH. |

|    | <b>Section of the RFP</b> | <b>Question</b>  | <b>CCHHS Response</b>   |
|----|---------------------------|--|---|
| 57 | 5.2.1.3 #4                | Plumbing and Maintenance costs. What is the limit of responsibility? We assume this is limited to food and nutrition areas (i.e. kitchen)  | Correct   |
| 58 | 5.2.2 #4                  | If in fact it is clarified that CCH would like the contractor to employ and pay salaries for all hourly, union employees at Provident Hospital, please provide: (1) Full name of Unions representing employees. Full name should include the National Union name and the Local Union name. (2) Copies of any collective bargaining agreements.   | Provident Employees are Unionized and are represented by Teamsters Local?<br><br>CBA is between the Vendor and the Union                                  |
| 59 | 5.2.2 #4                  | For Provident Hospital, please provide information pertaining to health insurance, including: Summary of Benefits Coverage documents, Monthly Premiums, Cost Share of the Employer and the Employee towards the monthly premium, number of employees participating in the benefits at each level (employee, EE + 1, family, etc.), information relating to other insurance programs (i.e. Dental, Vision, STD, Life), information regarding the retirement plan. | This is not available from CCH.   |
| 60 | 6.3.1. b.                 | Provide at least three relevant references - why is there an asterisk (*) after the reference Section #1-8? We did not see a footnote that the asterisk would be referencing.  | The asterisk was an error.  |
| 61 | 6.3.5                     | Can you clarify "35% of procurement" for MWBE requirement? Is this only include purchases as the denominator of the spend or does it include labor, benefits, general expenses in the denominator of spend?  | Please reference answer to Inquiry #20.   |
| 62 | 6.3.5                     | You are members of Premier and Vizient purchasing groups. Are we required to purchase off of one of your GPO programs, if so, which one? If we are required to use one of these programs, how does that affect our 35% MWBE goal?  | CCH is a member of Vizient Inc. Requirement to use GPO vendor can be discussed upon contract award. The total contract value is subject to the MWBE goal. |

|    | <b>Section of the RFP</b> | <b>Question</b>   | <b>CCHHS Response</b>   |
|----|---------------------------|---|---|
| 63 | 6.3.13                    | References addenda that must be signed. Please provide these documents as we were unable to locate them on the website. | Refer to Section 2 of this Addendum 5.  |
| 64 |                           | Section 6.3.9 states Sample Contract terms and Conditions.  | <a href="https://cookcountyhealth.org/about/do-business-with-cook-county-health/">https://cookcountyhealth.org/about/do-business-with-cook-county-health/</a> |

## **ADDENDUM ACKNOWLEDGEMENT FORM**

As required by the RFP, Proposers must submit this acknowledgement form with their response. One acknowledgement form per response, listing all addenda, is appropriate.

**Addendum No.: \_\_\_\_\_**

**Company Name:** \_\_\_\_\_

**Representative's Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

END OF ADDENDUM