



Department of Property & Procurement

Government of the United States Virgin Islands

3274 ESTATE RICHMOND, CHRISTIANSTED, U. S. VIRGIN ISLANDS 00820

8201 SUB BASE, 3RD FLOOR, ST. THOMAS, U. S. VIRGIN ISLANDS 00802

ST. CROIX MAIN OFFICE: 340.773.1561 | ST. THOMAS MAIN OFFICE: 340.774.0828

ST. CROIX FAX: 340.773.0986 | ST. THOMAS FAX: 340.774.9587

[HTTP://DPP.VI.GOV](http://DPP.VI.GOV)



June 23, 2020

AMENDMENT TEN (10) RFP-013-C-2020 (P) Territorial Solicitation for Architectural and Engineering (A/E) Services for the Hospitals in the U.S. Virgin Islands.

QUESTION AND ANSWER

1. **Question:** Regarding the technical proposal section of the RFP, does the 25-page limit refer to a single page or double-sided page?

Response: Single.

2. **Question:** Does the Hospital Redevelopment Team have monies appropriated by the GVI (or other sources) for the A&E Services solicited for projects in RFP 013-C-2020-(P)? Since FEMA funding is based solely on a reimbursement system, meaning once the applicant (The Hospital Redevelopment Team) pays for the services rendered by the contractor (A&E firm), only then the applicant may solicit reimbursement funds drawdown from the GVI for work completed.

Response: No.

3. **Question:** Please confirm that the assessment of the existing facilities and written report described on Section 5.2 Conceptual/Pre-design on pages 18, 36, 54 and 72 of the RFP will be prepared according to the description found on the pages mentioned above and that the assessment is not an evaluation of damages incurred by Hurricanes Irma and Maria.

Response: Correct

4. **Question:** Since it was stated on Amendment 5 that FEMA prepared and obligated funds for A&E services for all projects (A through D). In the eventuality that FEMA finds a portion of the work described in RFP 013-

C-2020-(P) ineligible and the work has been performed by the A&E firm. What other sources of funding will the GVI have to compensate the A&E firm work completed as per the RFP but not found eligible by FEMA?

Response: There are no other funding sources available currently.

5. **Question:** Has FEMA Public Assistance Coordinator reviewed the SOW on RFP 013-C-2020-(P)? I ask this question based on experience with a similar type of client in Puerto Rico for projects related to Hurricane Maria. Our firm was awarded a contract, and after completing the tasks described in the Scope of Work prepared by the applicant for the contract, the applicant requested reimbursement from FEMA. Unfortunately for the applicant, FEMA deemed the SOW in the RFP ineligible, and the applicant was not reimbursed for the services rendered.

Response: No

6. **Question:** Please clarify the roles and responsibilities required by the A&E firm found in Section 5.1 Program Development, paragraph 3, page 17, "The A/E Firm shall identify potential construction constraints." Specifically, elaborate on items 3b, 3c, and 3d. What would be the role of the A&E firm regarding shipping, transportation, customs, etc. for the construction materials?

Response: The role of the A&E firm is to determine any potential constraints on project timelines and cost as it relates to the items listed in section 3.

7. **Question:** Does the USVI government have a list of "certified" MBE & WBE firms that will meet the goal of the item in the RFP below? If you do have a list, please provide a link to its location.

Response: No

8. **Question:** Will each project be a hard bid or RFP negotiated similarly to the AE RFP?

Response: As it pertains to this RFP, project A, B, C, and D will each be negotiated with the highest respondent.

9. Question: Would a licensed Prime contractor, who is a sub-consultant to the "Respondent," be precluded from bidding for the construction phase of each of the projects?

Response: No, you will only be precluded from bidding on the construction work where your Prime Contractor is the awarded A&E Contractor.

10. Question: Would there be a possibility of early CM involvement or a "Design Assist" to provide input on cost and constructability unique to healthcare construction and the USVI?

Response: Your proposal should reflect what is needed to accomplish all tasks listed in the RFP.

11. Question: Regarding the Myrah Keating project, On page 70 of the RFP, it states *"It should be noted that the cost proposal to be submitted must identify the Interim and the Reconstruction as two separate proposals due to the fact each project is represented as two independent projects pursuant to FEMA funding."* however, in the appendices, the only project that has a separate cost proposal for an Interim Structure is Roy Schneider. Are we to provide two cost proposals for Myrah Keating as noted, or is this a mistake?

Response: There should only be one cost proposal for the Myrah Keating Smith. The "two independent projects pursuant to FEMA funding" relates specifically to Roy L. Schneider Hospital, the interim structure, and the permanent reconstruction/renovation of the existing facility.

12. Question: Can you send the Preliminary drawings mentioned in the RFP?

Response: No, there are no preliminary drawings

13. Question: There is no specific reference to medical equipment in the RFP. Is the provision of medical equipment part of the design, procurement, and construction requirements?

Response: All new equipment will be determined with the completion of the 100% plans and specifications as the new structures would determine the required equipment.

14.Question: If so, are we to assume that medical equipment is included in reference to FF&E in Project A only?

Response: All new equipment will be determined with the completion of the 100% plans and specifications as the new structures would determine the required equipment.

15.Question: Will the procurement of medical equipment be part of the general construction scope of work, or purchased and installed by a separate party?

Response: While the procurement process for the medical equipment may run concurrently, it will not be a part of the general construction scope of work. The purchase and installation are to be determined as certain equipment requires the manufacturer and/or their respective representative.

16.Question: For Projects B, C, and D, are we to evaluate the condition of existing medical equipment and make recommendations? **Response:** Yes. Is it the intent of GVI to purchase all new equipment in the renovation projects, or to try to re-use existing equipment? **Response:** The evaluation and ultimately the timeline for construction will determine whether items can be re-used based on condition, age, useful life and efficiency of said equipment. Once equipment is recommended to be replaced and the owner concurs, new equipment will be purchased. If the latter, who assumes responsibility for the operational readiness of the equipment? **Response:** This will be done in collaboration with the manufacturer, the owner and the final redesigns of each facility.

17.Question: RFP No. 013-C-2020 (P) J. CONTENTS OF PROPOSAL, 6. Firm Background and Experience, a. Organization Chart, Page 8: Does DPP want to see an organization chart of the firm, including the names, background, education, and experience of all principals? **Response:** Yes, or does the DPP want to see an organization chart for each project? **Response:** Each project should contain all the requirements, as they are submitted separately.

18.Question: RFP No. 013-C-2020 (P) J. CONTENTS OF PROPOSAL, 7. Technical Proposal, Page 8: Can resumes and/or licenses for key personnel be included as an attachment?

Response: Yes

19.Question: Projects B and C are to be presented in separate proposals since both facilities sit on the same campus, would it be possible to submit one combined proposal for both projects?

Response: No

20.Question: Appendix C-2A, C-2b, C-3, and C-4 have headers in the Staff Position blocks for each section that do not match the descriptions in the Totals block. For example, in Appendix C-2a-Roy L. Schneider Hospital Fee Schedule (Interim Structure), Appendix C-2b-Roy L. Schneider Hospital Fee Schedule (RLSH Existing Structure), Appendix C-3-Charlotte Kimelman Cancer Institute Fee Schedule, and C-4-Myrah Keating Smith Community Health Center Fee Schedule. Do you want Contractors to correct before proposals are submitted?

Response: The blocks can be amended if the respondents are clear in their respective descriptions.

21.Question: RFP-013-C-2020 (P) Appendices, Exhibit A, JFL, and SRMC Insurance Requirements, Pages 51 – 55: As insurance deductibles vary between contractors and insurance policies, please confirm that higher deductibles are allowed under the provided insurance coverages that are required under the awarded contracts.

Response: Yes

22.Question: RFP No. 013- C-2020 (P), Scope of Services for Projects, under the paragraph of the Scope of Services for each of the hospital projects entitled "Final Site Inspection and Project Close-Out" the last line states "Warranty procedures will be finalized" As the A&E Contractor will be covered under provisions for professional services for errors and omission, please confirm that there are no other warranty requirements required

under any subsequent awarded contract, or provide the specific details as to what other warranties are to be required.

Response: No other warranties required for A/E Services.

23.Question: What is the existing total square footage of the RLSH? The RFP listed the CKCI total square footage, not the RLSH.

Response: In the description of each facility, the square footages are listed. The existing total square footage of the RLSH is approximately 220,000 sqft.

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

BIDDERS MUST ACKNOWLEDGE RECEIPT OF THIS AMENDMENT WITH
THEIR BID PROPOSAL.