LEE COUNTY BOARD OF COUNTY COMMISSIONERS Agenda Item Summary

BLUE SHEET NO: 20020142

	AGEN	DA HEIVI SUIVIIVIAR I		DIUE SHEET	110.2002014
1. REQUESTED MOTION: <u>ACTION REQUESTED</u> : Award RFP- the Evaluation Committee as being \$9.75; 2a. \$4.75; 2b. \$4.75; 3a. \$19 Ambulatory \$17.00, Wheelchair \$2 three (3) additional 12 month perio best interest of Lee County. <u>WHY ACTION IS NECESSARY</u> : Purs September 25, 2001, Committee re <u>WHAT ACTION ACCOMPLISHES</u> : V conditions, are unable to access the 2. DEPARTMENTAL CATEGORY: 06 <u>COMMISSION DISTRICT #:</u> 4. AGENDA X_CONSENT	in the best intered 2.20; 3b. \$24.10; 21.50, for an initial ds, subject to satisfied suant to Administ commendations a Will provide para fixed route bus s independent Divis	est of Lee County, A' 4a. \$11.45; 4b \$14.45 al contract period to r isfactory performance trative Code AC-4-4 and award shall be ap transit services to ind service under the dire ions CGA UIREMENT/PURPOSE STATUTE	CC/Vancon 5; 5 Ambul 2010 through 2010 throu	n Inc., for the following fe atory \$7.10, Wheelchair \$ a June 30, 2003 with the op ce, and determination that y Contract Manual, approv the Board. ho, because of physical or	es: 1a. \$9.75; 1b. 11.60; 6. otion to renew for renewal is in the ed by the Board on cognitive
ADMINISTRATIVE		DINANCE	B. D	EPARTMENT:	
APPEALS PUBLIC		ER	C. D	IVISION: Lee Transit	
TIME REQUIRED:			BY: Steve N	Myers, Lee Transit Director	
7. BACKGROUND: The current annual ADA Paratrans	it Services contra	ict is up for renewal	The eviction	ng provider is ATC Public	Transportation
In an effort to solicit new proposals	s below is a list o	f events that have tak	en place to	date:	Thansportation
In an enter to somer new proposal	5 001077 15 u 115t o		on place is		
 New proposals were solicited un Advertisement was on May 4, 24 Board, this RFP remained sealed June 26, 2001 Board directed sta was written as brokers who are a was advertised on August 17, 20 received and opened. On September 25, 2001, Lee Tra of an unsolicited facsimile of Go October 3, 2001, a letter was ma that we are terminating the revie advantage from one proposer ov stipulation that they would be no On October 24, 2001 a letter wit deadline submittal date of Nove MANAGEMENT RECOMMENDAT 	001 with a deadli I. off to return the sulso providers willon 101, with a deadli 101, with a deadli 1	ne of June 21. One (ole RFP sealed and re Il not be allowed to p ne date for submittal eral express package f osal prices from an ex- ic proposers, from Da ion of all the pricings is time all three (3) p late for the resubmitta l Pricing Template wa 11:30 a.m.	(1) proposa -write the rovide mor of Septem from ATC/ c-employee vid Owen, under RFI roposals w al of their p as issued to	al was received and at the c RFP to increase competition re than 35% of trips. This ber 25, 2001. Three (3) pr (Intelitran (one of the proper- e of Good Wheels. Assistant County Attorney P-01-07, due to an unfair c vere returned to each propo- proposal with new pricing.	Inrection of the on. A new RFP RFP, RFP-01-07 oposals were osers), with a copy y, notifying them ompetitive ser, with
			-		
-	<u>9.</u>]	RECOMMENDED APP	ROVAL	<u></u>	
DEPARTMENT Purchasing/	Human	County Administration	Г	COUNTX	COUNTY
	Resources	OMM 24		OTHER ATTORNEY	MANAGER
		Of Risk	GC	- the fait of the	{
Hend hyme 3 56362		2 thor 23/20	12.19-02	20/19/02	M
10. COMMISSION ACTION:		-	₹ .	1 State and the state of the st	
APPROVED DENIED DEFERRED OTHER		RECEIVED BY COUNTY ADMIN,	20m	HECVO. by CO. ATTY. 2/19/CB. /CO. POC CO. ATTY. POCEAARDED, TO: ADJUT J.V.	
Contracts/LAB			<u></u>		
		COUNTY ADMIN. FORWARDED TO:		1:20 pm	
		4/21 41	0		

Page 2

- November 8, 2001, all three firms submitted a proposal with pricing by the established deadline date and time. ATC Public Transportation submitted pricing on 3 alternatives: (1) ATC Continues as Brokerage Firm; (2) ATC Operates 35% and (3) LeeTran Performs Operations; DeCandis submitted pricing on the RFP document only and GoodWheels submitted pricing on the submitted proposal and also submitted pricing as an alternative without the 35% restriction.
- November 14, 2001, the Proposal Evaluation Committee met to review each proposal. It was the consensus of the committee that each of the 3 proposals required further clarifications to their submittal.
- November 15, 2001 Contracts Management faxed each proposer a letter requesting clarification to several questions. The deadline for receipt of the clarifications was November 27, 2001.
- On November 26, 2001, Contracts Management received a fax from GoodWheels notifying Lee County that they are withdrawing their primary proposal, leaving Lee County with just the GoodWheels Alternative proposal for evaluation by the Committee.
- November 28, 2001 the Proposal Evaluation Committee reconvened to review the submittals as well as the clarifications received. At the November 28, 2001, Evaluation Committee meeting, the Committee found and determined that further direction from the Board was required due to the nature of the Proposals submitted in order to continue with the selection process, and to consider the alternative of the County (Lee Tran) participating in the process.
- On December 18, 2001, a blue sheet was taken to the Board requesting additional direction with regards to the project.
- The Board of County Commissioners motion was to return the existing proposal and request the proposers to re-price the proposal to provide a firm price for Broker/Operator with up to 100% of the services. Also, requested Lee Transit to prepare a cost analysis for the Broker/Operator with up to 100% of the service as an alternative to outsourcing this service.
- January 14, 2002, Contracts Management issued New Pricing Templates to all three (3) of the proposers, with a deadline for receipt of all Pricing Templates on January 29, 2002 by 11:30 a.m.
- January 29, 2002, all three (3) proposers submitted new Pricing Templates.
- January 31, 2002, the Proposal Evaluation Committee, which consisted of William Hammond, Deputy County Manager; Steve Myers, Transit Director and Susan Oliver, Human Services, met for evaluation of the three-(3) proposals. Based on the proposals submitted it was the consensus of the committee to recommend award to ATC/Vancom Inc. whose proposal was evaluated as being in the best interest of Lee County.
- January 31, 2002, all three (3) firms where notified in writing of the Proposal Committee's recommendation to award, subject to Board approval the proposal to ATC /Vancom Inc.

Therefore, at this time it is being recommended that the Board approve award RFP-01-07 ADA PARATRANSIT SERVICES, to the proposer whose proposal was evaluated by the Evaluation Committee as being in the best interest of Lee County, ATC/Vancom Inc., for the following fees: 1a. \$9.75; 1b. \$9.75; 2a. \$4.75; 2b. \$4.75; 3a. \$19.20; 3b. \$24.10; 4a. \$11.45; 4b \$14.45; 5 Ambulatory \$7.10, Wheelchair \$11.60; 6. Ambulatory \$17.00, Wheelchair \$21.50 (as specified in the attached Pricing Template).

The County intends to enter into an initial contract period to run through June 30, 2003 with an option to renew for three (3) additional 12 month periods, subject to satisfactory performance, acceptance, and determination that renewal is in the best interest of Lee County.

Funding will be available in account string: k15440148600.503490.08

Attachments: 1. Evaluation Sheets – ATC/Vancom Inc.

- 2. ATC Pricing Template
- 3. Evaluation Sheets DeCandis
- 4. Evaluation Sheets Goodwheels Inc.
- 5. Overall Combined Evaluation Sheet

[Originator/Typist Initials]

BLUE.doc

1/31/02 DATE:

PROPOSER: ATC

All responding firms must submit the following required information using the prescribed format.

Provided the most recent Financial Statement, and include a Cash Flow Analysis which will show adequate cash flow to provide service.

Listed the name of your insurance agent, and all companies who insure you. Attach copies of Insurance Certificates.

Provide a listing of any Pending Litigation.

Qualification of the Firm

This section of the proposal should establish the qualifications of the presenter to satisfactorily provide the required work by reason of the strength and stability as a business concern.

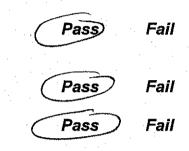
Included resumes of key personnel proposed for this project. Key positions for this solicitation shall be considered the Project/Operations Manager.

Identified subcontractors, if any, by company name, address, contact person, telephone number and project function. Provided the same information for each subcontractors as requested above.

Related Experience and References of the Firm

This section should establish the ability of the firm to satisfactorily provide the required service by reasons of demonstrated competence, by the nature and relevance of recently completed work; record of current contracts; and supportive client references.

Provided examples of similar services that your firm has completed within the last three years. For each reference cited as related experience, furnish the name, title, address and telephone number of the person(s) at the client organization who is most knowledgeable about the work performed.



Pass Fail



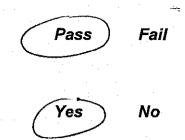


Page 2

Listed all Business and/or Operating License(s) issued by Lee County or the State of Florida.

ATC

Provided if company as ever had their Operating and/or Business License(s) terminated or suspended? (If yes, provided a detailed explanation of the circumstances.



<u>Service Plan</u>

Provided a detailed work plan and description for providing services as described herein. The firm's response should present highlights demonstrating their technical knowledge and capabilities of providing the service as described. Firm's approach should be clearly defined and should include but not be limited to the following.

Proposed Facility/Facilities Drug Free Work Place Policy			Pass
Start-up Plan			Pass
Operations			Pass
Screening			Pass
Hiring			Pass
Training			Pass
Uniforms			Pass
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Compliance with Chapter 14-90, Florida Statutes Accident reporting, standards, procedures Complaint procedures Dispatch procedures Dispatch and supervisory staff Radio communications Emergency procedures

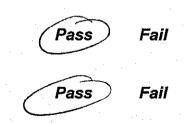
Operations Plan Personnel Days/Hours of Operation Record keeping system Performance monitoring Security plan Training program

Provided documentation of past D.B.E. effort and proposed D.B.E. efforts for this contract.

Pass Pass Pass Pass Pass Pass Pass Pass	Fail Fail Fail Fail Fail Fail Fail
Pass Pass	Fail Fail Fail

Fail





DATE: 1/31/02 PROPOSER: ATC

Criteria 1=Poor Maximum Points=Excellent	Points Possible	Points Received
Capability & Experience of the firm in coordinating demand response transportation services, particularly ADA services.	15	15
Capability & experience of key personnel to be assigned to the project in coordinating demand response transportation services, particular ADA services.	20	18
Adequacy of proposed facilities, equipment & vehicles	5	5
Adequacy of financial, managerial, and technical resources to successfully carry out the required services and meet required service standards.	10	7
Adequacy & quality of proposer's staffing, implementation & training plans.	10	8
Quality and reporting capabilities of the firms trip reservation software program	10	10
Adequacy of proposer's response to all other requirements, terms, and conditions of this Request for Proposal.	5	4
Price for Services	25	24
Total	100	91

COMMITTEE MEMBERS SIGNATURE:

SOLICITATION NO.: RFP-01-07 RE-PRICED PROPOSAL

ADA PARATRANSIT SERVICES FOR LEE COUNTY TRANSIT DIVISION OFFICIAL PROPOSAL FORM

Date: January 29, 2002 Proposer Name: ATC Paratransit

Having carefully examined the "Proposal Documents", all of which are contained herein, the Undersigned proposes to furnish the following which meets these specifications:

PROVIDE PRICING AS SPECIFIED IN THE RFP

The undersigned acknowledges receipt of the following addenda, and the cost, if any, of such revisions has been included in the price of the proposal.

Addendum # Date: Janua:	ry 23, 2002
Addendum # Date:	
Addendum # Date:	
January 2002.	Seal) VELMA M. WOODS Notary Public - State of Florida MyCommission Expires Apr 29, 2005 Commission # DD021217
ATC Paratransit	Joel Hargis
Company Name	Contact Person
4400 PGA Boulevard, Ste. 400	(561) 799-5285
Mailing Address	Phone Number
Palm Beach Gardens, Fl. 3341	0 (561) 828-0953
City, State, and Zip	Fax Number

Deadline: January 29, 2002 @ 11:30 a.m. Dated: January 14, 2002 BROKER/OPERATOR UP TO 100% OPTION 2

	's Name: <u>ATC Paratransit</u>	
RFP	-01-07 PRICE BID SHEET	
1a.	Cost per Individual ADA Ambulatory Passenger Trip minus \$2.00 retained fare = County Cost per trip:	\$9.75
		
1b.	Cost per Individual ADA Wheelchair Trip minus \$2.00 retained fare = County Cost per trip:	\$9.75
2a.	Cost per Multi-Load ADA Ambulatory Passenger Trip minus \$2.00 retained fare = County Cost per trip:	\$4.75
	*Multi-Load is defined as trhre or more passengers picked up or dropped off at a common location.	
2b.	Cost per Multi-Load ADA Wheelchair Trip minus \$2.00 retained fare = County Cost per trip:	\$4.75
3a.	Cost per Individual ADA Ambulatory Passenger Trip provided in a non-county owned vehicle minus \$2.00 retained fare = County Cost per trip:	\$19.20
3b.	Cost per Individual ADA Wheelchair Passenger Trip provided in a non-county owned vehicle minus \$2.00 retained fare = County Cost per trip:	\$24.10
4a.	Cost per Multi-Load ADA Ambulatory Passenger Trip provided in a non-county owned vehicle minus \$2.00 retained fare = County Cost per trip: *Multi-Load is defined as three or more passengers picked up or dropped off at a common location.	\$11.45
4b.	Cost per Multi-Load ADA Wheelchair Passenger Trip provided in a non-county owned vehicle minus \$2.00 retained fare = County Cost per trip:	\$14.45
5	Fee paid by the proposer to Lee County for transportation of non-ADA spassengers provided by the carriers in county vehicles shall be as follows Sponsoring agency rate less the applicable ADA rate equals net due to Ambulatory: \$7.10 Wheelchair: \$11.60	
6.	Fee paid to Lee County for transportation provided by Lee Tran of ADA a sponsored passengers in Lee county vehicles shall be paid as follows: Sp agency reimbursement rate less the trip coordination fee equals net of County: <u>Ambulatory: \$17.00</u> Wheelchair: \$21.50	onsoring

CTC Lee & DeSoto Counties North River Center, Unit 11 & 12 13240 N. Cleveland Avenue N. Fort Meyers, FL 33903 (941) 656-5530 Fax (941) 656-6563



Date:

January 29, 2002

Subject: ADA Paratransit Service

Solicitation Number: RPF-01-07

In response to your request to provide an updated, current list of proposed sub-contractors for the provision of ADA services, the following are our proposed sub-contractors:

- Goodwheels, Inc. 10075 Bavaria Road, S.E. Ft. Myers, Fla. 33913 (941) 768-6184 President: Gary Bryant
- Ambitrans
 P.O. Box 2444
 Port Charlotte, Fla. 33949
 (941) 743-3665
 President: Michael Grant

If further information is required regarding the above proposed sub-contractors, the additional information will be submitted upon request.



DATE:	1/31/02	
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PROPOSER: De (ANDIS

All responding firms must submit the following required information using the prescribed format.

Provided the most recent Financial Statement, and include a Cash Flow Analysis which will show adequate cash flow to provide service.

Listed the name of your insurance agent, and all companies who insure you. Attach copies of Insurance Certificates.

Provide a listing of any Pending Litigation.

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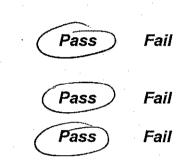
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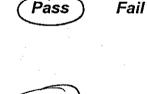
Related Experience and References of the Firm

This section should establish the ability of the firm to satisfactorily provide the required service by reasons of demonstrated competence, by the nature and relevance of recently completed work; record of current contracts; and supportive client references.

Provided examples of similar services that your firm has completed within the last three years. For each reference cited as related experience, furnish the name, title, address and telephone number of the person(s) at the client organization who is most knowledgeable about the work performed.

Pass Fail









Page 2

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DECANDIS

Pass Fail

Provided if company as ever had their Operating and/or Business License(s) terminated or suspended? (If yes, provided a detailed explanation of the circumstances.

<u>Service Plan</u>

Provided a detailed work plan and description for providing services as described herein. The firm's response should present highlights demonstrating their technical knowledge and capabilities of providing the service as described. Firm's approach should be clearly defined and should include but not be limited to the following.

Proposed Facili	ty/Facilities
Drug Free Work	Place Policy
Start-up Plan	
Operations	
Screening	
Hiring	
Training	
Uniforms	<i>и</i> .

Safety Plan

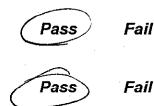
Compliance with Chapter 14-90, Florida Statutes Accident reporting, standards, procedures Complaint procedures Dispatch procedures Dispatch and supervisory staff Radio communications Emergency procedures

Operations Plan Personnel Days/Hours of Operation Record keeping system Performance monitoring Security plan Training program

Provided documentation of past D.B.E. effort and proposed D.B.E. efforts for this contract.

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DATE: 1/31/02 PROPOSER: DECANDIS

Criteria 1=Poor Maximum Points=Excellent	Points Possible	Points Received
Capability & Experience of the firm in coordinating demand response transportation services, particularly ADA services.	15	10
Capability & experience of key personnel to be assigned to the project in coordinating demand response transportation services, particular ADA services.	20	18
Adequacy of proposed facilities, equipment & vehicles	5	3
Adequacy of financial, managerial, and technical resources to successfully carry out the required services and meet required service standards.	10	4
Adequacy & quality of proposer's staffing, implementation & training plans.	10	8
Quality and reporting capabilities of the firms trip reservation software program	10	10
Adequacy of proposer's response to all other requirements, terms, and conditions of this Request for Proposal.	5	3
Price for Services	25	10
Total	100	Lela

COMMITTEE MEMBERS SIGNATURE:

DATE: PROPOSER: Good Wheels

All responding firms must submit the following required information using the prescribed format.

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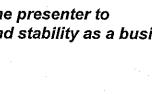
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Provided examples of similar services that your firm has completed within the last three years. For each reference cited as related experience, furnish the name, title, address and telephone number of the person(s) at the client organization who is most knowledgeable about the work performed.

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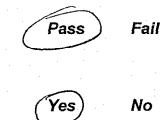
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GOOD WHEELS

Page 2

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Service Plan

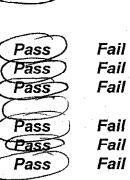
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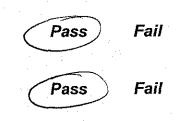
Proposed Fac	ility/Facilities				Pass	Fail
Drug Free Wo	rk Place Policy	-		~ 7	Pass)	Fail
Start-up Plan				the the	Pass	Fail
Operations				. 7	Pass	Fail
Screening				2	Pass	Fail
Hiring	•			2	Pass	Fail
Training				ζ	Pass	Fail
Uniforms	۰.	· •			Pass)	Fail
			•			

Safety Plan Compliance with Chapter 14-90, Florida Statutes Accident reporting, standards, procedures Complaint procedures Dispatch procedures Dispatch and supervisory staff Radio communications Emergency procedures

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DATE: _______ PROPOSER: _______ WHEELS

Criteria 1=Poor Maximum Points=Excellent	Points Possible	Points Received
Capability & Experience of the firm in coordinating demand response transportation services, particularly ADA services.	15	13
Capability & experience of key personnel to be assigned to the project in coordinating demand response transportation services, particular ADA services.	20	18
Adequacy of proposed facilities, equipment & vehicles	5	5
Adequacy of financial, managerial, and technical resources to successfully carry out the required services and meet required service standards.	10	7
Adequacy & quality of proposer's staffing, implementation & training plans.	10	8
Quality and reporting capabilities of the firms trip reservation software program	10	10
Adequacy of proposer's response to all other requirements, terms, and conditions of this Request for Proposal.	5	4
Price for Services	25	25
Total	100	90

COMMITTEE MEMBERS SIGNATURE: