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## REQUEST for QUALIFICATIONS

**DATE:** May 9, 2024

**TO:** ALL PROSPECTIVE GEOTECHNICAL ENGINEERING FIRMS

**Grady Health System is soliciting Qualifications for Geotechnical Engineering Services for the following project:**

**PROJECT:** Crestview Health & Rehabilitation Center Expansion

**PROJECT #:** TBD

**LOCATION:** 2800 Springdale Rd SW, Atlanta, GA 30315

### **Existing Facility**

Crestview Health & Rehabilitation Center, managed by Grady Health System, is a 2-level facility originally constructed in 1959. Crestview is currently 68,547 sf and is licensed for 388 beds.

### **Project Description:**

Grady seeks to expand and refresh Crestview to enhance services for patients transitioning from hospital care to independent living. The expansion project will include new ground-up construction and refresh of the existing building that aims to create a supportive environment equipped with specialized amenities and programs to facilitate the recovery and rehabilitation process for patients requiring sub-acute care and short-term rehabilitation services.

### **Goals of this Effort:**

The goals of the Crestview Health & Rehabilitation Center expansion effort are to:

- Enhance patient care and experience by providing specialized services and amenities tailored to the unique needs of transitional care patients.
- Expand facilities and programs to accommodate the growing demand for sub-acute care and short-term rehabilitation services in the community.
- Optimize operational efficiency and effectiveness by streamlining workflows and integrating innovative technology solutions into the facility design.
- Ensure regulatory compliance and safety standards to provide a secure environment conducive to patient recovery and rehabilitation.
- Promote community engagement and partnership to enhance access to care and support population health initiatives in the surrounding area.

- Sustain financial viability and growth by developing a sustainable business model that balances quality of care with fiscal responsibility.
- Achieve a 30% minority spend to Diverse Suppliers for the project.

**Tasks Included:**

The geotechnical engineering firm(s) will be responsible for providing comprehensive studies and reports for the expansion project, including but not limited to:

- Site investigation: Perform geotechnical investigations, such as soil borings, geophysical surveys, laboratory testing, etc.
- Geotechnical analysis: Run soil mechanics analysis, slope stability analysis, foundation design recommendations, etc.
- Produce a detailed geotechnical report to include executive summary to easily define and digest for consumption and future decision making.

Firms seeking to submit a proposal for GEOTECHNICAL SERVICES must be pre-qualified.

To become qualified, please submit a qualifications package meeting the following requirements:

1. Generally, describe your firm’s experience and expertise with geotechnical engineering and previous efforts performed pertaining to sub-acute transitional care facilities, rehabilitation facilities, or other similar patient-care environments.
2. Identify and describe three to five projects from your firm’s history which are of similar characteristics to this project. Explain how your experience from each will contribute to the success of this project. Also include reference contact information for each project.
3. Provide information on Sustainability efforts to include previously incorporated measures and best practices for projects with similar size and scope.
4. General explanation of your firm’s personnel resources, including quantities and respective office locations.
5. An organizational chart of the team your firm would propose for this project assignment.
6. One-page CV or resume of each team member
7. Qualifications Package “Cover Sheet” (below)
8. Appendix C – Contract Compliance Certification (below)
9. Appendix C-1 Business Identification and Nondiscrimination (below)

**Failure to provide the requested information will result in the submittal being determined nonresponsive.**

Please submit qualifications to **Sean Soares**, by email to [sean.soares@bdrpartners.com](mailto:sean.soares@bdrpartners.com) by **C.O.B Friday, 05/24/2024**.

You will be notified by **5:00pm, Friday, 05/31/2024**, if you have been prequalified and selected to proceed through next steps.

The schedule for the proposal submissions is as follows:

- Friday, 05/24/2024 – C.O.B. – Qualifications packages due
- Friday, 05/31/2024 – GMH notifies qualifying firms

- Wednesday, 06/05/2024 – Mandatory Pre-Proposal Meeting: 9:30am, Grady Facilities Development Offices, Third Floor, Hurt Building, 50 Hurt Plaza, Atlanta, Georgia, 30303

#### **PROCESS FOR SELECTION**

A selection team will evaluate and score each qualification submitted.

The scores will be made available upon request for your team following prequalification.

GHS-FD reserves the unqualified right to request additional information or meetings with any firm submitting qualifications.

**QUALIFICATIONS PACKAGE COVER SHEET**

Your company wishes to be pre-qualified as:

- Architect
- Engineer
- Parking Consultant
- Planning Firm
- Project or Program Management Firm
- Other: \_\_\_\_\_ (Please specify)

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

## **LOCAL, SMALL ECONOMICALLY DISADVANTAGED BUSINESS UTILIZATION**

It is an overall objective of The Grady Memorial Hospital Corporation, d/b/a Grady Health System (GHS) to encourage involvement by local, small, economically disadvantaged contractors and suppliers in business activities generated by GHS®, while assuring that such activities will be conducted in accordance with all applicable laws.

It is the declared policy and intent of GHS® to strive to maximize participation of local, small, economically disadvantaged businesses through all business contracting opportunities.

GHS® is committed to ensuring that local, small, economically disadvantaged businesses are given every opportunity to participate in contracting opportunities.

GHS® prohibits discrimination on the basis of race, color, gender, religion, national origin, or disability in connection with employment of any person, or the award of any contract.

GHS® will provide equal opportunities without regard to race, color, gender, religion, national origin, or disability, by requiring that any vendor doing business with GHS® provide equal opportunity to persons and businesses employed by, or contracting with the supplier of products and services to GHS® .

GHS® expects that the policies, programs and practices of its vendors/contractors are carried out in an equitable fashion and that local (Fulton County, DeKalb County, State of Georgia), small and economically disadvantaged business enterprises are afforded an equitable opportunity to share in contract/subcontract opportunities.

## **CONTRACT COMPLIANCE**

GHS® expects that the policies, programs and practices of its vendors/contractors are carried out in an equitable fashion and that local (Fulton County, DeKalb County, State of Georgia), small and economically disadvantaged business enterprises are afforded an equitable opportunity to share in contract/subcontract opportunities.

Vendors interested in doing business with GHS® are required to sign the Certification below and complete the Contract Compliance Section in its entirety and submit it with their proposal response.

## **ECONOMIC OPPORTUNITY PLAN**

IN ADDITION TO THE QUALIFICATIONS SUBMISSION REQUIREMENTS, EACH VENDOR MUST SUBMIT AN ECONOMIC OPPORTUNITY PLAN (APPENDIX C) WITH THEIR BID.

Required Forms required as part of your Qualifications Submittal and Economic Opportunity Plan Statement:

**In order for the proposal package to be considered complete Bidders must submit the following completed documents:**

- Appendix C – Contract Compliance Certification

- Appendix C-1 Business Identification and Nondiscrimination

**These documents are considered a part of and should be submitted with your qualifications package. Failure to provide the information on the part of the submitter will result in the submittal being determined non-responsive.**

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**APPENDIX C  
CONTRACT COMPLIANCE CERTIFICATION**

**CERTIFICATION:**

I certify that the statements made by me in this Contract Compliance Section are complete and true to the best of my knowledge and belief and are made in good faith. I understand that if I knowingly make any misstatements of facts, I am subject to debarment from participation in future GHS® contracting opportunities, held liable for breach of contract and subject to the enforcement of any remedies available under the contract or as a matter of contract law. I agree that no changes shall be made to this section without the written consent of GHS®.

Authorized Representative Signature

\_\_\_\_\_

Title: \_\_\_\_\_

Authorized Representative Printed Name

\_\_\_\_\_

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

**APPENDIX C-1: BUSINESS IDENTIFICATION AND NONDISCRIMINATION**

(TO BE SUBMITTED WITH QUALIFICATIONS)

Part I – Business Identification (definitions on Appendix C-2). Please indicate if your company qualifies as one of the business designations below:

	Yes	No												
<b>Small Business</b> If yes, please check the following reason(s) that apply: _____ Less than 100 Employees _____ Less than \$1,000,000.00 in gross annual receipts														
<b>Minority Business Enterprise</b> If yes, please indicate the percentage of minorities who own, control or operate your company: <table border="1" style="width:100%; margin-top:5px;"> <tr> <td>African American</td> <td align="center">%</td> <td>Asian American</td> <td align="center">%</td> </tr> <tr> <td>Hispanic/Latino</td> <td align="center">%</td> <td>Pacific Islander</td> <td align="center">%</td> </tr> <tr> <td>Native American</td> <td align="center">%</td> <td>Other</td> <td align="center">%</td> </tr> </table>	African American	%	Asian American	%	Hispanic/Latino	%	Pacific Islander	%	Native American	%	Other	%		
African American	%	Asian American	%											
Hispanic/Latino	%	Pacific Islander	%											
Native American	%	Other	%											
<b>FEMALE BUSINESS ENTERPRISE</b> If yes, please indicate the percentage of women who own, control or operate your company: _____%														
<b>LOCAL SMALL BUSINESS</b> If yes, please indicate in which county your company is located? _____ DeKalb _____ Fulton _____ Business location in both counties _____ Other														
<b>ARE YOU RESPONDING AS A CONSULTANT?</b>														
<b>IS YOUR COMPANY CERTIFIED AS ONE OF THE BUSINESS DESIGNATIONS ABOVE?</b> If yes, please give the certifying agency and include a copy of your current certification with your proposal response.														

Total percent of participation by one of the above listed designations \_\_\_\_\_%

**PART II - NONDISCRIMINATION POLICIES AND PROCEDURES**

	Yes	No
Are you an individual and do not employ anyone? If yes, you do not need to complete the remainder of the questions.		
Does your company have an Equal Employment Opportunity/Affirmative Action statement posted on company bulletin boards?		
Do you notify all recruitment sources in writing of your company's Equal Employment Opportunity/Affirmative Action employment policy?		
Do your company advertisements contain a written statement that you are an Equal Employment Opportunity/Affirmative Action employer?		
Do you belong to any unions? If yes, have you notified each union in writing of your commitments to non-discrimination?		
Does your company have a collective bargaining agreement with workers? If yes, do the collective bargaining agreements contain non-discrimination clauses and/or your Equal Employment Opportunity policy covering all workers?		
Does your company, at least annually, maintain a written record of and review the Equal Employment Opportunity policy and Affirmation Action obligations with all employees including those having any responsibility for employment decisions?		
Do you conduct, at least annually, an inventory and evaluation of minority and female personnel for promotional opportunities and encourage these employees to seek, train and prepare for such opportunities?		
Do you conduct, at least annually, a review, of all supervisors' adherence to and performance under the vendors, and contractor's Equal Employment Opportunity policies and Affirmative Action obligations?		
Is there a person in your company who is responsible for Equal Employment Opportunity? If yes, please give name, phone and email address.		

Please explain any no answers, use additional paper as necessary:

Authorized Representative Signature: \_\_\_\_\_

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

**END OF DOCUMENT**

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