REQUEST FOR PROPOSAL
RFP#: SV-2022-0307

Consulting Services in support of UC San Diego Health’s Clinical Services
Master Plan for the Hillcrest Campus

RELEASE DATE: Monday, March 7th, 2022
PROPOSAL DUE DATE: Monday, March 28th 2022 by 4:00 PM PST
1. Project Summary

UC San Diego Health (UCSDH) is publicly soliciting proposals from qualified consulting firms with strategic planning and healthcare facility master planning expertise to collaborate with UCSDH leadership to define the clinical services vision for the Hillcrest Campus, and to quantify the associated capacity needs to support that vision.

In this effort, the consultant will work with UCSDH to plan the following:

- The articulated vision for the Hillcrest Campus and new replacement hospital
- The future model of care for patients
- The role of each medical campus
- The distribution of hospital services across campuses
- Patient care capacity required on the Hillcrest Campus
2. RFP Schedule

UC San Diego Health will make every effort to adhere to the schedule below. However, UC San Diego Health reserves the right to modify these activities and dates at any time. All registered Bidders will be informed of changes to the schedule.

<table>
<thead>
<tr>
<th>RFP Milestone</th>
<th>Date</th>
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<tbody>
<tr>
<td>RFP issued via CalUsource.</td>
<td>Monday, March 7, 2022</td>
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<tr>
<td>Pre-Bid Zoom Conference and Q&amp;A</td>
<td>Monday, March 14th, 2022 at 11:00 AM PST</td>
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<tr>
<td>Deadline to submit written questions through Discussion Forum</td>
<td>Thursday, March 17th, 2022 by 4:00 PM PST</td>
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<tr>
<td>Final answers to Bidder questions posted in Discussion Forum</td>
<td>Monday, March 21st, 2022 by 4:00 PM PST</td>
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<td>RFP response deadline</td>
<td>Monday, March 28th, 2022 by 4:00 PM PST</td>
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<tr>
<td>Finalist Bidder Interviews</td>
<td>Week of April 11th, 2022 – April 15th, 2022 (finalists will be notified no later than Monday, April 4th)</td>
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<tr>
<td>Notice of intent to award</td>
<td>Friday, April 22nd, 2022</td>
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<td>Anticipated Contract start date</td>
<td>May 23rd, 2022</td>
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3. UC San Diego Health Overview

UC San Diego Health is one of five academic medical centers within the 10-campus University of California system. Collectively known as UC Health, these medical centers comprise the fourth largest health care delivery system in California and train nearly 50% of the state’s medical students and medical residents.

As part of a public trust organization, UC Health serves as a safety net for individuals in need. Nearly 60% of UC patients are covered by Medicare, Medi-Cal, or lack health insurance.

To fulfill our mission, UC San Diego Health currently maintains a two-campus strategy, integrating research, teaching, and clinical care at locations in Hillcrest and La Jolla. Each medical complex supports acute inpatient care and a spectrum of outpatient specialty medical and surgical services, including ambulatory, and emergency patient care.

Our hospitals operate under one license with a current combined inpatient capacity of 808 beds: UC San Diego Medical Center in Hillcrest (390 beds), Jacobs Medical Center (364 beds) and Sulpizio Cardiovascular Center (54 beds).
4. Project Overview

4.1. BACKGROUND

The main hospital building at the Hillcrest Campus was leased from the county in 1966 and purchased by UC San Diego in 1981. California Bill Senate Bill (SB 1953), passed in 1994, mandates all acute care hospitals in California become compliant with the seismic safety provisions of the California Building Standards Code (Title 24) by the year 2030. The existing inpatient tower and adjacent clinical spaces on the Hillcrest Campus cannot be renovated to meet all of these requirements and will therefore need to be demolished and replaced.

Hillcrest Hospital provides both highly specialized and basic services to the community, caring for 13,000 inpatients and 50,000 emergency visits annually. The Hospital is the only designated comprehensive emergency department in the County, and is one of three adult Level 1 Trauma centers, serving some of the most densely populated areas, including downtown San Diego. Hillcrest Hospital is the only adult and pediatric burn center in San Diego, Imperial, and Riverside Counties, treating about 450 patients per year and hundreds more as outpatients. The Hospital is the nearest acute care facility to more than 250,000 San Diego County residents.

The strategic redevelopment of the Hillcrest Campus requires a multi-phase construction effort spanning over approximately 15 years. In-construction currently is development of an on-campus 251,000 gross square foot (GSF) Outpatient Pavilion (OPP) that serves as the centralized home for existing and planned clinical services including multidisciplinary cancer care, specialty clinics, outpatient surgery, and imaging. The replacement Hillcrest Hospital represents the next major clinical construction project on the campus after the OPP.

4.2. OBJECTIVE

UCSDH’s intent is to retain a consulting firm with strategic planning and facility master planning qualifications and expertise to collaborate with UCSDH leadership to define the clinical services vision for the Hillcrest Campus, and quantify the associated capacity needs to support that vision. In this effort, the consultant will work with UCSDH to consider the following:

- How will demand for health care services grow or change in the next 5-10-20 years in UCSDH’s current and targeted markets?

- Given UCSDH’s mission, vision, and strategic goals, how will the services provided by UCSDH evolve over the next 5-10-20 years given the market demand? Which service lines are expected to grow and which ones will be maintained or deemphasized?

- What should the articulated vision for the new Hillcrest Campus hospital be as communicated to key internal and external stakeholders? What are the key components needed to support that vision and what are the implications for programmatic design/sizing?

- What should UCSDH’s patient delivery system look like in the future, in terms of number and location of patient care settings and sites (e.g., hospital campuses, ambulatory care)?
UC San Diego Health

- What role will each medical campus have within the system and how should hospital and other health services be distributed across campuses (e.g., tertiary vs. community, regional services vs. local services)?

- What will be the future model of care for patients and how will that impact the configuration of services across both Hillcrest and La Jolla campuses (e.g., beds required by acuity level, configuration of observation care, access points)?

- What is the existing patient care capacity within the system and are there opportunities to improve efficiencies?

- How much patient care capacity will be required in the future given projected demand and targeted productivity?

Answering these and other relevant questions will support the development of key program elements for the new Hillcrest Campus hospital and other facilities which will guide the design process when it is time to engage the architectural team.
5. Scope of Services

5.1. DESCRIPTION

UCSDH is soliciting via this Request for Proposal (RFP) a qualified consultant team to develop a Clinical Services Master Plan for inpatient, emergency, diagnostic/treatment, and support clinical services for its Hillcrest Campus, taking into consideration the inpatient/outpatient footprint of the La Jolla Campus and the health system’s broader regional network strategy. The Master Plan should include:

- Clear understanding of the role and distribution of services by campus or health care site
- Projected patient care volumes by service line and department
- Future model of care impacting patient care flow and settings
- Targeted operating characteristics and efficiencies
- Projected key rooms by functional area (e.g., beds, ORs, ED rooms, imaging rooms, etc.)

UCSDH’s Decision Support department will lead development of the financial analysis that evaluates the cost and feasibility of alternate scenarios developed during the consultant engagement. The consultant is expected to work collaboratively with UCSDH’s Decision Support department to ensure all meaningful assumptions and inputs are provided as part of the analysis process.

The scope of work outlined below is intended as a guide for the proposer. It is designed to identify minimum service level expectations from the successful firm and as such should be modified and augmented based upon the experience of the firm, as necessary, to successfully complete the project. Modifications to the phases, objectives, deliverables, etc. should be outlined clearly in the RFP response as part of the bidder’s “approach” to the project.

5.2. PHASING

The Clinical Services Master Plan is anticipated to consist of three phases.

Phase 1 planning will revisit the existing inpatient strategy for each medical campus developed by UCSDH in 2019/2020 in concert with Deloitte. The consultant will refresh assumptions based on market developments, update demand projections, and provide UCSDH with recommendations for service distribution between campuses and scenarios for future inpatient bed and other capacity at the Hillcrest campus based on data analysis and input from UCSDH leadership.

In Phase 1, the consultant will work with the Hillcrest Hospital Planning Executive Working Group which includes the UCSDH Chief Executive Officer, Chief Operating Officer, Chief Nursing Officer, Chief Strategy Office, Chief Financial Officer, Executive Lead(s) for the Hillcrest Campus, key departmental leaders, and perspectives from other stakeholders as necessary.
Phase 1 Deliverables

1. Market assessment that includes:
   - Inpatient market share and outmigration analysis by service line and geographic region
   - Current and projected population growth by age group for the target service areas defined in conjunction with UCSDH
   - Summary of current and future market bed capacity inclusive of UCSDH competitors
   - An analysis of how changes in health care policy, reimbursement, technology, changing care delivery models, competitor activity, and other factors will influence future demand for health care services
   - Projected inpatient, ED, surgery, other market demand at the service line and sub-service line level

2. Assessment of existing inpatient and other patient care utilization and capacity within the UCSDH system by campus

3. Scenarios for inpatient volume projections by campus through 2032-2042, by major service line, that takes into consideration the market assessment, current/projected market share by payer and geography, and input from UCSDH executive working group leaders and other staff

4. Initial inpatient bed need forecast by major service line based on volume projection scenarios by campus

The Phase 1 planning effort will take into consideration the 2019 Hillcrest Campus Long Range Development Plan (LRDP), the 2019 Inpatient Strategy Assessment, and other relevant planning studies. When preparing the above deliverables, the consultant team will work closely with UCSDH to leverage existing sources and reports, as available, to minimize rework.

In Phase 2, the consultant will incorporate the vision of key physician and administrative leaders within UCSDH in defining the future state of their specific program and Hillcrest Hospital overall. In this effort, the consultant will also obtain leadership perspective on Hillcrest Campus’ role in meeting UCSD’s academic mission via one-on-one meetings or focus groups. This information will be summarized and provided to the UCSDH executive working group, and integrated into the scenarios completed in Phase 1 as needed.

Phase 2 Deliverables

1. Vision documentation by service line/department for Hillcrest Campus and/or enterprise

2. Revised scenarios for inpatient volume and bed need forecast by major service line by campus; for Hillcrest Campus, scenarios to be further detailed by bed type and license category
3. La Jolla Campus impact assessment to define total capabilities roadmap for UCSDH inpatient services in San Diego County

**Phase 3** planning will build upon outputs from Phase 2 to provide UCSDH with an assessment of facility resource requirements for other key hospital program areas (e.g., emergency department, operating rooms). The consultant will engage with operational leaders in Phase 3 to inform the analysis and ensure findings are operational sound.

**Phase 3 Deliverables**

1. Volume projections and capacity needs for diagnostic and treatment (D&T) areas to support inpatient bed count and the Hillcrest vision that include:
   - Emergency department, by patient type (e.g., general, psychiatric, geriatric) and visit type
   - Inpatient and outpatient operating rooms by specialty and patient type
   - Inpatient and outpatient procedural areas by specialty (e.g., GI, pulmonary, cath/EP) and patient type
   - Imaging by modality and patient type
   - Other (e.g., observation beds, PFT, EEG/EMG, wound care, dialysis)

The Phase 3 planning effort will take into consideration ancillary UCSDH strategies related to ambulatory development, urgent care, FQHC partnerships, and other relevant activities that may impact D&T need and demand at Hillcrest Campus.

The preliminary schedule for all phases is up to 8 months to complete the work products and deliverables described above (Phase 1 anticipated at 2 months, Phase 2 at 3 months, and Phase 3 at 3 months).

In addition to meetings, interviews, onsite tours, and other activities related to the above scope of work, the consultant should anticipate periodic presentations or formal updates to the Executive Governing Board (EGB)/Executive Committee (EC) of UCSDH. These groups are composed of the full executive team of UCSDH, Department Chairs, UCSD Chancellor and Vice Chancellor, and will provide oversight to the Hillcrest Hospital planning project.

6. **RFP Administration**

6.1. **PROCUREMENT OFFICER**

UCSDH’s Procurement Officer designated below is responsible for the conduct of this procurement.

Brad Ouellet  
Director, Supply Chain Services  
E-Mail: bouellet@health.ucsd.edu

Bidders shall not contact any other employees of UC San Diego Health regarding this RFP.
6.2. Inquires, Clarifications, Requests for Information

UCSDH is administering this RFP through the joint University of California-California State University CalUSource system. All communications will be managed through the Discussion Forum for this RFP in CalUSource.

Bidders are expected to promptly review the RFP document, including all exhibits, and any addenda. If discrepancies, inconsistencies, or omissions are found, the Bidder shall immediately notify the Procurement Officer. If the Bidder has questions or requires clarification on the scope of work, the Health System’s intent, or any aspect of this procurement, they shall immediately notify the Procurement Officer. All questions, inquiries, or requests for clarification must be submitted through the Discussion Forum by the due date identified in the RFP Schedule. The Procurement Officer may respond to any such requests by issuing written addenda. Bidders should not rely upon any statements made by any person other than the Procurement Officer.

7. Overview of Selection and Award Process

Selection shall be made using the “Best Value” methodology focusing on the Bidder’s ability to differentiate itself based upon its ability to meet the Health System’s stated Critical Success Factors. This methodology consists of three primary stages: 1) Selection, 2) Clarification, and 3) Award

7.1. Selection:

UCSDH’s Selection committee will review all submitted bid materials with the exception of pricing. Committee members will award points to each section of the proposal. The Procurement Officer will award points for pricing proposals based on the UC Best Value methodology. Each Bidder’s total points will be calculated and the 3 highest points earning Bidders will move on to stage 2.

7.2. Clarification:

The second stage of the Best Value RFP methodology occurs prior to award with the highest three (3) point earning Bidders in the Selection stage. These Bidders will be required to present (via an online or in-person (TBD) interview with the UCSDH selection committee) their plan on how they will provide the services and deliverables on-time, without any cost increases, and meeting the project goals and quality expectations of UC San Diego Health. This period is provided to the Bidder to ensure that they have properly addressed and accounted for all aspects of the service in their proposal. Additional points will be awarded to Bidders based on the quality, clarity, and perceived relevance of the information presented in this stage.
7.3. AWARD

The third stage of evaluation begins with identifying an apparent awardee or highest total point earner inclusive of Selection Stage and Clarification stage scores. The apparent awardee will be required to execute the UC San Diego Health standard contract documentation that will govern the award. These documents are attached hereto as Exhibits A through D, and made part hereof by this reference.

- Exhibit A – UC Health Purchase Agreement
- Exhibit B – UC Health Terms and Conditions
- Exhibit C – Non-Clinical Health Requirements
- Exhibit D – Appendix BAA

8. Proposal Requirements, Format, and Submission

8.1. DATE, TIME, AND LOCATION

Bidders must submit the proposal packages through UC Public Bid Site, CalUsource, no later than the date and time indicated in the RFP Schedule.

When submitting through CalUsource, submissions will be time stamped with the time at the completion of the upload process, not the beginning. Bidders are strongly encouraged to complete and submit proposals in CalUsource well before the RFP due date, as the system prohibits submissions after the specified closing time.

8.2. PROPOSAL PACKAGE CONTENTS AND REQUIREMENTS

1. Provide profiles and resumes for the team that would be assigned to this project if awarded. Include title, a description of the proposed role on this project, and description of similar projects successfully completed by each team member.

2. Provide a minimum of five (5) healthcare client references capable of confirming the quality of your work on projects substantially similar in scope and complexity within the past five years. Include names, titles, and email addresses for at least one contact per reference.

3. Submit actual strategic plans produced for past clients (ideally, the references provided in item 2) that demonstrate your ability to deliver work product that meets UCSDH’s requested deliverables.

4. Provide a narrative response describing your proposed approach to this project. The proposal should articulate the assumptions, methods, and procedures that will be used to develop the deliverables for each phase of the project. The narrative response should at a minimum include the following key elements:
   - Bidder profile, including a summary of qualifications specific to this project
5. Pricing Proposal

Based upon your review of this RFP and your expertise in this field estimate the project cost range(s) for Phases 1-3, including travel and additional expenses (onsite visits, supplies).

- UCSDH is interested in Bidder’s cost factors (plus or minus) for the scope of services described within the RFP. UCSDH desires to acquire the most useful cost information possible to support its decision-making process concerning the development of a strategic plan.

- Identify any key assumptions or expectations that you have built into your pricing model.

- Set forth, by position, your hourly and daily rate for each level of personnel you anticipate utilizing on this engagement.

- Set forth by task the number of anticipated Proposer hours, level of personnel assigned, and estimated cost per task.

- Set forth your estimated total cost for the full scope of services contemplated by the RFP.
9. Additional Terms

**FIRM PROPOSALS**

Bidder’s pricing/fees/costs in response to this RFP shall remain firm for a period of one-hundred and twenty (120) days from the RFP due date.

**WORK MADE FOR HIRE**

Supplier acknowledges and agrees that any deliverables provided to UC by Supplier in the performance of the Agreement, and any intellectual property rights therein, (hereinafter the "Deliverables") will be owned by UC. The Deliverables will be considered "work made for hire" under U.S. copyright law and all right, title, and interest to and in such Deliverables including, but not limited to, any and all copyrights or trademarks, will be owned by UC. In the event that it is determined that UC is not the owner of such Deliverables under the "work made for hire" doctrine of U.S. copyright law, Supplier hereby irrevocably assigns to UC all right, title, and interest to and in such Deliverables and any copyrights or trademarks thereto.

**FOLLOW-ON WORK**

A Supplier that is awarded a consulting services or similar contract cannot later submit a bid or be considered for any work “required, suggested, or otherwise deemed appropriate” as the end product of the Services (see Public Contract Code Section 10515).

**UC TRAVEL POLICY AND LIMITS**

Any of Supplier’s expenses that UC agrees to reimburse will be reimbursed under UC’s Meal and Travel Expense Policy (see Article 3 of UC Terms and Conditions of Purchase).