The Rector and Visitors of the
University of Virginia
On behalf of its Medical Center

Request for Proposal #FJR-060618

Palliative Care Consulting Services

Issued By:
Medical Center Procurement
Division of Supply Chain Management
University of Virginia Medical Center
Charlottesville, Virginia

June 06, 2018
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A. GENERAL INFORMATION

Request for Proposal (RFP) Name: Palliative Care Consulting Services

RFP Number: #FJR060618

Issue Date: June 06, 2018

Brief Description: The Rector and Visitors of the University of Virginia, a Virginia public corporation, on behalf of its Medical Center (hereinafter “Medical Center”, “UVaMC”, “UH” or “University”) seek an experienced firm to satisfy the resource needs necessary to provide a palliative care program to reduce mortality rates and increase hospice referrals across the continuum of care. The intent is to perform a comprehensive assessment of our palliative care program to identify the status of our current state program against leading palliative care programs and to provide a future state recommendation on the best program structure and composition for UVaMC.

Pre-proposal Questions and Communications: Any questions and communications concerning this RFP must be sent to and through the Senior Contract Negotiator (SCN) listed below, or as otherwise indicated.

Proposal Due Date: The due date for this proposal is 5:00 p.m., June 27, 2018. Proposals are to be sent using the contact information below. By mail, provide minimum of (12) copies of each proposal and a full electronic version of the RFP, either sent electronically or on CD ROM with the response. The University of Virginia (the “University”) may, at its discretion, accept late proposals if it is determined to be in the best interest of the University.

Negotiations: On site negotiations, if needed, will be held on/during the week(s) of July 9th, 2018.

Expected Award Date: July 16th, 2018

Term of Agreement: The term of a resulting Agreement or Purchase Order will be for one year, with the ability to renew on the same terms and conditions, for one additional one-year period if mutually agreeable to the University and the Selected Firm. The Selected Firm and the University will mutually agree at least 180 days prior to each renewal period whether to renew the terms of the Agreement.

Refer all questions to: University of Virginia Medical Center
Department of Medical Center Procurement
1300 Jefferson Park Avenue, Room #1951
P.O. Box 800705
Charlottesville, VA 22903
This Request for Proposal (RFP) has been posted on Procurement Services web site for your convenience. Addenda and attachments are posted if issued. The RFP can be downloaded at this web site: http://www.healthsystem.virginia.edu/internet/scm. It is the firm’s responsibility to ensure that the latest version of the entire RFP and related links are reviewed prior to submission of a proposal. We encourage you to check the web site frequently for any changes prior to the due date. Call Marjorie Chambers (434) 924-9374 if you have trouble accessing the RFP from the web. For questions about the content of the RFP, contact Frank “Joe” Rodish listed above.

For ease of reference, each firm or individual receiving this RFP is referred to as a “firm” and the firm or individual selected to provide services for the University is referred to as the “Selected Firm.” This RFP states the instructions for submitting proposals and the procedure and criteria by which a firm may be selected.

Overview of the Medical Center:
1. UVaMC Locations and Services

The UVA Medical Center houses the outpatient and inpatient clinical portion of the University of Virginia Health System which also includes the Schools of Medicine and Nursing, the Claude Moore Health Sciences Library and the UVA Physicians Group (UPG). Inpatient and outpatient services are provided in a number of geographic locations which must be served by clinical and financial information systems. The Health System has routinely been included in rankings of high quality providers including Magnet recognition for superior nursing processes and quality patient, U.S. News and World Report’s Best Hospitals and Best Children’s Hospitals (7 nationally ranked specialties in 2016), and Best Doctors in America. Plans are underway for additional future facility and clinical program development which will be integral parts of the patient, family and clinician experience. The current and future array of services and sites include:

a. University Hospital (UH)

A full service, 10-story, 800,000 square foot academic medical center originally opened in 1989 offering the comprehensive array of inpatient and outpatient diagnostic, treatment and support services, serving a wide geographic region extending beyond Virginia into West Virginia, North Carolina, Maryland and beyond, including primary through quaternary care. It is staffed by more than 7,000 clinicians and staff, as well as over 1,000 volunteers. UH includes a Level I Trauma Center and a Level 4 Neonatal Intensive Care Unit. Ground and air transportation capabilities support and allow transport of patients from accident scenes, other hospitals and other locations. The inpatient services consist of approximately 600 beds. A hospital expansion project is underway that will renovate and expand the Emergency Department, expand interventional services and convert most of our semi-private patient rooms to private rooms. UH also has a 20 bed short stay unit, providing short term care for post procedure and observation patients.

b. UVA Children’s Hospital

UVA Children’s Hospital provides primary and specialty care in more than 30 specialties to children throughout Virginia. It is nationally ranked by U.S. News & World Report and includes a hospital-within-a-hospital at UVA Medical Center with 111 beds, a dedicated pediatric emergency department, a Neonatal Intensive Care Unit for infants, a Pediatric Intensive Care Unit for children younger than 18 and the UVA Child Health Research Center. The Battle Building, opened in 2014, consolidates outpatient children’s care at a single location in Charlottesville.

i. The 200,000-square-foot Battle Building at UVA Children’s Hospital is consolidating UVA's outpatient care for children. It brings together hundreds of doctors and healthcare staff devoted to caring for kids and families into a building designed to place children at ease and promote healing. Children can receive primary care as well as care from pediatric providers in dozens of specialties, including allergy, cardiology, hematology/oncology and teen health.
ii. Outreach Clinics – Physicians conduct Field Clinics throughout Virginia, providing pediatric subspecialty care in at least seven communities not able to support key subspecialties.

c. University of Virginia Outpatient Surgery Center

Located within the Battle Building, the Outpatient Surgery Center is comprised of twelve ORs and two procedure rooms as well as recovery room and related support services. A full array of anesthesia and surgical services is provided in this setting. Patients can be easily transported from the center to the UH if necessary for additional care or overnight stay if needed.

d. UVA Transitional Care Hospital

A 40 bed long term acute care hospital was established to expand the UH inpatient bed capacity and enhance operations and financial stability by relocating patients who require high intensity medical services with lengths of stay exceeding 25 days.

e. Emily Couric Clinical Cancer Center

The Emily Couric Clinical Cancer Center, located across the street from University Hospital, which provides the full array of services needed by patients with all kinds of cancer. The vision of those who planned the cancer center is that it will be “a place where families can come to be supported in their fight against cancer, knowing that they will receive the most advanced therapies possible. It is a place where their humanity will be valued, their individuality honored, and their intellectual, emotional, and spiritual struggle sustained.” The Emily Couric Clinical Cancer Center is designed to accommodate advances in such areas as genetic diagnosis and analysis, informatics, and molecular biology and is organized so that all disciplines and services can easily be brought to the patient to provide individualized care that is both sophisticated and tightly integrated. At the same time, the building is the center of a community that extends for hundreds of miles in all directions. The Emily Couric Clinical Cancer Center houses all outpatient services for adults diagnosed with cancer, including:

- Comprehensive services for patient-centered care
- Complete radiation-oncology treatment services
- Clinical trials office
- Complete patient and family services
- Clusters of exam and consultation rooms
- Telemedicine capabilities: Immediate and constant access to patient information is one of the most important conditions for the multidisciplinary care of cancer patients and is a foundation of success in this endeavor.

f. UVA-Health South Rehabilitation Hospital

A joint venture 40 bed rehabilitation hospital is located at Fontaine Research Park; this facility provides comprehensive rehab services for UVA and other patients needing such services who have been discharged by local hospitals.

g. Outpatient Services On Grounds

A wide variety of outpatient clinics are located in several sites in the vicinity of UVA. All are connected by enclosed walkways. The onsite clinics include:

- Primary Care Center – primary and specialty services located in a 125,000 square foot clinic adjacent to University Hospital; opened in 1977:
  - Dermatology
  - EEG and EP
  - Family Medicine
  - Heart and Vascular Center
  - Neurology
  - Gynecology
  - Pulmonary
  - Gamma Knife
• West Complex – an eight story 240,000 square foot facility constructed in 1960 and renovated over the past 20 years. Outpatient specialty services, in addition to administrative and office space, include:
  o Breast Care Center
  o Ophthalmology
  o Plastic Surgery
  o Kidney Center (Dialysis) and Kidney Center Clinic
  o Neurosurgery
  o Surgery Clinic
  o Urology
  o Transplant Clinic
  o Infectious Disease
  o Travelers Clinic

h. Outpatient Services Off Grounds

A need for additional space as well as a desire to be more accessible and convenient for patients resulted in the development and expansion of services in sites off the main UVA grounds:
  • Fontaine Research Park – subspecialty clinics, including Diabetes Education, Primary Care, ENT, PMR, Orthopedics, Hand Center, and Pituitary Clinic
  • Northridge – a 60,000 square foot medical office building located about 4 miles west from UVaMC, constructed in 1989 and including primary and subspecialty clinics:
    o Cardiology and Thoracic Cardiovascular Surgery
    o Internal Medicine
    o Ophthalmology
    o Pediatrics
    o Women’s Center – obstetrics, gynecology, Midlife Center, mammography
  • Orange – Medicine, pediatrics, some medical specialty clinics
  • Continuum Home Health & Home Infusion – home health provides services in 15 localities and home infusion in Virginia and North Carolina
  • Provider Based Primary Care locations – primary care practices located in communities surrounding Charlottesville operated as Provider Based Clinics, including Zion Crossroad Clinic, Stoney Creek Clinic, and Albemarle Family Medicine clinic
  • Regional Primary Care – seven primary care offices owned and managed by UPG located primarily in rural regions surrounding Charlottesville including the Shenandoah Valley
  • Telemedicine Program – UVA Health System provides telemedicine services throughout Virginia, serving rural communities and prisons with specialty care not routinely available.

i. UVA Imaging

A joint venture with Outpatient Imaging Associates (OIA) provides comprehensive imaging services at the Fontaine Research Park and Northridge. The UVA Department of Radiology provides medical staff for the centers, which provide accessible, patient-friendly services that are convenient for patients seen at UVA Clinics primarily at that location including Orthopedic Surgery and Physical Medicine and Rehabilitation.

j. Partnerships and collaborations

The MC has cultivated and values a distinct complement of partnerships and collaborations across the region. These include:
  • Novant Health UVA Health System – a regional health system that includes three medical centers
  • Collaborations for specialty care with Bon Secours Health System
  • Program of All-inclusive Care for the Elderly (PACE) a collaborative with JABA and Riverside Health
  • Radiosurgery Centers with Riverside Healthcare
  • Management services and medical direction for the stereotactic radiosurgery and stereotactic body radiotherapy services at Winchester Medical Center
  • Collaboration with Hospice of the Piedmont to provide a 10-bed inpatient hospice unit at the UVA Transitional Care Hospital
  • A pediatric liver transplant partnership with Children’s Hospital of Pittsburgh of UPMC
2. Customer Related Entities and Affiliates:

- **Related Entities.** UVa Physicians Group (UPG), its majority owned subsidiaries listed below, and the University's majority owned subsidiaries listed below shall hereinafter be referred to as "Related Entities." UPG is the University of Virginia Physicians Group, a Virginia not-for-profit corporation that furnishes clinical services, including the practice plan for physician faculty at the University. The majority owned subsidiaries are: Community Medicine University of Virginia LLC, Virginia Urologic Foundation and University of Virginia Imaging LLC.

- **Affiliates.** Customer Affiliates include but not be limited to, health care providers, of whatever legal form, that UVA or the Related Entities owns or controls, or with which UVA or the Related Entities has entered into an agreement for the furnishing of health care services (or services directly in support of health care services) for consideration, or which are physician practices which refer patients to the University, whether under the University's existing organizational and network structure or under future arrangements. Examples include Riverside UVA Radiosurgery. However, the term "Affiliate" does not include a Health Care Software Vendor or an entity that furnishes primarily data processing services as, or predominantly in the nature of, a data processing service bureau.

B. SCOPE OF GOODS & SERVICES

I. SCOPE OF GOODS AND SERVICES

The University of Virginia Medical Center is seeking a firm to satisfy the resource needs necessary to provide a palliative care program to reduce mortality rates and increase hospice referrals across the continuum of care. The intent is to perform a comprehensive assessment of our palliative care program to identify the status of our current state program against leading palliative care programs and to provide a future state recommendation on the best program structure and composition for UVAMC.

**Background**

Prior to 2017, palliative care at the University of Virginia Medical Center (UVAMC) was managed within the Department of Medicine and delivered by palliative care physicians in the inpatient setting. With UVAMC's transition to a service line structure in 2017, palliative care was identified and positioned as institutional service. Palliative care is currently managed by the Medical Center's Oncology administrator. Our palliative care physicians strive to prevent suffering for patients undergoing treatment for:

- AIDS
- Amyotrophic lateral sclerosis (ALS)
- Alzheimer’s disease
- Cancer
- Chronic obstructive pulmonary disease (COPD)
- End-stage kidney failure
- End-stage heart failure
- End-stage lung diseases

**Objective**

UVAMC leadership seeks to optimize our palliative care program to reduce mortality rates and increase hospice referrals across the continuum of care.

UVAMC seeks an experienced firm to perform a comprehensive assessment of our palliative care program to identify the status of our current state program against leading palliative care programs and to provide a future state recommendation on the best program structure and composition for UVAMC.

The selected firm will develop actionable improvement recommendations to close identified gaps between the current state program and the recommended future state program. Programmatic elements to be considered must include, but are not necessarily limited to: program structure, systems & tools, operational processes, education & training, and performance measurement/management.

**Future State Goals**

- Palliative care program optimized for UVAMC
Correct structure and organizational positioning
Right tools
Right resources
Efficient and effective processes
Right training
Right performance metrics

Scope
Program Structure:
- What is our optimal program structure?
- How should resources be aligned within our organization?
  - Best practice funding models for palliative care in academic medical centers
- What service lines should be supported?
- What patient populations should be supported?
- What services should be provided?
- What is the right mix of interventional and consultative care?
- How should training and program development be accomplished?
  - Near term
  - As the program matures
  - In the fully mature program
- How much palliative care outreach is optimal?
  - To which parties
  - Which media
  - By whom
  - What functions are optimally performed through outreach
- How much of the following care is right for UVAMC?
  - Inpatient Unit
  - Inpatient Consult Service
  - Outpatient Clinics
  - Telemedicine
  - Home Visits
  - Skilled Nursing Facility Consults
  - Where should each of these resources reside?
- What staff resources are necessary to support our optimal program?
  - Number of personnel and skill mix

Systems/Data:
- What system and tools are necessary enablers of a high performing palliative care system?
- What is the optimal support model for necessary systems and tools?
- What are the initial and ongoing costs of necessary systems and tools?

Operational Processes (Process, Policies, Procedures):
- What process, policies and procedures must be established in order to optimize the provision of palliative care
  - Inpatient protocols
  - Outpatient protocols
  - Oversight /management reporting
    - Performance management
    - Risk management

Education & Training:
- What education and training should be provided?
- To whom should specific education and training be provided?
- With what frequency should education and training be provided?

Performance Measurement/Management:
- What metrics should be used to manage and monitor program performance?
- What frequency should metrics be collected and reviewed?
Deliverables
- Kick-off meeting within 1st week of engagement
- Project Plan within 2nd week of engagement
- Comprehensive Program Current State Assessment and improvement recommendations covering, at a minimum:
  - Program structure & financial model
  - Systems & tools
  - operational processes
  - Education & training
  - Performance measurement/management
- Future State Program Recommendation covering, at a minimum:
  - Program structure
  - Systems & tools
  - operational processes
  - Education & training
  - Performance measurement/management
- Implementation roadmap to include sequencing, estimated resource requirements and costs
- Final presentation/discussion with UVAMC leadership

Please ensure that the following questions are answered and included in your response:

What is your experience in palliative care program development in academic medical center setting – inpatient, outpatient, community-based?
- What is your overall approach to assisting ORGANIZATION in the development of a palliative care program?
- What does your organization consider to be the key elements or pillars of palliative care program development and design?
- What is your approach to developing a targeted financial structure and program suitability to ensure successful implementation & appropriate models of care?
- What training resources or offerings can your organization provide or deliver to ORGANIZATION staff, including direct-delivery training as well as ongoing resources and curricula?
- How does your organization approach engaging potential participants and practitioners from across the continuum to generate consensus around program offerings, design and implementation?
- What are the key outcomes or quality indicators that are foundational for palliative care programs?
- What is your organization’s approach to developing measures and resource that can be leveraged to facilitate eventual deployment?
- Who are the subject matter experts/consultants you will deploy to support ORGANIZATION in this effort?

C. BASIS OF SELECTION
The Medical Center will evaluate proposals and, if a firm is to be selected, select the firm on the basis of:

1. The firm’s plan to assist the Medical Center to meet its goals and requirements as discussed in this RFP including its Section B: Scope of Goods and Services.
2. The firm’s relevant experience, qualifications and success in providing the goods and/or services outlined in this Request for Proposal.
3. The firm’s references from institutions of higher education, teaching hospitals, and clients who are comparable to the Medical Center.
4. The firm’s financial proposal.
5. The quality of the proposal, specifically, the provision, adequacy and completeness of your response.
6. The contractual terms that would govern the relationship between the Medical Center and the Selected Firm. The firm will be deemed to have fully accepted the Medical Center’s Contractual Provisions: http://www.medicalcenter.virginia.edu/scm/, unless specific modifications are requested in the firm’s written proposal, with an explanation as to why such modifications are required by the firm.
7. The firm’s Small, Woman-owned and Minority-owned (SWAM) businesses status and/or the firm’s plan for utilization of SWAM businesses.
8. Any other relevant factors as determined solely by the Medical Center.

D. CONTENTS OF PROPOSAL

Proposals should be prepared simply and economically, providing a straightforward, concise description of capabilities to satisfy the requirements of the RFP. Emphasis should be on completeness and clarity of content, and should be organized in the order in which the requirements are presented in the RFP. Firms should provide the following information:

1. A brief history of the firm and its experience, qualifications and success in providing the type of product requested.
2. A detailed description and the full specifications of the product/equipment/services proposed. Each firm should indicate in their proposal the firm’s ability to achieve / comply with each specification. In the event that the firm wishes to propose an alternate specification that, in any way, differs from the above specifications, the firm should detail their proposed change(s) and how the proposed change would compare to the listed specification. Proposals should be formatted in such a way to address each of the above specifications in a line-by-line process.
3. The estimated ship date of the product from the time of the order (i.e., 10 wks after order)
4. Information on the warranty associated with the product you are proposing and any extended warranty (include the price) that might be available.
5. The firm’s proposed price / fee for providing the Goods and Services, to include shipping charges (the University’s shipping terms are FOB Destination), and description of invoicing process.
6. The firm’s capacity for accepting electronic payments through Electronic Data Interchange (EDI) or Automated Clearing House (ACH) and any additional discounts that may result from paying electronically.
7. At least three references where similar goods and/or services have been provided. Include the name of the firm / organization, the complete mailing address, and the name of the contact person and their telephone number.
8. The firm’s Small, Woman-owned and Minority-owned (SWAM) businesses status and/or how the firm intends to utilize SWAM firms in regards to this particular procurement.
9. An authorized representative of the responding Firm shall sign proposals. All information requested should be submitted; the Medical Center may reject proposals that are substantially incomplete or lack key information.
10. Each copy of the proposal and all additional documentation submitted should be bound or contained in a single volume where practical. Responders shall provide minimum of (12) copies of each proposal and a full electronic version of the RFP, either sent electronically or on CD ROM with the response.
11. Ownership of all data, materials, and documentation prepared for the Medical Center pursuant to this RFP shall belong exclusively to the Medical Center. Once an award is announced, all proposals submitted in response to this RFP will be open to the inspection of any citizen, or any interested person, firm or corporation, in accordance with the Virginia Freedom of Information Act. Trade secrets or proprietary information submitted by a firm as part of its proposal will not be subject to public disclosure under the Virginia Freedom of Information Act if the firm invokes the protections of Virginia Code Section 2.2-4342(F) in writing and follows its stated requirements prior to or upon submission of its proposal. A firm may not request that its entire proposal be treated as a trade secret or proprietary information. Nor may a firm request that it’s pricing be treated as a trade secret or proprietary information, or otherwise be deemed confidential. The Medical Center shall, upon receipt of any request under the Virginia Freedom of Information Act for materials that the Firm has identified as trade secrets or proprietary information in conformity with the requirements of Virginia Code Section 2.2-4342(F), notify the Firm that a request has been received, before responding to the request. Except as may be required by applicable law, the Medical Center shall not voluntarily disclose the designated trade secrets or proprietary information without prior written approval of the Firm.
12. Complete and return the information requested in Attachment 1, Firm Information. State point of contact information to include name, address, office telephone number, mobile telephone number, facsimile number and email address.
13. Provide the Medical Center with a written statement of any requested modifications to the Medical Center’s Contractual Provisions: http://www.medicalcenter.virginia.edu/scm/ pursuant to C.6 above. Failure to provide
such a written statement will be deemed as full acceptance of the Medical Center’s Contractual Provisions without exception.

The Issuing Office for this Request for Proposal and the location to return the response to is:

U.S. Mail: All Other Deliverers:
Medical Center Procurement Medical Center Procurement
Division of Supply Chain Management Division of Supply Chain Management
University of Virginia Medical Center University of Virginia Medical Center
P.O Box 800705 1300 Jefferson Park Avenue, Room #1951
Charlottesville, Virginia 22908 Charlottesville, Virginia 22903

E. TERMS AND CONDITIONS

I. Awarded firms shall adhere to University and Medical Center Policies and procedures.

II. This solicitation and any subsequent award will be governed by:

   (a) The Selected Firm registering as a vendor with the University of Virginia Medical Center:
       http://www.healthsystem.virginia.edu/alive/scm/procurement.cfm
   (b) In addition to the Medical Center’s Contractual Provisions: http://www.medicalcenter.virginia.edu/scm/, the
       following Insurance provision will apply:

       **Insurance.** The Medical Center will not execute an Agreement or authorize the provision of goods and services until
       the Firm satisfies the insurance requirements of the Medical Center. In no event should the Selected Firm construe
       these minimum required limits to be their limit of liability to the Medical Center. The Medical Center reserves the
       right to approve any insurance proposed by the Selected Firm. The requirements are as follows:

       1. Automobile Liability insurance with a minimum combined single Limit of Liability for bodily injury and property
          damage of $750,000 per accident on all owned, hired, and non-owned vehicles operated by the Selected Firm’s
          employees;

       2. Commercial General Liability insurance with a minimum combined single Limit of Liability for bodily injury and
          property damage of $2 million per occurrence, to include premises/operations, products/completed operations,
          and contractual liability coverage and list the Medical Center as an additional insured, the proper name is: “The
          Commonwealth of Virginia, and the Rector and Visitors of the University of Virginia, its officers, employees and
          agents.”;

       3. Workers compensation coverage, (i) with Employer’s Liability coverage of at least $100,000 and (ii) which meets
          all statutory requirements.

       4. The Selected Firm will provide the Medical Center with a valid Certificate of Insurance evidencing all required
          coverage with its proposal, which shall remain in force throughout the terms of any resulting Agreement The
          Selected Firm shall only utilize insurers that hold at least an “A-“rating with A.M. Best Company. The Selected
          Firm shall notify the Medical Center in writing 30 days prior to the termination of any such insurance coverage
          for any reason whatsoever. The Selected Firm agrees to take no action that prohibits the utilization of this
          insurance or limits the liability of the Selected Firm for property damage or personal injury in conjunction with
          goods or services provided under this Agreement.

       5. For clinical services, the contractual medical malpractice insurance limit requirement is $2,000,000.

       6. For professional services, the Professional Errors & Omissions Liability insurance limit requirement is $1 million
          per claim.
ATTACHMENT 1

FIRM INFORMATION

Full Legal Name:______________________________________________________
(Company Name as it appears with Federal Taxpayer ID Number)

Address:________________________________________________________________

Telephone Number:______________ Fax Number:___________________________

Web Address:__________________________________________________________

eMail Address:________________________________________________________

DUNS Number:________________________________________________________

SWAM Information:

Is your firm certified with the Commonwealth of Virginia’s Department of Minority
Business Enterprises (DMBE):       YES___      NO____

Minority-Owned YES____   NO ____

Women-Owned   YES____   NO ____

Small –Owned     YES____   NO ____

Your firm’s point of contact for this proposal:

Name:____________________________________________________________

Address:__________________________________________________________

Office Phone:______________________________________________________

eMail: ____________________________________________________________
Greetings:

The quality of service the University of Virginia is able to deliver to its customers is directly related to the excellent support we receive from you and many other outstanding suppliers of goods and services. Without you, we would not be able to fulfill our educational, health care and research missions. An important part of our procurement program involves our commitment to doing business with small, women- and minority-owned (SWaM) businesses. As one of our most important vendors, we look to you to help us achieve this objective.

We conduct substantial business with small firms. We have a particular institutional focus on developing long-term business relationships with minority-and women-owned businesses. We count on our majority firms to help us achieve our goal.

I seek your assistance in two areas. First, to the extent practical, I ask that you involve small, women-and minority-owned businesses in the delivery of services you provide to UVa. The office of Procurement and Supplier Diversity Services is ready to assist you in identifying qualified diverse business partners. Second, I seek your help in reporting your results through our quarterly subcontracting reports. The terms and conditions previously provided to your organization outlined this process.

This effort is important to us. We depend on you in so many ways – this is another way that we can partner with your company to make things better.

Sincerely,

Colette Sheehy
Vice President for Management and Budget