ADDENDUM #4

December 1, 2020

TO: Potential Offerors

FROM: Cora Shirai, Contract Manager

RE: Solicitation Addendum #4 to RFP #21-01/IP Telephony System

This correspondence serves as Addendum #4 to the subject Request for Proposals (“RFP”). Your response to this RFP should be governed by the content of the original RFP and the revisions/corrections/additions/clarifications provided in this addendum notice.

The following questions were asked:

1. Q: Are there any floor plans, network diagrams, or other drawings available that we can have access to and review for the new site and branch sites?

A: We can provide paper copy of the floor plans for the hospitals. May need to sketch out the clinics.

1. Q: Are you interested in leveraging next generation technologies such as SIP trunks to take advantage of disaster recovery, mobility features, and potentially cut costs for PSTN access?

A: Yes.

1. Q: Are you interested in leveraging disaster recovery and survivability options at the remote locations?  i.e., survivable gateways with individual PSTN access for each site?

A: Yes.

1. Q: Is there a generator on site that will provide power should a prolonged power outage happen?

A: Each hospital has its own generator but not the clinics.

1. Q: When was the nurse call system last updated/upgraded or had maintenance work performed on it?  Is there a vendor/person we can contact to consult with regarding the nurse call integration to the new system?

A: The nurse call system was installed in 2018 and no upgrade has been made since.

1. Q: Are you interested in leveraging UC applications such as PC Attendant, Emergency On Site Notification, and or Call Center applications?

A: Yes.

Q: If so are you able to provide PC’s for the applications?

A: Yes.

1. Q: How many people will be requiring access to manage and maintain the system for simple moves, adds, and changes?

A: 8 staff.

1. Q: Do you have a specific PBX/UC vendor in mind?

A: No, we will accept what is proposed to us.

1. Q: Other than the nurse call system do you have any other types of peripheral equipment attached to the existing phone system? i.e., modems, music on hold, door phones, printers, paging systems, call accounting etc.

A: We have the code blue, paging system (amplifier and speakers), modems, music on hold.

1. Q: In the RFP you have listed the need for switches.  Is it only switches or do you need routers, wireless access points, and firewalls as well?

A: The new system will be on a separate network and will need switches and routers.

1. Q: If routers, switches, wireless, and firewalls are required are you interested in exploring a fully managed solution or do you prefer to own the gear outright?

A: Prefer to own the gear outright with support for the gear.

1. Q: Are all the sites connected via networking/TCPIP? Yes IE; MPLS, DSL, Point to Point circuits, and how much bandwidth runs between the sites?

A: Hospitals are connected through iNet (state network), and clinics are MPLS.

1. Q: For the rooms will you be reusing any existing analog sets or would like new analog room phones included in RFP response quote?  If so, how many?

A: Will be reusing existing analog phones in the patient rooms.

1. Q: Would you like training hours for the new system included for your staff?

A: Yes.

1. Q: Will all 3 locations require new CAT5/CAT6 Runs for the VoIP phones?

A: Yes, all locations will need new cable runs.

Q: If so how can we coordinate walkthroughs for all the sites to gather the requirements?

A: Yes.

1. Q: Do any of the locations have existing POE switches to power the VoIP phones or would you like us to quote switches for all locations?

A: The new system will be a separate network and will need new switches and should be included in the proposal.

1. Q: May we ask for a possible extension, taking into consideration of the release date of answers to our questions, the holiday period and the employees who will be taking time off? This potentially increases risk of a missed component for a proper RFP response.

A: Unfortunately, we will not be able to extend the closing date as the project is tied to a very tight financing deadline.