

To: Steve Rapson

Through: Ted L. Burgess *LB*From: Natasha M. Duggan *ND*

Date: April 20, 2022

Subject: Request for Proposal #2088-P: Paramedic Training and Certification

The Purchasing Department issued Request for Proposals #2088-P to contract with a provider for on-site training at the EOC for Emergency Medical Technicians and Paramedics. The Department emailed notices to 17 firms. An additional 888 were notified through the Georgia Procurement Registry using Commodity Codes #47549 (Medical Instructional Aids and Training Programs) and #92440 (Instructor-led classroom Training – Technical). Invitations were also extended via Channel 23, Georgia Local Government Access Marketplace (www.glga.org) and the Fayette County News.

One company submitted a proposal for on-site training with a cost of \$6,093.24. Fayette County Fire & EMS anticipates a minimum class size of 10 students. Seven of these students will be Fayette County employees and the other three seats will be filled by surrounding agencies' students.

The Fire / EMS Department recommends Faithful Guardian Training Center for the contract. A contractor evaluation is attached (Attachment 1).

Specifics of the proposed contract are as follows:

Contract Name	#2088-P: Paramedic Training and Certification		
Contractor	Faithful Guardian Training Center		
Not-to-Exceed Amount	\$42,652.68 (\$6,093.24 per student)		
Budget:			
	Fire	EMS	Total
Org Code	27030550	27230600	
Object	523600	523600	Seminars, Memberships & Dues
Amount	\$21,326.34	\$21,326.34	\$42,652.68
Requested FY23	\$23,000.00	\$23,000.00	\$46,000.00

Approved by: *[Signature]* Date: 4/21/22

*Note: Approval is conditional upon funds being budgeted and approved in Fiscal Year 2023 budget.

Place on County Administrator's Report? Yes (No)

On Agenda Dated: _____

FAYETTE COUNTY, GEORGIA CONTRACTOR PERFORMANCE EVALUATION

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1. Use this form to record contractor performance for any contract of \$50,000 or above.
2. The person who serves as project manager or account manager is the designated party to complete the evaluation.
3. This form is to be completed and forwarded to the Purchasing Department not later than 30 days after completion or expiration of a contract. Past performance is considered on future contracts.

VENDOR INFORMATION	COMPLETE ALL APPLICABLE INFORMATION
Company Name: Faithful Guardian Training Center	Contract Number: 1726-P
Mailing Address: 285 Carrollton St., Unit 106	Contract Description or Title: Paramedic Training
City, St, Zip Code: Temple, GA 30179	Contract Term (Dates) From: 10/7/2019-Present
Phone Number: 770-214-2252	Task Order Number: n/a
Cell Number:	Other Reference: for award of Contract 2088-P
E-Mail Address: info@faithfulguardian.com	

DEFINITIONS

OUTSTANDING – Vendor considerably exceeded minimum contractual requirements or performance expectations of the products/services; The vendor demonstrated the highest level of quality workmanship/professionalism in execution of contract.

EXCELLENT (Exc) - Vendor exceeded minimum contractual requirements or performance expectations of the products/services.

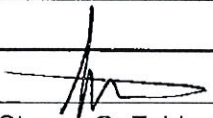

SATISFACTORY (Sat) - Vendor met minimum contractual requirements or performance expectations of the products/services.

UNSATISFACTORY (UnSat) - Vendor did not meet the minimum contractual requirements or performance expectations of the products and/or services; Performed below minimum requirements

EVALUATIONS (Place "X" in appropriate box for each criterion.)

Criteria (includes change orders / amendments)	Out-standing	Exc	Sat	Un-Sat	Not Apply
1. Work or other deliverables performed on schedule			X		
2. Condition of delivered products			X		
3. Quality of work			X		
4. Adherence to specifications or scope of work			X		
5. Timely, appropriate, & satisfactory problem or complaint resolution			X		
6. Timeliness and accuracy of invoicing			X		
7. Working relationship / interfacing with county staff and citizens			X		
8. Service Call (On-Call) response time			X		
9. Adherence to contract budget and schedule			X		
10. Other (specify):					
11. Overall evaluation of contractor performance			X		

EVALUATED BY

Signature: 	Date of Evaluation: 04/13/2022
Print Name: Steven G. Folden	Department/Division: Fire / EMS
Title: Asst. Chief - Administration 	Telephone No: 770-305-5173

	CONTRACTOR PERFORMANCE EVALUATION Explanation of Outstanding or Unsatisfactory Ratings	Page 2
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Company Name:

Contract Number:

EXPLANATIONS / COMMENTS

1. Do not submit page 2 without page 1.
2. Use this page to explain evaluations of *Outstanding* or *Unsatisfactory*.
3. Be specific (include paragraph and page numbers referenced in the applicable contract, etc.). Continue on separate sheet if needed (show company name and contract number or other reference)

None



Purchasing Department Comments (e.g. did the vendor honor all offers; submit insurance, bonds & other documents in a timely manner; and provide additional information as requested?):