



Address:
P.O. Box 1366
2519 State Road 16 W
Green Cove Springs,
Florida 32043

Phone: 904-529-5807
904-541-5807
Fax: 904-278-4731

County Manager
Howard Wanamaker

Commissioners:
Mike Cella
District 1

Wayne Bolla
District 2

Jim Renninger
District 3

Betsy Condon
District 4

Kristen Burke
District 5

www.claycountygov.com



NOTICE OF INTENDED SINGLE/SOLE SOURCE PURCHASE

Department: Public Safety

Purchase: Preventive Maintenance Program for Stryker Equipment

Supplier: Stryker Sales, LLC.

Short Description of the Commodity or Service Desired: Preventive Maintenance Program to maintain the readiness of the Stryker electrocardiogram devices (Basic Life Support and Advanced Life Support Units), and Power Pro and Power Load stretcher systems.

Amount: \$185,079.50 Per Year

If you believe you have a “like” good or service to offer, please submit descriptive literature and detailed technical specifications by email to purchasing@claycountygov.com

Purchasing Contact

Name: Alyssa Hamilton

Telephone: (904) 529-4220

Email: purchasing@claycountygov.com

Date Posted: October 12, 2022 12:00 pm

Last day for Receipt of Information: October 25, 2022 12:00 pm

Posted per Clay County Board of County Commissioners Purchasing Policy effective October 1, 2022.

CLAY COUNTY, FLORIDA

Single/Sole Source Request

Vendor: Stryker Sales LLC

Goods/Services: Service and Preventable Maintenance for Stretchers, power loads, AEDs, Cardiac Monitors, and Lucas devices

Estimated annual expenditure for the above goods or service: 185,079.50

Initial all entries below that apply to the proposed purchase. Attach a memorandum containing complete justification and support documentation as directed in initialed entry. (more than one entry may apply).

SINGLE/SOLE SOURCE REQUEST IS FOR THE ORIGINAL MANUFACTURER OR PROVIDER. (Attach the manufacturer's written certification as to single/sole source.)

1. [Signature] SINGLE/SOLE SOURCE REQUEST IS FOR THE ONLY REGIONAL DISTRIBUTOR OF THE ORIGINAL MANUFACTURER OR PROVIDER. (Attach the manufacturer's — not the distributor's — written certification that identifies all regional distributors.)
2. [Signature] THE PARTS/EQUIPMENT ARE NOT INTERCHANGEABLE WITH SIMILAR PARTS OF ANOTHER MANUFACTURER. (Attach memorandum describing basis for this request.)
3. _____ THIS IS THE ONLY KNOWN ITEM OR SERVICE THAT WILL MEET THE SPECIALIZED NEEDS OF THIS DEPARTMENT OR PERFORM THE INTENDED FUNCTION. (Attach memorandum describing basis for this request.)
4. [Signature] THE PARTS/EQUIPMENT ARE REQUIRED FROM THIS SOURCE TO PERMIT STANDARDIZATION. (Attach memorandum describing basis for this request.)
5. _____ NONE OF THE ABOVE APPLY. A DETAILED EXPLANATION AND JUSTIFICATION FOR THIS SINGLE/SOLE SOURCE REQUEST IS CONTAINED IN ATTACHED MEMORANDUM.

The undersigned requests that the vendor identified as the supplier of the goods or services described herein be authorized and approved as a single/sole source provider.

D. E. Motes

D. E. Motes (Oct 12, 2022 09:26 EDT)

DEPARTMENT/DIVISION SIGNATURE

Public Safety

DEPT./DIV.

COUNTY MANAGER SIGNATURE

DATE

For any anticipated Single Source or Sole Source purchases in an amount equal to or greater than \$50,000, a Notice of Intent to Single/Sole Source shall be posted on the County's website for at least seven (7) Business Days. If it is determined after reviewing information received from prospective Vendors that the Goods or Services are available only from a Single/Sole Source, a Notice of Intended Decision to Enter a Single/Sole Source Purchase shall be posted and brought before the Finance and Audit Committee for a recommendation to the Board.

(PURCHASING USE ONLY) SINGLE/SOLE SOURCE AUTHORIZATION

NOTICE OF INTENT DATE: _____

BCC APPROVAL DATE: _____



**Public Safety
Fire Rescue**

Address:
2519 State Road 16 West
PO Box 1366
Green Cove Springs, FL
32043

Phone: (904) 284-7703
Fax: (904) 284-7144

County Manager
Howard Wanamaker

Commissioners:

Mike Cella
District 1

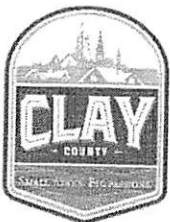
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MEMORANDUM

TO: Finance and Audit Committee
FROM: Charles LeRoy, Battalion Chief Logistics
DATE: October 12, 2022
SUBJECT: 2022-2024 Stryker Service Agreement Contract

Requested Action:

Consideration and approval of an agreement with Stryker Sales LLC for FY 2022-2024, a 2-year maintenance agreement, in the amount of: \$ 185,079.50 per year. This agreement does and has required advanced payment

Background:

Clay County Fire Rescue (CCFR) currently utilizes Stryker electrocardiogram devices on Basic Life Support (BLS) and Advanced Life Support (ALS) units, for cardiac rhythm interpretation and to facilitate patient care. CCFR also utilizes Power Pro and Power Load stretcher systems in all of our transport units. CCFR was able to obtain Stryker Lucas CPR devices last year with CARES funding. This equipment has proven to be reliable and has provided great service. We are requesting continuance of the preventive maintenance program to maintain the readiness of the equipment. This provides for coverage for both the cardiac related devices and Stretchers.

These goods and services are essential to the operation of Fire Rescue and are only available if advance payment is made.

Stryker is the original equipment manufacturer and the sole provider for replacement parts.

Agreement Term:

October 1, 2022 through September 30, 2024

Funding Source:

CC1169-546100: General Fund Rescue-Repair and Maintenance
CC1154-546100: Fire MSTU-Fire Control- Repair and Maintenance



ProCare® Services

3800 E. Centre Ave.
Portage, MI 49002 USA
1-800-STRYKER
stryker.com

To:	Whom it may concern
Subject:	Emergency Care Parts and Service
Date:	January 1, 2022

Stryker is the only factory authorized service provider with access to proprietary software necessary to perform proper maintenance and repairs. This proprietary software manages device configurations, error codes, etc. We do not, will not and cannot sell this proprietary software to anyone and only Stryker's ProCare Service Team has access to this tool.

Stryker employs its own field service team (known as ProCare Services) to service its products. Stryker only uses OEM parts for repairs and has exclusive use of certain proprietary tools for diagnostics and repairs. Stryker Emergency Care products that require the use of such proprietary tools include, but are not limited to:

- Power-LOAD fastener
- Power-PRO cot
- LUCAS 3 chest compression system
- LIFEPAK 15 monitor/defibrillator
- LIFEPAK 20e monitor/defibrillator
- LIFEPAK 1000 defibrillator
- LIFEPAK CR Plus / LIFEPAK CR2 defibrillator

Tooling is calibrated, documented and controlled by Stryker's home offices in Portage, MI, USA and Redmond, WA, USA. Calibration records and training records are available upon request.

Service repairs are documented and reviewed by Stryker's quality team. To help ensure Stryker's commitment to quality, Stryker tracks and trends its service to help ensure the highest level of product performance for its customers. Preventive maintenance (PM) and service history documentation is available upon request.

The Quality Management System of Stryker's Medical division is ISO 13485:2016 certified.

Please contact your local Stryker representative with questions.

Tom Tackabury

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