



Health Services
LOS ANGELES COUNTY

May 13, 2014

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Board of Supervisors**

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To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.



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The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

**APPROVAL OF AN AMENDMENT WITH SODEXO AMERICA,
LLC TO ADD HOUSEKEEPING SERVICES
(SUPERVISORIAL DISTRICTS 3, 4, AND 5)
(3 VOTES)**

SUBJECT

Request approval of an Amendment to add housekeeping services to the existing Proposition A Agreement with Sodexo America, LLC for Harbor-UCLA Medical Center's new Surgery/Emergency Building.

IT IS RECOMMENDED THAT THE BOARD:

1. Make a finding pursuant to Los Angeles County Code Section 2.121.420 that the continued provision of housekeeping services, as described herein, continues to be performed more economically by an independent contractor.
2. Approve and instruct the Chairman of the Board to sign the attached Amendment No. 5 (Exhibit I), to Proposition A (Prop A) Agreement No. 77855 with Sodexo America LLC (Sodexo), effective upon approval by the Board, for the continuation of housekeeping services at Harbor-UCLA Medical Center's (H-UCLA MC) new Surgery/Emergency (S/E) Building. The cost to provide additional housekeeping services for the S/E Building is \$1,851,458 annually, which includes \$168,314 for contingency due to emergencies or expanded work, increasing the annual maximum obligation from \$13,209,250 to \$15,060,708 (Attachment A).

ADOPTED

BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

26 May 13, 2014

Sachi A. Hamai
SACHI A. HAMAI
EXECUTIVE OFFICER

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS

Approval of the first recommendation is necessary to comply with Los Angeles County Section 2.121.420, which requires that contracting under Proposition A (Prop A) be cost effective and operationally feasible. The Department of Health Services (DHS) and the Auditor-Controller (Auditor) have made the determination that adding these services to the Agreement continues to be cost-effective and operationally feasible and Attachment B provides the cost analysis.

Approval of the second recommendation will allow the Chairman to execute an Amendment with Sodexo for the continuation of housekeeping services at H-UCLA MC new S/E Building. The new S/E Building opened to the public April 20, 2014. DHS will be using delegated authority to begin the expanded housekeeping services on an interim basis and is now seeking Board approval for an increase of the maximum obligation to pay for the continuation of services at the new cost.

Implementation of Strategic Plan Goals

The recommended actions support Goal 1, Operational Effectiveness, of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

The cost for the additional housekeeping services is \$1,851,458 annually, which includes \$168,314 for contingency due to emergencies or expanded work, increasing the total annual maximum obligation from \$13,209,250 to \$15,060,708 (Attachment A).

Funding is included in the Fiscal Year (FY) 2013-14 Final Budget and will be requested in future fiscal years as necessary. Contingency due to emergency or expanded work will only be requested up to the available funding.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The Agreement may be terminated for convenience by the County in its sole discretion, with no less than ten (10) days' written notice.

County Counsel has reviewed and approved the recommended Amendment, set forth in Exhibit I, as to form.

It has been determined that the provision of services by the Contractor under the recommended Agreement is subject to Prop A guidelines which include the Living Wage Program set forth in Los Angeles County Code Chapter 2.201. Contractor is in compliance with the Living Wage Program requirements.

CONTRACTING PROCESS

The current Agreement was approved by the Board on October 30, 2012. Sodexo was selected following a competitive solicitation process. This Agreement will remain in effect until October 29, 2017.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommendations will ensure that housekeeping services are provided for the new S/E Building.

Respectfully submitted,



Mitchell H. Katz, M.D.
Director

MHK:tvf

Enclosures (3)

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Department of Public Health

**COST TO ADD HOUSEKEEPING SERVICES TO THE
NEW SURGERY/EMERGENCY (S/E) BUILDING AT HARBOR-UCLA MC
AGREEMENT 77855
BUDGET SUMMARY**

SODEXO- Group 1 DHS Facilities: Olive View-UCLA MC, Mid-Valley HC, and San Fernando						
SODEXO - Group 3 DHS Facilities: Harbor-UCLA MC, Long Beach CHC, and Lomita Family HC						
(A)	(B)	(C)	(D)	(E)	(F)	(G)
DHS Annual Agreement Sum (Original Base)	DHS Annual 10% Contingency (First Year Original Amount)	Amendment Annual Cost To Add New S/E Building at Harbor-UCLA MC	DHS Annual 10% Contingency Increase*	Amendment Annual Cost To Add New S/E Building at Harbor-UCLA MC & 10% Contingency Increase*	DHS Total Cost Including 10% Contingency*	Annual Maximum Obligation Including 10% Contingency*
Group 1	\$6,091,267	\$609,127	\$0	\$0	\$0	\$6,700,393
Group 3	\$5,776,203	\$577,620	\$1,683,144	\$168,314	\$1,851,458	\$8,205,282
Total	\$11,867,470	\$1,186,747	\$1,683,144	\$168,314	\$1,851,458	\$14,905,675

*10% Contingency is for emergency or expanded work (e.g. additional space opened at existing facility)

SODEXO- Group 1 DPH Facilities: Burbank HC, Glendale HC, N. Hollywood HC, and Pacoima HC			
(H)	(I)	(J)	(K)
DPH Annual Agreement Sum	DPH Annual 10% Contingency	DPH Total Cost Including 10% Contingency	DPH Annual Maximum Obligation
Group 1	\$140,939	\$14,094	\$155,033
Total	\$140,939	\$14,094	\$155,033

*10% Contingency is for emergency or expanded work (e.g. additional space opened at existing facility)

	Total (A+B+K)
Original Annual Maximum Obligation Including 10% Contingency For DHS & DPH :	\$13,209,250
	Total (G+K)
New Annual Maximum Obligation Including 10% Contingency For DHS	\$15,060,708

**Department of Health Services Proposition A - Housekeeping Services
Cost Analysis Summary for the New Surgery/Emergency (S/E) Building
at Harbor-UCLA Medical Center**

Group 3 DHS Facilities: Harbor-UCLA MC, Long Beach CHC, and Lomita Family HC				
Adding New Surgery/Emergency (S/E) Building at Harbor-UCLA MC				
	Total Estimated Avoidable Costs	Total Cost to Add S/E Building (includes Cost for Annual 10% Contingency)*	Estimated Savings From Contracting	Percentage Savings*
Total	\$2,288,763	\$1,851,472	\$437,291	19.11%

*The annual Contractor Costs in the cost analysis of \$1,851,472 does not tie to the reported amount of \$1,851,458 in DHS' Board Letter due to rounding from calculations in the cost analysis.

AGREEMENT BY AND BETWEEN
COUNTY OF LOS ANGELES
AND
SODEXO AMERICA, LLC.
FOR
HOUSEKEEPING SERVICES

GROUPS 1

OLIVE VIEW-UCLA MEDICAL CENTER
MID-VALLEY COMPREHENSIVE HEALTH CENTER
SAN FERNANDO HEALTH CENTER
BURBANK HEALTH CENTER
GLENDALE HEALTH CENTER
NORTH HOLLYWOOD HEALTH CENTER
PACOIMA HEALTH CENTER

GROUPS 3

HARBOR-UCLA MEDICAL CENTER
LONG BEACH COMPREHENSIVE HEALTH CENTER
LOMITA FAMILY HEALTH CENTER

Amendment No. 5

THIS AMENDMENT is made and entered into this 13th day of May,
20 14 (hereafter "Execution Date"),

By and between

COUNTY OF LOS ANGELES
(hereafter "County"),

And

Sodexo America, LLC
(hereafter "Contractor")

Business Address:
600 City Pkwy W
Suite 610
Orange, CA 92868

77855 SUPPLEMENT 1

WHEREAS, the County and Contractor, entered into an Agreement to provide "Housekeeping Services for Group 1 which includes: Olive View-UCLA Medical Center, Mid-Valley Comprehensive Health Center, San Fernando Health Center and Burbank, Glendale, North Hollywood, and Pacoima Health Centers; and for Group 3 which includes: Harbor UCLA Medical Center, Long Beach Comprehensive Health Center; and Lomita Family Health Center," dated October 30, 2012 and further identified as Agreement No. 77855, and any amendments thereto (all hereafter referred to as "Agreement"); and,

WHEREAS, it is the intent of the parties hereto to amend Agreement to add Housekeeping Services to the new Surgery/Emergency building at Harbor-UCLA Medical Center, to increase the Agreement maximum by \$1,683,144 annually in order to pay for the new service area, and to provide for the other changes set forth herein; and

WHEREAS, Agreement provides that changes in accordance to Paragraph 8.1, Amendments may be made in the form of an Amendment which is formally approved and executed by the parties; and

NOW, THEREFORE, THE PARTIES HERETO AGREE AS FOLLOWS:

1. This Amendment shall commence and be effective upon the Execution Date.
2. Agreement, Paragraph 5.0, Agreement Sum, Billing and Payment, Subparagraph 5.1.1, Maximum Obligation of County For Basic Housekeeping Services, is deleted in its entirety and replaced as follows:

"5.1.1 Maximum Obligation of County For Basic Housekeeping Services

- 5.1.1.1 Between October 30, 2012 through May 31, 2014, the maximum obligation of County for all Basic Housekeeping Services shall not exceed \$17,011,912.75, due to Service Start Date of January, 1, 2013.
- 5.1.1.2 Between June 1, 2014 through October 29, 2017 the maximum obligation of County for all Basic Housekeeping Services shall not exceed \$46,779,472.75."

3. Agreement, Paragraph 5.0, Agreement Sum, Billing and Payment, Subparagraph 5.1.3, is deleted in its entirety and replaced as follows:

“5.1.3 Additional Authorized Services

5.1.3.1 Between October 30, 2012 through October 29, 2013 the Director, or his designee, may increase County's obligation under this Agreement by no more than \$1,200,840.91 for Additional Housekeeping Services when the need arises out of Emergency or Expanded services (e.g., adding additional areas in a facility or lengthening of service hours). To implement such an authorization, an Amendment to the Agreement shall be prepared in accordance to Subparagraph 8.1.4 and the specific amount authorized shall be set forth in Exhibit B-1(A) or Exhibit B-2(D).

5.1.3.2 Between October 30, 2013 through October 29, 2014 the Director, or his designee, may increase County's obligation under this Agreement by no more than \$1,270,971.91 for Additional Housekeeping Services that arises out of Emergency or Expanded services (e.g., adding additional areas in a facility or lengthening of service hours). To implement such an authorization, an Amendment to the Agreement shall be prepared in accordance to Subparagraph 8.1.4 and the specific amount authorized shall be set forth in Exhibit B-1(A) or Exhibit B-2(D).

5.1.3.3 Between October 30, 2014 through October 29, 2017, the Director, or his designee, may increase County's obligation under this Agreement by no more than \$1,369,155.30 annually for Additional Housekeeping Services that arises out of Emergency or Expanded services (e.g., adding additional areas in a facility or lengthening of service hours). To implement such an authorization, an Amendment to the Agreement shall be prepared in accordance to Subparagraph 8.1.4 and the specific amount authorized shall be set forth in Exhibit B-1(A) or Exhibit B-2(D).”

4. Agreement, Exhibit B, Housekeeping Services Pricing Sheet Summary (Groups 1 and 3) is deleted and replaced in its entirety by Exhibit B (A) attached hereto and incorporated herein by reference. All references to Exhibit B in the Agreement shall hereafter be replaced by Exhibit B (A).

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be executed by its Chair and Contractor has caused this Amendment to be executed in its behalf by its duly authorized officer, the day, month, and year first above written.

I hereby certify that pursuant to Section 25103 of the Government Code, delivery of this document has been made.

SACHI A. HAMAI
Executive Officer
Clerk of the Board of Supervisors

By Carla Little
Deputy



COUNTY OF LOS ANGELES

By: Alan Krabe
Chairman, Board of Supervisors

CONTRACTOR

SODEXO AMERICA, LLC

By: [Signature]
Signature

Jeff Paulson
Printed Name

Division President, West
Title

ATTEST:
SACHI A. HAMAI
Executive Officer of the
Board of Supervisors of
The County of Los Angeles
By Carla Little, Deputy

ADOPTED
BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

APPROVED AS TO FORM:

26 MAY 13 2014

John Krattli
County Counsel

Sachi A. Hamai
SACHI A. HAMAI
EXECUTIVE OFFICER

By Sharon Reichman
(Sharon Reichman, Assistant County Counsel)

**STATEMENT OF WORK
FOR
HOUSEKEEPING SERVICES**

GENERAL TERMS

GROUP 1

**OLIVE VIEW-UCLA MEDICAL CENTER
MID-VALLEY COMPREHENSIVE HEALTH CENTER
SAN FERNANDO HEALTH CENTER
BURBANK HEALTH CENTER
GLENDALE HEALTH CENTER
NORTH HOLLYWOOD HEALTH CENTER
PACOIMA HEALTH CENTER**

GROUP 3

**HARBOR-UCLA MEDICAL CENTER
LONG BEACH COMPREHENSIVE HEALTH CENTER
LOMITA FAMILY HEALTH CENTER**

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STATEMENT OF WORK (SOW)
GENERAL TERMS**

TECHNICAL EXHIBITS

SPECIFIC WORK REQUIREMENTS AND FACILITY DESCRIPTIONS

GROUP 1

Exhibit C-1.1	Olive View-UCLA Medical Center
Exhibit C-1.2	Mid-Valley Comprehensive Health Center
Exhibit C-1.3	San Fernando Health Center
Exhibit C-1.4	Burbank Health Center
Exhibit C-1.5	Glendale Health Center
Exhibit C-1.6	North Hollywood Health Center
Exhibit C-1.7	Pacoima Health Center

GROUP 3

Exhibit C-2.1	Harbor-UCLA Medical Center
Exhibit C-2.2	Long Beach Comprehensive Health Center
Exhibit C-2.3	Lomita Family Health Center

STATEMENT OF WORK (SOW)**GENERAL TERMS****1.0 SCOPE OF WORK**

Contractor shall provide Housekeeping Services for the health care facilities listed in the Agreement. The services shall consist of all labor, supervision, equipment, materials, supplies and other services necessary for Contractor's performance under this Agreement. These services include but are not limited to: Cleaning of inpatient/patient care areas, general service/ancillary service areas/ambulatory care clinics, non-patient/non-public areas, and miscellaneous services such as pest extermination, parking lot and interior street (internal to a Facility campus) cleaning, and window washing.

2.0 RESPONSIBILITIES

The County's and the Contractor's responsibilities are as follows:

COUNTY**2.1 Personnel**

The County will administer the Agreement according to Agreement Paragraph 6.0 - Administration of Agreement - County. Specific duties will include:

- 2.1.1 Monitoring the Contractor's performance in the daily operation of this Agreement.
- 2.1.2 Providing direction to the Contractor in areas relating to policy, administration and procedural requirements.
- 2.1.3 Preparing Amendments in accordance with the Agreement Paragraph 8.0, Standard Terms and Conditions, Subparagraph 8.1 - Amendments.

2.2 Furnished Items**2.2.1 Keys**

The County will provide two (2) sets of keys for access to all Facilities at no cost to the Contractor. The Contractor shall acknowledge receipt of the keys on a memorandum furnished by the County. All such keys are property of the County and shall be returned to the County Agreement Project Manager upon termination of the agreement. **At no time are the keys to be duplicated by the Contractor.** Any lost key(s) will be

replaced by the County at the expense of the Contractor at the same current replacement cost that the County pays including the cost of any re-keying associated with the lost key. If a key is bent/broken/damaged in any way, a new one shall be re-issued and receipt acknowledged once the damaged key is returned. The Contractor accepts full responsibility for all keys issued.

2.2.2 Utilities

The County will provide all utilities, including gas, electricity, and water. At no time are County telephones, computers or any County peripherals to be used for personal use. Contractor will make every effort to assist County in conservation efforts by employing measures designed to lower the use of gas, electricity and water. Additionally, Contractor will continuously measure and assess how its operations at each Facility can be conducted in a manner to reduce the carbon footprint of the provision of Housekeeping Services. The County shall be responsible for maintaining fixed equipment including, but not limited to, plumbing, electrical, soap dispenser, etc. The Contractor shall inform the County of any repairs required for these fixtures within twenty-four (24) hours of their discovery.

2.2.3 Storage

The County will provide a storage area to the Contractor at each facility if available, as determined by the County. The storage area is to be used for housekeeping related items and by personnel assigned to the specified building. Contractor must maintain and label items in accordance with State, Federal, and local standards. The Contractor is prohibited from use of said storage area or any other County property for conducting his/her business interests that are not related to or required by the specified Facility.

CONTRACTOR

2.3 Contractor Project Director

The Contractor shall provide a Contractor Project Director. The County must have access to the Contractor Project Director during business hours. The

Contractor shall provide a telephone number where the Contractor Project Director may be reached on a twenty-four (24) hour per day basis.

2.3.1 The Contractor Project Director shall be experienced in applicable regulatory requirements and guidelines for housekeeping in health care facilities which includes, but is not limited to, compliance with mandates of the following: Cal-OSHA, Centers for Disease Control & Prevention, National Institutes of Health, Joint Commission Standards, and Elements of Performance, California Code of Regulations, Title 22, Division 5, and all other applicable regulatory requirements.

The Contractor Project Director shall ensure all the Agreement objectives are met and will communicate with the Contractor Project Manager, as appropriate.

2.3.2 **Contractor Project Manager**

The Contractor shall provide a full-time Contractor Project Manager and a designated alternate(s), (collectively “Contractor Project Manager”). The County must have access to the Contractor Project Manager during all hours, 365 days per year. The Contractor shall provide a telephone number where the Contractor Project Manager may be reached on a twenty-four (24) hour per day basis.

2.3.3 The Contractor Project Manager shall be experienced in applicable regulatory requirements and guidelines for housekeeping in health care facilities which includes, but is not limited to, compliance with mandates of the following: Cal-OSHA, Centers for Disease Control & Prevention, National Institutes of Health, Joint Commission Standards and Elements of Performance, California Code of Regulations, Title 22, Division 5, and all other applicable regulatory requirements.

2.3.4 The Contractor Project Manager will be the central point of contact with the County for all Housekeeping matters as appropriate.

2.3.5 The Contractor Project Manager and/or designated alternates shall have full authority to act for the Contractor and will manage all

activities relating to the daily operation for all Facilities specified in the Agreement. The Contractor Project Manager will need to coordinate with Facility management to schedule/plan various tasks which could impact/interfere with the delivery of services at each Facility, (i.e., arranging access to various areas of each Facility to address large area floor/carpet maintenance and cleaning), and work with operations staff to minimize the impact of such cleaning/maintenance on the services being delivered at each Facility

2.3.6 The Contractor Project Manager will attend all regularly scheduled Facility Administrative Staff meetings. Contractor Project Manager will actively participate in annual or regularly scheduled audits by all regulatory and accreditation bodies, including, but not limited to, the State of California, The Joint Commission, Centers for Medicare and Medicaid Services, etc. Additionally, this will include participating in all Sentinel Event, Infection Control and Facility injury investigations as appropriate and as requested by the Facility.

2.3.7 The Contractor Project Manager/alternate shall be able to effectively communicate in English, both orally and in writing.

2.4 Contractor Personnel

2.4.1 The Contractor shall assign a sufficient number of employees to perform the required work. At least one supervising employee on site shall be authorized to act for the Contractor in every detail and all Contractor staff must speak and understand English, both orally and in writing.

2.4.2 The Contractor shall be required to background check their employees and shall not assign any employee to a County facility whose background is incompatible with services at the facility. This requirement is in addition to any County performed background clearance pursuant to Agreement Paragraph Section 7.5, Backgrounds and Security Investigations.

2.4.3 The Contractor is responsible for ensuring that **only** personnel assigned to provide Housekeeping Services in the Facilities are Contractor's

Housekeeping employees, specialty crew or specialty subcontractors. Refer to the Performance Requirements Summary.

- 2.4.4 The County may, at any time, give the Contractor written notice to the effect that the conduct or action of a designated employee of the Contractor is, in the reasonable belief of the County, detrimental to the interest of the health care Facility. The Contractor shall meet with representatives of the County to consider the appropriate course of action with respect to such matters and the Contractor shall take reasonable measures to assure the County that the conduct and activities of the Contractor's employee shall not be detrimental to the Facility.
- 2.4.5 Contractor's employees shall be at least eighteen (18) years of age, and the ability to provide verification of US citizenship or the right to work in the United States.
- 2.4.6 Contractor's employees shall be closely monitored to detect operational irregularities and noncompliance with contractual requirements. It is the Contractor's executive, management and supervisory employees' responsibility to see that the Contractor oversees the activities, and does not delay, ignore, or otherwise limit contractual obligations to a task, site, or operational request from the County.

2.5 Uniforms and Identification Badges

- 2.5.1 The Contractor's employees assigned to County Facilities shall wear an appropriate uniform at all times. The uniform, at a minimum, is to consist of a shirt with the company name on it. All uniforms, as required, will be approved by the Facility Project Manager or his/her designee, and will be provided by and at the Contractor's expense.
- 2.5.2 The Contractor shall ensure that its employees are appropriately identified as set forth in Agreement Paragraph 7.4, Contractor's Staff Identification.
- 2.5.3 The Contractor shall ensure that every on-duty employee of the Contractor wears a visible County issued photo identification badge identifying the following: Name, title and department. Such badge shall

be displayed on Contractor employee's person at all times when he/she is on duty at any County designated Facility.

2.6 Materials and Equipment

- 2.6.1 The Contractor is responsible for purchasing all supplies, materials and equipment to provide the needed services of the health care facilities.
- 2.6.2 The Contractor shall use supplies, materials and equipment that are commercial grade, safe for the environment, and that are safe for use by the employee. All supplies, materials and equipment are subject to approval by the County. Infection Control cleaning and disinfecting solutions shall be approved by the Facility's Infection Control Committee prior to use. All Contractor employees must wear safety and protective gear according to the OSHA/Cal-OSHA standards and equipment shall be maintained in accordance with the manufacturer's standards and specifications. Also, Contractor shall ensure all Material Safety Data Sheets are updated annually or as needed and that a copy is given to the Facility.
- 2.6.3 The Contractor is required to keep all equipment used to maintain the facilities in a safe and operable condition. All electrical equipment must be safety checked by Facility designated Bio-Medical Service staff prior to being placed into service and as appropriate thereafter.

2.7 Training

- 2.7.1 The Contractor shall be responsible for ensuring that each Contractor employee is familiar with the facility that they service.
- 2.7.2 The Contractor shall provide in-service education and training programs for all new employees and continuing in-service training for all employees and maintain evidence/documentation of said training available upon request. The in-service training should be at least on an annual basis and must be in compliance with OSHA/Cal-OSHA, The Joint Commission, Title 22, Division 5, and all other applicable regulatory requirements.
- 2.7.3 All Contractor employees shall be trained in their assigned tasks and in the safe handling of equipment.

2.7.4 All Contractor employees shall be trained in proper procedures and responsibilities in regards to the handling of protected health information in accordance with the Contractor's obligations as a business associate under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH).

2.8 Contractor's Office

The Contractor shall maintain an office within the Los Angeles County with a telephone in the company's name where the Contractor conducts business.

2.8.1 Business Hours

The Contractor's office shall be staffed during the hours of 8:00 a.m. to 5:00 p.m. (PST), Monday through Friday, by at least one employee who can respond to inquiries and complaints which may be received about the Contractor's performance of the Contract. If an answering service receives the call during normal business hours, the Contractor must respond within thirty (30) minutes of receipt of the call.

2.8.2 After Hours

When the Contractor's office is closed, an answering service shall be provided to receive calls. If an answering service receives the call after business hours, the Contractor must respond within thirty (30) minutes of receipt of the call.

2.9 Emergency Procedures

The Contractor shall immediately report any emergency situations such as vandalism, broken water pipes, windows, doors, etc., to the County Facility Project Manager. If after hours, report any emergency to the Facility emergency services office.

2.10 Hours/Days of Work

See Facility Descriptions, Cleaning Requirements, Hours of Operation, Staffing and Specification Sheets, Technical Exhibits C-1 and C-2 for Facility hours of operation and cleaning hours.

2.11 Additional Housekeeping Services

- 2.11.1 The Director, or his designee, may authorize the Contractor to perform additional housekeeping services when the need for such work arises out of Emergency or Expanded services. The performance of such services and related payments shall be as provided in the Agreement Paragraph 5.0, Agreement Sum, Billing and Payment Sub-paragraph 5.1.4.
- 2.11.2 The Contractor shall prepare and submit a written description of the work with an estimate of labor and materials prior to performing any additional housekeeping services. If immediate action is needed, a verbal authorization can be given to perform additional housekeeping services and a written description of the work completed with an estimate of labor and materials can be submitted within one (1) business day to the County. If the additional housekeeping services exceeds the Contractor's estimate the Facility Project Manager or his/her designee must approve the excess cost. No additional housekeeping services shall commence without written/verbal authorization.
- 2.11.3 The Contractor shall commence all additional housekeeping services on the established specified date. The Contractor shall proceed diligently to complete said work within the time allotted.
- 2.11.4 The County reserves the right to perform additional housekeeping services itself or assign the work to another Contractor.

2.12 Consumable Supplies

For respective Facilities, Contractor shall provide supplies that are commercial grade and meet the required specifications in Exhibits A.2, Detailed Facility Cleaning Requirements for Medical Centers, and A.3, Detailed Facility Cleaning Requirements for Comprehensive Health Centers (CHC), Clinics and Administrative Offices. The Contractor will supply, but is not limited to, all its own cleaning supplies. The Contractor will provide all soap, paper products, red bags, walk off mats, , etc. The awarded Contractor must provide samples of all supplies and MSDS sheets that will be used for the health care Facilities during the pre-job conference. Facilities will review

products prior to use. Cleaning products are not to be used that have not had prior approval.

3.0 QUALITY CONTROL

In accordance with Agreement Paragraph 8.6 Complaints, the Contractor shall establish and utilize a comprehensive Quality Control Plan to assure the County a consistently high level of service is provided throughout the term of the Agreement pursuant to subparagraph 8.6, Complaints. The plan shall be submitted to the Facility Project Monitor and Facility Project Manger for review. The plan shall include, but may not be limited, to the following:

- 3.1 Method of monitoring to ensure that the Agreement requirements are being met.
- 3.2 A record of all inspections conducted by the Contractor, any corrective action taken, the time a problem was first identified, a clear description of the problem, and the time elapsed between identification and completed corrective action, shall be provided monthly to the County and upon request.
- 3.3 The Contractor shall maintain a written log of all complaints, including date, time, and the action taken or reason for the inaction. The log of complaints shall be open to inspection by the County either in person, mailed, faxed, or emailed to the County upon request.
- 3.4 The Contractor shall respond to a “call back” request within two (2) hours of notification of the complaint. If a complaint is not abated within the time specified or to the satisfaction of the County, the County may correct the specific complaint. The total cost incurred by the County will be deducted from the Contractor’s monthly invoice.
- 3.5 The Contractor shall thoroughly complete each task in a professional manner. To this end, quality equipment and materials that comply with all current regulations and standards shall be used.

4.0 QUALITY ASSURANCE PLAN

The County will evaluate the Contractor’s performance under this Agreement in accordance with Agreement Paragraph 8.0 - Standard Terms and Conditions, Subparagraph 8.18 - County’s Quality Assurance Plan.

4.1 Meetings

The Contractor is required to attend any scheduled Facility Administrative Staff meetings (as needed). For example, monthly Environment of Care meetings and other monthly Infection Control meetings, quarterly Housekeeping Committee meetings, bed huddles, etc., for each facility covered by this Agreement. Advance notification of at least one (1) business day will be provided. Special meetings or emergency meetings, depending on the nature of an event or issue, may be scheduled during the same business day.

4.2 Contract Discrepancy Report

Verbal notification of a performance discrepancy will be made to the Facility Project Monitor as soon as possible whenever a performance discrepancy is identified. The problem shall be resolved within a time period mutually agreed upon by the County and the Contractor.

The Facility Project Monitor will determine whether a formal Agreement Discrepancy Report shall be issued. If a formal Contract Discrepancy Report is issued, the Contractor is required to respond in writing to the Facility Project Monitor within five (5) business days, acknowledging the reported performance discrepancies or presenting contrary evidence. A plan for correction of all performance deficiencies identified in the Contract Discrepancy Report shall be submitted to the Facility Project Monitor within ten (10) business days.

4.3 County Observations

In addition to departmental contracting staff, other County personnel may observe performance, activities, and review documents relevant to this Agreement at any time deemed necessary and appropriate by County. However, these personnel may not unreasonably interfere with the Contractor's performance.

5.0 PERFORMANCE REQUIREMENTS SUMMARY (PRS)

- 5.1 All listings of services used in the Performance Requirements Summary (PRS) are intended to be completely consistent with the Agreement and the SOW, and are not meant in any case to create, extend, revise, or expand any obligation of Contractor beyond that defined in the Agreement and the SOW.
In any case of apparent inconsistency between services as stated in the

Agreement and the SOW and, the PRS Chart, the meaning apparent in the Agreement and the SOW will prevail. If any service seems to be created in this PRS which is not clearly and forthrightly set forth in the Agreement and the SOW, that apparent service will be null and void and place no requirement on Contractor.

- 5.2 The Contractor is expected to perform all services described herein. The PRS Chart describes certain required services which will be monitored by the County during the term of the Agreement, and for which Contractor may be assessed financial deductions from payment if the service has not been satisfactorily provided. The PRS Chart indicates the SOW and/or Agreement section of the performance referenced (column 1); the service to be provided (column 2); the monitoring method that will be used (column 3); and the deductions/fees to be assessed for services that are not satisfactory (column 4).

PERFORMANCE REQUIREMENTS SUMMARY (PRS)			
SPECIFIC PERFORMANCE REFERENCE	STANDARD OF PERFORMANCE	MONITORING METHOD	DEDUCTIONS/FEEES TO BE ASSESSED FOR NON-COMPLIANCE OR NON-PERFORMANCE
Agreement Paragraph 7.5, Background & Security Investigations	100% - Contractor employees shall pass a background check.	Inspection, Verification, Observation, and Reporting	Immediate removal of employee and \$1,000 per occurrence.
Agreement Paragraph 7.7, Medical Health Screening	100% - Contractor shall ensure that all staff providing services and/or entering a DHS Facility have undergone and successfully passed a current physical health examination, consistent with current DHS policy and Exhibit M, Medical Health Screening.	Reporting, Verification and Observation	Immediate removal of employee and \$100 per day if Contractor allows an employee who has not passed medical screening to work.
Agreement Paragraph 7.9, Mandatory Personnel Monitoring Reports	100% - Contractor shall submit semi-annually.	Verification, Reporting	\$100 per day late or if incomplete.
SOW and Technical Exhibits (A-2, A-3, and C-1.1 to C-1.7, and C-2.1 to C-2.3)	100% - Contractor is in compliance with cleaning requirements stated in the SOW, cleaning levels 1, 2, and 3.	Observation, Verification, and Reporting	\$100 per occurrence.
SOW, General Terms, Paragraph 2.2.1, Keys	Secure and maintain keys/key cards. Contractor responsible for replacement/theft/loss.	Observation	Contractor pays for re-keying of facility due to lost key(s)/key card.
SOW, Paragraph 2.5, Uniforms and Identification Badges	100% - Contractor's employees shall always wear appropriate uniforms and have Contractor's identification badge and a County issued identification badge visible at all times.	Observation	Immediate removal of employee and \$100 per occurrence.

PERFORMANCE REQUIREMENTS SUMMARY (PRS)			
SPECIFIC PERFORMANCE REFERENCE	STANDARD OF PERFORMANCE	MONITORING METHOD	DEDUCTIONS/FEEES TO BE ASSESSED FOR NON-COMPLIANCE OR NON-PERFORMANCE
SOW Paragraph 2.2.3, Storage, Proper storage of items and Paragraph 2.6, Materials and Equipment	Contractor shall store equipment and supplies and ensure chemicals are properly labeled, stored and secured in an orderly manner as required by DHS, Facility, and laws and regulations.	Inspection and Observation	\$100 per occurrence.
SOW, General Terms, Paragraph 2.7 Training	Contractor shall ensure all employee trainings are current with Facility requirements.	Reporting, Verification and Observation and Inspection.	\$100 per occurrence.
SOW, General Terms, Paragraph 2.9 Emergency Procedures	Contractor shall immediately notify Facility Project Manager of any emergency situation.	Reporting, Verification and Observation and Inspection.	\$100 per occurrence.
SOW, General Terms, Paragraph 2.11 Additional housekeeping services.	Contractor shall complete all additional housekeeping services on time and according to plan submitted to and approved by Facility	Reporting, Verification and Observation and Inspection.	Up to \$500 per occurrence.
SOW, General Terms, Paragraph 2.12 Consumable Supplies	Contractor shall keep an adequate quantity of all consumable supplies on site and keep all appropriate dispensers of soap, paper towels, toilet paper, etc., stocked at all times.	Inspection and Observation	\$100 per occurrence.
SOW, General Terms, Paragraph 3.0 Quality Control	Contractor shall maintain a quality control plan for each Facility.	Reporting, Verification and Inspection	\$250 per occurrence.
SOW, General Terms, Paragraph 3.0 Quality Control	Contractor shall respond to a "call back" request within two (2) hours of notification of the complaint.	Reporting, Verification and Observation	\$100 per occurrence.

STATEMENT OF WORK (SOW)

DETAILED FACILITY CLEANING REQUIREMENTS FOR MEDICAL CENTERS (MC)

LEVEL 1 INTENSITY CLEANING (IN-PATIENT/PATIENT CARE AREAS)

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

PATIENT CARE AREAS (UNITS)		
	TASK	FREQUENCY
1	<p>After patient discharge or transfer, the patient room is entirely cleaned.</p> <p>All horizontal surfaces including tables: bedside, under and over bed, beds, bedrails, knobs on monitors, telephones, hand-held television controls, chairs, countertops, vents, ledges, lights, light switches, television, monitors, curtain rails and wall fixtures should be cleaned with the hospital approved disinfectant. Includes high and low dusting of window sills.</p> <p>Using the hospital approved disinfectant, wipe and sanitize mattress: all sides and bed including frame, rails, and wheels by removing debris around wheel bearing. Make bed with clean linen. Do not tie knots in linen.</p>	<p>Respond within 15 minutes of patient discharge or transfer and complete within 45 minutes (Airborne Precautions Isolation requires waiting minimum 45 minutes between patient placement due to air changes requirement). Complete within one hour.</p>
2	Dust ceiling vents, air duct grills and ceilings.	Upon patient discharge and as needed, but not with patients present.
3	Empty linen bags and empty trash.	Every shift and as needed.
4	Collect personal items left by previous occupant and give to Nursing.	As needed.
5	Utility Rooms - All floors must be dust mopped prior to each mopping. Mop all floors. Thoroughly clean and disinfect faucets, stainless steel sinks, counters, metal kick plates, railings, wall corner coverings, door handles, door frames, IV stands, and wheel chair with hospital approved disinfectants.	Daily each shift, and as needed.
6	Wipe and sanitize gurneys, wheel chairs, stretchers, equipment, non-electrical beds, computer surfaces and rolling stands, after each use. Cover equipment with plastic bag (to identify cleaned equipment) and place in clean utility room.	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

PATIENT CARE AREAS (UNITS)		
	TASK	FREQUENCY
7	Steam and thermal clean gurneys, wheel chairs, stretchers and equipment, non-electrical beds.	Twice a month and as needed.
8	All vertical surfaces: Walls, windows, ceiling vents, and doors should be spot cleaned. Remove all tape. Door handles and light switches should be wiped with a hospital approved disinfectant.	Daily and as needed.
9	Clean all Bathrooms (employee and patients), including sinks: inside and outside and drain covers and vent openings, toilets: inside and outside and toilet handles, soap dispensers, towel dispensers, toilet tissue dispensers, and seat cover dispensers with hospital approved disinfectants. Replenish supplies, empty trash. Inpatient bathrooms shall be cleaned daily and special attention given to sanitizing the commodes, all bars, handles and doorknobs.	Each 8 hour shift and as needed.
10	Dust ceiling vents and ceilings.	Daily and as needed.
11	Scrub shower floors and wipe clean the shower walls and curtains.	Daily and as needed.
12	Replace cubicle curtains when soiled or damaged.	Check daily, change monthly or as needed and when visibly soiled or on discharge. All cubicle curtains of patients requiring Isolation precautions must be changed on discharge or as needed.
13	Mop all floors. Thoroughly clean and disinfect faucets, stainless steel sinks, counters, metal kick plates, railings, wall corner coverings, door handles, and door frames. Mop floors, applying approved germicide solution to entire floor surface.	Daily and as needed.
14	Dispose of Sharps as indicated when ¾ full. Remove from room/area collection location, transport according to facility	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

PATIENT CARE AREAS (UNITS)		
	TASK	FREQUENCY
	procedure and place in collection location for removal by sharps reprocessing contractor as designated by each facility.	
15	Maintenance/replacement of waterless (alcohol-based) hand sanitizer throughout hospital; wipe down dispenser when refilled; coordinate installation of dispensers. Empty canisters must be recycled.	Daily and as needed.
16	Clean electrical patient care equipment (only if not connected to patients) including: cardiac monitor, vital signs machine and thermometer, IV pump, patient-controlled anesthesia pump machine, transport monitor, Bear Hugger, ventilator, Lucas device (automated cardiac compression device), ultrasound machine, wound vacuum machine, sequential compression device should be cleaned with the hospital approved disinfectant.	Daily and as needed.
17	Clean patient-support equipment including: PYXIS machines, crash carts, computer on wheels, beside commode, wheelchairs should be cleaned with the hospital approved disinfectant.	Daily and as needed.

EMERGENCY DEPARTMENT (ED)		
Contractor shall provide the following housekeeping services for the Emergency Department utilizing dedicated Housekeepers and equipment. (Lock-in Housekeepers and equipment)		
	TASK	FREQUENCY
1	Wet mop Emergency Department floors.	2 times per shift daily and as needed.
	Clean all vertical surfaces: Walls, windows, ceiling vents, items attached to the ceilings, and doors should be spot cleaned. Door handles and light switches should be wiped with hospital approved disinfectant.	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

EMERGENCY DEPARTMENT (ED)		
Contractor shall provide the following housekeeping services for the Emergency Department utilizing dedicated Housekeepers and equipment. (Lock-in Housekeepers and equipment)		
	TASK	FREQUENCY
2	Clean all Bathrooms (employee and patients), including sinks: inside and outside and drain covers and vent openings, toilets: inside and outside and toilet handles, soap dispensers, towel dispensers, toilet tissue dispensers, doorknobs, rails, walls, and doors with hospital approved disinfectant. Replenish supplies, empty trash.	Every shift and as needed.
3	Dust ceiling vents, air duct grills and ceilings and light fixtures.	As needed, only when patients are not present.
4	All horizontal surfaces including tables: bedside and over bed, beds, bedrails, knobs on monitors, telephones, chairs, countertops, vents, ledges, lights, light switches, monitors, curtain rails and wall fixtures with hospital approved disinfectant.	Daily and as needed.
5	Wash all scrub and work sinks, including under surfaces, drainpipes and splashboards.	Twice daily and as needed.
6	Replace cubicle curtains when soiled or damaged.	Check daily, change when visibly soiled as needed and routinely every month or by Infection Control standards.
7	Empty trash, empty soiled linen and hampers.	Each eight hour shift and as needed.
8	Dispose of Sharps as indicated when ¾ full. Remove from room/area collection location, transport according to facility procedure and place in collection location for removal by sharps reprocessing contractor as designated by each	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

EMERGENCY DEPARTMENT (ED)		
Contractor shall provide the following housekeeping services for the Emergency Department utilizing dedicated Housekeepers and equipment. (Lock-in Housekeepers and equipment)		
	TASK	FREQUENCY
	facility.	
9	Clean all gurneys, examining tables, wheelchairs, stands, IV poles and footstools with hospital approved disinfectants.	After each patient and daily and as needed.
10	Any room requiring decontamination must be cleaned according to facility Infection Control procedures.	Within 15 to 30 minutes after notification.
11	Remove all portable equipment from room, when performing floor care with the unit manager's approval. Equipment must be cleaned before returning to room. This includes cleaning all equipment (i.e. wards and units).	Daily and as needed.
12	Maintenance/replacement of waterless (alcohol-based) hand sanitizer throughout hospital; wipe down dispenser when refilled; coordinate installation of dispensers. Empty canisters must be recycled through the vendor if possible.	Daily and as needed.
13	Clean electrical patient care equipment (only if not connected to patients) including: cardiac monitor, vital signs machine and thermometer, IV pump, patient-controlled anesthesia pump machine, transport monitor, Bear Hugger, ventilator, Lucas device (automated cardiac compression device), ultrasound machine, wound vacuum machine, sequential compression device should be cleaned with the hospital approved disinfectant.	Daily and as needed.
14	Clean patient-support equipment including: PYXIS machines, crash carts, computer on wheels, beside	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

EMERGENCY DEPARTMENT (ED)		
Contractor shall provide the following housekeeping services for the Emergency Department utilizing dedicated Housekeepers and equipment. (Lock-in Housekeepers and equipment)		
	TASK	FREQUENCY
	commode, wheelchairs should be cleaned with the hospital approved disinfectant.	

ISOLATION ROOMS/TERMINAL CLEANING OF PATENT AREAS FOLLOWING COMMUNICABLE DISEASE EXPOSURE		
Contractor shall provide the following additional or special housekeeping services for Isolation Rooms including decontaminating equipment and disposing of solution after each cleaning of an isolation room as required by Hospital Infection Control Policy. Contractor shall follow procedures for all housekeeping services cleaning activities as approved by the Infection Control Committee and written in the Infection Control Manual.		
	TASK	FREQUENCY
1	Remove all trash, CLEAN WITH GERMICIDICAL DISINFECTANT AND REPLACE LINER. Fill all dispensers	Every eight hour shift and as needed.
2	Clean the bathroom according to Departmental policy. Clean door surfaces, door handles, fixtures. Wash entire door surface and any potentially contaminated surface. Damp wipe all ledges, fixtures and furniture including doorknobs and telephone. , and spot wash walls.	Daily and as needed.
3	Damp dust all horizontal surfaces walls and air vents, fixtures, etc above shoulder height.	Daily clean as needed.
4	Replace cubicle curtains and window drapes upon discharge, or when damaged or soiled.	Check curtains and window drapes daily, change when visibly soiled as needed and routinely every month.
5	Clean mini-blinds.	Weekly and as needed.
6	Report any hazardous conditions and items in need of repair to Hospital Administration.	As needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

ISOLATION ROOMS/TERMINAL CLEANING OF PATENT AREAS FOLLOWING COMMUNICABLE DISEASE EXPOSURE		
Contractor shall provide the following additional or special housekeeping services for Isolation Rooms including decontaminating equipment and disposing of solution after each cleaning of an isolation room as required by Hospital Infection Control Policy. Contractor shall follow procedures for all housekeeping services cleaning activities as approved by the Infection Control Committee and written in the Infection Control Manual.		
	TASK	FREQUENCY
7	Replace soiled or damaged curtains as needed and after isolation is discontinued.	As indicated by Isolation Protocol or as requested by Nursing Supervisor/Charge Nurse.
8	Empty water and use new mop before and after isolation room cleaning.	As indicated by Isolation Protocol or as requested by Nursing Supervisor/Charge Nurse.
9	Clean electrical patient care equipment (only if not connected to patients) including: cardiac monitor, vital signs machine and thermometer, IV pump, patient-controlled anesthesia pump machine, transport monitor, Bear Hugger, ventilator, Lucas device (automated cardiac compression device), ultrasound machine, wound vacuum machine, sequential compression device should be cleaned with the hospital approved disinfectant.	Daily and as needed.
10	Clean patient-support equipment including: PYXIS machines, crash carts, computer on wheels, beside commode, wheelchairs should be cleaned with the hospital approved disinfectant.	Daily and as needed.

INTENSIVE CARE UNITS (ICU), CRITICAL CARE UNITS (Coronary/Medical/Surgical/Pediatric/Neonatal)		
Contractor shall provide the following additional services utilizing dedicated (Lock-in Housekeepers and equipment).		
	TASK	FREQUENCY
1	Clean all horizontal surfaces including: tables, bedside and over bed, beds, bedrails, knobs on monitors, telephones, hand-held television controls, chairs, countertops, vents,	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

INTENSIVE CARE UNITS (ICU), CRITICAL CARE UNITS (Coronary/Medical/Surgical/Pediatric/Neonatal) Contractor shall provide the following additional services utilizing dedicated (Lock-in Housekeepers and equipment).		
	TASK	FREQUENCY
	ledges, lights, light switches, television, monitors, sharp container, glove holder, thermometer, Iv poles, blood pressure unit, curtain rails and wall fixtures, and call button/cord should be cleaned with the hospital approved disinfectant. Maintain a daily cleaning log file for each of the ICUs and other units and provide a copy to unit nursing supervisor.	
2	Clean electrical patient care equipment (only if not connected to patients) including: cardiac monitor, vital signs machine and thermometer, IV pump, patient-controlled anesthesia pump machine, transport monitor, Bear Hugger, ventilator, Lucas device (automated cardiac compression device), ultrasound machine, wound vacuum machine, sequential compression device should be cleaned with the hospital approved disinfectant.	Daily and as needed.
3	Clean patient-support equipment including: PYXIS machines, crash carts, computer on wheels, beside commode, wheelchairs should be cleaned with the hospital approved disinfectant.	Daily and as needed.
4	Wet mop ICUs.	2 times per shift daily and as needed.
5	Clean sinks: inside and outside and drain covers and vent openings, hoppers: inside and outside and handles, soap dispensers, towel dispensers, toilet tissue dispensers, and seat cover dispensers with hospital approved disinfectant. Replenish supplies, empty trash.	At the end of each shift and as needed.
6	Inspect laminar curtains and spot clean or remove per hospital procedures.	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

INTENSIVE CARE UNITS (ICU), CRITICAL CARE UNITS (Coronary/Medical/Surgical/Pediatric/Neonatal)		
Contractor shall provide the following additional services utilizing dedicated (Lock-in Housekeepers and equipment).		
	TASK	FREQUENCY
7	Replace cubicle curtains when soiled or damaged.	Inspect daily, replace on discharge and as needed.
8	All vertical surfaces: Walls, windows, ceiling vents, and doors should be spot cleaned. Remove all tape. Door handles and light switches should be wiped with a hospital approved disinfectant.	Daily and as needed.
9	Incubators must be cleaned with hospital approved disinfectant.	On discharge per unit approved procedures.
10	Dispose of Sharps as indicated when ¾ full. Remove from room/area collection location, transport according to facility procedure and place in collection location for removal by sharps reprocessing contractor as designated by each facility.	Daily and as needed.

OPERATING ROOM (OR) SUITES Surgery/Recovery/Labor and Delivery/Pre-Op/Post-Op Holding Areas		
Contractor shall ensure that all Housekeepers wear disposable scrub suit, shoe covers, cap and mask upon entering Operating Room (OR) Suites and that Housekeepers wear cover gowns over scrub suits when leaving. At the beginning of each shift, Housekeeper shall check with the OR supervisor or appointed representative for any special housekeeping services or duties which must be performed. All soiled mop heads will be taken to the Housekeeping Department to be exchanged for clean ones. Clean mop heads are to be used after each surgical case. Contractor shall provide the following additional or special housekeeping services for the Operating Suites utilizing dedicated equipment.		
THIS EQUIPMENT SHOULD NEVER BE REUSED TO CLEAN OTHER AREAS OF THE HOSPITAL.		
	TASK	FREQUENCY
1	Clean and buff all Operating Suite and recovery floors with exception of designated operating rooms.	Twice a month and/or as-needed.
2	Clean ORs and delivery rooms and recovery	After each case and daily as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

OPERATING ROOM (OR) SUITES Surgery/Recovery/Labor and Delivery/Pre-Op/Post-Op Holding Areas		
<p>Contractor shall ensure that all Housekeepers wear disposable scrub suit, shoe covers, cap and mask upon entering Operating Room (OR) Suites and that Housekeepers wear cover gowns over scrub suits when leaving. At the beginning of each shift, Housekeeper shall check with the OR supervisor or appointed representative for any special housekeeping services or duties which must be performed. All soiled mop heads will be taken to the Housekeeping Department to be exchanged for clean ones. Clean mop heads are to be used after each surgical case. Contractor shall provide the following additional or special housekeeping services for the Operating Suites utilizing dedicated equipment.</p> <p align="center">THIS EQUIPMENT SHOULD NEVER BE REUSED TO CLEAN OTHER AREAS OF THE HOSPITAL.</p>		
	TASK	FREQUENCY
	cubicles after each case and within 30 minutes of notification.	
3	<p>Check and clean all ceilings, walls, and fixtures attached to walls and ceilings, including ceiling lights. Dust all vents.</p> <p>Wipe and clean portable items to include OR tables, footstools, buckets, rubber hoses, cabinets, shelves.</p> <p>Maintain all portable equipment inside OR.</p>	Immediate after each surgery case and daily and as needed.
4	<p>Wipe OR table and all furniture and all horizontal surfaces.</p> <p>Wet vacuum floor with hospital approved disinfectant. Clean baseboards</p> <p>Wipe and scrub work sinks, including under surfaces and drainpipes.</p> <p>Wash exposed surfaces of OR lights.</p> <p>Dispose of trash and linen.</p> <p>Wet wipe hamper stands and replace with fresh hamper bag.</p> <p>Clean and scrub room mats</p>	Immediately after each surgery case and daily as needed.
5	Wipe walls, doors, doorframes, footstools, buckets,	Immediately (STAT) after each surgery case.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

OPERATING ROOM (OR) SUITES		
Surgery/Recovery/Labor and Delivery/Pre-Op/Post-Op Holding Areas		
<p>Contractor shall ensure that all Housekeepers wear disposable scrub suit, shoe covers, cap and mask upon entering Operating Room (OR) Suites and that Housekeepers wear cover gowns over scrub suits when leaving. At the beginning of each shift, Housekeeper shall check with the OR supervisor or appointed representative for any special housekeeping services or duties which must be performed. All soiled mop heads will be taken to the Housekeeping Department to be exchanged for clean ones. Clean mop heads are to be used after each surgical case. Contractor shall provide the following additional or special housekeeping services for the Operating Suites utilizing dedicated equipment.</p> <p align="center">THIS EQUIPMENT SHOULD NEVER BE REUSED TO CLEAN OTHER AREAS OF THE HOSPITAL.</p>		
	TASK	FREQUENCY
	rubber hoses, fire extinguishers, clocks, fixtures attached to walls, and cabinets or shelves with hospital approved disinfectant.	
6	Clean autoclave including doors and area beneath and maintain cleaning records as directed by OR and Delivery Room Supervisors.	Immediately (STAT) after each surgery case.
7	Wash walls, surgery table, scrub rooms, OR wall, doors, doorframes, footstools, buckets, soiled linen hampers, waste receptacles, rubber hose fixtures attached to walls, and cabinets or shelves with bactericidal detergent.	Daily after last case.
8	Thoroughly clean equipment furniture gurneys and recovery room beds, remove tape.	Immediately after each surgery case.
9	Remove dirt and debris, e.g. sutures and lint, from all wheels of operating room equipment.	Daily and as needed.
10	Suction canisters shall be placed into rigid, leak proof biohazard waste containers; and transported to the biohazard waste storage room for short-term storage until it is autoclaved locally by Environmental Services or it is picked up by an approved medical waste hauler (e.g. Stericycle), for treatment and disposal."	Disposed of after each surgical case, and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

OPERATING ROOM (OR) SUITES		
Surgery/Recovery/Labor and Delivery/Pre-Op/Post-Op Holding Areas		
<p>Contractor shall ensure that all Housekeepers wear disposable scrub suit, shoe covers, cap and mask upon entering Operating Room (OR) Suites and that Housekeepers wear cover gowns over scrub suits when leaving. At the beginning of each shift, Housekeeper shall check with the OR supervisor or appointed representative for any special housekeeping services or duties which must be performed. All soiled mop heads will be taken to the Housekeeping Department to be exchanged for clean ones. Clean mop heads are to be used after each surgical case. Contractor shall provide the following additional or special housekeeping services for the Operating Suites utilizing dedicated equipment.</p> <p align="center">THIS EQUIPMENT SHOULD NEVER BE REUSED TO CLEAN OTHER AREAS OF THE HOSPITAL.</p>		
	TASK	FREQUENCY
11	Dispose of Sharps as indicated when ¾ full. Remove from room/area collection location, transport according to facility procedure and place in collection location for removal by sharps reprocessing contractor as designated by each facility.	Daily and as needed.
12	Clean electrical patient care equipment (only if not connected to patients) including: cardiac monitor, vital signs machine and thermometer, IV pump, patient-controlled anesthesia pump machine, transport monitor, Bear Hugger, ventilator, Lucas device (automated cardiac compression device), ultrasound machine, wound vacuum machine, sequential compression device should be cleaned with the hospital approved disinfectant.	Daily and as needed.
13	Clean patient-support equipment including: PYXIS machines (exterior surface), crash carts (exterior surface), computer on wheels, beside commode, wheelchairs should be cleaned with the hospital approved disinfectant.	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

GENERAL SERVICE AREAS/ANCILLARY SERVICES AREAS/ AMBULATORY CARE CLINICS		
<p>Contractor’s housekeeping services shall provide at the highest level of intensity for the following areas utilizing dedicated (locked-in housekeepers and equipment). The housekeeper must wear disposable scrubs, cap, shoe covers (trained when to use) and gloves when entering unit and remove same when leaving unit per departmental protocol. Cleaning equipment for this area remains in area and is never used to clean other areas of the hospital. Before starting to clean area, use clean cleaning equipment. Begin cleaning in sterile storage and workrooms with last cleaning in decontamination rooms.</p>		
	TASK	FREQUENCY
1	Monitor/patrol area and spot clean.	Each Shift and as needed.
2	Wet mop, all lobbies, hallways, and waiting rooms and apply hospital approved cleaning solution to entire floor surface when mopping including appropriate cleaning solutions for tile surfaces as applicable.	2 times per shift, daily and as needed.
3	All vertical surfaces: Walls, cabinets, windows, ceiling, air duct vents, and all items attached to the ceiling should be spot cleaned. Remove all tape. Doors, door handles and light switches shall be wiped with a hospital approved disinfectant.	Daily and as needed.
4	Thoroughly clean and disinfect all horizontal surfaces including tables, knobs on monitors, telephones, chairs, countertops, ledges, lights, light switches, curtain rails and wall fixtures with the hospital approved disinfectant.	Daily and as needed.
5	Clean all bathrooms and staff lockers (employee and patients) including sinks: inside and outside and drain covers and vent openings, toilets: inside and outside and toilet handles, soap dispensers, towel dispensers, toilet tissue dispensers, and seat cover dispensers with hospital approved disinfectants. Replenish all supplies, empty trash.	Twice daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

GENERAL SERVICE AREAS/ANCILLARY SERVICES AREAS/ AMBULATORY CARE CLINICS		
<p>Contractor’s housekeeping services shall provide at the highest level of intensity for the following areas utilizing dedicated (locked-in housekeepers and equipment). The housekeeper must wear disposable scrubs, cap, shoe covers (trained when to use) and gloves when entering unit and remove same when leaving unit per departmental protocol. Cleaning equipment for this area remains in area and is never used to clean other areas of the hospital. Before starting to clean area, use clean cleaning equipment. Begin cleaning in sterile storage and workrooms with last cleaning in decontamination rooms.</p>		
	TASK	FREQUENCY
6	Clean all gurneys, examining tables, wheelchairs, stands, IV poles and footstools.	Daily and/or as-needed.
7	Thoroughly clean and disinfect faucets, stainless steel sinks, counters, metal kick plates, railings, wall corner coverings, door handles, and door frames, with hospital approved disinfectants.	Twice daily and as needed.
8	Empty trash, empty soiled linen bags and hampers.	Each eight hour shift and as needed.
9	Change cubicle curtains/drapes when soiled and as needed.	Each eight hour shift and as needed.
10	Any room requiring decontamination SHALL BE cleaned according to Infection Control procedures. Cleaning to include pest extermination as necessary.	Within 15 to 30 minutes after notification. As needed.
11	Remove all portable equipment from room, when performing floor care. Equipment must be cleaned before returning to room. This includes cleaning all equipment (i.e. wards and units).	Daily and as needed.
12	Clean pantry as required, this includes the microwave oven.	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

GENERAL SERVICE AREAS/ANCILLARY SERVICES AREAS/ AMBULATORY CARE CLINICS		
<p>Contractor’s housekeeping services shall provide at the highest level of intensity for the following areas utilizing dedicated (locked-in housekeepers and equipment). The housekeeper must wear disposable scrubs, cap, shoe covers (trained when to use) and gloves when entering unit and remove same when leaving unit per departmental protocol. Cleaning equipment for this area remains in area and is never used to clean other areas of the hospital. Before starting to clean area, use clean cleaning equipment. Begin cleaning in sterile storage and workrooms with last cleaning in decontamination rooms.</p>		
	TASK	FREQUENCY
13	Clean autoclaves/sterilizers.	Weekly per established procedure and maintain cleaning records as directed by Central Service Supervisor.
14	Maintenance/replacement of waterless (alcohol-based) hand sanitizer throughout hospital; wipe down dispenser when refilled; coordinate installation of dispensers. Empty canisters must be recycled.	Daily and as needed.
15	Dispose of Sharps as indicated when ¾ full. Remove from room/area collection location, transport according to facility procedure and place in collection location for removal by sharps reprocessing contractor as designated by each facility.	Daily and as needed.
16	Clean electrical patient care equipment (only if not connected to patients) including: cardiac monitor, vital signs machine and thermometer, IV pump, patient-controlled anesthesia pump machine, transport monitor, Bear Hugger, ventilator, Lucas device (automated cardiac compression device), ultrasound machine, wound vacuum machine, sequential compression device should be cleaned with the hospital approved disinfectant.	Daily and as needed.
17	Clean patient-support equipment including: PYXIS machines, crash carts, computer on wheels, beside commode, wheelchairs should be cleaned with the hospital approved disinfectant.	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

FLOOR MAINTENANCE: ALL LOBBIES, HALLWAYS, WAITING ROOMS AND RESTROOMS		
	TASK	FREQUENCY
1	Sweep/Dust mop all non-carpeted areas daily, including corners, baseboards and inaccessible areas such as behind beds. Keep baseboards free of dust, splash marks and old seal.	Daily and as needed.
2	Check and dust mop all heavy traffic areas.	Daily and as needed.
3	Wet mop all non-carpeted floors (All floors must be swept before mopping).	Daily and as needed.
4	Clean and mop spills, blood, feces, sputum and glass.	Immediately and as needed.
5	Contain and clean bio-hazardous waste spills, per established facility procedure.	Immediately and as needed.
6	Contain and clean as appropriate hazardous waste spills, per Facility procedure.	Immediately and as needed.
7	Mop and decontaminate area following sewer back up or overflow of any drain. Notify Infection Control. Follow Hospital Infection Control procedures.	Immediately and as needed.
8	Buff floors. Mop before buffing. Spray buff all patient care rooms (including waiting rooms, lobbies, nursing stations, exam rooms and patient rooms).	Three (3) times per week.
9	Apply floor finish.	Monthly and as needed.
10	Mop, scrub or strip and refinish floors. Maintained in a clean state, free of build-up of dirt and black markings, and with a gloss acceptable to the Administrator.	Twice monthly and as needed.
11	Maintain flooring as prescribed by manufacturer and per Infection Control procedures.	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

FLOOR MAINTENANCE: ALL LOBBIES, HALLWAYS, WAITING ROOMS AND RESTROOMS		
12	Vacuum carpets in, floor areas, hallways and waiting rooms. Check, and remove spots and stains from carpeted areas.	Daily and as needed.
13	Spot shampoo carpets. Check and remove spots and stains from carpeted areas.	As needed.
14	Shampoo heavy use carpets.	Monthly, and as needed.
15	Shampoo carpets.	Bi-annually and as needed.
16	Maintenance/replacement of waterless (alcohol-based) hand sanitizer throughout hospital; wipe down dispenser when refilled; coordinate installation of dispensers. Empty canisters must be recycled.	Daily and as needed.

RESTROOMS		
	TASKS	FREQUENCY
1	Clean restroom fittings.	Every shift and as needed.
2	Clean and disinfect urinals, basins, toilet seats, seat covers, towel and paper fittings and sinks.	Every shift and as needed.
3	Replenish towels, toilet paper, and seat covers in all restrooms.	Every shift and as needed.
4	Replenish hand soap.	As needed.
5	Damp mop floors.	Every shift and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

RESTROOMS		
	TASKS	FREQUENCY
6	Dust low level ledges.	Every shift and as needed.
7	Clean and polish bright metal and mirrors.	Every shift and as needed.
8	Remove marks from walls, doors and partitions.	Every shift and as needed.

ELEVATORS (SERVICE AND PASSENGER)		
	TASKS	FREQUENCY
1	Sweep and mop floors. Remove gum and other sticky substances.	Daily and as needed.
2	Apply floor finish.	As needed.
3	Clean and polish metal and panels.	Daily and as needed.
4	Clean inside and outside doors.	Daily and as needed.
5	Dust light grills.	Daily and as needed.
6	Remove debris from elevator tracks.	Daily and as needed.
7	Check and clean elevator ceilings, doors and walls. Dust mop and damp mop Elevator floors. Keep Elevator tracks clean and free of dust and debris.	Daily and as needed.

PAY TELEPHONES		
	TASKS	FREQUENCY
1	Damp dust interior and exterior telephone booth panels with germicidal solution.	Daily and as needed.
2	Damp dust telephone and wipe with germicidal solution.	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

PAY TELEPHONES		
3	Report damaged or un-useable telephones to the Hospital Administration.	Daily and as needed.

SUPPLEMENTARY WORK		
	TASK	FREQUENCY
1	Scrub shower floors and wipe clean shower walls and curtains. Clean inside and outside of basin, drain covers and vent openings, bath and restrooms and drinking fountains.	Daily and as needed.
2	Clean public restrooms and replenish supplies.	Each 8 hour shift and as needed.
3	Clean employee restrooms, and replenish supplies (i.e. soap, towels, toilet paper, and seat covers, etc.).	Each 8 hour shift and as needed.
4	Damp dust countertops and hopper areas in ICUs with germicidal solution.	Daily and as needed.
5	Dispose of soiled linen and replace.	Daily and as needed.
6	Clean and polish drinking fountains.	Daily and as needed.
7	Check and remove finger marks and smears and clean low level interior glass partitions, glass door panels,	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

SUPPLEMENTARY WORK		
	TASK	FREQUENCY
	and windows.	
8	Dust electrical equipment (only if not connected to patients).	Daily and as needed.
9	Dust all horizontal surfaces, cabinet faces and interiors	Daily and as needed.
10	Damp dust all furnishings and repair.	Daily and as needed.
11	Damp dust all furnishings.	Daily and as needed.
12	Vacuum upholstered furnishings.	Daily and as needed.
13	Clean Refrigerator interior	Weekly.
14	Spot clean finger marks, smears and graffiti from vertical surfaces (walls, doors).	Daily and as needed.
15	Clean Refrigerator exterior	Weekly.
16	Wash vertical surfaces of ICUs.	Daily and as needed.
17	Dispose of Sharps as indicated when ¾ full. Remove from room/area collection location, transport according to facility procedure and place in collection location for removal by	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

SUPPLEMENTARY WORK		
	TASK	FREQUENCY
	sharps reprocessing contractor as designated by each facility.	
18	Wash ceilings vents.	Daily and as needed.
19	Damp dust and/or vacuum mini blinds and window shades.	Daily and as needed.
20	Change cubicle curtains/ drapes when soiled and as needed.	Check daily, weekly and change as needed or as directed by Infection Control.
21	Wash ceilings vents.	Daily and as needed.
22	Damp dust excluding technical equipment and laboratory counter tops.	Daily and as needed.
23	Dust mop all heavy traffic areas.	Each shift, daily, and as needed.
24	Clean designated offices during day hours.	Daily and as needed.
25	Steam clean trash containers.	Monthly.
26	Clean trash containers.	Monthly.
27	Dust mop and damp mop all stairs and landings. Damp dust rails and ledges. Remove gum behind rail	Daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

SUPPLEMENTARY WORK		
	TASK	FREQUENCY
	bars. Remove tape from all surfaces. Check painted walls for marks and remove. Spot wash stairwell and walls.	
28	Check and spot clean waiting rooms and public areas.	Every hour and as needed.
29	Clean patient care areas between patient encounters.	As requested by clinic staff.
30	Clean designated offices during day hours.	Daily and as needed.
31	Steam clean trash containers.	Monthly.
32	Clean trash containers inside and outside with germicidal spray.	Once per month.

MEDICAL AND BIO-HAZARDOUS WASTE		
All Medical Waste must be handled in compliance with the California Medical Waste Management Act (CA Health and Safety Code Statue 11700-118360)		
	TASK	FREQUENCY
1	Clean up hazardous and bio-hazardous waste (medical waste) spills, per established facility Infection Control procedures and applicable regulations.	Immediately and as needed.
2	Mop and decontaminate areas following sewer back up or overflow of any drain. Notify Infection Control. Follow Hospital Infection Control procedures.	Immediately and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

MEDICAL AND BIO-HAZARDOUS WASTE		
All Medical Waste must be handled in compliance with the California Medical Waste Management Act (CA Health and Safety Code Statute 11700-118360)		
	TASK	FREQUENCY
3	Bio-hazardous waste shall be contained for storage and disposal in red autoclavable plastic bags (“red bags”) with indicator strips which are impervious to moisture and have strength sufficient to preclude ripping tearing or bursting under normal conditions of usage and handling, and tied to prevent leakages or expulsion of solid or liquid wastes during storage, handling or transport. All bags used for collection, storage and disposal of bio-hazardous waste shall be red in color. All containers/carts for red bags shall be kept locked at all times and shall be visibly labeled with the words “Bio-hazardous Waste” in accordance with regulatory standards.	Once per shift daily and as needed. In accordance with procedures established by Facility Administrators.
4	Pick-up and transport bio-hazardous and hazardous waste to designated holding area/locations. Garbage chutes shall not be used to transfer bio-hazardous waste.	Once per shift daily and as needed. In accordance with procedures established by Facility Administrators.
5	Bio-hazardous waste will be picked up from the designated holding area/locations and will be taken to the autoclave for sterilization and disposed of according to facility procedure and applicable regulations. All containers/carts for red bags shall be kept locked at all times.	Once per shift daily and as needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

MEDICAL AND BIO-HAZARDOUS WASTE		
All Medical Waste must be handled in compliance with the California Medical Waste Management Act (CA Health and Safety Code Statue 11700-118360)		
	TASK	FREQUENCY
6	<p>Weigh and record red bags prior to being autoclaved. Records are to be kept for five years.</p> <p>Use biological indicators weekly to test the sterilizer. Records are to be kept for five years.</p> <p>Bio-hazardous waste shall be sterilized in the retort sterilizer.</p> <p>In accordance with the Medical Waste Management Act, Section 118215(a)(2)(b), Biohazard waste shall be subjected to a minimum of 250 degrees Fahrenheit for at least one-half hour, depending on the quantity and density of the load, in order to achieve sterilization of the entire load.</p> <p>Contractor supervisor shall inspect temperature gauge to be certain that Bio-hazardous waste has been autoclaved prior to placement into the trash compactor in accordance with hospital procedure manuals, Infection Control procedures and applicable regulations.</p> <p>Replace liners as needed.</p>	In accordance with procedures established by Facility Administrators.
7	Send autoclave spore test to Infection Control. Retain results in Contractor’s Office for five years.	Weekly.
8	Chemotherapeutic Waste Material removal/disposal is placed in a yellow plastic bag and labeled “Chemotherapy Hazard”. When collected, chemotherapy waste is taken to the Bio-hazardous Waste holding area and held for collection by a County provided hazardous waste collection contractor.	As needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

MEDICAL AND BIO-HAZARDOUS WASTE		
All Medical Waste must be handled in compliance with the California Medical Waste Management Act (CA Health and Safety Code Statute 11700-118360)		
	TASK	FREQUENCY
	Pick up chemotherapy and hazardous waste and transport to holding area.	
9	Remove trash from radiology areas per procedures established by Environmental Safety Officer.	Daily and as needed.
10	Place Radiation Hazardous Waste in the radiation hazardous waste area. Trash from radiation hazard areas is not to be removed until checked and released by the Radiation Safety Officer or designee.	Daily and as needed.
11	Monitor radiation levels of all waste bins/compactors prior to pick-up by solid waste handler. Records are to be kept by Contractor for five years.	Daily and as needed. In accordance with procedures established by Facility Administrators.
12	Remove and replace sharps containers when 3/4 full. Sharps waste shall be contained for disposal in rigid puncture proof containers. Remove from room/area collection location, transport according to facility procedure and place in collection location for removal by sharps reprocessing contractor as designated by each facility.	Daily and as needed. In accordance with procedures established by Facility Administrators.
13	Rigid disposal containers of bio-hazardous sharps waste shall be labeled as bio-hazardous waste.	Daily and as needed. In accordance with procedures established by Facility Administrators.
14	Remove full sharps containers in a covered custodial cart and transport to designated holding area for pick up by County designated preprocessing contractor.	Daily and as needed. In accordance with procedures established by Facility Administrators.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

TRASH/SOLID WASTE COLLECTION AND REMOVAL		
	TASK	FREQUENCY
1	Collect and remove solid waste generated in the building and place into Contractor provided receptacles.	Twice daily and as needed.
2	Normal waste collection.	Daily and as needed.
3	Contractor shall provide solid waste receptacle (trash carts for pickup).	Daily.
4	Containers used for the collection and/or storage of waste material shall be non-combustible or flame resistant construction and labeled or listed by Underwriters Laboratories, Inc. is acceptable.	As needed.
5	Clean areas/rooms used for the collection of solid waste.	Daily and as needed.
6	Dispose of solid waste only through a certified solid waste disposal facility that has been certified within the meaning of the Solid Waste Disposal Act, as amended by the Resource Recovery Act of 1970.	Daily.
7	Empty and clean all waste paper baskets, receptacles and ash trays.	Daily and as needed.
8	Replace fresh liners.	As needed.

LEVEL 1 INTENSITY (IN-PATIENT/PATIENT CARE AREAS)

TRASH/SOLID WASTE COLLECTION AND REMOVAL		
	TASK	FREQUENCY
9	Deposit/Deliver all trash from building to dumpster as trash bags are filled; remove jams/or blockages that may occur in dumpster.	Daily as requested.
10	Steam clean trash containers.	Weekly and as needed.
11	Remove trash from radiology areas per procedures established by Environmental Safety Officer.	Daily and as needed.

LEVEL 2 INTENSITY CLEANING (NON-PATIENT AREAS)

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

GENERAL HOUSEKEEPING: ADMINISTRATIVE, COUNTY OTHER OFFICES		
	TASK	FREQUENCY
1	Clean entrances, doors, glass, door panels/frames, jams and thresh hold plates.	Daily and as needed.
2	Dust all furniture, counter tops, high/low ledges, chair legs, door facings, window sills, fire extinguishers, television sets, damp wipe phones, including public phones.	Daily and as needed.
3	Move furniture and equipment (including beds, examining tables and other equipment and furniture) for storage upon request by facility administrator or designee.	Daily and as needed.
4	Remove graffiti. (Exterior and Interior)	Daily and as needed.
5	Clean and polish metal on drinking fountains.	Daily and as needed.
6	Clean Chalk Boards and Trays. Clean Boards.	Daily and as needed.
7	Empty all trash/waste containers.	Daily and as needed.
8	Empty recycle containers.	Daily and as needed.
9	Empty recycle bins in office areas.	Daily and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

GENERAL HOUSEKEEPING: ADMINISTRATIVE, COUNTY OTHER OFFICES		
	TASK	FREQUENCY
10	<p>Remove and store recycle bins contents in designated areas.</p> <p>Maintain confidential bins for shredding of confidential trash, weigh and count containers. Empty according to facility procedure if necessary maintaining appropriate control procedures for protected health information.</p> <p>Separate the cardboard from normal trash for recycling by bailing of cardboard. Contractor to provide baler and prepare and bale all cardboard for recycling.</p>	<p>When recycle bins are full and as</p> <p>Twice a week (Tuesday and Friday) or as needed</p> <p>Daily and as needed.</p>
11	<p>Report all hazardous conditions plumbing problems, floors, walls, doors and other items needing repairs to Facilities Management. If not repaired within five (5) working days, report to the Hospital Administrator.</p>	<p>As needed.</p>
12	<p>Report all hazardous conditions plumbing problems, floors, walls, doors and other items needing repairs to facilities management. If not repaired within five (5) working days, report to the Hospital Administrator.</p>	<p>Daily and as needed.</p>

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

GENERAL HOUSEKEEPING: ADMINISTRATIVE, COUNTY OTHER OFFICES		
	TASK	FREQUENCY
13	Turn in lost articles to hospital administration.	Daily and as needed.
14	Rope off all areas, post warnings or directional signs when cleaning floors, walls, or ceilings to protect public and employees from possible injury.	Daily and as needed.
15	Damp dust exterior of any fire extinguisher.	Daily and as needed.
16	Damp dust exterior surfaces of vending machines.	Daily and as needed.
17	Move furniture and equipment including beds, examining tables and other equipment and furniture for storage upon request by facility administrator or designee.	As needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

FLOOR MAINTENANCE: ADMINISTRATIVE, COUNTY AND OTHER OFFICES/ LOBBIES, HALLWAYS, WAITING AREAS, AND LOUNGES		
	TASK	FREQUENCY
1	Dust mop floors. Dust mop all non-carpeted areas using a dust control tool daily, including corners, baseboards and inaccessible areas such as behind file cabinets. Keep baseboards free of dust, splash marks and old seal.	Daily and as needed.
2	Check and sweep all heavy traffic areas at 8:00 am and 10:00 pm.	Daily and as needed.
3	Wet mop all non-carpeted floors. All floors must be dust mopped before wet mopping.	Daily and as needed.
4	Clean and mop up spills and broken glass.	Immediately upon notification.
5	Buff floors. Mop before buffing	Twice a week and as needed.
6	Apply floor finish using non-slip wax.	Monthly and as needed.
7	Scrub or strip and refinish floors. Maintained in a clean state, free of build-up of dirt and black markings, and with hospital approved products.	Quarterly and as needed.
8	Vacuum carpets and rugs in offices and non-office areas.	Weekly and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

FLOOR MAINTENANCE: ADMINISTRATIVE, COUNTY AND OTHER OFFICES/ LOBBIES, HALLWAYS, WAITING AREAS, AND LOUNGES		
	TASK	FREQUENCY
9	Vacuum entrance rugs.	Daily and as needed.
10	Spot shampoo carpets and rugs. Check and remove spots and stains from carpeted areas.	As needed.
11	Shampoo heavy use carpets and rugs. Vacuum carpets and rugs before shampooing.	Monthly and as needed.
12	Shampoo carpets and rugs. Remove movable items (chairs, tables, boxes, etc.) from area prior to shampooing. In most cases carpet area should be shampooed on Fridays after hours of operation to allow for drying time over the weekends.	Quarterly and as needed.
13	Vacuum and shampoo/clean upholstered furnishing.	As needed and as requested.
14	Public Cafeteria - Dining Area – Strip and wax floors.	Monthly and as needed.
15	Maintain flooring as prescribed by manufacturer and applicable regulations.	As needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

RESTROOMS		
	TASKS	FREQUENCY
1	Clean walls, doors, partitions, dust vents, sweep and damp mop floors.	Every shift and as needed.
2	Clean restroom fitting.	Every shift and as needed.
3	Clean and disinfect urinals, basins, toilet seats, seat covers, towel and paper fittings and sinks.	Every shift and as needed.
4	Replenish towels, toilet paper, and seat covers in all restrooms.	Every shift and as needed.
5	Replenish hand soap.	Every shift and as needed.
6	Dust low level ledges.	Every shift and as needed.
7	Clean and polish bright metal and mirrors.	Every shift and as needed.
8	Remove marks from walls, doors and partitions.	Every shift and as needed.

STAIRWELLS/LANDINGS		
	TASKS	FREQUENCY
1	Sweep and damp mop all stairs and landings.	Daily and as needed.
2	Dust rails and ledges.	Every shift and as needed.
3	Remove gum behind rail bars.	Every shift and as needed.
4	Check painted walls for marks and remove.	Every shift and as needed.
5	Spot wash stairwell and walls.	Every shift and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

ELEVATORS (SERVICE AND PASSENGER)		
	TASKS	FREQUENCY
1	Sweep and mop floors.	Daily and as needed.
2	Apply floor finish.	As needed.
3	Clean and polish metal and panels.	Daily and as needed.
4	Clean inside and outside doors.	Daily and as needed.
5	Dust light grills.	Daily and as needed.
6	Remove debris from elevator tracks. Sweep or use dry tank vacuum to remove debris from tracks.	Daily and as needed.
7	Check and clean elevator ceilings, doors and walls. Dust mop and damp mop Elevator floors. Keep Elevator tracks clean and free of dust and debris.	Daily and as needed.

PAY TELEPHONES		
	TASKS	FREQUENCY
1	Damp dust interior and exterior telephone booth panels with germicidal solution.	Daily and as needed.
2	Damp dust telephone and wipe with germicidal solution.	Daily and as needed.
3	Report damaged or non-useable telephones to Information Systems or Hospital Administration as appropriate.	Daily and as needed

AUDITORIUMS, CONFERENCE AND ASSEMBLY ROOMS		
	TASK	FREQUENCY
1	Clean auditoriums, conference and meeting rooms and employee break	After each use.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

AUDITORIUMS, CONFERENCE AND ASSEMBLY ROOMS		
	TASK	FREQUENCY
	rooms. Arrange tables and chairs as previously requested. Set up or rearrange rooms upon request.	
2	Dust mop and damp mop floors. Clean vertical surfaces - spot clean finger marks, smears and graffiti.	Daily and as needed. Wash quarterly.
3	Change floor mats.	Weekly.
4	Vacuum carpets.	Daily and as needed.
5	Shampoo Carpets/rugs.	Quarterly and as needed.

PHYSICIAN'S CALL ROOMS		
	TASK	FREQUENCY
1	Wipe and clean all tables, chairs; vertical and horizontal surfaces.	Daily and as needed.
2	Sweep and mop floors.	Daily and as needed.
3	Apply floor finish.	As needed.
4	Clean and disinfect urinals, basins, clean toilet seats (on both sides), clean inside and outside of basins, and toilets, clean and polish all metal fixtures, clean mirrors, clean `walls, doors, partitions, dust vents, sweep and mop floors.	Daily and replenish supplies as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

PHYSICIAN'S CALL ROOMS		
	TASK	FREQUENCY
5	Clean showers.	Daily and as needed.
6	Strip bed, wet wipe mattress, bed frame and pillow with germicidal solution.	Daily and as needed.
7	Remake bed using clean linen.	Daily and as needed.

LINEN ROOM		
	TASK	FREQUENCY
1	Buff floors. Mop before buffing.	Monthly as needed.
2	Buff floors. Mop before buffing.	Monthly as needed.
3	Apply floor finish.	Monthly and as needed.
4	Scrub or strip and refinish floors. Maintain in a clean state, free of build-up of dirt and black markings, and with hospital approved products.	Quarterly and as needed.

WAREHOUSE/STORAGE AREAS		
	TASK	FREQUENCY
1	Dust mop office, warehouse/storage areas, including shelving and bins using a chemically treated dust control	Daily.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

WAREHOUSE/STORAGE AREAS		
	TASK	FREQUENCY
	device.	
2	Machine scrub all floors with an approved solution.	Twice a week.

KITCHEN, NUTRITION AREAS), PHYSICIAN CONFERENCE AND DINING ROOM		
	TASK	FREQUENCY
1	Dust mop floors. Dust mop all non-carpeted areas using a dust control tool daily, including corners, baseboards and inaccessible areas such as behind file cabinets. Keep baseboards free of dust, splash marks and old seal.	Daily and as needed.
2	High dust all surfaces above 6 feet, including cleaning all air vents.	Daily and as needed.
3	Remove trash and steam clean trash containers.	Daily and as needed.
4	Change floor mats.	Weekly and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

TRASH/SOLID WASTE COLLECTION AND REMOVAL		
	TASK	FREQUENCY
1	Contractor shall provide solid waste receptacle (trash carts for pickup).	Daily and as needed.
2	Clean rooms used for the collection of solid waste.	Daily and as needed.
3	Dispose of solid waste only through a certified solid waste disposal facility that has been certified within the meaning of the Solid Waste Disposal Act, as amended by the Resource Recovery Act of 1970.	Daily and as needed.
4	Empty and clean all ash trays.	Daily and as needed.

FINISHING WORK		
	TASK	FREQUENCY
1	Clean restrooms and sinks and replenish supplies. Replenish waterless hand sanitizer/alcohol foam in all areas and wipe down dispensers. Empty canisters must be recycled. Clean and disinfect seat, seat covers (both sides, towel and paper fittings).	Daily and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

FINISHING WORK		
	TASK	FREQUENCY
	Scrub shower floors and wipe clean shower walls and curtains. Clean inside and outside of basin, drain covers and vent openings, bath and restrooms.	
2	Clean public restrooms and replenish supplies.	Each 8 hour shift and as needed.
3	Clean employee restrooms, and replenish supplies (e.g., soap, towels, toilet paper, and seat covers, etc.).	Each 8 hour shift and as needed.
4	Damp dust countertops and hopper areas in ICUs.	Daily and as needed.
5	Dispose of soiled linen.	Daily and as needed.
6	Clean and polish drinking fountains.	Each 8 hour shift and as needed.
7	Check and remove finger marks and smears and clean low level interior glass partitions, glass door panels, and windows.	Daily and as needed.
8	Dust electrical equipment (only if not connected to patients).	Daily and as needed.
9	Damp dust countertops of all workrooms and hopper areas, e.g., utility rooms.	Daily and as needed.
10	Damp dust all furnishings and fittings to include but not be limited to: - beds, head, foot and side rails; - stretchers (occupied and unoccupied); - tables, bedside and over bed;	Daily and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

FINISHING WORK		
	TASK	FREQUENCY
	<ul style="list-style-type: none"> - chairs; - footstools; - linen hampers; - carts; - wheelchairs; - exam tables; - television sets; - telephone; - lockers and cabinets external surfaces; - vents; - window sills and ledges; - bedside lamps; - fire extinguishers; - countertops; - pipes; - furniture fittings and equipment; - miscellaneous; - wheels of items, remove dirt and debris. 	
11	Vacuum upholstered furnishings. Report ripped or torn furnishing for removal and repair.	Daily and as needed.
12	Damp wipe and clean stainless steel and other metal, to include but not limited to; metal kick plates, railings, wall corner coverings, door handles, door frames and foot plates, portable	Daily and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

FINISHING WORK		
	TASK	FREQUENCY
	chart racks, I.V. stands, and wheelchairs.	
13	Thoroughly wash surfaces of refrigerators, stoves, ovens, ice machines, and all kitchen equipment.	Daily and as needed.
14	Spot clean finger marks, smears and graffiti from vertical surfaces (walls, doors).	Daily and as needed.
15	Wash vertical surfaces (walls, doors, doorjambs).	Daily and as needed.
16	Wash vertical surfaces of ICUs.	Daily and as needed.
17	Damp dust all high level items, to include but not limited to: unoccupied closets, lights, ceiling light fixtures, direction and exit signs, air duct grills, fans.	Daily and as needed.
18	Wash ceilings vents.	Daily and as needed.
19	Clean all interior glass partition, glass door panels and windows.	Daily and as needed.
20	Vacuum upholstered furnishing.	Daily and as needed.
21	Damp dust and/or vacuum mini blinds and window shades.	Daily and as needed.
22	Replace cubicle curtains when soiled or damaged.	Check daily, quarterly and change as needed when visibly soiled or as directed by Infection Control.
23	Check cleaning in the following areas: Entrance lobby waiting rooms, all public restrooms, corridors, elevators, outpatient clinics, Emergency Department and heavily used areas of the X-Ray Dept. throughout the day to maintain	2 times, 8 hour shift, and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

FINISHING WORK		
	TASK	FREQUENCY
	clean and tidy conditions.	
24	Damp dust excluding technical equipment and laboratory counter tops.	Daily and as needed.
25	Check and clean elevator ceilings, doors and walls. Dust mop and damp mop Elevator floors. Keep Elevator door tracks clean and free of dust and debris.	Daily and as needed.
26	Dust mop and damp mop all stairs and landings. Damp dust rails and ledges. Remove gum behind rail bars. Check painted walls for marks and remove. Spot wash stairwell and walls.	Daily and as needed.
27	Dust mop all heavy traffic areas.	Each shift and as needed.
28	Wash windows (inside and outside surfaces including screens.	Quarterly. Monday through Friday between 7:00 a.m. and 4:00 p.m.
29	Auditoriums, conference and meeting rooms. Reconfigure as previously set up. Set up rooms as requested.	After each use within the buildings.
30	Sweep and damp mop stairs and landings at loading dock. Vertical surfaces - spot clean finger marks, smears and graffiti.	Daily and as needed. Wash quarterly.
31	Conference dining room.	Daily and as needed.
32	Kitchen.	Daily and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

FINISHING WORK		
	TASK	FREQUENCY
33	Change Floor mats.	Weekly as needed.
34	<p>Clean and disinfect all public telephones and wash telephone booths (if applicable including ledges and doors; spot clean walls.</p> <p>Report all plumbing, floors, walls, doors and other items needing repairs to Facilities Management. If not repaired within five (5) working days, report to the Assistant Hospital Administrator.</p> <p>Rope off areas, post warning or directional signs when cleaning floors, walls, or ceilings to protect public and employees from possible injury.</p>	Daily and as needed.
35	<p>Damp dust fire extinguishers.</p> <p>Damp dust exterior surfaces of vending machines.</p>	Daily and as needed.
36	<p>Mop and decontaminate area following sewer back up or overflow of any drain. Notify Infection Control. Follow proper Hospital Infection Control, Decontamination and Safety Procedures to minimize spread of contaminants.</p> <p>Decontaminate any room, surface, or area following infectious exposure.</p>	Immediately and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

MEDICAL AND BIO-HAZARDOUS WASTE		
	TASK	FREQUENCY
1	Clean up hazardous and bio-hazardous waste spills per established hospital procedure and applicable regulations.	Immediately upon notification of spill and as needed.
2	Bio-hazardous and hazardous waste pick up and transfer to designated holding area. All containers/carts for red bags shall kept locked at all times.	Daily and as needed.
3	<p>Dispose of all waste.</p> <p>All medical waste must be handled in compliance with the California <u>Medical Waste Management Act (CA Health and Safety Code Statue 117600 – 118360)</u></p> <p>Transport normal waste either by disposal in trash containers and leak-proof carts. Biohazardous waste is red bagged and transported to the designated handling areas. All containers/carts for red bags shall kept locked at all times.</p> <p>The bio-hazardous waste shall be sterilized in the retort sterilizer. In accordance with the Medical Waste Management Act, Section 118215(a)(2)(b), Biohazard waste shall be subjected to a minimum of 250 degrees Fahrenheit for at least one-half hour, depending on the quantity and density of the load, in order to achieve sterilization of the entire load.</p> <p>Contractor supervisor shall inspect temperature gauge to be certain that bio-hazardous waste, has been autoclaved prior to placement into the trash compactor in accordance with hospital procedure manuals and applicable regulations. Records must be maintained for five years.</p>	Daily and as needed.

LEVEL 2 INTENSITY (NON-PATIENT AREAS)

MEDICAL AND BIO-HAZARDOUS WASTE		
	TASK	FREQUENCY
	Replace cart liners as needed. Deposit trash collected into containers.	
4	Place Radiation Hazard waste in the in the radiation hazard waste area until checked and released by the Radiation Safety Officer.	Daily and as needed.
5	Remove and replace sharps containers when 3/4 full. Transport to and place in the holding area for pick up by licensed medical waste reprocessor. Medical waste hauler to incinerate and dispose of used sharps/pharmaceutical waste containers.	At least once per shift daily and as needed.
6	Monitor radiation levels of all waste bins/compactors prior to pick-up by solid waste handler. Records must be maintained for five years.	Daily and as needed.

LEVEL 3 INTENSITY CLEANING (MISCELLANEOUS SERVICES)

LEVEL 3 INTENSITY CLEANING (MISCELLANEOUS SERVICES)

PEST EXTERMINATION SERVICES

Contractor shall provide the following Pest Extermination Services to include but not limited to fleas, ants, roaches, mites, and vermin for all Facility areas.

Contractor' Pest Extermination Services, for all work involving the use of chemicals, shall be accomplished by a State of California licensed pest control operator. Contractor shall ensure that only persons possessing a valid California Pest Control Advisor License make written recommendations for use of chemicals prior to any application. Contractor, prior to using restricted pesticides, shall furnish Department of Health Services with a valid and current restricted materials permit issued by the County Agricultural Commissioner Department.

	TASK	FREQUENCY
1	<p>Inspect building and grounds to locate, identify and eradicate infestations of pests including ants, flies, fleas, roaches, gnats, spiders, rodents, etc.</p> <p>Prepare and use approved poison bait, insecticides, and traps in infested areas.</p> <p>Locate conditions conducive to infestations and develop and implement preventive pest control programs subject to County approval.</p> <p>Report to Administrator damage to building appurtenant structures from termites, damp rot, or other pests.</p>	<p>Twice a week and as needed within a twenty four (24) hour period, including holidays.</p>

LEVEL 3 INTENSITY CLEANING (MISCELLANEOUS SERVICES)

2	Provide Pest Extermination Services.	Weekly in-patient/patient and dietary areas and monthly in office areas.
3	Adhere to all regulations and safety precautions listed in the "Pesticide Information and Safety Manual" published by the University of California. Records must be maintained for five years.	In the provisions of all Pest Extermination Services.

PARKING LOT, INTERIOR STREETS, SIDEWALKS/STREET, RAMPS, DOCK AREAS, SIDES OF BUILDING, AND SIDEWALK CLEANING SERVICES		
	TASK	FREQUENCY
1	Clean parking lots of trash. Remove oil, grease, and other stains from parking lot surfaces, using conventional equipment. Remove dirt and litter from around obstructions such as concrete wheel stops.	Daily and as needed.
2	Clean and sweep all interior streets and parking lots on the campus.	Daily and as needed.
3	Clean sidewalks adjacent to all buildings on the campus and parking	Daily and as needed.

LEVEL 3 INTENSITY CLEANING (MISCELLANEOUS SERVICES)

PARKING LOT, INTERIOR STREETS, SIDEWALKS/STREET, RAMPS, DOCK AREAS, SIDES OF BUILDING, AND SIDEWALK CLEANING SERVICES		
	TASK	FREQUENCY
	lots using conventional sweeping equipment. Empty and wash trash containers and move other obstructions such as rubbish bins. Furnish and install plastic bags when needed. Note and report any needed repairs of parking lot or sidewalk surfaces and adjacent fences to Facility Administrator.	
4	Sweep sidewalk areas (Main Unit) and remove cigarette butts Sidewalk traversing areas. Hospital, clinic. Sidewalks joining clinics, trailers and hospitals.	Daily and as needed.
5	Remove scuff marks from yellow painted edges/ surfaces.	Daily and as needed.
6	Wash all sidewalks.	Daily and as needed.
7	Sweep steps and landings.	Daily and as needed.
8	Sweep areas between buildings flanking entryway to hospital and trailers.	Daily and as needed.

LEVEL 3 INTENSITY CLEANING (MISCELLANEOUS SERVICES)

PARKING LOT, INTERIOR STREETS, SIDEWALKS/STREET, RAMPS, DOCK AREAS, SIDES OF BUILDING, AND SIDEWALK CLEANING SERVICES		
	TASK	FREQUENCY
9	Sweep hospital rear sidewalks, entrance and dock area. Sweep entire concrete area running across rear of hospital.	Daily and as needed.
10	Sweep hallways and walkways.	Daily and as needed.
11	Sweep or hose sides of building.	Daily and as needed.
	Sweep, clean or hose parking structure, trash cans and elevator.	Daily and as needed

WINDOW WASHING SERVICE		
	TASK	FREQUENCY
1	Cover books, papers, flower pots, or other items on window ledges or sill. Cover furniture such as desks, tables, cabinets, or any other item in front of windows. Cover all office furniture, which cannot be moved, with plastic cover.	Quarterly. Provide a 2 day notice prior to cleaning.
2	Window washers shall not stand on	Quarterly.

LEVEL 3 INTENSITY CLEANING (MISCELLANEOUS SERVICES)

WINDOW WASHING SERVICE		
	top of furniture.	Provide a 2 day notice prior to cleaning.
3	Window washers shall return all items that were moved to their original location, upon completion of washing windows.	Quarterly. Provide a 2 day notice prior to cleaning.
4	Wash all interior and exterior glass or mirrors, metal frames, metal louvers, porcelain panels, inside and outside, window sills and ledges completely, including stainless steel mullions, aluminum mullions, window screen, and outside building surfaces, such as marble and other smooth surfaces.	Quarterly. Provide a 2 day notice prior to cleaning.
5	Remove streaks and watermarks from all windows, walls, and ledges. Remove excess water from floors in the immediate area; remove all water and cleaning agents before leaving the area.	Quarterly. Provide a 2 day notice prior to cleaning.
6	Leave windows and the adjacent surrounding areas in a clean condition. Lock all windows.	Quarterly. Provide a 2 day notice prior to cleaning.

LEVEL 3 INTENSITY CLEANING (MISCELLANEOUS SERVICES)

WINDOW WASHING SERVICE		
7	Remove all cleaning equipment from areas after completion of work.	Quarterly. Provide a 2 day notice prior to cleaning.
8	Immediately report to Administrator all broken windows, mirrors, etc., or otherwise non-functioning window opening and closing mechanisms.	Immediately upon discovery.
9	Perform all window cleaning techniques and practices in a safe manner in accordance with the "Window Cleaning Safety Orders," issued by the Division of Industrial Safety of the State of California. Equipment such as ladders, scaffolds, safety belts, lifts, etc., shall meet California OSHA Safety Standards.	Quarterly. Provide a 2 day notice prior to cleaning.
10	When working overhead, rope off areas or post warning signs to prevent the public from walking into the working area.	Quarterly. Provide a 2 day notice prior to cleaning.
11	Use protective rubber gloves and eye protectors if acid or other corrosive substances are used to clean glass, metal frames, etc.	Quarterly. Provide a 2 day notice prior to cleaning.

LEVEL 3 INTENSITY CLEANING (MISCELLANEOUS SERVICES)

WINDOW WASHING SERVICE		
12	Shall wear a safety harness with a lifeline while using a Boatswain's chair or operating a power platform. The use of these power lifts is prohibited during severe or adverse weather.	Quarterly. Provide a 2 day notice prior to cleaning.

Light Fixtures and Ceilings		
	Task	Frequency
1	Wash light fixtures.	Annually.
2	Wet dust ceiling lights.	Quarterly and/or as needed.
3	Vacuum or brush all ceilings.	Annually or as needed.

LEVEL 3 INTENSITY CLEANING (MISCELLANEOUS SERVICES)

CONSUMABLE SUPPLIES

The Contractor shall provide supplies that are commercial grade and meet the required specifications in the SOW and listed below. The Contractor will supply all their own cleaning supplies including soap, paper products, red bags and walk off mats.

Contractor must provide samples of all supplies and MSDS sheets that will be used for the facilities during the pre-job conference. Facility Manager to review products prior to use. No products to be used that are not prior approved.

1	Must provide white toilet paper (roll) – 2 ply, manufactured by 135 soft plus or equal.
2	Must provide toilet seat covers of a high quality, capable of fitting dispensers.
3	Must provide commercial grade liquid hand soap for all dispensers.
4	Must provide paper towels manufactured by Crown Zellerback or equal that is capable of fitting various dispensers in each facility.
5	Must provide diaper changing liners that are manufacturer's recommendation or equal.
6	Must provide deodorant cakes and/or deodorizers upon County Facility Project Monitors request only.
7	Must provide "red bags" and autoclave liners.
8	Must provide trash liners.
9	Must provide waterless hand sanitizer/alcohol foam in all areas. Empty canisters are to be recycled.

This Page is a summary of potential maximum not to exceed costs for County that includes County's discretionary Contingency Funds. Use of Contingency Funds referenced here may only be authorized by an executed Amendment to the Agreement and pursuant to Agreement, Subparagraph 5.1.3 and Subparagraph 8.1.4. Further, actual not to exceed payment rates are set forth in Agreement Subparagraph 5.1.1 and in Exhibit B-1 (A) and B-2 (D).

SODEXO- Group 1 DHS Facilities: Olive View-UCLA MC, Mid-Valley HC, and San Fernando						
SODEXO - Group 3 DHS Facilities: Harbor-UCLA MC, Long Beach CHC, and Lomita Family HC						
(A)	(B)	(C)	(D)	(E)	(F)	(G)
DHS Annual Agreement Sum (Original Base) 1	DHS Annual 10% Contingency (First Year Original Amount)	Amendment Annual Cost To Add New S/E Building at Harbor-UCLA MC	DHS Annual 10% Contingency Increase*	Amendment Annual Cost To Add New S/E Building at Harbor-UCLA MC & 10% Contingency Increase*	DHS Total Cost Including 10% Contingency*	Annual Maximum Obligation Including 10% Contingency*
Group 1	\$6,091,267	\$609,127	\$0	\$0	\$6,700,393	\$6,700,393
Group 3	\$5,776,203	\$577,620	\$1,683,144	\$168,314	\$8,205,282	\$8,205,282
Total	\$11,867,470	\$1,186,747	\$1,683,144	\$168,314	\$14,905,675	\$14,905,675

*10% Contingency is for emergency or expanded work (e.g. additional space opened at existing facility)

SODEXO- Group 1 DPH Facilities: Burbank HC, Glendale HC, N. Hollywood HC, and Pacoima HC			
(H)	(I)	(J)	(K)
DPH Annual Agreement Sum	DPH Annual 10% Contingency	DPH Total Cost Including 10% Contingency	DPH Annual Maximum Obligation
Group 1	\$140,939	\$14,094	\$155,033
Total	\$140,939	\$14,094	\$155,033

	Total (A+B+K)
Original Annual Maximum Obligation Including 10% Contingency For DHS & DPH :	\$13,209,250
	Total (G+K)
New Annual Maximum Obligation Including 10% Contingency For DHS & DPH:	\$15,060,708

*10% Contingency is for emergency or expanded work (e.g. additional space opened at existing facility)

HOUSEKEEPING SERVICES
PRICING SHEETS

FOR BASIC HOUSEKEEPING SERVICES		
(Work is Described in Agreement, Exhibits A-1, A-2, and A-3, SOW and Exhibit C, Technical Exhibits to SOW)		
FACILITY LOCATION	BILL TO ADDRESS (Submit Invoices)	MONTHLY PRICE
*DHS FACILITIES		
OLIVE VIEW-UCLA MEDICAL CENTER	Olive View-UCLA Medical Center, Expenditure Management, 14445 Olive View Drive, Sylmar, CA 91342	\$487,515.60
MID-VALLEY COMPREHENSIVE HEALTH CENTER	Mid-Valley Comprehensive Health Center, Expenditure Management, 7515 Van Nuys Blvd, Van Nuys 91405	\$16,043.25
SAN FERNANDO HEALTH CENTER	San Fernando Health Center, Expenditure Management, 1212 Pico Street, San Fernando, CA 91340	\$4,046.69
	*DHS TOTAL:	\$507,605.55
*DPH FACILITIES		
BURBANK HEALTH CENTER	Burbank Health Center, 1101 West Magnolia Boulevard, Burbank, CA 91503, Attention : Maria Kharadjian	\$2,074.27
GLENDALE HEALTH CENTER	Glendale Health Center, Community Health Services, 501 North Glendale Avenue, Glendale, CA 91206	\$3,790.96
NORTH HOLLYWOOD HEALTH CENTER	North Hollywood Health Center, Community Health Services, 5300 Tujunga Avenue, North Hollywood, CA 91601	\$2,248.61
PACOIMA HEALTH CENTER	Pacoima Health Center, Community Health Services, 13300 Van Nuys, Blvd, Pacoima, CA 91331	\$3,631.08
*DHS-Department of Health Services Facilities		
*DPH- Department of Public Health Facilities	*DPH TOTAL:	\$11,744.93
	GRAND TOTAL:	\$519,350.47

sodexo

October 23, 2012

Mr. Zev Yaroslávsky
Los Angeles County Supervisor, Third District
821 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

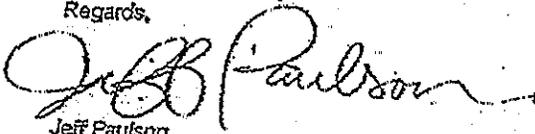
Dear Mr. Yaroslávsky,

This correspondence is in response to the letter dated October 12, 2012, to Supervisor Yaroslávsky, from a public relations firm on behalf of Servicon System, Inc. The meritless issues raised in the public relations letter sent on behalf of Servicon have all been previously raised by Servicon and refuted by every prior arbiter that has considered them. Servicon's initial RFP response was not accepted, so they filed a request for review by the Department of Health Services alleging the same issues that were raised in the letter to the Supervisor. DHS reviewed the matter in detail and denied the matter as meritless. Servicon then filed a request for review by the County Review Panel. That request for review again contained the same issues that were raised in the DHS review as well as the current letter to the Supervisor. The independent County Review Panel reviewed the allegations in detail. They convened and heard approximately three hours of testimony and argument. At the conclusion, they too found that there was no merit to Servicon's assertions.

The only issue not examined at length by the prior review panels is Servicon's inaccurate and unfounded assertion that Sodexo will not be able to comply with its obligations to SEIU. Let us be very clear on this point: Sodexo will comply with its obligations under the collective bargaining agreement with SEIU, and such compliance will not require an increase in the amounts quoted by Sodexo in our RFP response. Representatives of Sodexo and SEIU have met and discussed the proposed change from Servicon to Sodexo and we at Sodexo have affirmed our intention and ability to meet our obligations to SEIU under the collective bargaining agreement and to the County of Los Angeles under our proposal.

In summary, the County's RFP process was not faulty or in any manner inadequate and as noted above we stand ready to serve the employees, the County of Los Angeles, and most importantly the patients, guests, staff and hospital employees. As such, we request that the Board of Supervisors award the contracts for housekeeping services Groups 1 and 3 to Sodexo without further delay.

Regards,



Jeff Paulson
President, West Operations
Sodexo Healthcare
jeff.paulson@sodexo.com

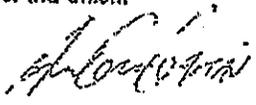
Cc: Los Angeles County Supervisors and Deputies
Kathy Hanks
Andrew Gaitan
Carol Alesso
Talia Reyes
Roger Fry

Memorandum of Agreement
by & between
SEIU-USWW and Sodexo Health Care Services

together with any incidental expenses mutually agreed upon in advance, shall be borne equally by the parties

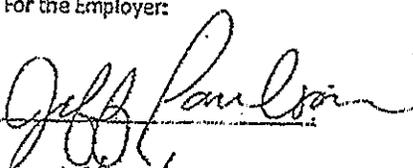
e The decision of the Arbitrator shall be final and binding on both parties. It is understood that the Arbitrator shall not have the ability or power to in any way modify, change, restrict, or extend any of the terms of this Agreement.

For the Union:



10/18/12
Date

For the Employer:



10/19/12
Date

Memorandum of Agreement
by & between
SEIU-USWW and Sodexo Health Care Services

SEIU: United Service Workers West ("the Union") and the Sodexo Corporation ("the Employer") agree to the following terms:

- 1 The Employer recognizes that the Union currently represents Servicon's non-clerical, non-supervisory employees providing housekeeping services to the Los Angeles County Department of Health Services at the Harbor and Olive View Hospitals ("Group 1 and 3 Employees")
- 2 The Employer recognizes that the Union is signatory to a current collective bargaining agreement covering the Group 1 and 3 Employees
- 3 If the Los Angeles Department of Health Services awards the service contract for housekeeping services at Harbor and Olive View Hospitals to the Employer, the Employer will:
 - a Provide written offers of employment to all of the Group 1 and 3 Employees, and
 - b Honor and maintain, at a minimum, all current wages, shift differentials, paid time off benefits, and any other current contractual conditions of the Group 1 and 3 Employees for the life of the service contract awarded by Los Angeles County, including the and
 - c Maintain, at a minimum, current staffing levels and total hours for the life of the service contract awarded by Los Angeles County, and
 - d Recognize the Union as the sole and exclusive bargaining representative with respect to wages, hours and other conditions of employment for all Group 1 and 3 Employees
 - e Become signatory to the current collective bargaining agreement covering the Group 1 and 3 Employees effective the Employer's first date of service
- 4 Disputes arising out of the expressed terms or conditions of this agreement shall be handled in the following manner:
 - a The parties will attempt to address issues promptly as they arise
 - b Any issues which the parties cannot resolve informally within thirty (30) days of written notice by either party may be referred for final decision and determination to an impartial arbitrator
 - c A request for arbitration shall be filed in writing with the Federal Mediation and Conciliation Service (FMCS) no later than sixty (60) calendar days following the initial written notice of the issue
 - d Both the Employer and the Union agree to be bound by the rules and regulations of the FMCS. Each party to this Agreement shall bear the expenses of preparing and presenting its own case. The fees and the expenses of the Arbitrator,

HOUSEKEEPING SERVICES
PRICING SHEETS

FOR BASIC HOUSEKEEPING SERVICES (Work is Described in Agreement, Exhibits A-1, A-2, and A-3, SOW and Exhibit C, Technical Exhibits to SOW)		
FACILITY LOCATION	BILL TO ADDRESS (Submit Invoices)	MONTHLY PRICE
*DHS FACILITIES		
HARBOR-UCLA MEDICAL CENTER	Harbor-UCLA Medical Center 1000 W. Carson Street, Building D3.5, Box 479, Torrance, CA 90509, Attention: Head, General Accounting Unit	598,969.68
LONG BEACH COMPREHENSIVE HEALTH CENTER	Harbor-UCLA Medical Center 1000 W. Carson Street, Building D3.5, Box 479, Torrance, CA 90509, Attention: Head, General Accounting Unit	18,770.76
LOMITA FAMILY HEALTH CENTER	Harbor-UCLA Medical Center 1000 W. Carson Street, Building D3.5, Box 479, Torrance, CA 90509, Attention: Head, General Accounting Unit	3,871.85
	GRAND TOTAL:	\$621,612.28
*DHS-Department of Health Services Facilities		

FOR AUTHORIZED ADDITIONAL HOUSEKEEPING SERVICES	
(Description of Work is Set Forth in Agreement, Exhibit A-4)	
ADDITIONAL SERVICES	HOURLY RATES INCLUDING BENEFITS
Unscheduled Work/Emergencies	
Facility Additions - Staffing	
<u>Day Shift Staffing</u>	<u>Day Shift Pricing</u>
Housekeeper	\$15.99
Floor Tech/Red Line Housekeeper	\$16.32
Supervisor	\$25.20
<u>Evening Shift Staffing</u>	<u>Evening Shift Pricing</u>
Housekeeper	\$16.66
Floor Tech/Red Line Housekeeper	\$17.00
Supervisor	\$25.20
<u>Night Shift Staffing</u>	<u>Night Shift Pricing</u>
Housekeeper	\$17.20
Floor Tech/Red Line Housekeeper	\$17.54
Supervisor	\$25.20

sodexo*

October 23, 2012

Mr. Zev Yaroslavsky
 Los Angeles County Supervisor, Third District
 821 Kenneth Hahn Hall of Administration
 500 West Temple Street
 Los Angeles, CA 90012

Dear Mr. Yaroslavsky,

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Regards,



Jeff Paulson
 President, West Operations
 Sodexo Healthcare
jeff.paulson@sodexo.com

Cc: Los Angeles County Supervisors and Deputies
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Memorandum of Agreement
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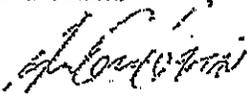
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 - b Honor and maintain, at a minimum, all current wages, shift differentials, paid time off benefits, and any other current contractual conditions of the Group 1 and 3 Employees for the life of the service contract awarded by Los Angeles County, including the and
 - c Maintain, at a minimum, current staffing levels and total hours for the life of the service contract awarded by Los Angeles County, and
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Memorandum of Agreement
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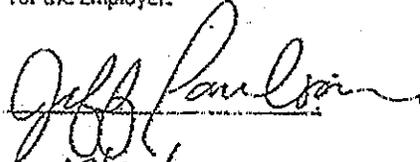
For the Union:



10/18/12

Date

For the Employer:



10/19/12

Date

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

1. INTRODUCTION: HEALTH AND PATIENT CARE SERVICES

Harbor-UCLA Medical Center (H-UCLA MC) is located at 1000 West Carson Street, Torrance, CA 90509. The clinics are through the campus (inside and outside of the main building)

Level I Trauma Center, fully licensed by the California State Department of Health Services to offer a wide array of clinical and ancillary services, such as:

Medical/Surgical	Prenatal
Pediatrics	Labor & Delivery
Pediatrics ICU	Intensive Care
Coronary Care	Acute Respiratory
ICU-Newborn Nursery	Psychiatry Emergency
Pediatric Emergency Dept	Psychiatry
Operating Rooms	Urgent Care
Basic Emergency	Cardiovascular Surgery
Nuclear Medicine	Occupational Therapy
Physical Therapy	Ambulatory Care
Radiation Therapy	Renal Transplant Center
Respiratory Care	Social Services
Speech Pathology/Audiology	Pathology
Pharmacy	Obstetric & Gyn
Neurology	Pediatric

The medical center plant (Unit I) is an eight-story acute care facility. Adjacent to the medical center is a complex of three masonry buildings and multiple one-story stationary trailers, cottages, and wooden barracks

2. FACILITY HOURS OF OPERATION FOR MEDICAL CENTER AND CLINICS

Listed below are Facility Hours of Operation.

FACILITY	HOURS
Hospital and Inpatient areas	24 hours per day, 7 days per week
General Clinic Hours	Monday through Friday 8:00 a.m. to 5:00 p.m.
Hours of Operation for Special Clinics:	Monday through Friday
1st Floor Clinics	8:00 a.m. to 7:00 p.m.
Unit 2 South	8:00 a.m. to 6:00 p.m.
2nd Floor Clinics	8:00 a.m. to 7:00 p.m.

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

FACILITY	HOURS
Triage	24 hours per day, 7 days per week
Urgent Care Urgent Care	7:00 a.m. to 12:30 a.m. M-F and Saturday, 7:00 a.m. to 4:00 p.m.
Primary Care Diagnostic Center (PCDC) OSSA	6:00 a.m. to 7:00 p.m. 7:00 a.m. to 11:30 p.m.
Community Health Plan (CHP):	Monday through Friday
A, B and C Clinics in the Basement	7:00 a.m. to 6:00 p.m.
Infusion Clinics	6:00 a.m. to 5:00 p.m.
N24 Clinics	6:00 a.m. to 9:30 p.m.
N28 Women's Clinic	8:00 a.m. to 6:00 p.m.
N31 OT / PT	8:00 a.m. to 6:00 p.m.
N34 Child Assessment	8:00 a.m. to 6:00 p.m.
Child Life Center	8:00 a.m. to 6:00 p.m.
RB2 Sleep Clinic	8:00 a.m. to 6:00 p.m.
Linen Room	Monday through Friday 4:00 a.m. to 4:30 p.m. Saturday through Sunday 4 AM to 12:30 PM

3. FACILITY CLEANING REQUIREMENTS

There are three levels of cleaning services: Level 1 Intensity (In-Patient/Patient Care areas), Level 2 Intensity (Non-Patient/Non-Public Areas), and Level 3 Intensity (Miscellaneous Services). If cleaning levels are not required, it will be noted as Not Applicable (N/A).

3.1 LEVEL 1 INTENSITY (INPATIENT/PATIENT CARE AREAS)

- 1) In-Patient/Patient Care and General Clinical Research Center Areas
 - a) Unit 1 South – Patient Units
 - b) Emergency Departments (ED) (Adult, Pediatrics, and Psychiatric)
 - c) ED waiting area and the Vermont Avenue lobby
 - d) Triage and Urgent Care
 - e) Isolation Rooms
 - f) 1st and 2nd floor restrooms

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

- g) Intensive Care, Critical Care Units and Step-Down Units (Labor and Delivery, Surgical, Pediatric, Neonatal, Coronary and Medical)
 - h) Cardiac Observation (4 West)
 - i) Newborn Nurseries
 - j) Hemodialysis Unit
 - k) Operating Room (OR) Suites including, but not limited to: Surgery; Recovery; Labor and Delivery; Operating Surgical Staging Area (OSSA); Radiology Coiling Suite; Cardiac Catheterization Laboratory; Vascular (Special Procedure) Rooms and Endoscopy Suite
 - l) Pathology
- 2) Medical and Hazardous Waste
- 3) General Service Areas
- a) Central Sterile Services
 - b) Radiology, Pathology Respiratory Therapy, Rehabilitation Therapy, Blood Gas Laboratory
 - c) Heart Station
 - d) Breast Diagnostic Center
 - e) Speech Pathology
 - f) Phlebotomy Area and Blood Donor Room
 - g) Cardiology Diagnostic Clinic
 - h) Pharmacy
 - i) Morgue (also includes disinfecting the morgue trays – monthly)
- 4) Ambulatory Care Clinics – Unit 2 South
- a) 1st Floor Clinics
 - b) 2nd Floor Clinics
 - c) Urgent Care
 - d) PCDC Clinics, CHP Clinic
 - e) Infusion Clinic
 - f) N 18 Clinic
 - g) N 20 Audiology
 - h) N 24 A Clinic
 - i) N 24B Clinic
 - j) N 24 Clinic
 - k) N 26 Clinic

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

- l) N 26C Clinic
 - m) N 28 Women's Health Clinic
 - n) N 31 OT / PT Clinic
 - o) N 34 Child Assessment Clinic
 - p) Child Life Center
 - q) RB2 Sleep Clinic and other Clinics
 - r) Employee Health
- 5) Additional Areas in Hospital and Clinics
- a) All Lobbies, Hallways, and Waiting Rooms
 - b) Floor Maintenance
 - c) All Restrooms
 - d) Elevators
 - e) Pay phones

3.2 LEVEL 2 INTENSITY (NON-PATIENT/NON-PUBLIC AREAS)

- 1) Office Areas
 - a) Administrative Offices
 - b) Other Offices (Information Systems, Registration, Facilities Management, etc.)
- 2) Non-Office Areas
 - a) Auditoriums, Conference Rooms, Assembly Room
 - b) Physician's Call Rooms
 - c) Linen Room
 - d) Unit 2 County Offices (Bungalows, Warehouse)
 - e) Nutrition area and Physician's Dining Room
- 3) Employee Health
- 4) Additional Service Areas
 - a) Library
 - b) Gift Shop
 - c) Floor Mat Placement/ Entrances/ Sinks (OR/Central Services),
 - d) Medical Records
 - e) Volunteer Office
 - f) Soiled Linen Rooms

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

- g) Loading Dock/Walk Ways, Ramps
- h) Stairs and Landings
- i) Computer Room
- j) Safety Police
- k) Clinical Social Services
- l) Solid Waste Collection and Removal Areas
- m) Wheel Chairs/ Gurneys – Steam clean
- n) Chaplain Office
- o) Floor Maintenance
- p) Finishing Work
- q) Restrooms
- r) Medical Waste

3.3 LEVEL 3 INTENSITY (MISCELLANEOUS SERVICES)

- 1) Pest Extermination Services
- 2) Sidewalk/Street
- 3) Parking Lot/**Parking Structure** and Interior Streets and Sidewalks Cleaning Services
- 4) Sidewalks, Ramps, Dock Areas and Sides of Building
- 5) Window Washing Services
- 6) Light Fixtures
- 7) Trash/Solid Waste Collection and Removal
- 8) **Basement Cart wash/Storage areas**

4. HISTORICAL SERVICE VOLUMES

Listed below are historical service volumes.

LOCATION	FISCAL YEAR July 2010- June 2011 (12 Months)	FISCAL YEAR July 2011- June 2012 (12 Months)	FISCAL YEAR July 2012- October 2013 (12 Months)
Outpatient Visits	337,799	334,517	336,570
Emergency Room Visits	80,636	77,656	74,962
Inpatient Admissions	23,048	21,244	20,819
Average Daily Census	360	329	333
Licensed Beds	538*	538*	453**

*Effective 5/1/11

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

**Effective 5/1/13

5. FACILITY SQUARE FOOTAGE

The Facility Description and Department square footage are listed below.

LOCATION	DEPARTMENT/FLOORS	SQUARE FOOTAGE
Main Unit Basement	Hospital	78,886
Main Unit First Floor	Hospital	92,923
Main Unit Second Floor	Hospital	84,171
Main Unit Third Floor	Hospital	41,957
Main Unit Fourth Floor	Hospital	31,916
Main Unit Fifth Floor	Hospital	32,437
Main Unit Sixth Floor	Hospital	32,437
Main Unit Seventh Floor	Hospital	31,897
Main Unit Eighth Floor	Hospital	31,899
PCDC First Floor	Hospital	17,560
PCDC Second Floor	Hospital	16,480
PCDC Third Floor	Hospital	5,165
1 East	Anes/Surgery Admin	6,600
2 East/Centrex	Information Systems	1,500
1 South	Inpatient Psych/Crisis Unit	9,850
2 South	Outpatient Psychiatry (Able)	5,385
3 South	Patient Financial Services	12,240
A. F. Parlow Library	Library	22,500
Warehouse #1 Central Plant	Materials Mgmt/Central Plant	37,075
Warehouse #2	Materials Management	5,127
B-2 West Trailer	School of Radiologic Tech	1,440
B-3	Psychiatry	3,600
B-3 Annex	Medical Records	929
Child Care Center	Hospital Administration	4,360
Cottage #14	DHS/Public Health Child Health Dis & Prev	875
Cottage #16	Nursing/Home Health Care	875
Cottage #18	Medical Records	875
D 2.5	Psychiatry	1,420
D 3.5	Finance/Information Mgmt.	6,447
D4.5	Outpatient Psychiatry	1,440
D 5	Outpatient Psychiatry	4,532
D 5-Annex	Outpatient Psychiatry	1,200
D 5 Ramp	Outpatient Psychiatry	919

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

LOCATION	DEPARTMENT/FLOORS	SQUARE FOOTAGE
Office/Restroom		
D 5.5	Outpatient Psychiatry	5,533
D 6	Outpatient Psychiatry	4114
D 6/Ramp Office	Outpatient Psychiatry	768
D 9	Emergency Medicine/Trauma	11,520
F 3/3.5	Facilities Management (Admin., Carp., Shop)	5,454
F 4	Facilities Management & Hospital Plan & Arch (Offices, storage, Admin., Carp., Shop)	5,904
F 4.5 Trailer	Information Systems	1,430
F 7	Surgery GME Storage	3,877
F 8	Human Resources	2,919
F 10	Quality Resource Mgmt	5,040
H 1	LAC Transportation	830
M 1	Facilities Management	19,200
N 06	Medical Records	2,257
N7	Surgery	1,500
N 08	Radiology Files	11,400
N 09	Medical Records Chart Files	9,793
N 11	Radiology	1,515
N 17	Language Center/ Nursing/Snack Bar	2,086
N 18	Nursing/Prof. Practice Affairs	2,160
N 20	Audiology	1,728
N 22	Social Services/Outpatient Pharmacy	2,650
N 24A	Medicine/Outpatient/ Pharmacy	11,350
N 24 B	Medicine/Outpatient Clinic/HIV Clinic	3,600
N 24 C	Clinic	3,600
N 25	Finance/Pediatrics/Neurology	26,520
N 26/A & B	Child Crisis Center	795
N 26 C	Kids Clinic	1440
N 28	Women's Health Center	12,881
N 31	Occupational & Phys. Therapy	4,800
N 32	Environmental Health & Safety	3,600
N 34	DHS Child Health Disability and Prevention	1,125

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

LOCATION	DEPARTMENT/FLOORS	SQUARE FOOTAGE
Paint Shop	Facilities Management	1,156
T 1	Facilities Management (Transportation)	2,450
826 W. 220th Street	Environmental Serv./Police/Storage	2,368
Unit II	Hallways	15,234
Unit II	Walkways	10,558
Surgery/Emergency (S/E) Building adjacent to Main Hospital	Basement	10,698
	1 st Floor	41,028
	2 nd Floor	33,718
Main Hospital and S/E Building (*Gross Floor Area)	Service Elevators Basement to 8 th floor	9,918*
	FACILITY GRAND TOTAL	927,576
Sidewalks	Unit I & Unit II	23,568
Parking Lot	Unit I	264,542 (<)
Parking Lot	Unit II	269,024 (<)
Parking structure-3 stories (544 spaces)	Parking Lot	153,325
	PARKING LOT GRAND TOTAL	710,459

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

**Facility
Specifications**

Hours of Operation	Days of Operation	Cleaning Hours
24 Hours	7 Days	24 hours

Staffing	Housekeepers			Supervisors/Administration Staff	
Shift	No.	Hours	Shift	No.	Hours
Day: 7:00am – 3:30 pm	78	8	Day: 7:00am – 3:30 pm	7.5	8
Swing: 3:00 pm – 11:30 pm	43	8	Swing: 3:00 pm – 11:30 pm	4	8
Graveyard: 11:00 pm – 7:30 am	34	8	Graveyard: 11:00 pm – 7:30 am	3	8
TOTAL	155	24	24/7 Coverage	14.5	24

Facility Specifications	Main Building	S/E Building
Gross Square Footage	832,214	95,362
Staff in Building (County + Contractor)	Not available	Not available
Approximate Number of Persons Entering/Exiting Building Per Month	Not available	Not available
Number of Floors	9	3 (adjacent to main hospital)
Number of Stairwells	6	5
Number of Elevators	11	9
Approximate Number of Light Fixtures	15,400	1299
Number of Parking Lots	13	N/A
Number of Cafeterias	1	0
Number of Kitchen Areas	2	0
Number of Kitchenettes (including nursing stations)	30	12

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

Number of Sinks	828	263
Facility Specifications	Main Building	S/E Building
Number of Single Fold Paper Towel Dispensers	837	263
Number of Soap Dispensers	828	263
Number of Liquid Soap Dispensers	Not available	263
Number of Liquid Soap Dispensers with lotion	Not available	263
Number of foam dispensers with lotion	Not available	263
Number of Sanitary Napkin Dispensers	55	0
Number of Tampon Dispensers	55	0

Bio-hazardous Waste Removal	Main Building	S/E Building				
Number of Sealed Containers	345	200*	Pickups Per Week	Six days	Autoclave (Biohazardous Waste) (Y/N) See #20 in the Additional Information Section	Y
Who is Responsible for Bio-hazardous Waste collection and transport?	Contractor		*S/E projection of 200			

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

Medical Waste Removal	Main Building	S/E Building		
	Number of Sealed Containers	230	200*	Pickups Per Week
Who is Responsible for Medical Waste collection, transport and storage?	Contractor		Medical Waste picked up from storage area by separate County Contractor. See #20 in the Additional Information Section	

*S/E projection of 200

Trash/Solid Waste Removal	Main Building & S/E Building				
Number of Trash Bins	25	Pickups Per Week	6	Trash Compactor (Y) Leased by Contractor	2
Who is Responsible for Trash Pick Up?	Contractor		Cardboard Bailer Leased by Contractor		

Parking Lot Sweeping	Main Building	S/E Building
Number of parking lots	11	No change
Who is Responsible for parking lot sweeping?	Contractor	

Pest Control	Main Building	S/E Building
Who is Responsible for Pest Control?	Contractor	

Window Cleaning	Main Building		
Number of Windows/Exterior Glass	4,387	Interior Partition Glass/Doors	Not available
Who is Responsible for Window Cleaning?	Contractor		

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

Window Cleaning	S/E Building		
Number of Windows/Exterior Glass	942	Interior Partition Glass/Doors	16
Who is Responsible for Window Cleaning?	Contractor		

Who Provides Supplies?	County	Paper Supplies, plastic liners, Soap, Hand Sanitizer, Sharp containers
	Contractor	Yes (e.g. cleaning supplies)

<u>ADDITIONAL INFORMATION</u>																									
<p>1. At Harbor-UCLA Medical Center, the areas and hours where there are dedicated locked employees are: Intensive Care Unit (ICU), Operating Room (OR) and Labor and Delivery (L&D). These are 24/7 operations.</p> <p>As a clarification the locked in units at Harbor-UCLA Medical Center, the Operating Rooms (OR) and Labor and Delivery Rooms (LDR) have more than one person assigned per shift as follows:</p> <table style="margin-left: 40px;"> <tr> <td>Employee(s)</td> <td>OR</td> <td>L&D</td> <td>ICU</td> <td>ER</td> </tr> <tr> <td>Dayshift</td> <td>3 (plus 1 Relief)</td> <td>1</td> <td>2</td> <td>4</td> </tr> <tr> <td>Evening shift</td> <td>3</td> <td>1</td> <td>1</td> <td>4</td> </tr> <tr> <td>Night shift</td> <td>3</td> <td>1</td> <td>1</td> <td>4</td> </tr> </table>						Employee(s)	OR	L&D	ICU	ER	Dayshift	3 (plus 1 Relief)	1	2	4	Evening shift	3	1	1	4	Night shift	3	1	1	4
Employee(s)	OR	L&D	ICU	ER																					
Dayshift	3 (plus 1 Relief)	1	2	4																					
Evening shift	3	1	1	4																					
Night shift	3	1	1	4																					

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

2. The staff in the Pre-operation and Recovery units will assist the surgery unit/OR when needed to expedite bed turnaround.
3. The number of surgical procedures performed each day at Harbor-UCLA Medical Center were 876 OR cases reported for the month of August 2013. The majority of the cases occurred during the day.
4. The number of Operating Room (OR) suites and C-Section suites at Harbor-UCLA Medical Center are 16 OR suites plus 4 C-Section suites (which are also used for surgical cases).
5. The number of births and C-Sections performed at Harbor-UCLA Medical Center is approximately 100 deliveries/month (70 vaginal + 30 C-Sections).
6. The number of room moves and room set ups provided each week at Harbor-UCLA Medical Center average 35 to 45 weekly. Moves are done by the transportation unit. Set ups are done by contractor. Setups include providing tables/chairs and other equipment for special activities/events.
7. At Harbor-UCLA Medical Center, there is a bed control unit that tracks the bed system; however the unit is supervised and managed by hospital administration, not housekeeping. The contractor must provide monthly or as needed reports on bed turnaround time for: OR, ED, OSSA, In-patient etc.
8. The carpet to vinyl/tile percentage breakdown for Harbor-UCLA Medical Center is 10% carpet; 90% vinyl/tile. Unit II: 44% carpet, 56% vinyl/tile. S/E: 10% carpet, 90% vinyl/tile/terrazo
9. The name and quantity of hand sanitizer used at Harbor-UCLA Medical Center is Steris Alcare Plus. Quantity unknown for the main building but approximately 263 in the S/E building (1 per area or room).
10. County nursing staff is responsible for cleaning refrigerators containing patient medications. Employees' refrigerators are cleaned by employees. Contractor cleans the outside of all refrigerators only. Refrigerators containing patient food are cleaned by dietary staff.
11. County owns the electric carts and auto clave compactors (S/E).
12. The bailer & trash compactors are leased by the housekeeping contractor.
13. The contractor is responsible for replacing the sand in ashtrays around the facility.

**HARBOR-UCLA MEDICAL CENTER
FACILITY DESCRIPTION, CLEANING REQUIREMENTS
HOURS OF OPERATION, STAFFING AND SPECIFICATION SHEET**

14. The warehouse tunnel at Harbor-UCLA Medical Center is cleaned by the housekeeping contractor.
15. The number of beds in 3rd West ICU-3W A bay (Cardiothoracic ICU) is as follows:
- 3W A bay (Cardiothoracic ICU) 6 beds
3W B bay (6 de-licensed beds, satellite pharmacy)
3W C bay (Surgical ICU): 8 beds
3W D bay (Surgical ICU): 6 beds
- Total 3W intensive care: 20 licensed beds**
16. There is one laundry chute in use in the main building. All other chutes are not in operation.
17. There is only a trash chute in the main building but not one in the S/E building. Contractor must maintain all trash areas clean.
18. Contractor must transport trash, Bio-hazardous & medical waste and boxes, per facility and/or CMS recommendations.
19. Approximately **18 clinics** operate in the basement of Harbor-UCLA Medical Center which includes a combination of clinics and hubs. The number of patient visits in the last year was **approximately 63,000**.
20. OR staff to place Suction canister fluids in fluid collection device (Harbor-UCLA MC), place suction canisters into a properly labeled rigid, leak proof biohazard waste containers; and transported to the biohazard waste storage room for short-term storage until it is autoclaved locally by Environmental Services or it is picked up by an approved medical waste hauler (e.g. Stericycle), for treatment and disposal.