**ATTACHMENT A TO PURCHASING AGREEMENT #\_\_\_\_\_\_**

**STATEMENT OF WORK**

This Statement of Work # \_\_ (“SOW”) is issued pursuant to Purchasing Agreement #\_\_\_\_\_\_\_ dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_ between UC and Supplier (“Agreement”).

1. **Title and Description of the Scope of Goods and/or Services**

**Background**

University of California Davis Health (UCDH) has a mission of providing unparalleled care across California, transforming lives and communities. Supplier to provide custodial cleaning services for nine outlying clinic locations in the Greater Sacramento Area (refer to Exhibit D Clinic Locations).

Supplier will be responsible for maintaining the cleanliness, appearance, and safety of UCDH facilities for patients and staff, based on this document and site-specific requirements. Good communications between the UCDH suite coordinator and the supplier is vital for positive program service levels. Please note certain clinics will have specific requirements that will be addressed at the site**.**

**Clinic Operations:**

UCDH operates primary and specialty clinics at various outlying areas. Normal clinic operations are from 8:00 am to 5:00 pm Monday through Friday for most departments, as dictated by operational need. Days and hours may vary based on location and/or services performed, which would be managed by individual sites. The Rocklin Infusion Pharmacy location operates Monday through Saturday including holidays 8:00 am to 6:00 pm.

1. **Term of SOW**

This SOW will begin on \_\_\_\_\_\_\_\_\_\_, 20\_\_ (“Effective Date”) and continue through \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_. This SOW may not be renewed or otherwise amended except through a Change Order pursuant to the Change Management section below.

1. **Key Tasks and Activities, Deliverables and Completion Timeframe**

The scope of work will include, but is not limited to:

Perform cleaning, housekeeping, and/or general maintenance duties within clinics including but not limited to exam rooms, procedure rooms, offices, hallways, lobby areas, restrooms, private rooms, and other designated public or private areas of the facility.

## CLEANING SERVICES SCOPE

**Services to be completed daily:**

1. Remove biohazard/infectious waste and transport to storage area.
2. Empty all trash cans – waste baskets, change liners and damp wipe as needed.
3. Vacuum all carpeted areas following flooring manufactures recommendations.
4. Sweep and mop all linoleum and tile floors.
5. Reposition all equipment and furniture to their proper positions.
6. Spot clean all flooring as needed following manufactures recommendations.
7. Wipe door handles.
8. Clean glass partitions of grime and fingerprints.
9. Dust countertops if not obstructed.
10. Pickup and disposal of stray trash in all areas.
11. Remove dust and cobwebs from walls and ceilings.
12. Restock paper towels and soaps in exam rooms and other sink locations.
13. Wipe down sinks.
14. Wipe down exam chairs.
15. Spot clean walls of soap spills, splash marks, or other grime.
16. Spot clean window interiors as needed.
17. Clean shower walls, floor, fixtures, and curtain/door.
18. Dust/damp wipe refrigerators.

**Daily cleaning of restrooms:**

1. Restock paper towels, soaps, toilet tissues and other sanitary items.
2. Empty trash cans, damp wipe and change the liners.
3. Clean mirror.
4. Clean dispensers.
5. Clean walls of soap spills, splash marks, or other grime.
6. Clean sinks.
7. Clean and sanitize toilets and urinals inside and out.
8. Clean and sanitize both sides of toilet seats.
9. Wipe down dust on all surfaces.
10. Mop floors and disinfect.

**Services to be completed each week:**

1. Vacuum or wipe down furniture.
2. Remove scuff marks from floors, walls, and doors.
3. Dust picture frames and partition walls.
4. Dust all office furniture, shelving, and cabinets – if not obstructed.

**Services to be completed monthly:**

1. Clean interior glass windows.
2. Dust window coverings.
3. Dust windowsills.
4. Move waiting room furniture and vacuum.
5. Vacuum hard to reach areas, like under worksurfaces.
6. Wash doors, handles, and door frames.
7. Dust lighting fixtures.
8. Dust high surfaces and cabinets.
9. Restore all hard surface flooring.

**Services to be completed on a quarterly basis:**

1. Pile lift carpet if on manufactures recommendations.
2. Spot treat carpet stains and high traffic areas following manufactures recommendations.

**Services to be completed a minimum of twice per year:**

1. Restorative maintenance of carpet, damp bonnet, or extraction of carpet per recommendation.
2. Strip and rewax all hard surface flooring.

**Additional services as needed:**

1. Cleaning and stain removal of upholstery.
2. Cleaning tile grout.
3. Additional floor cleaning.
4. Emergency service for disasters.
5. General maintenance.

**Additional Cleaning Services Specific to Rocklin Infusion Pharmacy:**

1. **Services to be completed daily:**
2. All General Daily Responsibilities noted above.
3. Remove biohazard/infectious waste and transport to storage area.
4. Counters and easily cleanable horizontal surfaces cleaned using Peridox RTU.
5. High touch surfaces (telephones, door handles, keyboards, computer equipment) cleaned using Peridox RTU.
6. Floors cleaned using Peridox RTU.
7. Clean exhaust hood (if applicable) over workstations.
8. **Services to be completed monthly:**
9. Clean ceilings with Peridox RTU
10. Clean walls with Peridox RTU
11. All daily clean activities

## General Cleaning Hours (Subject to change):

To ensure minimal disruption to patient care, cleaning services are performed after hours daily (Monday-Friday) after 6:00 p.m. until all daily services are completed. All other services that must be completed on a monthly/quarterly/semi-annual basis are also performed after clinic hours and/or must be coordinated with the clinic coordinator.

Specific to the Rocklin Infusion Pharmacy, cleaning services are performed:

Monday, or any day during which we are closed for more than 24 hours: Daily IV room clean at 6:00 AM AND 1:00 PM.

All other days of the week Tuesday-Saturday: Daily IV room clean and entire pharmacy space at 1:00 PM and 3rd Friday of the month, monthly IV room clean and entire pharmacy space at 1:00 PM.

1. **UC Obligations**
   1. Provide access to facilities
   2. Clinic to supply carpet manufacture’s recommendation for maintenance.
   3. Clinic to provide details of hazards/specific conditions of site.
   4. Provide required training and conduct assessment
   5. Chemical used to be reviewed and approved by clinic. Provide MSDS.
   6. Cleaning Products and Supplies:
      1. Clinic will order cleaning supplies. Custodial staff will be responsible for filling out a supply order form for clinic staff to order at least once a week or as on needed basis.
2. **Place(s) of Performance**

Multiple clinics as per the attached document. Refer attached document, Exhibit D\_Clinic Locations.

1. **Key Personnel**

Supplier’s Account Manager is listed below, is subject to UC approval, and hasoverall responsibility for managing the UC/Supplier relationship:

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | Name |  | | Phone |  | | Email |  | | Address |  | |  |  | |

Supplier’s Account Management Team is:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | **Name** |  | | | | **Phone** |  |  |  | | **Email** |  | | | | **Address** |  | | | |  |  | | | |
| |  |  |  |  | | --- | --- | --- | --- | | **Name** |  | | | | **Phone** |  |  |  | | **Email** |  | | | | **Address** |  | | | |  |  | | | |
| |  |  |  |  | | --- | --- | --- | --- | | **Name** |  | | | | **Phone** |  |  |  | | **Email** |  | | | | **Address** |  | | | |  |  | | | |
| |  |  |  |  | | --- | --- | --- | --- | | **Name** |  | | | | **Phone** |  |  |  | | **Email** |  | | | | **Address** |  | | | |  |  | | | |

UC’S Project Manager, responsible for acceptance/rejection of project results/deliverables, is:

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | **Name** |  | | **Phone** |  | | **Email** |  | | **Address** |  | |  |  | |

1. **Reporting Requirements**

Supplier agrees to provide other reports as reasonably requested by UC during the Term of the Agreement and any extension(s) to the Term at no additional cost to UC.

1. **Assumptions**
2. **[Add if applicable]**
3. **Pricing, Invoicing Method, and Settlement Method and Terms**

**Fee Structure/Payment Terms**

Refer to Exhibit C\_Cost Proposal.

Pricing is addressed below. The Invoicing Method, and Settlement Method and Terms are addressed in the applicable Agreement. As regards Invoicing Method, and Settlement Method and Terms, the terms of the applicable Agreement will take precedence over any conflicting terms in this Statement of Work.

1. “Fixed Price Services” to be rendered under this SOW, including deliverables to be provided as part of Fixed Price Services, are described in this section as:
2. “Time and Materials Services” to be rendered under this SOW, including deliverables to be provided as part of Time and Materials Services:
3. The rates applicable to each person who will render Time and Materials Services are as follows:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name and Title of Person Rendering Services** | **Rate per Hour/Day** | **Estimated No. of Days** | **Extended Cost of Fees** | **UC MRC (Monthly Recurring Cost)/Fixed Fee** |
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|  |  |  |  |  |
| Estimated Maximum Expenses (if any): | | | **n/a** |  |
| Estimated Maximum Cost: | | |  |  |

1. **Acceptance Criteria**

Key Performance Indicators (KPI)

1. Quality
   1. Audits by location/department
   2. Track completion of work
   3. Results and review standards
   4. Janitor’s closet will be maintained in a clean and orderly condition and JACHO guidelines.
2. Client satisfaction
   1. Surverys, compliments, complaints
   2. Resolution
   3. Monthly and quarterly reviews with respective clinics.
3. Productivity
   1. Cleaning schedule
   2. Training completion record, upon request
4. Safety
   1. OSHA recordable incidents
   2. Supplier staff wear proper identification
5. **Changes to the Services**

UC may desire to change the Goods and/or Services following execution of an SOW. If so, UC will submit a written Amendment to Supplier describing the changes in appropriate detail. If an Amendment does not require Supplier to incur any additional material costs or expenses, then Supplier will make the modification within ten (10) business days of Supplier’s receipt of UC’s Amendment. If an Amendment does require that Supplier incur additional material costs or expenses, then Supplier in good faith will provide UC with a written, high level, non-binding assessment of the costs and expenses and the time required to perform the modifications required by the Amendment, within ten (10) business days of Supplier’s receipt of UC’s Amendment. UC will notify Supplier in writing within ten (10) business days after receipt of Supplier’s response to the Amendment as to whether UC wishes Supplier to implement the Amendment based on the response. UC will compensate Supplier for implementation of an Amendment in accordance with the terms and conditions of the relevant Amendment and Supplier’s response to the Amendment, if any. Supplier’s implementation of an Amendment will not delay the performance of Services and/or the delivery of deliverables not reasonably affected by an Amendment.

1. **No Mandatory Use**

Because there is no mandatory use policy at UC, nothing in this Statement of Work will be construed to prevent UC from entering into similar agreements with any third parties including, without limitation, suppliers that may be in competition with Supplier.

This Statement of Work is signed below by the parties’ duly authorized representatives.

**THE REGENTS OF THE [SUPPLIER NAME]**

**UNIVERSITY OF CALIFORNIA**

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(Signature) (Signature)

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(Printed Name, Title) (Printed Name, Title)

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(Date) (Date)