



**Decision Memo**  
**Procurement Services Division**

This form is required for all Professional Service Contracts over \$25,000 and as otherwise required by the Procurement Review Checklist.

Date: May 2, 2023

MinuteTraq (IQM2) ID #: 23-1764

Department Requisition #: 6266-0001SERV

Requesting Department: DuPage Care Center	Department Contact: DuPage Care Center
Contact Email: annabel.leonida@dupageco.org	Contact Phone: 630-784-4250
Vendor Name: KCI USA, Inc.	Vendor #: 28606

**Action Requested** - Identify the action to be taken and the total cost; for instance, approval of new contract, renew contract, increase contract, etc.  
 Increase contract in the amount of \$45,500.00 to cover rentals of the Wound Vac Therapy (negative pressure wound treatment) and Medical Supplies for wound and skin care.

**Summary Explanation/Background** - Provide an executive summary of the action. Explain why it is necessary and what is to be accomplished.  
 This contract is for the rental of wound vac therapy and medical supplies for wound and skin care, for the DuPage Care Center residents in need, for the period 01/26/23 through 01/25/24.

**Strategic Impact**  
 Quality of Life Select one of the five strategic imperatives in the County's Strategic Plan this action will most impact and provide a brief explanation.  
 The Nursing Department has analyzed this contract and it was determined that all funds would be exhausted. Historically, the Care Center has budgeted for 1 resident. This is the preferred method prescribed by Physicians. Three (3) additional residents, have been prescribed this method, therefore, there is a need to increase this contract to cover rentals and medical supplies needed for this contract.

**Source Selection/Vetting Information** - Describe method used to select source.  
 6266-0001 SERV under bid #21-100-CARE

**Recommendations/Alternatives** - Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request.  
 1) Increase contract in the amount of \$45,500.00 to cover rentals of the Wound Vac Therapy (negative pressure wound treatment) and Medical Supplies for wound and skin care.  
 2) Consider alternative methods of wound treatment, however, Wound Vac Therapy is the current preferred method of treatment and has always proven positive results.

**Fiscal Impact/Cost Summary** - Include projected cost for each fiscal year, approved budget amount and account number, source of funds, and any future funding requirements along with any narrative.  
 1200-2050-52320 (supplies) \$3,500.00  
 1200-2050-53410 (monthly rental of wound vac machines) \$42,000.00