



Procurement Review Comprehensive Checklist  
 Procurement Services Division  
 This form must accompany all Purchase Order Requisitions

**SECTION 1: DESCRIPTION**

<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID#: JPS-P-0015-24	RFP, BID, QUOTE OR RENEWAL #: 23-111-SHF	INITIAL TERM WITH RENEWALS: OTHER	INITIAL TERM TOTAL COST: \$299,283.21
COMMITTEE: JUDICIAL AND PUBLIC SAFETY	TARGET COMMITTEE DATE: 04/16/2024	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$299,283.21
	CURRENT TERM TOTAL COST: \$299,283.21	MAX LENGTH WITH ALL RENEWALS: FIVE YEARS*	CURRENT TERM PERIOD: INITIAL TERM
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: SapphireHealth, LLC.	VENDOR #:	DEPT: Sheriff	DEPT CONTACT NAME: Commander John Putnam
VENDOR CONTACT: Jennifer Pittore	VENDOR CONTACT PHONE: 724-349-1111 ex 1038	DEPT CONTACT PHONE #: 630-407-2050	DEPT CONTACT EMAIL: john.putnam@dupagesheriff.org
VENDOR CONTACT EMAIL: japittore@diamondpharmacy.com	VENDOR WEBSITE:	DEPT REQ #:	
<i>Overview</i>			
DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). The purpose of this purchase is to implement an electronic medical records system in the Correctional Center. The procurement process was conducted via an RFP process as currently the Sheriff's Office does not have such system to compare to. This will be a not to exceed purchase of \$299,283.21 covering the implementation price as well as yearly fees over the course of 5 years.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Currently the Correctional Centers medical charting and record keeping is done via an antiquated pen and paper process. The purchase of this system will allow for improved patient care and help to reduce liability.			

**SECTION 2: DECISION MEMO REQUIREMENTS**

DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.
DECISION MEMO REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.
RFP (REQUEST FOR PROPOSAL)	

**SECTION 3: DECISION MEMO**

STRATEGIC IMPACT	Select an item from the following dropdown menu of County's strategic priorities that this action will most impact. FINANCIAL PLANNING
SOURCE SELECTION	Describe method used to select source. A diverse team representing all aspects of the Correctional medical department, Sheriff's Administration and IT reviewed all of the vendors and the products they proposed for this emergency medical records software project. Pursuant to County procurement rules, they were not able to view the pricing associated with each product, therefore scoring was based only on the product presentation. The top two vendors both offered products that will meet the needs of the medical staff in the Correctional Center. However, the top rated product is significantly more expensive. After careful consideration between the two, it was determined that the differences that existed did not justify the pricing differential. In the interest of fiscal responsibility, for not only start up costs, but also the proposed five year cost, the vendor with the second highest overall score was selected.
RECOMMENDATION AND TWO ALTERNATIVES	Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request, including status quo, (i.e., take no action). Award vendor for new EMR...issue new RFP, maintain status quo (maintain paper medical records system)

## SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION

<b>JUSTIFICATION</b>	Select an item from the following dropdown menu to justify why this is a sole source procurement.
<b>NECESSITY AND UNIQUE FEATURES</b>	Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific.
<b>MARKET TESTING</b>	List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.
<b>AVAILABILITY</b>	Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.

## SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: SapphireHealth, LLC.	Vendor#:	Dept: Sheriff	Division: Budget Support
Attn: Jennifer Pittore	Email: japittore@diamondpharmacy.com	Attn: Colleen Zbilski	Email: colleen.zbilski@dupagesheriff.org
Address: 645 Kolter Drive	City: Indiana	Address: 501 N County Farm RD	City: Wheaton
State: PA	Zip: 15701	State: IL	Zip: 60187
Phone: 724-349-1111 ext 1038	Fax: 724-599-3509	Phone: 630.407.2212	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: same	Vendor#:	Dept: Sheriff	Division: Corrections
Attn:	Email:	Attn: Commander John Putnam	Email: john.putnam@dupagesheriff.org
Address:	City:	Address: 501 N County Farm Rd	City: Wheaton
State: IL	Zip:	State: IL	Zip: 60187
Phone:	Fax:	Phone: 630.407.2050	Fax:
<b>Shipping</b>		<b>Contract Dates</b>	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): May 1, 2024	Contract End Date (PO25): Apr 30, 2029
Contract Administrator (PO25):			

**Purchase Requisition Line Details**

LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/Activity Code	Unit Price	Extension
1	1	EA		Implementation and year 1 service	FY24	1000	4410	53806		96,880.00	96,880.00
2	1	EA		Licensing agreement/hosting	FY25	1000+	4410	53806		48,389.40	48,389.40
3	1	EA		Licensing agreement/hosting	FY26	1000	4410	53806		49,801.08	49,801.08
4	1	EA		Licensing agreement/hosting	FY27	1000	4410	53806		51,336.32	51,336.32
5	1	EA		Licensing agreement/hosting	FY28	1000	4410	53806		52,876.41	52,876.41
<b><i>FY is required, assure the correct FY is selected.</i></b>										Requisition Total	\$ 299,283.21

<i>Comments</i>	
HEADER COMMENTS	Provide comments for P020 and P025.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO.
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.

The following documents have been attached:     W-9     Vendor Ethics Disclosure Statement