REQUEST FOR PROPOSALS
City of Mobile

Chest Compression Units, Training, and Professional Services
Community Development Block Grant-CV (CDBG-CV) Grant

INTRODUCTION

The City of Mobile has been awarded Community Development Block Grant – CV (CDBG-CV) funds and has an active subrecipient agreement from the Alabama Department of Economic and Community Affairs (ADECA) for administering said funds within the municipal jurisdiction of the City of Mobile. The ADECA funds were provided as part of an allocation of CDBG-CV funds from the U.S. Department of Housing and Urban Development (HUD) in response to Coronavirus. The funds are required to tie back to the prevention, preparation, and response to coronavirus.

The City of Mobile is seeking proposals from qualified vendors to provide Lucas Stryker Chest Compression Machines or equivalent product, accessories, and training, as well as ongoing monitoring and maintenance of the Lucas Stryker units at City of Mobile Emergency Medical Services (EMS) in accordance with the terms, conditions, requirements, and specifications contained in this Request for Proposal (RFP).
The intent of this RFP is for the successful Proposer to provide the expertise and services requested with the expected result to be economical and provide the City of Mobile with a higher level of product quality, reliability, performance and customer service.

To ensure that the required items are provided with the highest possible quality, the City is interested in establishing a contract with a Proposer experienced and qualified in such contracts that will provide the quality and services requested in a professional and timely manner.

Nothing herein is intended to exclude any responsible Proposer, or in any way restrain or restrict competition. On the contrary, all responsible Proposers are encouraged to submit a bid, and their bids are solicited.

The City of Mobile is seeking proposals from Proposers that have specific experience and qualifications in the areas identified in this solicitation. For consideration, proposals must contain evidence of the Proposer's experience and abilities in the specified area and other disciplines directly related to the proposed service.

QUALIFICATIONS

The Proposer must demonstrate to the complete satisfaction of the City that it has the necessary facilities, expertise, staffing, financial, and other resources to provide the services specified herein in a satisfactory manner. The Proposer must also provide its history and references which demonstrate the Proposer's qualifications. The City may contact references and perform additional research and inquiries deemed necessary and proper to determine the ability of the Proposer to perform the work, and the Proposer shall furnish to City all information for this purpose that may be requested. The City reserves the right to reject any offer if the evidence submitted by, or investigation of, the Proposer fails to demonstrate at the discretion of the

City that the Proposer is qualified to carry out the obligations of the contract and to complete the work described therein.

SCOPE OF WORK

A. General Statement:
City of Mobile requests proposals from qualified firms to provide Lucas Stryker Chest Compression Machines or equivalent product, accessories, and training, along with device support.

B. Purpose:
The City currently has an approved budget for its CDBG-CV funds being provided by ADECA to help prevention, mitigation, and response to future Coronavirus (COVID) incidents. The Mobile community continues to recover from impacts of COVID five years after the superspreading event. The realities of long-term COVID are better understood, and services are needed for people with long COVID who continue to experience symptoms of the virus and may be diagnosed with other illnesses and comorbidities. Additionally, the Center for Disease Control and Prevention (CDC) has tracked an average of 560 deaths nation-wide per week from January 2025 to May 2025. The City of Mobile recognizes the need for EMS responders to be prepared with equipment, supplies and training to best serve communities that were at higher risk for COVID in 2020 and 2021 and be able to respond to and treat residents at higher risk for long-term COVID symptoms and recovery.

C. Overview:
The City of Mobile requests the following services to be provided, including labor, supervision, materials, equipment and support necessary:

Lucas Stryker Unit (or equivalent) Acquisition and Installation

Purchase and install Lucas Stryker or equivalent units, supplies and cabinets according to the following:

- Propose unit and specifications to be provided based on the attached Lucas Chest Compression System Version 3 Data sheet.
- Provide new units and related supplies for selected EMS and Fire Stations within the City of Mobile. The selected vendor will work with the City of Mobile Neighborhood Development and EMS Departments to select stations and distribute the units.
- Install units in locations agreed upon with the City of Mobile Neighborhood Development lead and responsible site Facilities Manager.

Medical Oversight

Provide medical authorization/prescriptions for chest compression units as required by Federal/State/Local law.

- Local EMS registration/notification of placement of all units, including filing of appropriate paperwork as well as tracking of renewal dates of registrations/certifications.
- Ongoing Medical Oversight by a licensed physician to include event review, consultation, and documentation.

Data Management/Tracking and Record Keeping
The qualifying firm will create, update, and maintain a database of all installed units preferably via online platform or shared document system providing 24/7 access of all installed units, training records, product and supply expiration dates, locations and serial numbers of units, and other information pertinent to program.

- Consistent and constant monitoring of expirations of the Lucas Stryker Unit or equivalent and related consumables.
- Status records, showing the location of each unit, its functional status, associated equipment status, and expiration replacement dates of associated equipment and cabinet alarm batteries, and next scheduled service date(s).
- Unit inspection records, showing the date of inspection, individual performing the inspection, and status of deployed units, cabinets, and associated equipment. Copies of such records shall be kept with each deployed unit in a central location as designed by the site Facilities Manager.
- Records of all troubleshooting, repair, etc. shall be maintained.
- Detailed records of each unit use including required incident reports shall be maintained at each installation site, along with a log of device use. The qualifying firm will ensure this log and documentation is being maintained by the site Facilities Manager.
- Registration of all units with the proper authorities in compliance with Alabama law.
- All new equipment purchased after inception of this contract shall be added to the company-maintained database and updated accordingly.
- All documentation and a copy of the database will be provided to the City at the end of the contract term.

Training - CPR/Lucas Stryker unit Certification Verification

- Provide on-site CPR and Lucas Stryker Unit, or equivalent product, training by field expert instructors for EMS staff in selected locations so all are familiar with available equipment (at least once per contract year).
- Training shall be between the hours of 8:00 a.m. and 4:00 p.m., Monday through Friday, excluding holidays.
- Verify that anticipated volunteer responders complete the proper training and maintain certification in CPR and the use of units.
- Provide and maintain CPR/chest compression unit training materials.
- Develop and document chest compression unit/CPR training class schedules, monitor student attendance and performance, and certify/recertify all attending students who satisfactorily complete training.
- The qualifying firm shall maintain and produce for inspection/verification files documenting training scheduled and completed.

Written Compliance

- Provide Chest Compression Unit Implementation Plan and instructional manual to be completed by April 2026.

D. Contract Term
The contract term will be through May 31, 2026 due to the grant term with ADECA.

TIMELINE

It is expected that the purchasing of equipment and the training on Lucas Stryker unit Services for CDBG-CV process will begin within Q3 2025

- RFP Issued: August 8, 2025 (City website); August 13, 2025 (newspaper)
- RFP Responses due: September 16, 2025
- Selection of Vendor: September 30, 2025

The City of Mobile reserves the right to make adjustments as needed to the above schedule.

SUBMISSION REQUIREMENTS

A consultant, firm, or combination thereof wishing to submit a proposal must include the following in their response:

- A brief history of the proposing entity, including general background, knowledge of emergency services and related equipment, and experience working with relevant agencies.
- A listing of the personnel to be assigned to the project, including organizational structure and each person's area of responsibility. Resumes for each professional assigned to this project are also required. Responders must have sufficient and qualified staff immediately available to contract solicitations and to enter into and manage any components targeted by the RFP statement substantiating the resources of the proposing entity and the ability to carry out the scope of work requested within the proposed timeline.
- Resume and medical license from physician that will provide prescription necessary to purchase Lucas Stryker units or equivalent product and provide medical authorization for use.
- Proposed unit pricing and quantities for Lucas Stryker units, or equivalent product, storage and installation equipment, and related accessories.
- Proposed fee structure, including billing rates, hourly rates, reimbursable expenses, etc. for training and maintenance. Preferences will be given to firm fixed pricing.
- References including contact information for at least three organizations.
- At least one (1) example of work.
- A statement of conflicts (if any) the proposing entity or key employees may have regarding these services. The statement should include conflicts, as well as any working relationships that may be perceived by disinterested parties as a conflict. If no potential conflicts of interests are identified, please state so.

EVALUATION CRITERIA

Evaluation of the Proposer's qualifications shall include:

A. **Capacity:** The ability, capacity, skill, financial, and other necessary resources to perform the work or provide the service required; and
B. **Work Proposal:** The ability to accomplish the items referenced in this RFP through an assessment of work hours proposed, skill of assigned staff, approach to be taken in completing scope of work, and previous experience with similar funding types; and
C. **Cost:** Presentation to the City that the fee proposed is of a reasonable and acceptable nature for the services to be performed; and
D. **Timely Performance:** The ability to perform the work or provide the services promptly

or within the time specified, without delay or interference; and

E. **Past Performance:** The quality of performance of previous contracts or services, including judgment, ability, skill, and presentation.

SCORING CRITERIA

Proposals will be reviewed and evaluated by staff.
Criteria for evaluation will include:
25% Capacity to perform the services established
25% Proposal for accomplishing the tasks listed in Scope of Work
25% Cost
15% Ability to perform the work or provide the service in the timeframe provided
10% References

QUESTIONS

Please direct all questions to: James.Roberts@CityofMobile.org. All questions should be submitted at least 72 hours prior to the response deadline for this RFP.

RFP SUBMISSION PROCESS

Proposal deadline: Proposals must be received no later than September 16, 2025 by 4:00 p.m. Sealed proposals must be received in the City of Mobile's Neighborhood Development Department at the address referenced below. Submittals should include three hard copies including signatures. No proposals received by fax or e-mail transmission will be accepted. Should the City have a need, the proposals from this RFP may also be used to contract with Consultants to provide administrative support for its direct CDBG-CV funds from HUD.

NEIGHBORHOOD DEVELOPMENT DEPARTMENT
Room 508 – 5th Floor, South Tower
Government Plaza
205 Government Street
Mobile, Alabama 36602

Proposing entities must note on the outside of their proposal package:
REQUEST FOR PROPOSALS
CITY OF MOBILE
NEIGHBORHOOD DEVELOPMENT DEPARTMENT
CDBG-CV ADMINISTRATIVE SERVICES

EXHIBIT 1

LUCAS 3 Chest Compression System Data Sheet

stryker

LUCAS® 3

Chest Compression System, version 3.1

Data Sheet

Setting the standard for mechanical CPR

We continue to innovate the LUCAS platform with Wi-Fi® connection to the LIFENET® System and integration into CODE-STAT™ Data Review Software.* The LUCAS 3, v3.1, allows for tailored rates to meet your protocols, alerts configured to improve compliance, Post-Event Reports to your inbox, and asset notifications by e-mail.

Device configuration via the LIFENET System

Wirelessly set device presets to align with your protocols

- Adjustable rate: 102, 111, 120 ± 2 compressions per minute – fixed or variable during operation
- Adjustable depth: 45 to 53 ± 2mm – fixed during operation
- Audible CPR timer: 1-15 minutes (in 1 minute increments)
- Adjustable ventilation alerts, pause length and count
- Auto-lowering of the piston (AutoFit or QuickFit)
- Pressure pad release to allow for chest rise during ventilation

Post-Event reporting

- Receive device Post-Event Report (PDF) via e-mail after device check-in over Wi-Fi
- Transmit reports wirelessly to any predetermined e-mail addresses (configurable in LIFENET)
- Integration with CODE-STAT 11

Asset management via LIFENET

- Asset dashboard for fleet status at latest device check-in
- Notifications of expiring and expired LUCAS batteries
- Notifications of upcoming or missed service

Widely used mechanical CPR device

- Over 15 years of experience, over 30,000 devices deployed, and 200+ publications**
- Unique device design: piston with suction cup designed to stabilize the compression point and follow the chest
- Used in the field all the way into the cardiac cath lab

Evaluated and documented clinical use, quick and easy

- Highest level of evidence showing equivalent safety and efficacy to high-quality manual CPR[1]
- Simple 1-2-3 step user interface
- Quick: A median 7 sec. interruption at transition from manual to mechanical CPR in clinical use[2]

Proven to perform. Reliably.[1]

- Easy to maintain and own
- Compact and lightweight
- >99% operational reliability in clinical use[1]

*LUCAS 3, v 3.1, LIFENET and CODE-STAT are available in major markets. For details on local regulatory status, availability and data connectivity, please contact your local Stryker sales representative.

**As of January 2020

Specifications

Device and Therapy

Type of chest compression

- Piston with suction cup designed to stabilize the compression point
- Factory default settings consistent with AHA and ERC Guidelines 2015

Compression rate

- Configurable to 102 – 111 – 120 compressions per minute, fixed, or variable during use
- Factory default setting: 102 ± 2 compressions per minute

Compression depth

- Configurable to a fixed value between 45 to 53 ± 2 mm
- Factory default setting: 53 ± 2 mm for nominal patients Note: 40 to 53 mm for chest height < 185 mm

Pressure pad during ventilation

- To allow for chest rise during ventilation the pressure pad can be configured to move up 10 mm above start position during pauses or during continuous compressions
- Factory default setting: pressure pad remains in start position

Compression duty cycle: 50 ± 5%

Compression modes (operator selectable)

- ACTIVE 30:2 mode: 30:2 (factory default setting) or 50:2 (setup option) compression to ventilation ratio
- ACTIVE Continuous mode

Ventilation alerts

- ACTIVE 30:2 mode: LED blinks and audible alert signals before ventilation pause
- ACTIVE Continuous mode: LED blink. Configurable to 6 to 10 alerts per minute (factory default setting: 10 alerts per minute). Audible alert configurable ON/OFF (factory default setting: OFF)

Ventilation pause duration

- ACTIVE 30:2 mode: configurable to 3 to 5 sec. (factory default setting: 3 sec.)
- ACTIVE Continuous mode: configurable to 0.3 to 1.5 sec. (factory default setting: 0.3 sec.)

Device and Therapy (cont.)

Suction cup start position

- Configurable:
  - QuickFit (factory default setting): Manual lowering of the suction cup. Automatic fine-tuning will occur when locking the start position
  - AutoFit: Automatic lowering of the suction cup from its upper position down to the chest
  - Manual: Manual lowering of the suction cup to the chest. No automatic fine-tuning will occur when locking the start position

Suction cup in ADJUST mode: The device can be setup so that the suction cup automatically returns up from the chest when the operator pushes the ADJUST key coming from PAUSE or ACTIVE (30:2 or Continuous) modes (factory default setting: OFF)

Audible timers

- 1 to 15 minutes, in 1 minute increments (factory default setting: OFF)
- The timer can be setup as either CPR Timer or Continuous Timer
  - CPR Timer: the device only measures the time in uninterrupted ACTIVE (30:2 or Continuous) modes
  - Continuous Timer: the device measures the time continuously, independent of what mode the device is in

Safety system controls

- Automatic self-test at each Power ON
- Advanced control of delivered compression depth, rate and duty cycle, with safety alarm
- Soft Start at beginning of compressions
- Automatic adjustment of compression force to reach the set compression depth in individual chests

Patients eligible for treatment

- 17.0 to 30.3 cm chest height
- 44.9 cm chest width
- No patient weight limitation

Device post-event data and connectivity

Connectivity

- Wireless connectivity: Device can communicate via Bluetooth™ (factory default setting ON) and connect to configured Wi-Fi networks to receive and transmit data when not in clinical use.
- Local Bluetooth connection for setting up local Wi-Fi network, and for Post-Event Report generation and software updates (if Wi-Fi cannot be used)
- Ability to disable Bluetooth and/or Wi-Fi

Wi-Fi and LIFENET capabilities

- Manual or automatic data transmission (configurable): push the TRANSMIT key in range of known network (factory default setting), or setup option for automatic data transmission whenever the device is off, charging and in range of known network
- Setup options: Device functionality can be configured with setup options via secure, online platform (LIFENET) and be transmitted to the device wirelessly. A single setup profile can be applied to entire fleet or individual setup options for each device
- Post-Event Reports: Device can transmit Post-Event Reports (PDF) wirelessly and send to any predetermined e-mail addresses.
- Device readiness status: Device can transmit device readiness and battery notifications wirelessly to any predetermined e-mail addresses

Post-Event Report contents: Easy to read Post-Event Report (PDF) showing:

- Summary of device use: compression time, ratio, rate, count, number of pauses > 10 sec. and duration of longest compression pause
- Visual timeline showing device compressions, rate and pauses
- Event log showing user interactions, battery alerts and alarms
- Full display of device setup for quick reference
- Comprehensive post-event review in CODE-STAT 11 Data Review Software (optional)

Device post-event data and connectivity (cont.)

Device readiness data: Configurable in LIFENET to send e-mail notifications on latest device check-in status including:

- Battery nearing expiration
- Battery expired
- Failed device self-test

Reporting software over Bluetooth

- Report Generator software (DTX, included with device purchase for download online) with ability to download, print, save and share device reports of each use (PDF format)
- The Report Generator (DTX) can be downloaded on a pc with Windows® 7, 8.1 or 10

Device data storage: 4GB (estimated to store more than two uses per day over the lifetime of the device, 8 years)

Device physical specifications

Device dimensions when assembled (HxWxD): 56 x 52 x 24 cm

Device dimensions while stored in carrying case (HxWxD): 58 x 33 x 26 cm

Battery dimensions (HxWxD): 13.0 × 8.8 × 5.7 cm

Weight of the device with Battery (no straps): 8.0 kg

Battery weight: 0.6 kg

Back plate: Thin and lightweight back plate (15mm and 1.1 kg)

Device environmental specifications

Operating temperature

- +0°C to +40°C
- -20°C for 1 hour after storage at room temperature

Storage temperature: -20°C to +70°C

Relative humidity: 5% to 98%, non-condensing

Device IP classification (IEC60529): IP43

Operating input voltage: 12-28 V DC

Atmospheric pressure: 62-107 kPa -382 to 4000 m

Power specifications

Power source: Proprietary battery alone or with external power supply or car power cable

Power supply input: 100-240VAC, 50/60Hz, 2.3A, Class II

Power supply output: 24VDC, 4.2A

Car power cable: 12-28VDC/0-10A

Battery type: Rechargeable Lithium-ion Polymer (LiPo)

Battery capacity: 3300 mAh (typical), 86 Wh

Battery voltage (nominal): 25.9 V

Battery run time (nominal patient): Battery run time 45 minutes (typical) Extended run time connecting to external power supply

Power specifications (cont.)

Maximum Battery charge time: Charged in the device using external power supply:

- Less than two hours at room temperature (+22°C)

Charged in the external battery charger:

- Less than four hours at room temperature (+22°C)

Battery service life (interval for recommended replacement)

- Recommendation to replace the battery every 3 to 4 years or after 200 uses (of more than 10 minutes each time)
- End of Battery service life will be indicated by a constant yellow LED to the far right on the Battery charge indicator

Battery IP classification (IEC60529): IP44

Battery charge temperature

- +0°C to +40°C
- (+20°C to +25°C preferred)

Battery storage temperature

- -20°C to +40°C
- +41°C to +70°C ambient for less than a month

References

1. Rubertsson S, Lindgren E, Smekal D, et al. Mechanical chest compressions and simultaneous defibrillation vs conventional cardiopulmonary resuscitation in out-of-hospital cardiac arrest. The LINC randomized trial. *JAMA*. 2013;311(1):53-61.
2. Levy M, Yost D, Walker R, et al. A quality improvement initiative to optimize use of a mechanical chest compression device within a high-performance CPR approach to out-of-hospital cardiac arrest. *Resuscitation*. 2015;92:32-37.

For further information, please contact your Stryker representative or visit our website at strykeremergencycare.com

Emergency Care

04/2020
GDR 3337582_B

CE Class IIb (2460)

Jolife AB
Scheelevägen 17
Ideon Science Park
SE-223 70
LUND, Sweden

Stryker European
Operations B.V.
Herikerbergweg 110
1101 CM Amsterdam
Netherlands
Tel +31 (0)43 3620008
Fax +31 (0)43 3632001

Distributed by:

Stryker UK Ltd
Stryker House
Hambridge Road
Newbury, Berkshire
RG14 5AW
United Kingdom