

Department of General Services

Emergency Procurement ("EP") Approval Request

Bureau of Procurement

If either of the following two conditions exist, an EP is not required and should not be requested:

1. Material / Service available from DGS statewide contract.
2. Estimated Cost of the Material / Service is within the Small, No-bid Procurement threshold identified in the Procurement Handbook, Part I, Chapter 7.

Agency requests approved to proceed with an emergency procurement under Section 516 of the Commonwealth Procurement Code (62 Pa. C.S. §516).

Requesting Agency Information

Agency/Bureau:	Department of Health					
Contact Person:	Rebekah Gregorowicz					
Contact Address:	625 Forster Street Harrisburg PA 17120					
Contact Tel#:	717-547-3280					
Contact Email:	rgregorowi@pa.gov					
Description Of Material (or) Service (or) IT	IT	Development, deployment and maintenance of a mobile application with COVID-19 exposure notification capability that will be available for voluntary public download.				
SAP Material Groups:	80111608					
Estimated \$ Amount:	1,940,000					
Length of EP:	24 months - Date of EP approval-6/30/22					
Delivery Location:	City	Harrisburg	State	Pennsylvania	ZipCode	17120

Basis for the Emergency Purchase

Threat to public health, welfare, or safety

Identify the Threat:

Novel Coronavirus (COVID-19)

Provide a brief explanation of the need for the material and/or service:

At present, the spread of COVID-19 in the community is so overwhelming that the ability to track, trace, isolate and test the individuals suspected to have the virus is impossible without the influx of additional staff and use of technology-assisted applications. Bluetooth-enabled technology is a promising solution to assist with exposure notification where traditional contact tracing cannot. It is important that we follow guiding principles of data privacy when implementing a technology-assisted exposure notification. Exposure Notification via Mobile App is novel technology solution that will provide COVID-19 exposure notifications to reduce risk of transmission of COVID-19 amount residents of the Commonwealth. Notifying individuals who have had close contact with self-disclosing positive cases is essential to slow the spread of the virus that continues to cause hospitalizations and deaths throughout the Commonwealth. The contract length is 24 months because we intend to utilize this mobile application over the next two years to ensure enough time for the threat of COVID-19 to subside or until the population is vaccinated.

State the consequence if the procurement is not done on emergency basis:

Contact tracing is essential to slow the spread of the virus. If we do not create a more robust contact tracing system to include the option of a voluntary mobile application that includes exposure notification, we may see a greater spread of the virus and more positive cases and associated deaths. This is critical to implement immediately as workplaces and schools begin to reopen and individuals are having more in-person contact with others.

Indicate whether approval was obtained from DGS.

If "Yes", provide the following:

- ☐ **Yes** a. Name of person granting approval:
☒ **No** b. Date of approval:

☐ ***Circumstances outside the control of the agency create an urgency of need, which does not permit the delay in using more competitive methods***

NOTE: Verbal approval will not be provided for this basis. Agency cannot proceed with emergency procurement until this form is completed and approved by DGS.

Identify the Circumstances:

Why are those circumstances outside of the control of Agency?

Provide a brief explanation for the urgent need:

Information Required

For ALL EP's provide the following information:

Brief description of selection process:

The selection process included a requirement where the Mobile App developer should have already been thoroughly tested in other states or jurisdictions. NearForm already created a mobile application with COVID-19 exposure notification that meets all the functionality and privacy criteria deemed necessary by the Apple and Google teams, Department of Health and Office of Administration. It is already implemented nationally in Ireland, Northern Ireland and Gibraltar governments.

Full supplier information (if known at time of submission of form)	Name:	NearForm Ltd	
	Address:	Tankfield, Convent Hill, Tramore, Co. Waterford, X91 PV08, Ireland	
	Telephone #:		
	SAP Vendor#:	0000543192	Total Amount

For EP's that are NOT a threat to public health, welfare, or safety, provide the following information

Include a list of the solicited suppliers, their contact information, and their quotations:

Funds have already been encumbered for this request (Yes/No):

☐ Yes
☒ No

If applicable, what has been done previously to procure this material/service? (Also provide the previous SAP/SRM PO number and/or Contract Number)

NOTE: If any Agency only intends to solicit a quote from one supplier, the following section, "Supplemental Single Source Information" must be completed

Supplemental Single Source Information Required

This section of the EP APPROVAL REQUEST Form is only required to be completed if the following is applicable:

1. Category of Emergency is due to "Circumstances outside the control of the agency create an urgency of need, which does not permit the delay in using more competitive methods."
2. It is not practical for the agency to obtain two or more quotes.

Is only a single supplier capable of providing the material or services? If Yes, please explain. If not applicable, leave blank and respond in the next block.	No. Other suppliers are capable but did not offer a Mobile App product to DOH that met all of the privacy-centric criteria's, functionality, experience in this novel technology, as deemed necessary to operationalize in the Commonwealth.
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Explain why it is not practical to obtain two or more quotes for this emergency procurement.	The reason why we decided on NearForm because it met all the Apple and Google's exposure notification criteria. Other Mobile App developers created an app that collected Location data, geo-tagged individual phones or asked for microphone access to determine and validate proximity between phones.
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If timing is a factor, what is the time factor and why? If yes, please explain.	Yes. The COVID-19 pandemic persists in the Commonwealth and the United States as we continue to see new positive cases, hospitalizations, and related deaths. If we do not increase our contact tracing efforts immediately, we will continue to see a greater spread of the virus, especially now that workplaces and schools are beginning to reopen.
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Are there compatibility requirements or compliance requirements? If yes, please explain.

Yes. NearForm must demonstrate that the mobile application meets our identified criteria and they will be providing maintenance and support throughout the length of the contract to ensure it is functioning properly.

NOTE: If the purpose of the emergency procurement is to prevent a lapse in contracted services, one of the following must be checked. Include status of the new contract/purchase and note any special conditions of the emergency procurement.

☐ To extend a current contract with the current contractor to prevent a lapse in contracted services.

☐ To bridge a gap between an expiring contract and a new contract by allowing the new contractor to begin work before the new contract is fully

☐ To authorize a supplier, who has been properly selected through one of the methods of award, to begin work before the new contract is fully executed because the agency needs the services immediately and cannot wait until full execution of the

☒ If none of the above is applicable, explain how the emergency supplier was selected.

This agreement is needed to quickly implement a contact tracing mobile application, and NearForm is the only supplier reviewed that can provide a product quickly with the necessary criteria.

Agency Approvals

IMPORTANT*:The printed names on this form shall constitute the signatures of these individuals. Agencies must insure that these individuals review the completed form and give their consent to apply their printed name on this form. No handwritten signatures shall be required in order for the form to be considered "signed" by those individuals whose names appear in the signature section

**Requesting Authority (Agency Head or Designee reviewing and approving this request)
Requesting Authority signature connotes concurrence with the Agency EP request to procure the material and/or service**

Title: Agency Head Designee

Signature: Rebekah Gregorowicz

Date: 07-02-20