

This section is for M/WBE Office use only

Contact Name & Phone Number:

- ☐ The M/WBE Office supports the waiver request. Please submit any comments below.

1. The extraordinary and necessary requirements of the contract render application of the Program Elements infeasible or impractical. **Please explain in detail. (Attach supporting documentation as necessary)**

2. The nature of the goods or services being procured are excluded from the scope of this Program Plan.

Please check one of the exclusions below: (Attach supporting documentation as necessary)

- ☐ Contracts that are subject to the U.S. Department of Transportation Disadvantaged Business Enterprise Program;
- ☐ Sole Source: the required supplies or services are available from one responsible source
- ☐ Contracts for electricity or water and sewage services from a municipal utility district or governmental agency;
- ☐ Emergency contracts for goods or supplies;
- ☐ Contracts for the City's lease or purchase of real property where City is lessee or purchaser; and

3. Sufficient qualified M/WBEs providing the goods or services required by the contract are unavailable in the Relevant Market area of the project despite every reasonable attempt to locate them. **Please explain in detail the reason for the request: (Attach RFP & supporting documentation as necessary)**

- ☐ The M/WBE Office does not support the waiver request. Please explain in detail the reason for not supporting the request: (Attach supporting documentation as necessary)

This section is for CMO Office use only

Contact Name:

- ☐ The CMO Office approves the waiver request
- ☐ The CMO Office does not approve the waiver request.

Internal M/WBE Waiver Request Form

Date: 5/6/2021

Department: Fire

Contact Name & Phone: Ronald Swails 336-412-5723

Contract Name and Number (if applicable): Moses H. Cone Hospital Firefighter Physicals

A waiver of the M/WBE participation requirement may be requested by the **Originating Department** at least 5 business days **prior** to advertisement or solicitation. In detail below, please explain your reason for requesting a waiver (attach RFP & supporting documentation as necessary).

Final approval of the request will be made by the City Manager's Office.

This is a request to continue the existing contract with Moses H. Cone Memorial Hospital Operating Corporation (MCMHOC) for firefighter medical evaluations and physicals. MCMHOC is a nationally recognized and distinguished health care system. The Greensboro Fire Department (GFD) has contracted with MCMHOC since FY 2005-2006 and we have over fourteen years of medical/physical history and baseline for all GFD personnel which is essential when evaluating and tracking an employee's health condition and well-being priorities.

MCMHOC has a state of the art fixed medial facility eliminating the use of smaller mobile units.

The City of Greensboro Physician (Dr. Mary Hunt) with MCMHOC is knowledgeable on National Fire Protection Association standards, OSHA standards and other firefighter recommended fire industry standards.

GFD personnel on vacation, sick leave, or that miss the blood work day can simply go by MCMHOC fixed local facility for their blood draws.

MCMHOC and the City of Greensboro Physician work in conjunction with City Medical Services to provide the following:

- Employee fit-for-duty and return to work clearance. (Worker's Comp and personnel injuries and medical issues).
- Infectious Control (Firefighter exposure and source testing for blood borne and air borne pathogens and etc.)
- Advisory to GFD concerning national and local medial/health issues such as Ebola, bed bugs, TB, etc.
- Employee Drug and Alcohol testing. (Random, promotional, and ordered)
- Psychological fit-for-duty. Resource for City of Greensboro's Employee Assistance Program.
- Advisory to the GFD Fitness Committee.
- Advisory to the GFD Peer Support Team.

R Michael Swails

Digitally signed by R Michael Swails
Date: 2021.05.06 10:57:34 -04'00'