



PROFESSIONAL SERVICES – REQUEST FOR APPROVAL

Approved by Consent Agenda:

TO BE COMPLETED BY COUNCIL STAFF ONLY

Title: TEK Systems Contract Extension RFQ [ ] RFP [ ] RFQ/RFP #: Enter # or Option
Dept: Public Health Contact Person: Sara Evers Ext.: 7559

Description (service, justification and use):

The Department of Public Health is requesting an extension of three months on the current contract for up to six epidemiologists and two data analysts. The epidemiologists provide data analysis, investigation, management and mitigation of outbreaks, and support to our two full-time epidemiology staff. The data analysts assist in scheduling citizen appointments for vaccination, enter data for vaccinations given and test results, or other information as requested. There is a large amount of data to maintain and for which the Department must provide quality control and those functions are supported by this contract. This contract is reimbursed 100% by funds from the State. The cost is expected to be \$60,000 per month for a total of \$180,000.

If we were able to fill these job duties with intermittent employees we would do so, however appropriate, and qualified candidates are not available.

Award to: TEK Systems Location: St. Louis, MO

Was the vendor pre-qualified? Yes [ ] No [x]

Total negotiated price: \$ 180,000.00 Contract term: 3 months with renewals.

Price break-down (if applicable):

Proposal opening held on: Opened by:

Account number to be charged for purchase: 0019800-45800

If paying for with grant funds, please indicate (1) grant name, (2) total grant amount, (3) what portion of purchase is being paid for by a grant, and (4) when grant period ends as applicable:

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## Additional RFQs/RFPs Received

The following additional responses were received:

Vendor: \_\_\_\_\_ Location: \_\_\_\_\_

Vendor: \_\_\_\_\_ Location: \_\_\_\_\_

Vendor: \_\_\_\_\_ Location: \_\_\_\_\_

Vendor: \_\_\_\_\_ Location: \_\_\_\_\_

Vendor: \_\_\_\_\_ Location: \_\_\_\_\_

Vendor: \_\_\_\_\_ Location: \_\_\_\_\_

Vendor: \_\_\_\_\_ Location: \_\_\_\_\_

Sole source justification memos from (1) dept. and (2) vendor attached.

Department Director/Elected Official must sign the request prior to routing to the Purchasing Manager.

Sara Evers  
Department Director/Elected Official Signature

\_\_\_\_\_ Date

Robert W. Schnur  
Approval or Concurrence of Director of Finance

\_\_\_\_\_ Date

**BELOW ONLY TO BE COMPLETED FOR PROPOSALS AT LEAST \$15,000 AND LESS THAN \$50,000. See instructions at the top of pg. 1.**


\_\_\_\_\_ Director of Administration Signature

\_\_\_\_\_ Date

## MEMORANDUM

TO: Members of the County Council

CC: County Executive Ehlmann

FROM: Sara Evers, Department Acting Director 

RE: TEK contract extension

DATE: 11/19/2021

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