Addendum #1

Date: July 30, 2025

Title: RFQP/RFP #202513222737 Multidiscipline Electronic Library Content Provider

Subject: Questions and Answers

1. Would you please confirm the following data volumes: 446 staff beds and 1 location?

Answer: Per the website, the main JPS Health Network campus in Fort Worth is a 582-bed facility. There are also a number of clinics located throughout Tarrant County.

1. Please specify the clinical content areas your organization requires the clinical decision support tool to cover. A current list of clinical content used would be helpful.

Answer: The purpose of this resource is to provide seamless access to evidence-based literature in psychology, nursing, medicine, global public health, sports medicine, general and healthcare business, and healthcare administration.

1. Regarding the following minimum requirement, "Does your resource provide an easy to use, intuitive search interface for evidenced-based clinical point-of-care content?", it is our understanding that a clinical point-of-care product is not in scope of this RFP. Is this requirement included by error?

Answer: The resource should provide an easy to use, intuitive search interface for evidence-based literature.

1. Regarding the 25% MWVBE participation requirement, is it possible to lift this from the RFP? We complete all work in house by our staff for the proposed services.

Answer: No

All corrections, changes, additions, revisions, and/or clarifications in this Addendum # to the

RFP are hereby made a part of the RFQP/RFP #20251322737 Multidiscipline Electronic Library Content Provider

All Respondents to the RFQP/RFP shall acknowledge receipt and acceptance of this Addendum # by

signing in the space provided and submitting the signed Addendum #1 with the RFQ/RFP.

Proposals submitted without an executed copy of this Addendum #1 attached may be considered

informal and may be rejected.

Received, acknowledged, and conditions agreed to on this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_, 2025, by:

Respondent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If there are questions pertaining to this addendum, please contact Lizzie Harris Johnson Bid\_submissions@jpshealth.org