## UNIVERSITY OF HAWAII NOTICE OF EXEMPTION FROM CHAPTER 103D, HRS

The President, University of Hawaii, is in the process of reviewing the request from University of Hawaii at Manoa, School of Nursing and Dental Hygiene (Department/Campus) for exemption								
from Chapter 103D, HRS, for the following goods, services, or construction:								
Multiple agreements with	qualified healthcare providers students in the University of H	in the State of Hawaii to provid awaii at Manoa, School of Nur						
Vendor: To be deter (If known) Address:	mined.							
Term of Contract: (If known)	From: Summer 2018	To: Spring 2019	Cost: \$1,000.00 per 1 credit					
Direct any inquiries to: Department: University of Hawaii at Manoa, School of Nursing and Dental Hygiene Contact Name/Title: Marla Acosta, Secretary, Office of the Dean Address: 2528 McCarthy Mall, Wester Hall 402 Honolulu, Hawaii 96822			Phone Number: (808) 956-8522 Fax Number: (808) 956-3257					
		Date Poste	d: May 15, 2018					

Submit written objections to this notice to issue an exemption from Chapter 103D, HRS, within seven (7) calendar days from the date posted to:

Office of Procurement and Real Property Management 1400 Lower Campus Road, Room 15 Honolulu, Hawai'i 96822 OPRPM Form 138 (Rev.07/2012)



RECEIVED

## REQUEST FOR EXEMPTION FROM CHAPTER 1803 PPH PS A10 :01

TO:

OFFICE OF PROCUREMENT AND REAL PROPERTY MANAGEMENT

FROM:

MANOA CHANCELLOR'S University of Hawaii at Manoa School of Nursing and Dental (Digitale (SONDH)

(Department/Program)

Pursuant to APM Section A8.220, the Department requests a procurement exemption to purchase the following:

Description of goods, services, or construction:

Multiple agreements with qualified healthcare providers in the State of Hawaii for Summer 2018 through Spring 2019 to provide individualized clinical training experiences for graduate students in the UHM School of Nursing and Dental Hygiene's (SONDH) Doctor of Nursing Practice (DNP) nurse practitioner program. The healthcare provider will provide nurse practitioners and/or physicians available to complete University nursing clinical preceptor training, precept students, and with UH SONDH faculty, review and evaluate student practice, as outlined by the course objectives, a minimum of twice during the semester (45 hours of training per 1 credit that each student enrolls).

Estimated Cost:

\$ 1,000 per 1 credit (45 hours of training) per student

(1) Explanation describing how procurement by standard competitive means is either not practicable or not advantageous to the University;

Procurement by standard competitive means is not practical for these agreements with healthcare providers which require consideration of many subjective factors to provide appropriate clinical training for the students in the program. These factors include: 1) Access to a setting with the breadth and depth of case mix appropriate to the student's population and clinical focus areas; 2) Direct clinical experiences that will allow students to practice hands-on clinical skills and develop new clinical proficiency, including performing an appropriate history, physical examination, and diagnostic procedures for clients' complaints; demonstrating evidence-based clinical reasoning, and formulate and implement an appropriate and culturally sensitive plan of care for patients; 3) Participation in inter-professional team activity; 4) Ability to practice to the full scope of their APRN education in compliance with organizational policy and the Hawaii Nurse Practice Act; 5) Access to and utilization of electronic health records; and 6) Opportunity to participate in unit and/or organizational level quality improvement activity specific to the student clinical specialty area. Access to a variety of clinical rotations and patient populations with an accredited/certified healthcare provider is necessary for graduation, licensure, and certification, which limits the healthcare provider type eligible for consideration under this arrangement. Furthermore, a standard rate of renumeration per credit (and associated number of hours of training required) per student student placed within each healthcare provider will be applied to all agreements issued under this proposed exemption.

(2) Details of the process or procedures to be followed in selecting the vendor to ensure as fair and open competition as practicable;

The Graduate Chair and Program Director for the Doctor of Nursing Practice Program will contact healthcare providers that meet the requirements as a training site, including an adequate staffing of nurse practitioners and/or physicians and provider accreditation/certification, to discuss the provider's ability to meet the clinical training experiences. They will formulate a plan that is most reasonable in terms of the numbers of required student placements, credits, and hours; numbers of students by healthcare provider, specialty, client population; and that meets the criteria for an effective individualized clinical training experience. We expect to issue contracts to multiple healthcare providers (approximately 5 to 15) to meet our clinical training needs.

(3) A description of the Department's internal controls and approval requirements for the exempted procurement; and

The Dean of SONDH will review all proposed agreements for services for the healthcare providers selected prior to processing for execution. The School's Chief Administrative officer will review and approve all requisition, purchasing, payment and related support documents for compliance with University procedural requirements.

(4) A list of Department personnel, by position title, who will be involved in the approval process and administration of the contract:

Mary Boland, Dean, School of Nursing and Dental Hygiene

Maureen Shannon, Graduate Chair

Julie Kathman, Director, DNP Program

Christopher Kanehiro, Administrative Officer

Direct questions to: Marla Acosta Phone: 956-8522

Direct questions to: M	larla Acosta	Phone:	956-8522		
I CERTIFY THAT THE KNOWLEDGE, TRUE		VIDED ABOVE IS T	O THE BEST C	F MY	
Mary G. Boland, Dean Full Name of Principal Inves Head, or Administrator	stigator, Department	Signature (	sent	4/ D	9/18 Pate
Christopher Kanehiro Full Name of Fiscal Officer	-	Signature	4 خا	/9/18 D	ate
APPROVED:	Jun				6 2018
Full Name of Vice Presiden	t or Chancellor	Signature		D	ate
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PRESIDENT, UNIVERSITY OF H	AVVAII			DAT	드