



BACKGROUND:

The Department of Veteran Affairs Network Contracting Office 19 (NCO19) is requesting information (RFI) on Physical Security Assessment (PSA) services.

This RFI will consist of answering questions, with the hopes of acquiring a basic understanding of PSA in today's market.

The **NAICS Code** for this service is: **541690-Security Consulting Services**

Therefore, please complete and return to:

Tony.Mathews2@va.gov

Due date: 04/17/2017-4:30PM

IMPORTANT NOTE: This is not solicitation-This is a Request for Information [RFI] for market research purposes. Any information provided is for internal use only and is not binding the government in any contract for this type of service

COMPANY NAME:

GENERAL QUESTIONS:

1. **KEY** elements of a Physical Security Assessment (PSA) consist of?

2. A PSA team typically consist of what individuals? [Job titles, number of people ...etc.,]
 - a. Does facilities size impact the PSA team size?

3. How is the PSA generally priced?

If hourly-the market hourly rate:

If Sq. footage –the market rate per sq. Footage:

Other: [Please explain below]

4. Is there any difference in providing PSA for healthcare facilities and non-healthcare facilities?

a. If “YES”, please list **KEY** differences?

5. What type training or education is required to be considered a professional in PSA? [Please select]

6. What institutions provide training and education on PSA?

7. How many curriculum hours are required?

8. Are there any public or private agencies that govern or provide oversight for PSA standards?

If you answered
"YES" please provide
name of agencies

COMPANY SPECIFIC QUESTIONS

9. Where did your company’s employees get training and education to be classified as a PSA professional?

10. What type of documentation was received for successfully completing the prescribed courses? [Please list the name]

11. How long has your company been in the PSA business?
12. Does your company *generally* team up with another company to provide PSA services?
If answered "NO" please mark "N/A" for 13 & 14 and skip to question 15
13. If "YES" what is your company function in that teaming arrangement?
14. Are both, your company and the teaming partners trained and educated in the field of PSA? [please list each company credentials]
- a. Your company
 - b. Teaming Partners
15. Has your company ever performed a PSA at a healthcare facility?
16. What would be the minimum years of experience required by your company, to hire someone to represent the company for a PSA service at a large health care or non-healthcare facility?
17. Could your company provide PSA service in the state of Oklahoma?

18. Company Name:

19. Your company socioeconomic size:

20. Addition socioeconomic size [please list]

21. For the given NAICS code stated above, under the *Background* section, would your company be consider a small business in accordance with the **Small Business Administration** [SBA] size standards for a small business?

22. DUNs#

GSA # [General Service Administration-for those who have a number, will know what this is] if not applicable put "N/A" or "NONE".

POC:

Phone#:

Email address:

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