



REQUEST FOR PROPOSAL

Outsourcing of Housekeeping Services at Govt. Health Institutions

RFP Reference Nos: Nirmal/Housekeeping /Dist-Inst. Name /1-32
(as mentioned in the Schedule of Submission : Section I for each District / Institution)

Date: 21st November 2018



DISCLAIMER

The information contained in this Request for Proposal (RFP) document or subsequently provided to bidder(s), whether verbally or in documentary form by or on behalf of the Tender Inviting Authority under Department of Health & Family Welfare, Govt. of Odisha, or any of their employees or advisors, is provided to bidder(s) on the terms and conditions set out in this RFP document and any other terms and conditions subject to which such information is provided. This RFP document is not an agreement and is not an offer or invitation by the Tender Inviting Authority or its representatives to any other party. The purpose of this RFP document is to provide interested parties with information to assist the formulation of their proposal and detailed Proposal. This RFP document does not purport to contain all the information each bidder may require. This RFP document may not be appropriate for all persons, and it is not possible for the Department, their employees or advisors to consider the investment objectives, financial situation and particular needs of each party who reads or uses this RFP document. Some bidders may have a better knowledge of the proposed Project than others. Each bidder should conduct its own investigations and analysis and should check the accuracy, reliability and completeness of the information in this RFP document and obtain independent advice from appropriate sources. Tender Inviting Authority / Department, its employees and advisors make no representation or warranty and shall incur no liability under any law, statute, rules or regulations as to the accuracy, reliability or completeness of the RFP document. Tender Inviting Authority / Department may in its absolute discretion but without being under any obligation to do so can update, amend or supplement the information in this RFP document.

NOTICE INVITING PROPOSAL

RFP No. : Nirmal/Housekeeping/ Dist. Name / 1-32

Dated: 21st November 2018

(as per the RFP no. of the concerned Dist. mentioned in the Section 1 :Schedule of Submission)

DETAILED PROPOSALS ARE INVITED FROM ELIGIBLE AGENCYS FOR SELECTION OF THE MOST SUITABLE AGENCY TO UNDERTAKE HOUSEKEEPING SERVICES AT GOVT. HEALTH INSTITUTIONS.

| | | |
|---|--|---|
| 1 | Period of Availability of RFP Document | From 21 st November 2018 to 21 st December 2018 (Downloadable from website: www.nhmodisha.gov.in) |
| 2 | Pre-bid Meeting | Date : 27th November 2018, Time : 11.30 AM Address: Conference Hall, Mission Directorate, National Health Mission, Annex. Building of SIH&FW, Nayapalli, Bhubaneswar-751 012 |
| 3 | Last date for submission of Proposal | Date: 21st December 2018, Time: 12 Noon Address: _____ <i>(Name of the Dist. & Venue is mentioned at Section 1 : Schedule of Submission)</i> <i>NB : Proposals should be submitted through Speed post / Registered post / Courier/Tender drop box</i> |
| 4 | Date, time and place of opening of Proposal and presentation | a) Technical Proposal (Part A) opening : 21st December 2018 at 12.30 PM at _____(Name of the Dist. & Venue is mentioned at Section 1 : Schedule of proposal Submission) b) Financial Proposal (Part B): <i>The date of opening of financial proposals will be intimated by the CDMO / Director of the concerned District / Institution, to the agency found successful in the technical proposal evaluation.</i> <i>(Name of the Dist. & Venue is mentioned at Section 1 : Schedule of proposal Submission)</i> <i>(Bidders / authorized representative may remain present at the time of opening of proposal)</i> |

SECTION 1 : SCHEDULE OF PROPOSAL SUBMISSION

| Sl. | RFP No. & date | Name of District / Institution | Address of submission of Proposal & Opening of Proposal | Last date & time of submission of Proposal | Date & time of opening of Technical Proposal |
|----------|---|--------------------------------|---|--|--|
| A | Districts | | | | |
| 1 | Nirmal/Housekeeping - Angul/1 dated 21.11.2018 | Angul | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Angul, Dist. Angul, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 2 | Nirmal/Housekeeping –Balasore /2 dated 21.11.2018 | Balasore | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Balasore, Dist. Balasore, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 3 | Nirmal/Housekeeping Housekeeping - Bargarh/3 dated 21.11.2018 | Bargarh | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Bargarh, Dist. Bargarh, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 4 | Nirmal/Housekeeping Housekeeping - Bhadrak/4 dated 21.11.2018 | Bhadrak | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Bhadrak, Dist. Bhadrak, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 5 | Nirmal/Housekeeping - Bolangir/5 dated 21.11.2018 | Bolangir | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Bolangir, Dist. Bolangir, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 6 | Nirmal/Housekeeping - Boudh/6 dated 21.11.2018 | Boudh | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Boudh, Dist. Boudh, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 7 | Nirmal/Housekeeping - Cuttack/7 dated 21.11.2018 | Cuttack | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Cuttack, Dist.Cuttack, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 8 | Nirmal/Housekeeping - Deogarh/8 dated 21.11.2018 | Deogarh | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Deogarh, Dist. Deogarh, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |

| Sl. | RFP No. & date | Name of District / Institution | Address of submission of Proposal & Opening of Proposal | Last date & time of submission of Proposal | Date & time of opening of Technical Proposal |
|-----|---|--------------------------------|---|--|--|
| 9 | Nirmal/Housekeeping - Dhenkanal/9 dated 21.11.2018 | Dhenkanal | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Dhenkanal, Dist. Dhenkanal, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 10 | Nirmal/Housekeeping - Gajapati/10 dated 21.11.2018 | Gajapati | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Paralakhemundi, Dist. Gajapati, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 11 | Nirmal/Housekeeping - Ganjam/11 dated 21.11.2018 | Ganjam | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Ganjam, Dist. Ganjam, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 12 | Nirmal/Housekeeping – Jagatsinghpur / 12 dated 21.11.2018 | Jagatsinghpur | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Jagatsinghpur, Dist. Jagatsinghpur, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 13 | Nirmal/Housekeeping - Jajpur/13 dated 21.11.2018 | Jajpur | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Jajpur, Dist. Jajpur, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 14 | Nirmal/Housekeeping - Jharsuguda/14 dated 21.11.2018 | Jharsuguda | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Jharsuguda, Dist. Jharsuguda, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 15 | Nirmal/Housekeeping – Kalahandi /15 dated 21.11.2018 | Kalahandi | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Bhawanipatna, Dist. Kalahandi, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 16 | Nirmal/Housekeeping – Kandhamal /16 dated 21.11.2018 | Kandhamal | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Kandhamal, Dist. Kandhamal, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |

| Sl. | RFP No. & date | Name of District / Institution | Address of submission of Proposal & Opening of Proposal | Last date & time of submission of Proposal | Date & time of opening of Technical Proposal |
|-----|---|--------------------------------|---|--|--|
| 17 | Nirmal/Housekeeping – Kendrapara /17 dated 21.11.2018 | Kendrapara | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Kendrapara, Dist. Kendrapara, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 18 | Nirmal/Housekeeping – Keonjhar /18 Dated 21.11.2018 | Keonjhar | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Keonjhar, Dist. Keonjhar, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 19 | Nirmal/Housekeeping – Khurda/19 dated 21.11.2018 | Khurda | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Khurda, Dist. Khurda, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 20 | Housekeeping – Koraput/20 dated 19.11.2018 | Koraput | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Koraput, Dist. Koraput, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 21 | Nirmal/Housekeeping – Malkangiri/21 dated 21.11.2018 | Malkangiri | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Malkangiri, Dist. Malkangiri, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 22 | Nirmal/Housekeeping - Mayurbhanj/22 dated 21.11.2018 | Mayurbhanj | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Baripada, Dist. Mayurbhanj, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 23 | Nirmal/Housekeeping - Nawarangpur/23 dated 21.11.2018 | Nawarangpur | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Nawarangpur, Dist. Nawarangpur, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 24 | Nirmal/Housekeeping - Nayagarh/24 dated 21.11.2018 | Nayagarh | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Nayagarh, Dist. Nayagarh, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |

| Sl. | RFP No. & date | Name of District / Institution | Address of submission of Proposal & Opening of Proposal | Last date & time of submission of Proposal | Date & time of opening of Technical Proposal |
|----------|--|--------------------------------|---|--|--|
| 25 | Nirmal/Housekeeping - Nuapada/25 dated 21.11.2018 | Nuapada | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Nuapada, Dist. Nuapada, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 26 | Nirmal/Housekeeping -Puri/26 dated 21.11.2018 | Puri | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Puri, Dist. Puri, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 27 | Nirmal/Housekeeping - Rayagada/27 dated 21.11.2018 | Rayagada | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Rayagada, Dist. Rayagada, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 28 | Nirmal/Housekeeping - Sambalpur/28 dated 21.11.2018 | Sambalpur | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Sambalpur, Dist. Sambalpur, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 29 | Nirmal/Housekeeping - Sonepur/29 dated 21.11.2018 | Sonepur | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Sonepur, Dist. Sonepur, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 30 | Nirmal/Housekeeping – Sundargarh /30 dated 21.11.2018 | Sundargarh | The Chief District Medical Officer, O/o of the Chief District Medical Officer, District Head Quarter Hospital, At/P.O. Sundargarh, Dist. Sundargarh, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| B | Other Institutions | | | | |
| 31 | Nirmal/Housekeeping – Capital Hospital/31 dated 21.11.2018 | Capital Hospital, Bhubaneswar | The Director, O/o of Director, Capital Hospital, At/P.O. Bhubaneswar, Dist. Khrda, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |
| 32 | Nirmal/Housekeeping - RGH/32 dated 21.11.2018 | RGH, Rourkela | The Director, O/o of Director, Rourkela Govt. Hospital (RGH), At/P.O. Rourkela, Dist. Sundergarh, Odisha | 21.12.2018, 12 Noon | 21.12.2018, 12.30 PM |

SECTION 2 - INSTRUCTIONS TO BIDDERS

2.1 Scope of Proposal

- (a) Interested bidders fulfilling the eligibility criteria may submit their bid **separately for any or all the Districts / Institutions. However, the bidder submitting proposal for any district has to provide housekeeping & cleanliness services in DHH, SDHs, CHCs & PHCs of that district (except for two institutions : Capital Hospital and RGH, Rourkela) as per the list attached in Section-6 and accordingly quote the prices in the price bid. The bid for Capital Hospital and RGH, Rourkela has to be submitted in the concerned institutions.**
- (b) Detailed description of the objectives, scope of services, deliverables and other requirements relating to “Provisioning of **Housekeeping & Cleaning** Services at Govt. Health Institutions” are specified in this RFP. The manner in which the Proposal is required to be submitted, evaluated and accepted is explained in this RFP;
- (c) The selection of the Agency shall be on the basis of an evaluation by the tender committee of the concerned District / Institution, through the Selection Process specified in this RFP. Bidders shall be deemed to have understood and agreed that no explanation or justification for any aspect of the Selection Process will be given and that the decision of CDMO / Director of the concerned health institution is without any right of appeal whatsoever;
- (d) The bidder shall submit its Proposal in the form and manner specified in this RFP. **The Financial Proposal (Part B) shall be submitted in the format specified in F1, F2 & F3.** Upon selection, the agency shall be required to enter into an Agreement with the Chief District Medical Officer / Director of the concerned District / Institution in the form specified at **Annexure I.**

2.2 Eligibility Criteria

The bidder should fulfil the following Eligibility Criteria:

- | | |
|-------|--|
| I. | Should be registered in India as a Company, Firm, Society or a Trust. |
| II. | Consortium is not allowed |
| III. | Should have an average Annual Turnover of Rs. 3 Crores or more during the last three financial years (2015-16, 2016-17 & 2017-18) |
| IV. | Should have minimum 3 years of working experience in the field of housekeeping & cleaning services in Public / Private sector [State Govt. / Govt. of India Institution / Govt. undertaking / Corporation / Banks / Govt. & Pvt. Hospitals / Pvt. Organizations] on the stipulated date of bid submission. |
| V. | Should have enrolled at least 100 personnel in housekeeping & cleaning works as on date of bid submission. Work Order / Contract copies in support of such enrolment must be submitted by the agency as per Format T4. |
| VI. | The Bidder must not have been blacklisted either by the tender inviting authority or by any State Govt. or Govt. of India organization. The agency shall submit undertaking regarding the same on Non Judicial Stamp paper of Rs. 20/- as per Format T6 |
| VII. | Must have labour registration certificate |
| VIII. | Must have ISO 9001 certification |
| IX. | Must be registered under EPF |

- X. Must be registered under ESI
- XI. Must have a PAN
- XII. Must have GST registration number

2.3 Proposal Submission

Interested eligible bidders may submit their bid(s) **separately for any or all the Districts / Institutions**. The bidders interested to submit their bids for **more than one district**, can do so by submitting **separate bids** with **EMD & documents** as set forth in this RFP **at the respective Districts / Institution**, the detail address of which is mentioned in **Section 1: Schedule of Proposal Submission**. However, the bidder submitting proposal for any district has to provide **Housekeeping & Cleaning services** in **DHH, SDHs, CHCs, PHCs** of **that district** (except for two institutions : Capital Hospital and RGH, Rourkela) as per the list attached in Section 6 and accordingly quote the prices in the price bid. The bid for Capital Hospital and RGH, Rourkela has to be submitted in the concerned institutions.

The proposal shall be submitted in two parts:

(1) Part A - Bid Security & Technical Proposal as per format set out in RFP.

(2) Part B - Financial Proposal as per the format set out in RFP.

- (i) The Proposal shall be typed or written legibly in indelible ink and shall be signed the authorized representative of the bidder.
- (ii) Power of Attorney for signing of bid: The bidder should submit a Power of Attorney as per the **Form T5**, authorizing the signatory of the bid to commit the bidder.
- iii) Any interlineations, erasures or overwriting shall be valid only if the person or persons signing the Proposal have put his/their initial prior to submission of the same.

2.4 Bid Document Cost

The bidders shall have to furnish a bid document cost of **Rs.1,500/-** (non-refundable) in the shape of a **Banker's cheques / Demand Draft** (for **each district** they want to participate) from any Nationalized / Schedule Bank payable at _____ (name of the **district** for which they want to bid) and in favour of **ZSS, Non-NRHM**, _____ (name of the district for which they want to bid).

In case of Capital Hospital and RGH-Rourkela, the bid document cost of **Rs.1,500/-** shall have to be furnished in the shape of a **demand draft** from any Nationalized / Schedule Bank payable at _____ [Bhubaneswar (in case of Capital Hospital) / Rourkela (in case of RGH) and in favour of **Director, Capital Hospital** (in case of Capital Hospital) / **Director, RGH** (in case of RGH).

In the absence of the bid document cost, the technical proposal of the bidder shall be rejected.

The bid document cost should be put in the Technical Proposal (Cover A) envelop.

2.5 Earnest Money Deposit (EMD)

The bidder along with the technical proposal shall have to furnish Earnest Money Deposit (EMD) amounting to

Rs. 1,00,000/- (refundable) in the shape of Banker's cheques / Demand Draft (for **each district** they want to participate) from any Nationalized / Schedule Bank in favor of the ZSS, non-NRHM ____ (as per the **District name** for which the bidder want to submit their proposal) payable at ____ (as per the **District name** for which the bidder want to submit their proposal).

In case of Capital Hospital and RGH-Rourkela, the EMD of **Rs.1,00,000/-** shall have to be furnished in the shape of a Banker's cheques / Demand Draft from any Nationalized / Schedule Bank payable at _____ [Bhubaneswar (in case of Capital Hospital) / Rourkela (in case of RGH) and in favour of **Director, Capital Hospital** (in case of Capital Hospital) / **Director, RGH** (in case of RGH).

In the absence of the EMD, technical proposal of the bidder shall be rejected. However, as per the Finance Department, Govt. of Odisha office memorandum no. 21926 dated 12.8.2015, the **local MSEs** registered with respective DICs, Khadi, Village, Cottage & Handicraft Industries, OSIC and NSIC are exempted from submission of EMD while participating in tenders of Govt. Departments and Agencies under its control. It is further clarified that the above exemption is applicable to **local MSEs registered in Odisha only**. This exemption to the local MSEs shall be applicable if the kind of service as required under this tender enquiry is clearly specified against the details of the service to be provided in their DIC / NSIC registration certificate (to be furnished in the technical bid).

The EMD shall be returned to unsuccessful bidders within a period of 4 weeks from the date of announcement of the successful bidder.

The EMD shall be forfeited if the bidder withdraws its proposal during the interval between the proposal due date and expiration of the proposal validity period or on in case of successful bidder, if does not execute the agreement.

2.6 Packing, Sealing and Marking of Proposal

(a) The Technical Proposal (Cover A) and Financial Proposal (Cover B) must be inserted in separate sealed envelopes, along with applicant's name and address in the left hand corner of the envelope and super scribed in the following manner.

- **Cover-A** - Technical Proposal for "**Housekeeping Services at Health Facilities, District / Institution Name _____**".
- **Cover-B** - Financial Proposal for "**Housekeeping Services at Health Facilities, District / Institution Name _____**".

(b) The two envelopes, i.e. envelope for Part-A, Part-B must be packed in a separate sealed outer cover and clearly **super scribed** with the following:

- Proposal for "**Housekeeping Services at Health Facilities, District / Institution Name _____**".
- **RFP no. & District /Institution Name** (The bidder should clearly mention the RFP no. & District /Institution name for which the proposal is submitted)
- The bidder's Name & address shall be mentioned in the left hand corner of the outer envelope.

- (c) The inner and outer envelopes shall be **addressed** to the **Chief District Medical Officer / Chief Medical Officer / Director** (of the concerned health facility) at the **detail address** mentioned at the Section - 1: Schedule of Proposal Submission.

If the outer envelope is not sealed and marked as mentioned above, then the O/o the CDMO / Director (of the concerned health facility) will assume no responsibility for the tender's misplacement or premature opening. Telex, cable or facsimile tenders will be rejected.

(d) Content of the Proposal

I. Cover A (Technical Proposal)

The bidders are requested to submit a detailed technical proposal with respect to outsourcing of Housekeeping & Cleaning Services at health institutions during the proposed contract period in conformity with the Terms of Reference forming part of this RFP.

1. EMD of **Rs.1,00,000/-** (Rupees One Lakh) in the shape of a Demand Draft in favour of **ZSS, Non NHM, _____** (name of the District for which the bidder is interested to bid)
2. Bid document cost of Rs.1,500/- (Rupees One Thousand Five hundred) in the shape of a Demand Draft in favour of **ZSS, Non NHM, _____** (name of the District for which the bidder is interested to bid)
3. Form T1
4. Form T2
5. Photocopy of the Registration Certificate of the Agency
6. Photocopy of PAN
7. Photocopy of GST, EPF, ESI Registration
8. Photocopy of the ECR of EPF and Challans of ESI for the month of **August 2018** towards EPF / ESI payment of the personnel deployed by the agency.
9. Photocopy of ISO 9001 certification
10. Form T3 (Turnover Certificate from the Chartered Accountant)
11. Photocopy of the audited Profit & Loss Statement in the last three financial years in support of the turnover certificate [2015-16, 2016-17 & 2017-18]
12. Form T4 - Relevant Experience Details in managing housekeeping & cleanliness services in State Govt. / Govt. of India Institution / Govt. undertaking / Corporation / Banks / Govt. & Pvt. Hospitals / Pvt. Organizations during the last three years.
13. Photocopies of work orders / contracts executed in support of the information furnished in Form T4
14. Form T5 - Power of Attorney authorizing the signatory for signing the proposal on behalf of the proposer/Bidder
15. Form T6 - Affidavit certifying that the Entity/Promoter(s)/Directors/Partner(s) of Entity are not blacklisted.
16. Form T7 - Letter of Declaration (Anti Collusion Certificate) mentioning that the bidder will not collude with the other bidders.
17. Any other details, the bidder like to include in the proposal.

II. Cover B (Financial Proposal)

1. The bidder must submit the Financial Proposal using Form specified in Form F1, F2, F3 with proper signature and seal of the bidder.

2. In case of any discrepancy between figures and words in the financial proposal, the one described in words shall be taken into consideration.
3. The same person signing the RFP shall sign the financial part also.

2.5 Number of Proposals

Interested bidders fulfilling the eligibility criteria may submit their proposal **separately for any one /more than one or all the Districts / Institutions**. However, the bidders have to submit their proposal(s) **at the District(s) / Institution (s)** for which they want to bid. However, a bidder is eligible to submit **only one proposal** for **one District / Institution**, the details of which are mentioned in the Section - 1: Schedule of Proposal Submission

2.6 Validity of Proposals

The Proposal shall remain valid for 180 days after the date of bid opening. Any Proposal, which is valid for a shorter period, shall be rejected as non-responsive.

2.7 Cost of Proposal

The bidder shall be responsible for all of the costs associated with the preparation of their Proposals and their participation in the Selection Process. The concerned district authority / institution will neither be responsible nor in any way liable for such costs, regardless of the conduct or outcome of the Selection Process.

2.8 Acknowledgement by the bidder

- (a) It shall be deemed that by submitting the Proposal, the bidder has: -
 - (i) made a complete and careful examination of the RFP;
 - (ii) received all relevant information requested from the concerned District authority / Institution;
 - (iii) acknowledged and accepted the risk of inadequacy, error or mistake in the information provided in the RFP or furnished by or on behalf of the concerned district authority / institution relating to any of the matters stated in the RFP Document;
 - (iv) satisfied itself about all matters, things and information, necessary and required for submitting an informed Proposal and performance of all of its obligations there under;
 - (v) acknowledged that it does not have a Conflict of Interest; and
 - (vi) Agreed to be bound by the undertaking provided by it under and in terms hereof.
- (b) The concerned district authority / institution shall not be liable for any omission, mistake or error on the part of the bidder in respect of any of the above or on account of any matter or thing arising out of or concerning or relating to RFP or the Selection Process, including any error or mistake therein or in any information or data given by the concerned district authority.

2.9 Language

The Proposal with all accompanying documents (the “**Documents**”) and all communications in relation to or concerning the Selection Process shall be in English language and strictly as per the forms provided in this RFP. No supporting document or printed literature shall be submitted with the Proposal unless specifically asked for and in case any of these Documents is in another language, it must be accompanied by an accurate translation of the relevant passages in English, in which case, for all purposes of interpretation of the Proposal, the translation in English shall prevail.

2.10 Proposal Due Date

RFP filled in all respect must reach O/o the CDMO / Director of the concerned District / Other Institution at the address, time and date specified in the Section-1: Schedule of Proposal Submission, through Speed Post/ Regd. Post / Courier or tender drop box. If the specified date for the submission of RFPs is declared as a holiday, the RFPs will be received up to the stipulated time on the next working day.

2.11 RFP Opening

- (a) The concerned authority of the district / institution in their respective Districts / Institution will open all Proposals, in the presence of bidders or their authorized representatives who choose to attend, at the location, date and time mentioned in the Section 1: Schedule of Proposal Submission
- (b) The bidder/their authorized representatives who will be present shall sign a register evidencing their attendance.
- (c) In the event of the specified RFP opening date being declared a holiday, the RFPs shall be opened at the stipulated time and location on the next working day.

SECTION 3 - TERMS OF REFERENCE

3.1 Background

Good sanitation and hygiene practices are a critical determinant of health. As the first principle of health care is “to do no harm”, it is essential to have our health care facilities demonstrate high levels of cleanliness, hygiene practices.

“WHO data on the burden of disease shows that “approximately 3.1% of deaths and 3.7 % of disability-adjusted-life-years (DALYs) worldwide are attributable to unsafe water, sanitation and hygiene. The Centres for Disease Control and Prevention (CDC) reports that approximately 1 in 20 patients acquired an infection during a stay in a healthcare setting where they are receiving medical or surgical treatment. Further, the perception of patients and the public regarding the level of cleanliness and ambience of a facility directly affects the level of confidence they have in the health care offered in a facility. There is no more visible parameter about Quality than cleanliness in public health facilities.

Against this backdrop, plan has been chalked out for strengthening Housekeeping & Cleanliness services across hospitals of the State. List of District wise bed strength along with the requirement of housekeeping and cleaning personnel for different category of Institutions is mentioned at Section

3.2 Modalities of Housekeeping & Cleaning Services

In order to priorities focus on **certain critical areas**, the entire hospital areas have been classified under 4 functional risk category areas are as follows.

3.2.1 Classification of Hospital Area

| 1.High Risk Areas | 2.Moderate Risk Areas | 3.Low Risk Areas |
|---|-----------------------|---------------------------------|
| Operation theatre units including recovery area – Major & minor | Wards & Corridors | Departmental areas/office areas |
| Intensive care units/ Cardiac care units/Neonatal ICU/PICU/ Hybrid ICU etc. | Laboratory areas | Outpatient department |
| High dependency units | Blood Bank | Non sterile supply areas |
| Emergency department/casualty | Pharmacies | Libraries |
| Labour room | Kitchen | Meeting Rooms |
| Post-operative units | Laundry services | Medical records section |
| Surgical wards | Mortuary | Stores section |

| | | |
|--|----------------------------|--|
| Central sterile supply department/Theatre sterile supply unit | Nurses/ Doctors rest rooms | Manifold services/room |
| Chemotherapy ward/room | Psychiatric wards | Telephone rooms, electrical, mechanical, External surroundings |
| | X-ray Room | |
| Burn Unit | | Staff Areas |
| Dialysis Unit | | |
| Isolation wards/ rooms including DR TB Centre & ART Centre | | |
| Attached internal areas like bathrooms & Toilets | | |
| 4.Other Areas | | |
| Hospital Premises- It includes the outhouse area, garden, roof tops, parapets, drains etc. | | |

3.2.2 Based on the Hospital functional risk category, Frequency of cleaning, level of cleaning, Method of cleaning & evaluation criteria has been defined are as follows:

| Functional Area Risk Category | Frequency of cleaning | Method of cleaning/Disinfection | Evaluation/auditing procedures & frequency |
|-------------------------------|---|---|--|
| High risk areas | Once in two hours and spot cleaning as required | Cleaning with soap & detergent plus disinfection with alcohol compound, aldehyde compounds (Formaldehyde, glutaraldehyde) hydrogen peroxide and phenolics | Procedures/ Frequency- <ul style="list-style-type: none"> • Display of service parameters / maintenance of Unit wise performance register (updated on daily basis) • Swab culture of critical areas (Monthly once) • Over all remarks of SN I/c of concerned unit (Monthly) • Use of housekeeping checklist & updated on daily basis |

| Functional Area Risk Category | Frequency of cleaning | Method of cleaning/Disinfection | Evaluation/auditing procedures & frequency |
|----------------------------------|---|--|--|
| Moderate risk areas | Once in four hours and spot cleaning as required | Cleaning with soap & detergent plus disinfection with aldehyde compounds (Formaldehyde, glutaraldehyde) hydrogen peroxide phenolics | Procedures/ Frequency- <ul style="list-style-type: none"> Swab culture of lab & Blood bank (Quarterly once) Use of housekeeping checklist & updated on daily basis Overall remarks of SN I/c / Sr. LT of concerned unit (Monthly once) |
| Low risk areas | For areas working round the clock at least once in a shift or For areas having general shift at least twice in the shift & Spot cleaning as required | Physical removal of soil, dust or foreign material followed by cleaning with water and detergent | Procedures/ Frequency <ul style="list-style-type: none"> Use of housekeeping checklist & updated on daily basis Overall remarks of SN I/c / Sr. LT of concerned unit (Monthly once) |
| Other Areas | Drains once in a week & spot cleaning as required Other Areas - once in a day | Clearing & cleaning of drains using bleach to both clean and deodorize the sewerage system. Physical removal of foreign particles through sweeping. | Procedures/ Frequency Overall remarks of Hospital In- Charge once in a month. |

3.2.3 Cleaning Schedule for other Items:

| Item to be cleaned | Frequency |
|---|----------------|
| Ceilings, including air conditioning, ventilation grills/vents, Fans and light fixtures | Quarterly once |
| Walls, including all doors and windows | Weekly once |
| Store rooms and storage areas | Monthly once |
| Exterior surfaces of machines and equipment | Weekly once |

| | |
|---|----------------------------------|
| Refrigerators | Monthly once/ As & when required |
| Furniture & Fixtures | Weekly once |
| Sterilizers, cabinets and doors (interior and exterior) | Weekly once |
| All horizontal surfaces (all shelving, computers, keyboards etc.) | Weekly once |

3.2.4 Maintenance Schedule & Deliverables of major Housekeeping Items

| Assignment | Deliverables |
|--|---|
| Electrical Works – Minor Repair & Check up, Electrical Systems (HT & LT), Electrical fixtures and appliances | <ul style="list-style-type: none"> • Daily operation of all electrical power system as & when required- incoming and outgoing • Minor maintenance and replacing fuse, tube lights, bulbs, minor wiring etc. • Switching on pumps for filling water to tanks. • Attending to power breakdowns in case of internal faults. • Providing electricians for preventive maintenance of power panels, maintenance of all accessories including Fans, light fixtures, power points, and replacement of spares, mechanical & electrical equipments. • Coordination with AMC agency for trouble free operation. • Unhealthy systems, abnormalities in performance or malfunctioning if any will be reported / rectified within a reasonable time period (Maximum within 1 hour). • Regular checking of all the electrical panels and distribution boards. • Logging of all parameters like meter readings, power factor, power consumption etc. and highlight discrepancies or variances. • Clean all panels, switchgears controls etc on regular basis. • Daily check of all light fixtures, points , bulbs and power sockets wiring and changing defective ones within the premises under maintenance. • Check earth pit resistance and watering earth pit. • Check and all the switches on standby equipment and ensure that all are in operating condition. • Inspect and clean contacts if necessary & check connections of Motors/ switchboards / equipment etc. on routine basis. • Check correct operations of all safety circuits and equipment. • To attend all service calls and breakdowns within the minimum possible time period (Maximum within 1 hour). • To carry out preventive maintenance to ensure minimum |

| Assignment | Deliverables |
|--|--|
| | <p>breakdowns.</p> <ul style="list-style-type: none"> • Prepare inventory of spares and ensure that critical spares are always available. • To ensure that all equipment / plants has sequential running and all equipment, pumps including the standby equipment work on operating time equalization basis. • To keep day to day reading of energy meter • Thoroughly clean all electrical fixtures and appliances and insect killing devices. • Periodically clean all motor vents, etc. |
| Water Management, Plumbing and Sewerage System, STP (if installed) | <ul style="list-style-type: none"> • Thoroughly clean all overhead and underground water storage tanks periodically. • Water management, operational records, inflow and outflow control. • Regular checking and repairs of all sanitary fixtures and supply lines. • Checkup of all valves, taps, floats and other plumbing and sanitary fittings free from leakage. • To operate & maintain the STP (if installed later) • Follow up for AMC of the STP or any other accessories. |
| Water Pumps | <ul style="list-style-type: none"> • Ensuring trouble free and smoothing operations and no disruption in water supply to Hospital Building & Quarters in the Campus • Regular routine maintenance of the pumps and associated equipment, pressure gauges etc. • Logging of all maintenance data in the approved formats. • Maintenance of the panels of the system. • Ensuring that the equipment is functioning as per the design parameters. • Prepare inventory of spares and ensure that critical spares are always available. • To ensure that all equipment / plants has sequential running and all equipment, pumps including the standby equipment work on operating time equalization basis. |
| Carpenter Work | <ul style="list-style-type: none"> • Regular checking and minor repair of all carpentry fitting & fixture like door, window, lock, door closer, chair etc |
| DG sets, associated panel, boards etc | <ul style="list-style-type: none"> • DG sets are to be maintained clean, operate as per the requirement or approved Schedules. • To carry out day to day maintenance work as per activity |

| Assignment | Deliverables |
|------------|--|
| | <p>chart</p> <ul style="list-style-type: none"> ▪ Battery check for electrolyte level. ▪ Specific gravity check. ▪ Oil level and temperature check. ▪ Fuel Leak. ▪ Cooling Hose check. ▪ Oil pressure check. ▪ Voltage and current check in each phase. ▪ Engine run hour and RPM. ▪ KWH generated. ▪ Checking general functioning of all gadgets observe noise and vibration levels. ▪ Prepare inventory of spares and ensure that critical spares are always available. ▪ To ensure that minimum one day fuel for continuous running of all DG's is always available and keep record of diesel/oil consumption and maintain the record. ▪ To keep records of diesel receipts and consumption and submit daily report to appropriate authority |

3.2.5 Other Conditions:

- Effort should be made to post female **sanitary attendant** wherever possible in female wards, Labour room & OPD.
- **Dedicated sanitary** attendants shall be posted for cleaning of toilets in patient care areas so as to ensure highest level of hygiene and cleanliness, mostly at DHHs & SDHs.

3.3 List of Cleaning Equipment, Cleaning Materials (consumables and durables) to be used:

3.3.1 Cleaning Equipment:

| | |
|---|----------------------------|
| 1. Wet / Dry Vacuum Cleaner | 2. Floor scrubbing Machine |
| 3. Back pack Vacuum Machine | 4. Glass Cleaning Kit |
| 5. Telescopic Pole | 6. Bucket Trolley |
| 7. Heavy Duty Scrubbing / Buffing Machine | 8. High Pressure Cleaner |

| | |
|---------------------------|--|
| 9. Ladder (24ft and 12ft) | |
|---------------------------|--|

3.3.2 Cleaning Materials (Durables & Consumables)

| | | |
|----------------------------------|--|---|
| 1. Floor Duster | 2. Urinal Cubes | 3. Floor cleaning liquid / Phenyl |
| 4. White dusters, Yellow dusters | 5. Naphthalene balls | 6. Brooms (Hard and Soft with long and short handles) |
| 7. Nylon scrubber | 8. Glass & plastic surface cleaning liquid (Colin) | 9. Brasso |
| 10. Room Fresheners | 11. Sponges | 12. Liquid toilet cleaner |
| 13. Floor/dish cleaner | 14. Multipurpose cleaner | 15. Plastic Scrubber |
| 16. Floor Polish | 17. Acid | 18. Drain openers (large and small) |
| 19. Scrubbing Brush Hard | 20. Dettol / Lysol | 21. Scrub Pad (Scotch Brite) |
| 22. Feather duster | 23. Blue Dry Mop | 24. Toilet Brush |
| 25. Dustpan | 26. Spray bottles | 27. Glass Wiper |
| 28. Vacuum pump | 29. Kentucky Mop | 30. Floor wiper/ Rubber Squeeze |
| 31. Dust Control mop | 33. Three Bucket System | |

3.4 HR requirement for House Keeping & Cleanliness services

3.4.1 Norms for HR engagement (tentative):

The competent agency is expected to engage HR as per following norms based on the bed strength of the concerned hospital.

Sanitation Worker (SW) – 2 SWs for every 10 beds and at least one for less than 10 beds at hospitals with any no of sanctioned bed strength.

Supervisor – 1 dedicated Supervisor for every 10 Sanitary Workers & maximum upto 6 Supervisors. One senior most Sanitation worker will be assigned the role of Supervisor with no extra cost where no of Supervisor is plan to be engaged.

Plumber – 1 Plumber for every 100 beds or minimum 1 per DHH & maximum up to 4 and in case of less than 100 beds, Plumber to be hired on assignment basis.

Electrician – 1 Electrician for every 100 beds or minimum 1 per DHH & maximum up to 4 and in case of less than 100 beds, Plumber to be hired on assignment basis.

Note :

The District wise details of the required HR Personnel and Bed Strength are attached at **Section 6**. Bidders are requested to refer the Annexure -A carefully to know the HR personnel requirement

and the bed strength of the each District / Other Institution before quoting their prices in the Price Format F-3.

3.4.2 Working Shifts:

The hospitals level staffs are expected to work in three shifts

- First Shift : 7 AM – 2 PM
- Second Shift : 2 PM – 9 PM
- Third Shift : 9 PM – 7 AM

3.4.3 Qualification of personnel in the Hospital Office: The following key personnel with the required qualification and experience shall form part of the team to manage the cleaning System. The selected agency shall submit the documents relating to relevant skill training imparted to the workers, their skills set and their personal record.

| Hospital Key Personnel | Minimum Qualification | Minimum Experience required in years |
|-------------------------------------|---|---|
| Supervisor (Skilled) | Any Graduate Degree | Minimum 2 years of experience in housekeeping & Cleanliness Services particularly in Hospital Sector. |
| Sanitation Worker (Semi-Skilled) | 7 th Standard | Minimum 1 Year experience in similar field |
| Electrician (Skilled) | ITI passed / any other certificate course | Minimum 1 Year post qualification experience in similar field |
| Plumber (Skilled) | ITI passed / any other certificate course | Minimum 1 Year post qualification experience in similar field |

3.4.4 Age Limit:

| Sl. No. | Category | Qualification Experience |
|---------|-------------------|--|
| 1. | Supervisor | Age Limit: Minimum 21 years & Maximum 60 years as on 31.10.2018 |
| 2. | Sanitation Worker | Age Limit: Minimum 21 years & Maximum 50 years as on 31.10.2018 |
| 3 | Electrician | Age Limit: Minimum 21 years & Maximum 50 years as on 31.10.2018 |
| 4 | Plumber | Age Limit: Minimum 21 years & Maximum 50 years as on 31.10.2018 |

3.4.5 Attendance: Biometric attendance system will be introduced to track availability of staff on duty, engaged under the said contract. The outsourced workers should be given

weekly off by the agency as per the labor rules of State Government. Any deviation of the rules is liability of the agency.

3.4.6 Uniform: A uniform dress code will be recommended for all House Keeping staff across the State.

3.4.7 Training: Staff training and development is a core activity in the sanitation service and a structured approach to training should be imparted by the agency with direct inputs from Hospital Authority, Nursing Superintendent and other relevant healthcare professionals, as required.

a) Induction Training Topics for Sanitation Workers

1. Job Description—duties & responsibility
2. Uniform and protective gear
3. Leave Procedures
4. Cleaning chemical—Use & dilution rate
5. Handling equipment – with demonstration
6. Step by step cleaning procedures for different areas and surfaces
7. Reporting repair and maintenance
8. Safety & security
9. Garbage removal & BMW Management
10. Fire safety
11. Penalties for misconduct/ not working

b) Induction Training Topics for Hospital Supervisor

1. Additional activities other than topics as mentioned in induction training
2. Inspection and filling up checklist
3. Documentation of records (work done, attendance, leave etc.) and knowledge of computers

3.4.8 Duration and Frequency of Training for Housekeeping staff as per risk Categorization of patient care areas:

| Worker | Training | Refresher Training | Responsibility |
|-------------------|--|--|-----------------|
| Sanitation Worker | 1 day Induction Training | Training of two hours every month from 2nd month onwards | Selected Agency |
| Supervisor | 2 days Induction training at State level | 1 day on quarterly basis | Selected Agency |
| Electrician | ½ day Orientation at State level | | Selected Agency |
| Plumber | ½ day Orientation at State level | | Selected Agency |

The Training programmes shall be evaluated by head of the Hospital on regular basis to ensure that they meet the needs of the service and that staff are able to readily assimilate the information provided to them.

3.4.9 Other Conditions

- a) The staff deployed through Agency in the health facility (ies) shall not claim any benefit, compensation, absorption or regularization of their services in the govt. establishment under the provision of any statutory act.
- b) The staff deployed by the Agency shall not divulge or disclose any details of office, operational process, technical know-how, security arrangement, administrative/ organizational matters to any third person, as all of that are confidential and secret in nature. In the event of being found that the official secrecy has been disclosed and for the purpose of security arrangement and or for other purpose, it is desirable to remove the said person, the nodal officer of the health facility has every right to remove the said person, immediately and responsibility if any to be borne by the Agency.
- c) The Agency shall ensure that the person deployed are disciplined and shall enforce prohibition of consumption of alcoholic drinks, paan, Gutkha, smoking, loitering and shall not engage in gambling or any immoral act.

3.5 Data Management:

- a) The agency needs to manage the data obtained from the hospitals on a regular basis utilizing special software (State to develop & share with the agency). The agency needs to provide exclusive facilities (computers with broadband internet connection) for the same at all hospitals.
- b) **Daily Report expected from the agency**
 1. A daily report of staff on duty in all the shifts.
 2. A daily report of the status of the equipment and its utilization.
 3. A daily report of the chemicals and the consumables used.
 4. A daily report of the general sanitation from the Officer in charge / Superintendent or any other officer deputed for the purpose of program.
 5. Evaluation report
 6. Any other reporting mechanism as desired by the Hospital.

3.6 Performance Review Criteria and Penalty from Bill Payment:

3.6.1 Performance review shall be carried out on a quarterly basis based on Score card by taking into account NQAS, Kayakalpa & other relevant indicators for assessing performance of the implementing agency as per the criteria, the details of which is **attached at Annexure-II**. Accordingly, the penalties from the bill payment shall be as mentioned in clause 3.6.2

3.6.2 Scoring Indicators & Extent of Penalty:

| Total Score | Extent of Penalty from Bill Amount |
|-----------------|------------------------------------|
| < or = 70% | 2 % penalty from Bill |
| >70% and < 80 % | 1% penalty from Bill |
| = or >80% | Zero penalty |

3.6 Responsibilities of the Implementing Agency & Hospital Administration

3.7.1 Following are the responsibilities of the Agency (Service Provider):

- The Housekeeping & Cleanliness services shall be provided **24x7x365days** without any interruption.
- All the personnel engaged by the Agency to provide the services in the hospital have to be in proper uniform during duty hour.
- All the personnel shall bear photo identity cards during the duty hour. (The Photo Identity Card shall be duly verified and countersigned by the designated Official of the hospital)
- All the rules and regulations relating to labour laws including accident, workmen compensation and insurance, ESI, PF, etc. are to be complied.
- Maintain location-wise log book to record all cleaning and housekeeping activities carried out in the format prescribed by the authority for checking and reference.
- To provide all necessary materials including tools, equipment, disinfectant, cleaning agents and consumables (as per details mentioned in Clause no. 3.3) of required quality and quantity needed for proper execution of the cleaning and housekeeping service.
- All standard safety norms are to be followed during execution of work by the Agency to avoid accidents causing damages to personnel, machines, buildings, etc.
- In case of any accident/ mishap of any nature occurred during performing the duty, the liability will be borne by the agency.

3.7.2 The responsibilities of the Hospital Administration/ Authority shall include:

- Clearly define the cleaning area, frequency and method of cleaning for respective locations as per ToR.
- Co-operate with the cleaning staff for timely and complete cleaning.
- Directly supervise the cleaning staff while carrying out cleaning in critical/sensitive areas like OT, Laboratories, Labour Room, office room, etc. to avoid unwanted situations including damages, interruption, accident, etc.
- Develop logbook, control sheet, checklist for documentation, regular monitoring and quality assurance.
- Provide space for safe storage of articles & place of sitting for supervisor.
- Release consumable cost on monthly basis on submission requisite bills/Vouchers.

SECTION 4 - TERMS & CONDITIONS

4.1 Period of Engagement

- a) The engagement shall be for a **period of three years** from the date of actual operation (beginning of service) or signing of contract whichever is later.
- b) The contract may be extended for a maximum of **another two years** (one year at a time) in existing terms and conditions with mutual consent of both the parties if performance is found satisfactory as per due assessment.
- c) The agency shall sign the contract (**in the given Format**) within 15 days of issue of Letter of Award / Intimation.

4.2 Award of Contract

On evaluation of technical and financial parts of RFP and decision thereon, the selected bidder shall have to execute a contract with the District Authority / Institution within 15 days from the date of acceptance of their bid is communicated to them. The terms and condition, terms of reference of this RFP along with documents and information provided by the selected bidder shall be deemed to be an integral part of the contract. Before execution of the contract, the selected bidder shall have to deposit the performance security deposit as per clause 4.4 mentioned below.

4.3 Allotment of districts / Institutions:

- a) An agency **can accept work orders of maximum of five (5) districts / Other Institutions.** However, agency can apply for any no of districts / other Institutions.
- b) In case an agency succeeded in getting work orders for **more than five districts / other institutions** as per the competitive bidding process, then the concerned agency has to **choose five districts / other institutions only** as per their choice and decline the rest of the districts / other institutions within 7 days from receipt of work order.
- c) If any L1 bidder of the district / other institution decline the work order, in such case the concerned district / other institution has to negotiate with L2 (L3, L4..and so on in that order) bidder of that District / other institution to agree to the L1 price and to finalize the bidder & issue work order.

4.4 Performance Security

The selected service provider has to furnish a performance security deposit at the time of signing of contract, amounting to 5% of the total yearly contract value (for 3 years) of the concerned district / Institution in the shape of DD / BG from a National / Scheduled Bank in India. The amount of Earnest money deposit of the selected bidder can be adjusted against the performance security deposit. The performance security deposit is for due performance of the contract.

The District Authority / Institution in the following circumstances can forfeit it;

- 1) When any terms or the condition of the contract is infringed.
- 2) When the service provider fails in providing the required services satisfactorily.

4.5 Commencement of Service

The selected service provider is required to start the housekeeping services in the concerned district **at all the facilities** of that district (DHH, SDH, CHC, PHC) **within 30 days** of signing of the contract.

4.6 Payment & Price Validity

- a) The service provider shall be paid on **monthly basis** as per the contracted rate. The price shall be all-inclusive including the cost of manpower, consumables and management.
- b) While the bill for 1st month shall be paid after submission of bill for the month, payment from the 2nd month onwards shall be made subject to production of documentary evidence of having made all statutory payments such as PF [Electronic Challan cum Return (ECR)], ESI (Challans) etc. for the previous month.
- c) The price as quoted by the service provider shall remain unchanged during the contract period except in case of revision in daily wages act if the contracted amount is below the recommended rate as applicable.
- d) GST as applicable shall be paid at the applicable rate.
- e) TDS as applicable shall be deducted from the payment as per the Income Tax Act
- f) The service provider will ensure that workers engaged by them must receive their entitled wages on time. In view of this, the following procedure will be adopted:
 - 1) Service Provider shall pay their entitled wages by 10th of the following month. It shall not be linked to the payment of the bill from the concerned institution or need for the checking & verification at their end.
 - 2) Payment to such workers must be made by the agency through e-transfer only. To ensure this, service providers will get a bank account opened for every engaged worker.

4.7 Penalty

In case the Agency fails to commence/execute the work as stipulated in the agreement or gives unsatisfactory performance or does not meet the statutory requirements of the contract, CDM & PH officer / Director of the concerned health facility (ies) reserves the right to impose the penalty as detailed below:

a) Commencement of the Work:

- 1) **0.5%** of annual costs of Contract / Agreement value (**per health facility**) per week of delay, up to four weeks of delay per health facility.
- 2) After four weeks delay, the tender Inviting Authority / concerned District Authority reserves the right to cancel the whole contract or part thereof and withhold the agreement and get this job carried out by other successful bidder (L2 & so on). The earnest money/security deposit shall also be forfeited.

b) During Implementation

i. Disincentive / Penalty:

If as per the assessment sheet (enclosed at **Annexure-II**), the agency is continue to under-performed (Average/Poor) continuously for 50% or more Institutions without any valid reasons, the contract shall not be renewed.

ii. Other Penalty Clauses:

In case the agency fails to commence/execute the work in the following areas hospital reserves the right to impose the penalty as detailed below:

| Sl. | Offences | Penalties (In Rupees) |
|-----|--|--|
| 1 | Not found keeping photo ID | Rs.50 /- per person/per day |
| 2 | Worker not in proper Uniform | Rs.50 /- per person/per day |
| 3 | Indulging in smoking/ drinking alcohol/ Substance abuse or any other misconduct during duty hours (need to be established) | Rs.500/- with removal of the offender |
| 4 | Duty performed by a worker for more than one shift in 24 hours | With Due permission from the Hospital authority, linked to Biometric attendance system, Not more than 5% of the total attendance. Beyond which, penalty of 200/- per instance/per person in case of non-compliance |
| 5 | Short supply of Consumables/Chemicals and any violation of specifications/ Quantity etc. | Rs.1,000/- per Item/month |
| 6 | Absence of personal protective gears | Rs.200/- per person/per day |
| 7 | If any person is found performing duty by submitting a fake name and address. | Rs.500/- per person/per day |
| 8 | If required number of manpower is not deployed by the Agency, | The proportionate amount (Total monthly bidding Cost / Total no of persons engaged X no of person absent on that particular day) will be deducted from payment with other penalties as applicable. |

4.8 General Conditions of the Contract

- a) The personnel provided shall be the employees of the service provider and all statutory liabilities will be paid by the service provider such as ESI, PF, Workmen's Compensation Act, etc.
- b) The persons deployed by the service provider should be properly trained, have requisite experience and having the skills for carrying out a wide variety of housekeeping & cleaning services using appropriate materials and tools/ equipment.

- c) The service provider shall have his own Establishment/Set up/Mechanism to provide training of housekeeping personnel to ensure correct and satisfactory performance of his / her duties and responsibilities under the contract.
- d) The service provider at their end should ensure the Health and Safety measures of the outsourced staffs, deputed for the works.
- e) The contracting authority if required may also conduct health checkup of the staff deployed at regular intervals at the cost of the service provider.
- f) The service provider shall engage only such workers, whose antecedents and health have been thoroughly verified including character and police verification and other formalities. The service provider shall be fully responsible for the conduct of their staff.
- g) The service provider at all times should indemnify the contracting Authority against all claims, damages or compensation under the provisions of payment of wages Act; Minimum Wages Act; Employer's Liability Act the Workmen Compensation Act; Industrial Disputes Act.; Maternity Benefit Act, or any modification thereof or any other law relating thereof and rules made hereunder from time to time. Contracting authority will not own any responsibility in this regard. Payment of minimum wages, notified by the government, shall be ensured all the time.
- h) The staff deployed through the service provider in the health facility (ies) shall not claim any benefit, compensation, absorption or regularization of their services in the Govt. establishment either under the provision of Industrial Disputes Act. or Contract Labour (Regulation & Abolition) Act. The Agency should have to obtain an undertaking from the deployed persons to the effect that the deployed person is the employee of the Service Provider and shall submit the said undertaking to the Contracting Authority. In the event of any litigation on the status of the deployed persons, the Contracting Authority/Society shall not be a necessary party, however in any event, either the deployed persons or to the order of the hon'ble court, **the District Health Society / Institution may be a party in dispute to adjudicate the matter. The service provider has to reimburse the expenditure that would have been borne by the Contracting Authority.**
- i) The staffs deployed by the service provider shall not divulge or disclose any details of office, operational process, technical know-how, administrative/ organizational matters to any third person, as all of that are confidential and secret in nature. In the event of being found that the official secrecy has been disclosed, it is desirable to remove the said person. The nodal officer of the health facility has every right to remove the said person immediately and the responsibility if any in this context is to be borne by the service provider.
- j) All liabilities arising out of accident or death of the personnel provided by the service provider while on duty shall be borne by the service provider.
- k) Adequate supervision will be provided to ensure correct & effective performance of the services in accordance with the prevailing assignment and instructions agreed upon between the two parties.
- l) The service provider and its staff shall take proper and reasonable precautions to prevent loss, destruction, waste or misuse of the areas of the Hospital premises.

- m) That in the event of any loss occasioned to the Hospital, as a result of any lapse on the part of the service provider as may be established after an enquiry conducted by the hospital, such loss will be made good from the amount payable to the service provider. The decision of the district / institution authority in this regard will be final and binding on the service provider.
- n) The service provider shall be responsible to protect all properties and equipment of the health facility entrusted to it.
- o) Any damage or loss caused by service provider's persons to the hospital in whatever form, would be recovered from the service provider.
- p) In the event of any breach/violation or contravention of any terms and conditions contained herein by the service provider, the performance security deposit of the service provider shall be forfeited.
- q) Any liability arising out of any litigation (including those in consumer courts) due to any act of service provider's personnel shall be directly borne by the service provider including all expenses/fines. The concerned service provider's personnel shall attend the court as and when required.
- r) The service provider shall not engage any such sub-contractor or transfer the contract to any other person in any manner.
- s) The staffs engaged by the service provider shall not take part in any staff union and association activities.
- t) The Hospital shall not be responsible for providing residential accommodation to any of the deployed personnel of the service provider.
- u) If as a result of post payment audit any overpayment is detected in respect of any work done by the service provider or alleged to have been done by the service provider under the tender, it shall be recovered by the authority of the concerned health institution from the service provider.
- v) If any underpayment is discovered, the amount shall be duly paid to the service provider by the authority of the concerned health institution.
- w) The service provider shall provide the copies of relevant records during the period of contract or otherwise even after the contract is over whenever required by the Tender Inviting Authority / Authority of the concerned health institution.
- x) The service provider will have to enclose the proof / copies of the challans showing payment of statutory dues for the previous month along with monthly bills.
- y) All necessary reports and other information will be supplied on a mutually agreed basis and regular meetings will be held with the nodal officer of the respective health facility (ies)/ Tender Inviting Authority/Contracting Authority. The service provider and its staff shall take proper and reasonable precautions to preserve from loss, destruction, waste or misuse the areas of responsibility given to them by the Hospital, and shall not knowingly lend to any person or company any of the effects or assets of the Hospital, under its control.
- z) The service provider shall immediately intimate to the Controlling Authority about any criminal charge framed against the persons or supervisor engaged or employed by the

agency, in the course of their performance of duties. A copy of such communication shall also be sent to the officer-in-charge of the Police Station where the person charged against resides.

- aa) The service provider shall be blacklisted if miserably performed as per assessment based on score card even after repeated notice for improving performance i.e. minimum 3 times. The service provider shall also be blacklisted if found indulging in such activity which will affect name & fame of the implementing agency.
- bb) The service provider shall not assign or sublet this Agreement or any part thereof to any third party.
- cc) The contract can be terminated at any time prior to its completion by either Party with 30 days of notice period.
- dd) In case of breach of any terms and conditions attached to the contract, the Performance Security Deposit of the service provider will be liable to be forfeited by contracting authority besides annulment of the contract.
- ee) The service provider shall ensure that the person deployed are disciplined and shall enforce prohibition of consumption of alcoholic drinks, paan, gutkha, smoking, loitering and shall not engage in gambling or any immoral act.

4.9 Termination / Suspension of Contract

The District Authority / Institution may by a notice in writing, suspend the contract if the selected agency fails to perform any of his obligations including carrying out the services, provided that such notice of suspension shall specify the nature of failure, and shall request remedy of such failure within a period not exceeding 15 days after the receipt of such notice.

The District Authority / Institution after giving 30 days clear notice in writing expressing the intension of termination by stating the ground/grounds on the happening of any of the events (as mentioned below), may terminate the agreement after giving reasonable opportunity of being heard to the service provider :

- 1) If the service provider do not remedy a failure in the performance of his obligations within 15 days of receipt of notice or within such further period as the District Authority / Institution have subsequently approve in writing.
- 2) If the service provider becomes insolvent or bankrupt.
- 3) If, as a result of force majeure, the service provider is unable to perform a material portion of the services for a period of not less than 60 days: or
- 4) If, in the judgment of the District Authority / Institution, the service provider is engaged in corrupt or fraudulent practices in competing for or in implementation of the project.

4.10 Modifications

Modifications in terms of reference including scope of the services can only be made by the district authority / institution with written consent of both parties. However, basic conditions of the contract shall not be modified.

4.11 Force Majeure

Housekeeping & Cleanliness Services as being an emergency response services, the Service Provider shall not be allowed to suspend or discontinue the Services during occurrences of emergencies or Force Majeure Events.

For the purposes of this contract, “Force Majeure” means an event which is beyond the reasonable control of a Party, is not foreseeable, is unavoidable, and not brought about by or at the instance of the Party claiming to be affected by such events and which has caused the non-performance or delay in performance and which makes a Party’s performance of its obligations hereunder impossible or so impractical as reasonably to be considered impossible in the circumstances, and includes, but is not limited to war, riots, civil disorder, earthquake, fire, explosion, storm, flood or other adverse weather conditions, strikes, lockouts or other industrial action (except where such strikes, lockouts or other industrial action are within the power of the Party invoking Force Majeure to prevent), confiscation or any other action by Government agencies.

In such circumstances of emergencies and Force Majeure Event, if the Performance Standards are not complied with because of any damage caused to the services or any of the Project Facilities or non availability of staff, or inability to Provide services in accordance with the Performance Standards as a direct consequence of such Force Majeure Events or circumstances, then no penalties shall be applicable for the relevant default in Performance Standards and would be applied to such particular defaults. Further, unless the Force Majeure event is of such nature that it completely prevents the operation of services, a suspension or failure to provide Services on the occurrence of a Force Majeure event will be an Event of Default and the District authority may terminate this Agreement without any termination payment being made in respect thereof.

The failure of a party to fulfill any of its obligations under the agreement shall not be considered to be a default in so far as such inability arises from an event of force majeure, provided that the party affected by such an event has taken all reasonable precautions, due care and reasonable alternative measures in order to carry out the terms and conditions of the agreement and has informed the other party as soon as possible about the occurrence of such an event.

4.12 Settlement of Dispute

If any dispute with regard to the interpretation, difference or objection whatsoever arises in connection with or arises out of the agreement, or the meaning of any part thereof, or on the rights, duties or liabilities of any party, the same shall be referred to Committee constituted at the District level for decision.

4.13 Jurisdiction of Court

Legal proceedings if any shall be subject to the concerned District jurisdiction only.

4.14 Right to Accept and Reject any Proposal

The District Authority / Institution / Tender Inviting Authority reserve the right to accept or reject any proposal at any time without any liability or any obligation for such rejection or annulment and without assigning any reason.

SECTION 5 - CRITERIA FOR EVALUATION

5.1 Evaluation of Technical Proposals

Evaluation of proposals shall be made **district wise** at the distinct level by the concerned district authority. However, in case of Capital Hospital & RGH, evaluation of proposals shall be made by the concerned authority of Capital Hospital and RGH respectively.

In the first stage, the Technical Proposal will be evaluated on the basis of bidder's fulfillment of **eligibility criteria**. Only those bidders whose Technical Proposals becomes **responsive** based on the eligibility criteria, shall qualify for further detail technical evaluation for presentation and awards of marks based on the following Criteria :

| Sl. No | Evaluation of Parameters | Total Mark | Criteria for award of Mark |
|--------|--|------------|--|
| 1 | Working Experience | | |
| 1.1 | Experience in Hospital House Keeping & Cleanliness Services in Public / Private Sector | 5 | <ul style="list-style-type: none"> • >3 year ≤ 5 years : 3 marks • >5 years : 5 marks |
| 1.2 | Experience in handling Hospital House Keeping & Cleanliness Services with regards to no. of beds - Average per Annum in last three years : 2015-16, 2016-17 & 2017-18 (to be determined from the work order / contract copies) – Details to be furnished Form T4 | 10 | <ul style="list-style-type: none"> • ≥ 300 beds < 400 beds : 3 marks • ≥ 400 beds < 500 beds : 5 marks • ≥ 500 beds < 700 beds : 7 marks • ≥700 beds : 10 marks |
| 1.3 | Experience in handling mechanised system (electrical / battery operated) of House Keeping & Cleaning in previous assignments (Similar to the current proposal defined in point no 3.3 in RFP) at least in one previous assignment in past 3 years. | 5 | <ul style="list-style-type: none"> • Submitted documentary proof (work order / contract) from the concerned organization : 5 marks |
| 2 | Performance Certificates of previous assignments | 5 | <ul style="list-style-type: none"> • Satisfactory Work Performance Submitted from clients during last 3 years : : 5 marks or other wise 0 marks |
| 3 | Total Average Annual turnover (In last 3 financial years 2015-16, 2016-17 & 2017-18) | 15 | <ul style="list-style-type: none"> • > 3 ≤ 5 crores : 5 Marks • > 5 ≤ 7 crores : 7 Marks • > 7 ≤ 10 crores : 10 Marks • > 10 crores : 15 Marks |
| 4 | Average no of manpower engaged in last 3 years : 2015-16, 2016-17 & 2017-18 (to be | 15 | <ul style="list-style-type: none"> • 100-200 persons : 5 marks • 201- 300 persons : 7 marks |

| | | | |
|---|--|-----------|--|
| | determined from the work order / contract copies) – Details to be furnished Form T4 | | <ul style="list-style-type: none"> ● 300-500 persons : 10 marks ● >500 persons : 15 marks |
| 5 | Work Plan Presentation | 5 | Presentation of the work plan in consonance with the tender document and guidelines, not more than 15-20 min. Total Marks : 5 |
| | Total Marks | 60 | |

Financial proposal shall be opened after the technical evaluation is completed and **only those bidders** who score **at least 36 marks or more** in technical evaluation shall qualify for **financial bid opening**. In the financial bid, the bidder with the **lowest price** shall be awarded the contract.

5.2 Evaluation of Financial Proposal

The **total price (exclusive of GST)** as per price format F2 shall be considered for price evaluation. However, in case two bidders quote the same lowest price, then the agency with the **highest mark** in the technical bid shall be awarded the contract. However, if two bidders quote the same lowest price and their technical mark also become equal, then in that case, the bidder having the higher annual average turnover shall be awarded the contract.

SECTION 6

LIST OF GOVT. HEALTH INSTITUTIONS FOR HOUSEKEEPING & CLEANING SERVICES

Institution wise bed strength & estimated allocation of Housekeeping & Cleanliness Services

| Sl. | Name of the District | No. of Expected Beds in the Institution | | | | | Manpower | | | |
|-----|---------------------------|---|-----|--------------|--------------|---|---|----------------------------------|-------------------------------|-----------------------------------|
| | | DHH | SDH | CHC/ UCHC | PHC/ UPHC | Total No. of Beds of all Institutions | Total No of Sanitation Worker (Semi- Skilled) | No of Supervisor (Skilled) | No of Plumber (skilled) | No of Electrician (Skilled) |
| 1 | Angul | 192 | 212 | 290 | 12 | 706 | 140 | 8 | 3 | 3 |
| 2 | Balasore | 430 | 70 | 620 | 16 | 1136 | 227 | 10 | 4 | 4 |
| 3 | Baragarh | 300 | 80 | 510 | | 890 | 178 | 9 | 3 | 3 |
| 4 | Bhadrak | 191 | 0 | 240 | 50 | 481 | 96 | 5 | 2 | 2 |
| 5 | Bolangir | 290 | 240 | 480 | 28 | 1038 | 207 | 11 | 5 | 5 |
| 6 | Boudh | 93 | 0 | 150 | | 243 | 49 | 2 | 1 | 1 |
| 7 | Cuttack | 130 | 130 | 820 | 22 | 1102 | 220 | 10 | 2 | 2 |
| 8 | Deogarh | 60 | 0 | 120 | | 180 | 36 | 1 | 1 | 1 |
| 9 | Dhenkanal | 300 | 73 | 305 | 24 | 702 | 139 | 6 | 3 | 3 |
| 10 | Gajapati | 161 | 0 | 260 | 6 | 427 | 85 | 4 | 2 | 2 |
| 11 | Ganjam | 137 | 246 | 890 | 80 | 1353 | 268 | 7 | 1 | 1 |
| 12 | Jagatsinpur | 226 | 0 | 360 | | 586 | 117 | 6 | 2 | 2 |
| 13 | Jajpur | 301 | 0 | 420 | 53 | 774 | 154 | 8 | 3 | 3 |
| 14 | Jharsuguda | 300 | 0 | 180 | 10 | 490 | 98 | 6 | 3 | 3 |
| 15 | Kalahandi | 275 | 55 | 607 | 24 | 961 | 191 | 9 | 3 | 3 |
| 16 | Kandhamal | 236 | 66 | 420 | 26 | 748 | 148 | 6 | 2 | 2 |
| 17 | Kendrapara | 195 | 60 | 240 | 20 | 515 | 103 | 5 | 2 | 2 |
| 18 | Keonjhar | 259 | 198 | 520 | 12 | 989 | 196 | 8 | 4 | 4 |
| 19 | Khurda | 258 | 0 | 592 | 24 | 874 | 173 | 8 | 4 | 4 |
| 20 | Capital Hospital, BBSR | 657 | 0 | 0 | | 657 | 131 | 6 | 4 | 4 |
| 21 | Koraput | 215 | 122 | 480 | | 817 | 163 | 6 | 3 | 3 |
| 22 | Malkangiri | 300 | 70 | 180 | 51 | 601 | 120 | 6 | 3 | 3 |
| 23 | Mayurbhanj | 355 | 363 | 870 | 44 | 1632 | 323 | 14 | 7 | 7 |
| 24 | NawarangPur | 152 | 66 | 300 | | 518 | 103 | 4 | 2 | 2 |
| 25 | Nayagarh | 249 | 220 | 420 | 46 | 935 | 186 | 11 | 4 | 4 |
| 26 | Nuapada | 170 | 46 | 150 | 6 | 372 | 74 | 3 | 2 | 2 |
| 27 | Puri | 380 | 0 | 614 | 38 | 1032 | 205 | 10 | 5 | 5 |
| 28 | Rayagada | 200 | 70 | 334 | 6 | 610 | 121 | 5 | 2 | 2 |
| 29 | Sambalpur | 271 | 80 | 330 | 64 | 745 | 148 | 5 | 3 | 3 |

| Sl. No | Name of the District | No. of Expected Beds in the Institution | | | | | Manpower | | | |
|--------|----------------------|---|-----|-----------|-----------|---------------------------------------|--|----------------------------|-------------------------|-----------------------------|
| | | DHH | SDH | CHC/ UCHC | PHC/ UPHC | Total No. of Beds of all Institutions | Total No of Sanitation Worker (Semi-Skilled) | No of Supervisor (Skilled) | No of Plumber (skilled) | No of Electrician (Skilled) |
| 30 | Subarnapur | 160 | 30 | 180 | 12 | 382 | 76 | 4 | 2 | 2 |
| 31 | Sundargarh | 297 | 56 | 672 | 14 | 1039 | 206 | 8 | 3 | 3 |
| 32 | RGH Rourkela | 309 | 0 | 0 | | 309 | 62 | 6 | 3 | 3 |

*Note: The calculation of no. of housekeeping & Cleaning Personnel for a District / other Institution are based on the requirement of DHH, SDHs, CHCs, PHCs as per their bed strengths

RFP FORMATS

Housekeeping Services at Govt. Health Institutions

TECHNICAL PROPOSAL

Check List (Technical Proposal)

Please check whether following have been enclosed in the respective cover namely, Technical Proposal: *(please arrange the documents serially in the following order & do the page numbering of the entire bid document and mention the page no. in the column “page No” against the particulars in the check list as mentioned below for ease of scrutiny)*

| Sl. | Particulars | Whether Submitted (Yes / No) | Page No. |
|-----|--|---------------------------------|----------|
| 1 | EMD (DD of Rs. 1,00,000/-) | | |
| 2 | Bid document Cost (DD of Rs. 1,500/-) | | |
| 3 | Form T1 | | |
| 4 | Form T2 | | |
| 5 | Copy of the company/Agency Registration certificate | | |
| 6 | Copy of the GST, EPF, ESI registration certificate | | |
| 7 | Copy of PAN | | |
| 8 | Photocopy of ISO 9001 certification | | |
| 9 | Form T3 | | |
| 10 | Photocopies of the audited P/L account of each year highlighting the turnover in support of that | | |
| 11 | Form T4 | | |
| 12 | Copies of Work Order/Contract certificates from the clients in support of housekeeping & cleaning services executed in support of the information provided in Form T4 | | |
| 13 | Form T5 | | |
| 14 | Copied of ECR of EPF in support of the information in Form T5 | | |
| 15 | Form T6 | | |
| 16 | Copied of ECR of EPF in support of the information in Form T6 | | |
| 17 | Form T7 | | |
| 18 | Form T8 | | |
| 19 | Form T9 | | |
| 20 | Any other document | | |

FORM – T1*(to be furnished in the technical proposal)***TECHNICAL TENDER SUBMISSION FORM***(On the letterhead of the agency)*

To

The Chief District Medical Officer / Director

(pl. mention the name of the district in case of Districts and name of the institution in case of Capital.Hospital & RGH)

Re. : RFP Reference no. _____ dated _____
(pl. mention the RFP reference no. against the concerned district / institution from the table at Section 1-Schedule of Proposal submission)

Dear Sir / Madam,

We, the undersigned, offer to provide the **Housekeeping & Cleanliness Services** at District Health Institutions. We are hereby submitting our Proposal, which includes this Technical Proposal and a Commercial Proposal sealed under a separate envelope.

We hereby declare our Confirmation of acceptance of the Conditions of Contract mentioned in the RFP document under reference cited above.

We hereby declare that all the information and statements made in this Proposal are true and accept that any of our misrepresentations contained in it may lead to our disqualification.

Our proposal shall be binding upon us for a period of 180 days from the date of bid opening, subject to the modifications resulting from Contract negotiations you may subsequently carry out with us to accept our bid. If we are assigned the work during the period of validity of the Proposal, we undertake to carry out the same as per the terms and conditions of this tender document.

I hereby declare that my company has not been debarred / black listed by any Government/ Semi Government organizations. I further certify that I am the competent authority in my company authorized to make this declaration.

We understand you are not bound to accept any Proposal you receive.

Yours sincerely,

Authorized Signatory [*In full and initials*]: _____

Name and Title of Signatory: _____

Name of Agency: _____

Address: _____

(Organization Seal)

FORM – T2*(to be furnished in the technical proposal)***PROFILE OF THE AGENCY**

| | |
|---|---|
| Name of the Agency | |
| Office Address | |
| Status of the Agency (Whether registered under Company / Firm / Society / Trust) | |
| Name of the Chief Executive and authorized signatory | |
| Telephone Nos.: Landline | |
| Mobile | |
| Fax | |
| Email id (Official email id for correspondence if any) | |
| Date of Establishment | (furnish copy of the Registration Certificate of the Agency) |
| GST Registration No. | (furnish copy of the GST Registration of the Agency) |
| EPF Registration No. | (furnish copy of the EPF registration certificate of the Agency) |
| ESI Registration No. | (furnish copy of the ESI registration certificate of the Agency) |
| Income Tax No. (PAN) | (furnish copy of the PAN) |
| No. of branch offices in Odisha with location details | |
| Bank Details of the Bidder: The bidders have to furnish the Bank Details as mentioned below for return of EMD / Payment for services if any (if selected) | a. Name of the Bank : b. Name of the Account & Full address of the Branch concerned c. Account no. of the bidder : d. IFS Code of the Bank : |

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Organization Seal)

FORM T3*(to be furnished in the technical proposal)***ANNUAL AVERAGE TURN OVER STATEMENT***(To be furnished in the **letter head** of the Chartered Accountant)*

The Annual Turnover of M/s _____
for the last 3 financial years are given below and certified that the statement is true and correct.

| Sl. | Financial Year | Turnover in Rs. |
|---------------------------------------|-----------------------|------------------------|
| 1 | 2015-16 | |
| 2 | 2016-17 | |
| 3 | 2017-18 | |
| Average Annual Turnover in Rs. | | |

*Provisional audited statement shall not be considered.

Date: _____ Signature of Chartered Accountant

Place: _____
(Name in Capital)

Seal

Membership No.

Note:

- 1) To be issued in the **letter head** of the Chartered Accountant with membership No.
- 2) Also attach photocopies of the audited P/L account of **each year highlighting** the turnover in support of that

FORM T4*(to be furnished in the technical proposal)***PAST EXPERIENCE IN HOUSEKEEPING & CLEANING SERVICES DURING THE LAST THREE YEARS**
(attach separate sheets if the space provided is not sufficient)**A) Experience in Hospitals****F.Y. 2015-16**

| Sl. | *Name /address of the Hospitals for which Housekeeping & Cleaning & Cleaning services assignments were undertaken | Date of award of Assignment | Date of completion of assignment | Value of the Assignment | Role of your agency | **No. of Beds in the hospital | ***No. of personnel deployed (Housekeeping & Cleaning & Cleaning services only) | Whether Mechanized Cleaning System / Manual Cleaning System | Performance Certificate enclosed (Yes / No) |
|-----|---|-----------------------------|----------------------------------|-------------------------|---------------------|-------------------------------|---|---|---|
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| .. | | | | | | | | | |

F.Y. 2016-17

| Sl. | *Name /address of the Hospitals for which Housekeeping & Cleaning & Cleaning services assignments were undertaken | Date of award of Assignment | Date of completion of assignment | Value of the Assignment | Role of your agency | **No. of Beds in the hospital | ***No. of personnel deployed (Housekeeping & Cleaning & Cleaning services only) | ***Whether service undertaken by Mechanized Cleaning System / Manual Cleaning System | Performance Certificate enclosed (Yes / No) |
|-----|---|-----------------------------|----------------------------------|-------------------------|---------------------|-------------------------------|---|--|---|
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| .. | | | | | | | | | |

F.Y. 2017-18

| Sl. | *Name /address of the Hospitals for which Housekeeping & Cleaning & Cleaning services assignments were undertaken | Date of award of Assignment | Date of completion of assignment | Value of the Assignment | Role of your agency | **No. of Beds in the hospital | ***No. of personnel deployed (Housekeeping & Cleaning & Cleaning services only) | **** Whether service undertaken by Mechanized Cleaning | Performance Certificate enclosed (Yes / No) |
|-----|---|-----------------------------|----------------------------------|-------------------------|---------------------|-------------------------------|---|--|---|
| | | | | | | | | | |

| | Cleaning services assignments were undertaken | | | | | | & Cleaning services only) | System / Manual Cleaning System | |
|----|---|--|--|--|--|--|---------------------------|---------------------------------|--|
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| .. | | | | | | | | | |

- * Please furnish the **Work order / Contract copies** of the works executed in support of the information mentioned above **alongwith the performance certificate** of the client, **serially** in the **same order** as mentioned in the above format for ease of scrutiny.
- ** No. of Beds needs to be certified by the concerned hospital / any proof regarding no. of bed to be furnished for all hospitals, the information of which is mentioned above.
- *** No. of **housekeeping** personnel deployed should be clearly mentioned in the relevant work order / contract copies
- **** Mechanized / Manual Cleaning system undertaken should be mentioned in the relevant work order / contract /copies / certificate from the client.

B) Experience in Other Organizations (Other than Hospital)

F.Y. 2015-16

| Sl. | *Name/address of the Organization for which housekeeping Services assignments were undertaken | Date of award of Assignment | Date of completion of assignment | Value of the Assignment | Role of your agency | **No. of personnel deployed (Housekeeping & Cleaning & Cleaning services only) | ***Whether service undertaken by Mechanized Cleaning System / Manual Cleaning System | Performance Certificate enclosed (Yes / No) |
|-----|---|-----------------------------|----------------------------------|-------------------------|---------------------|--|--|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| .. | | | | | | | | |

F.Y. 2016-17

| Sl. | *Name/address of the Organization for which housekeeping Services assignments were undertaken | Date of award of Assignment | Date of completion of assignment | Value of the Assignment | Role of your agency | **No. of personnel deployed (Housekeeping & Cleaning Personnel only) | ***Whether service undertaken by Mechanized Cleaning System / Manual Cleaning System | Performance Certificate enclosed (Yes / No) |
|-----|---|-----------------------------|----------------------------------|-------------------------|---------------------|--|--|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| .. | | | | | | | | |

F.Y. 2017-18

| Sl. | *Name/address of the Organization for which (Housekeeping & Cleaning Services assignments were undertaken) | Date of award of Assignment | Date of completion of assignment | Value of the Assignment | Role of your agency | **No. of personnel deployed (Housekeeping & Cleaning Personnel only) | ***Whether service undertaken by Mechanized Cleaning System / Manual Cleaning System | Performance Certificate enclosed (Yes / No) |
|-----|--|-----------------------------|----------------------------------|-------------------------|---------------------|--|--|---|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| .. | | | | | | | | |

- * Please furnish the **Work order / Contract copies** of the works executed in support of the information mentioned above **alongwith the performance certificate** of the client, **serially** in the **same order** as mentioned in the above format for ease of scrutiny.
- ** No. of **Housekeeping & Cleaning** personnel deployed should be clearly mentioned in the relevant work order / contract copies
- *** Mechanized / Manual Cleaning system undertaken should be mentioned in the relevant work order / contract / copies / certificate from the client.

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Organization Seal)

Form T5*(to be furnished in the technical proposal)***Format for Power of Attorney for Signing of Proposal***(On a Stamp Paper of relevant value)***Power of Attorney**

Know all persons by these presents, We.....(name and address of the registered office) do hereby constitute, appoint and authorize Mr / Ms.....(name and residential address) who is presently employed with us and holding the position ofas our attorney, to do in our name and on our behalf, all such acts, deeds and things necessary in connection with or incidental to our bid for **Housekeeping & Cleanliness Services** at District health institutions including signing and submission of all documents and providing information / responses to the District / Institution Authority, representing us in all matters before District / Institution authority and generally dealing with District / Institution authority in all matters in connection with our bid for the said Project. We hereby agree to ratify all acts, deeds and things lawfully done by our said attorney pursuant to this Power of Attorney and that all acts, deeds and things done by our aforesaid attorney shall and shall always be deemed to have been done by us.

Dated this the _____ day of _____ 2018

For _____

(Name, Designation and Address)

Accepted

_____(Signature)
(Name, Title and Address of the Attorney)

Date : _____

Note:

- i. *To be executed by the Chief of the Agency.*
- ii. *The mode of execution of the Power of Attorney should be in accordance with the procedure, if any, laid down by the applicable law and the charter documents of the executant(s) and when it is so required the same should be under common seal affixed in accordance with the required procedure.*
- iii. *In case an authorized Director of the agency signs the proposal, a certified copy of the appropriate resolution/ document conveying such authority may be enclosed in lieu of the Power of Attorney.*

FORM T6*(to be furnished in the technical proposal)*

**Format for Affidavit certifying that Entity / Promoter(s) /Director(s)/Partners
of Entity are not blacklisted
(On a Stamp Paper of relevant value)**

Affidavit

I, M/s. (the name of the agency with address of the registered office) hereby certify and confirm that we or any of our promoter(s) / Director(s) are not barred by Department of Health & FW, Govt. of Odisha / or any other entity of GoO or blacklisted by any State Government or Central Government / Department / Organization in India from participating in Tenders as on the _____ (Date of Signing of this proposal).

We further confirm that we are aware that, our proposal for the captioned Project would be liable for rejection in case any material misrepresentation is made or discovered at any stage of the Bidding Process or thereafter during the agreement period.

Dated thisDay of, 2018

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Organization Seal)

FORM T 7

(to be furnished in the technical proposal)

Anti Collusion Certificate

We hereby certify and confirm that in the preparation and submission of our Proposal for **Housekeeping & Cleanliness Services** at health institutions under this RFP Reference No. _____, We have not acted in concert or in collusion with any other Bidder or other person(s) and also not done any act, deed or thing, which is or could be regarded as anti-competitive. We further confirm that we have not offered nor will offer any illegal gratification in cash or kind to any person or organization in connection with the instant proposal.

Dated this _____ Day of _____, 2018

Authorized Signatory/Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

(Organization Seal)

FORMATS

Housekeeping & Cleanliness Services at Govt. Health Institutions

FINANCIAL PROPOSAL

Check List (Financial Proposal)

Please check whether the following Forms have been enclosed in the respective cover, namely Cover **B: Financial Proposal**

(please arrange the documents serially in the following order)

| | | | |
|----|---------|--------|--------------------------|
| 1. | Form F1 | Yes/No | <input type="checkbox"/> |
| 2. | Form F2 | Yes/No | <input type="checkbox"/> |
| 3. | Form F3 | Yes/No | <input type="checkbox"/> |

FORM F-2

(To be submitted with Financial Proposal)

To
The Chief District Medical & PH Officer / Director

(pl. mention the name of the district in case of Districts and name of the institution in case of Capital Hospital & RGH)

Re. : RFP Reference no. _____ dated _____
*(pl. mention the RFP reference no. against the concerned district / institution from the table at Section 1-
Schedule of Proposal submission)*

Sub: **Request for Proposal for Housekeeping & Cleanliness Services at Govt. Health Institutions**

Sir,

1. Having carefully examined all the parts of the RFP documents and having obtained all the requisite information affecting this proposal and being aware of all conditions and difficulties likely to affect the execution of the contract, I/We hereby propose to offer the services as described in the RFP document in conformity with the conditions of contract, technical aspects and the sums indicated in this financial proposal.
2. I/We declare that we have read and understood and that we accept all clauses, conditions, and descriptions of the RFP document without any change, reservations and conditions.
3. If our proposal is accepted, we undertake to deposit the performance security deposit at the time of execution of the formal agreement
4. I/We agree to abide by this proposal/bid for a period of 180 days from the date of its opening and also undertake not to withdraw and to make any modifications unless asked for by you and that the proposal may be accepted at any time before the expiry of the validity period.
5. Unless and until the formal agreement is signed, this offer together with your written acceptance thereof shall constitute a binding contract between me/us and the District Authority.
6. We submit the Schedule of Prices as appended herewith.

Encl: Schedule of Prices (Form F2 & F3)

Yours sincerely,

Authorized Signatory [*In full and initials*]: _____

Name and Title of Signatory: _____

Name of Agency: _____

Address: _____

(Organization Seal)

FORM F-2
(To be submitted with Financial Proposal)
PRICE SCHEDULE

Name of the District / Other Institution: _____

| Particulars | Cost per Bed per Month (in Rs.) (exclusive of GST) | GST as applicable with % | Cost per Bed per Month (in Rs.) (inclusive of GST) |
|---|---|--------------------------|---|
| | a | b | a+b |
| <p>Cost per bed per Month</p> <p>[The cost per bed per month shall include all operational cost related to Human Resources as per category of personnel mentioned in Section – 3 (Clause 3.4) and complying to minimum wages act considering 24 x 7 x 365 days service by mechanized cleaning system with cleaning material / consumables mentioned in Section – 3 (Clause 3.3) and managing their services as per the Terms of Reference mentioned in Section 3 of RFP with all statutory requirement]</p> | (up to two decimal places only) | | (up to two decimal places only) |

Note : The bidder has to furnish the cost calculation format Form F-3 for arriving at the cost / bed per Month for the **Housekeeping & Cleanliness Services**

Authorized Signatory [*In full and initials*]: _____

Name and Title of Signatory: _____

Name of Agency: _____

Address: _____

(Organization Seal)

FORM E-3

(To be submitted with Financial Proposal)

Cost Calculation format for arriving at the cost / bed per Month for the Housekeeping & Cleanliness Services

Name of the District /Other Institution: _____

| Sl. | Particulars | Monthly Cost per Personnel (Rs.) | | | | | ***No. of Personnel | Total Cost / Month (Rs.) (up to two decimal places only) |
|----------|--|--|----------------------------------|------------------------------------|-------------------|------------------------------------|---------------------|---|
| | | *Take home Remuneration / Month (to be quoted based on 30 days service) | EPF (Employer's share of 13%) | ESI (Employer's share of 4.75%) | Service Charge ** | Total (per personnel per Month) | | |
| 1 | Human Resource | a | b | c | d | e = a+b+c+d | f | g = e x f |
| 1.1 | Remuneration of Sanitation worker (Semi- Skilled) | | | | | | | |
| 1.2 | Remuneration of Plumber (Skilled) | | | | | | | |
| 1.3 | Remuneration of Electrician (Skilled) | | | | | | | |
| 1.4 | Remuneration of Sanitation Supervisor (Skilled) | | | | | | | |
| 2 | Cleaning Material Cost per Month **** | | | | | | | |
| 3 | Total Cost / Month [g of 1.1 + g of 1.2 + g of 1.3 + g of 1.4 +g of 2] | | | | | | | |

| | | |
|---|---|---------------------------------|
| 4 | Total No. of Beds ***** | |
| 5 | Cost per bed per Month (g of Sl. 3 ÷ g of Sl. 4) | (up to two decimal places only) |

(Pl. go through the **Notes** mentioned below carefully before quoting the rates and No. of Personnel)

Note :

- * The **monthly take home remuneration** must be based as per minimum wages act vide the **recent gazette notification no. 1991 dated 30.10.2018** issued by **Labour & ESI Department, Odisha** for **Semi-skilled** and **Skilled** personnel. This should take into account **24 x 7 x 365 days service** of **housekeeping & cleaning** personnel required at the health institutions.
- ** The **service charge** shall be quoted by taking into account the managing cost of the personnel including statutory requirement. The bidders are required to quote the price (**Service Charge**) in **whole Rupees & no fraction of Rupee** will be considered and quoting in fraction of Rupee will lead to summarily rejection of financial bid. There must not be **any compromise** on the **take home remuneration** mentioned above. The service charge should include **all the charges of mechanized cleaning equipment** to be used as mentioned in **Section 3 – Clause 3.3.1**.
- *** The no. of housekeeping personnel (Sanitation worker / Plumber / Electrician / Sanitation Supervisor) against each District / Other institution is mentioned at **Section - 6**. The bidders are requested to go through the **Section - 6** carefully against the District / other Institution for which they want to quote and according put the **no. of personnel figure** in the **column ‘f’** against Sl. No.1.1, 1.2, 1.3 & 1.4 of Form F3.
- **** **Cleaning Material / Month** should take into account the **total no. of beds** of **all the institutions** of a **district** (for which the bidder intend to quote) as mentioned in **Section-6** and the consumable list mentioned in Section-3 (Clause 3.3.2)
- ***** The no. of Beds against each district / other institution is mentioned at **Section - 6**. The bidders are requested to go through the **Section - 6** carefully against the District / other Institution for which they want to quote and according put the **no. of beds figure** in the **column ‘g’** against **Sl. No. 4** of Form F3.

Date :

Authorized Signature

Place :

Full Name :

Organization Seal

Annexure - I**AGREEMENT**

(*On a Stamp Paper of Rs.100/-)

Reference:

- (i) RFP Reference No _____ dated _____ and subsequent Amendment / Pre-bid clarification issued by the Tender Inviting Authority
(ii) Service provider's bid submitted dated _____

1. An agreement made on the _____ day of _____ 2018 BETWEEN.....(hereinafter called "the approved service provider", which expression shall, where the context so admits, be deemed to include his heirs successors executors and administrators) of the **one part** AND the CDM& PHO, District, Odisha / Director,.....(name of Institution) (hereinafter called "the District Authority" which expression shall, where the context so admits be deemed to include his/her successors in office and assigns) of the **other part**.

2. Whereas the approved service provider has agreed with the District Authority / Institution to manage the **Housekeeping & Cleanliness Services** in the Health Institutions in the manner set forth in the terms of the **Request for Proposal (RFP) reference no.** _____ And whereas the approved service provider has deposited a sum of Rs.....(Rupees.....) only in the form of as Performance Security of the project.

3. NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

(a) The following documents shall be deemed to form part of and be read and constructed as Integral part of this Agreement, viz.:

- i) Terms & conditions of the RFP reference no. cited above
- ii) Terms of Reference of the RFP reference no. cited above.
- iii) Amendment / Clarification to Pre-bid queries of the RFP reference no. cited above

(b) The approved service provider shall be paid at the rate as offered by them in the financial proposal towards monthly cost of the housekeeping & cleaning Services as mentioned below:

- i) Per Sanitation Worker /month : Rs. _____/month,

No. of Sanitation Worker / Month : _____

ii) Per Sanitation Supervisor/month : Rs...../month

No. of Sanitation Supervisor / Month: _____

iii) Per Plumber/month : Rs...../month

No. of Plumber / Month: _____

iv) Per Electrician / month : Rs...../month

No. of Electrician / Month: _____

v) Cleaning Material Cost (Durable & Consumable) / month : Rs...../month

(c) In consideration of the payment to be made by the District Authority / Institution as above, the approved service provider will duly implement the project in the manner set forth in the terms of the RFP.

(d) The terms & conditions and terms of reference of the RFP appended to this agreement will be deemed to be taken as integral part of this agreement and are binding on the parties executing this agreement.

(e) Following documents / letters /correspondence undertaken between the parties shall also form part of this agreement :

| District Authority | Approved Service Provider |
|---|--|
| (a) Request for proposal and any amendment thereof. | a) Proposal Submitted in response to RFP |
| (b) Office Order subsequent to RFP | b) SOPs in respect to Housekeeping & Cleaning Service Operation |

4. Payment

(a) The District / Institution Authority does hereby agree that if the approved service provider shall duly implement the project in the manner aforesaid, observe and keep the said terms and conditions, the District / Institution Authority will pay or cause to be paid to the approved service provider at the time and in the manner set forth in the said terms.

(b) The mode of payment is as specified below:

The payment shall be paid on a monthly basis upon submission of bill **monthly basis** upon submission of bill with attendance chat of the deployed manpower. The bills should be in the name of the concerned authority of the District / Institution.

5. Operational Parameter and Penalty

The successful bidder has to operate the **Housekeeping & Cleanliness Services** with quality service as mentioned in the terms of reference. Penalties shall be imposed on the agency in case of any deviation found in discharging of services. The penalties shall be imposed as specified clause 4.7 of the RFP (Terms & condition)

6. Period of Engagement/Duration of Contract

The agency will be engaged initially for a period of 3 years subject to satisfactory performance, which may further be extended by the District / Institution Authority for another two years based on satisfactory performance of the Service Provider.

7. Schedule of Implementation

The agency is required to set up the Housekeeping & Cleanliness Services with all personnel within 30 days of signing the contract.

8. Termination /Suspension of Agreement

The District Authority / Institution may by a notice in writing, suspend the contract if the selected agency fails to perform any of his obligations including carrying out the services, provided that such notice of suspension shall specify the nature of failure, and shall request remedy of such failure within a period not exceeding 15 days after the receipt of such notice.

The District Authority / Institution after giving 30 days clear notice in writing expressing the intension of termination by stating the ground/grounds on the happening of any of the events (as mentioned below), may terminate the agreement after giving reasonable opportunity of being heard to the service provider :

- a) If the service provider do not remedy a failure in the performance of his obligations within 15 days of receipt of notice or within such further period as the District Authority / Institution have subsequently approve in writing.
- b) If the service provider becomes insolvent or bankrupt.
- c) If, as a result of force majeure, the service provider is unable to perform a material portion of the services for a period of not less than 60 days: or

- d) If, in the judgment of the District Authority / Institution, the service provider is engaged in corrupt or fraudulent practices in competing for or in implementation of the project.

9. Settlement of Dispute

If any dispute with regard to the interpretation, difference or objection whatsoever arises in connection with or arises out of the agreement, or the meaning of any part thereof, or on the rights, duties or liabilities of any party, the same shall be referred to Committee constituted at the District level for decision.

10. Jurisdiction of Court

Legal proceedings if any shall be subject to the _____ District (*name of the District / place of the Institution*) jurisdiction only.

In witness whereof the parties hereto have set their hands on theday of.....2018.

Signature of the Approved Service Provider

Signature of CDM & PHO / Director

Date:

Date:

1.Witness

1. Witness

2.Witness

2. Witness

Score Card of Housekeeping & Cleanliness Services for Performance Review

| Ref. No. of Kayakalp Document / NQAS / Other allotted number | Criteria * | Assessment Method | Means of Verification | Compliance | Score Secured |
|--|--|-------------------|---|------------|---------------|
| Sanitation & Hygiene | | | | | |
| A1 | Staff management | | | 5 | |
| A.1.1 | % of staff recruited as per contract | SI/ RR | HR documents | 2 | |
| A.1.2 | No of staff turnover per month (Standard <10%) | RR | HR documents | 2 | |
| A.1.3 | % of staff immunized for hepatitis B | SI/ RR | Immunisation Register | 1 | |
| A2 | Capacity building | | | 4 | |
| A.2.1 | % of staff provided induction training | SI/ RR | Training Documents | 2 | |
| A.2.2 | % of staff provided Refresher Training | SI/ RR | Training Documents | 2 | |
| B1 | Cleanliness of Circulation Area | | | 5 | |
| B1.1 | No dirt/Grease/Stains in the Circulation area | OB | Check that floors and walls of Corridors, Waiting area, stairs, roof top for any visible or tangible dirt, grease, stains, etc. | 1 | |
| B1.2 | No Cobwebs/Bird Nest/ Dust on walls and roofs of corridors | OB | Check that roof, walls, corners of Corridors, Waiting area, stairs, roof top for any Cobweb, Bird Nest, etc. | 1 | |
| B1.3 | Corridors are cleaned at least twice in the day with wet mop | SI/RR | Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records | 1 | |
| B1.4 | Corridors are rigorously cleaned with scrubbing / flooding once in a month | SI/RR | Ask the staff about cleaning schedule and activities | 1 | |
| B1.5 | Surfaces are conducive of effective cleaning | OB | Check if surfaces are smooth enough for cleaning | 1 | |
| B2 | Cleanliness of Wards | | | 5 | |
| B2.1 | No dirt/Grease/ Stains/ Garbage in wards | OB | Check that floors and walls of indoor department for any visible or tangible | 1 | |

| | | | | | |
|-----------|---|-------|--|----------|--|
| | | | dirt, grease, stains, etc. | | |
| B2.2 | No Cobwebs/Bird Nest/ Dust/Seepage on walls and roofs of wards | OB | Check for the roof, corners of ward for any Cobweb, Bird Nest, Dust etc. | 1 | |
| B2.3 | Wards are cleaned at least thrice in the day with wet mop | OB | Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records | 1 | |
| B2.4 | Patient Furniture, Mattresses, Fixtures are without grease and dust | OB | Check for visible dirt, dust, grease etc. Check if the items are wiped/dusted daily | 1 | |
| B2.5 | Floors, walls, furniture and fixture are thoroughly cleaned once in a week. | OB | Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records if available | 1 | |
| B3 | Cleanliness of Procedure Areas | | | 5 | |
| B3.1 | No dirt/Grease/ Stains/ Garbage in Procedure Areas | OB | Check that floors and walls of Labour room, OT, Dressing room for any visible or tangible dirt, grease, stains etc. | 1 | |
| B3.2 | No Cobwebs/Bird Nest/ Seepage in OT & Labour Room | OB | Check for roof, walls, corners of Labour Room, OT, Dressing Room for any Cobweb, Bird Nest, Seepage, etc. | 1 | |
| B3.3 | OT/Labour Room floors and procedure surfaces are cleaned at least twice a day / after every surgery | SI/RR | Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records. | 1 | |
| B3.4 | OT & Labour Room Tables are without grease, body fluid and dust | OB | Check that Top, side and legs of OT Tables, Dressing Room Tables, Labour Room Tables for dirt, dried human tissue, body fluid etc. | 1 | |
| B3.5 | Floors, walls, furniture and fixture are thoroughly cleaned once in a week. | SI/RR | Ask cleaning staff about frequency of cleaning day. Verify with Housekeeping records if available. | 1 | |
| B4 | Cleanliness of Ambulatory Area (OPD, Emergency, Lab) | | | 5 | |
| B4.1 | No dirt/Grease/Stains / Garbage in Ambulatory Area | OB | Check for floors and walls of OPD, Emergency, Laboratory, Radiology for any visible or tangible dirt, grease, stains, etc. | 1 | |

| | | | | | |
|-----------|--|-------|--|----------|--|
| B4.2 | No Cobwebs/Bird Nest/ Seepage on walls and roofs of ambulatory area | OB | Check for roof , walls, corners of OPD, Emergency, Laboratory, Radiology for any Cobweb, Bird Nest, Dust, Seepage, etc. | 1 | |
| B4.3 | Ambulatory Areas are cleaned at least thrice in the day with wet mop | SI/RR | Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records | 1 | |
| B4.4 | Furniture, & Fixtures are without grease and dust and cleaned daily | OB/SI | Observe and ask the staff about frequency for cleaning | 1 | |
| B4.5 | Floors, walls, furniture and fixture are thoroughly cleaned once in a week. | SI/RR | Ask staff about schedule of cleaning and verify with records | 1 | |
| B5 | Cleanliness of Auxiliary Areas | | | 5 | |
| B5.1 | No dirt/Grease/ Stains/ Garbage in Auxiliary Area | OB | Check for the floors and walls of Pharmacy, Kitchen, Laundry, Mortuary, Administrative offices, for any visible or tangible dirt, grease, stains, etc. | 1 | |
| B5.2 | No Cobwebs/Bird Nest/ Seepage on walls and roofs of Auxiliary Area | OB | Check the roof , walls, corners of Pharmacy, Kitchen, Laundry, Mortuary, Administrative offices for any Cobweb, Bird Nest, Seepage, etc. | 1 | |
| B5.3 | Auxiliary Areas are cleaned at least twice in the day with wet mop | SI/RR | Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records. | 1 | |
| B5.4 | Furniture & Fixtures are without grease and dust and cleaned daily | OB/SI | Observe and ask the staff about frequency for cleaning | 1 | |
| B5.5 | Floors, walls, furniture and fixture are thoroughly cleaned once in a month | SI/RR | Ask staff about schedule of cleaning and verify with records | 1 | |
| B6 | Cleanliness of Toilets | | | 5 | |
| B6.1 | No dirt/Grease/Stains/ Garbage in Toilets | OB | Check some of the toilets randomly in indoor and outdoor areas for any visible dirt, grease, stains, water accumulation in toilets | 1 | |
| B6.2 | No foul smell in the Toilets | OB | Check some of the toilets randomly in indoor and outdoor areas for foul smell | 1 | |

| | | | | | |
|-----------|--|----------|--|----------|--|
| B6.3 | Toilets have running water and functional cistern | OB | Ask cleaning staff to operate cistern and water taps | 1 | |
| B6.4 | Sinks and Cistern are cleaned every two hours or whenever required | SI/RR | Ask cleaning staff for frequency of cleaning and verify it with house keeping records | 1 | |
| B6.5 | Floors of Toilets are Dry | OB | Check some of the toilets randomly for dryness of floors and without residue water accumulation | 1 | |
| B7 | Use of standards materials and Equipment for Cleaning | | | 5 | |
| B7.1 | Availability of Detergent Disinfectant solution / Hospital Grade Phenyl for Cleaning purpose | SI/OB/RR | Check for good quality Hospital cleaning solution preferably a ISI mark. Composition and concentration of solution is written on label. Check with cleaning staff if they are getting adequate supply. Verify the consumption records. | 1 | |
| B7.2 | Cleaning staff uses correct concentration of cleaning solution | SI/RR | Check, if the cleaning staff is aware of correct concentration and dilution method for preparing cleaning solution. Ask them to demonstrate. Verify it with the instruction given solution bottle. | 1 | |
| B7.3 | Availability of carbolic Acid/ Baciloid for surface cleaning in procedure areas- OT, Labour Room | SI/RR | Check for adequacy of the supply. Verify with the records of stock outs, if any | 1 | |
| B7.4 | Availability of Buckets and carts for Mopping | SI/RR | Check if adequate numbers of Buckets and carts are available. General and critical areas should have separate bucket and carts. | 1 | |
| B7.5 | Availability of Cleaning Equipment | SI/OB | Check the availability of mops, brooms, collection buckets etc. as per requirement. Hospital with a size of more than 300 beds should have mechanized mopping machine. | 1 | |
| B8 | Use of Standard Methods Cleaning | | | 5 | |

| | | | | | |
|-----------|---|-------|---|----------|--|
| B8.1 | Use of Three bucket system for cleaning | SI/OB | Check if cleaning staff uses three bucket system for cleaning. One bucket for Cleaning solution, second for plain water and third one for wringing the mop. Ask the cleaning staff about the process | 1 | |
| B8.2 | Use unidirectional method and out word mopping | SI/OB | Ask cleaning staff to demonstrate the how they apply mop on floors. It should be in one direction without returning to the starting point. The mop should move from inner area to outer area of the room. | 1 | |
| B8.3 | No use of brooms in patient care areas | SI/OB | Check if brooms are stored in patient care areas. Ask cleaning staff if they are using brooms for sweeping in wards, OT, Labour room. Brooms should not be used in patient care areas. | 1 | |
| B8.4 | Use of separate mops for critical and semi critical areas and procedures surfaces | SI/OB | Check if cleaning staff is using same mop for outer general areas and critical areas like OT and labour room. The mops should not be shared between critical and general area. The clothes used for cleaning procedure surfaces like OT Table and Labour Room Tables should not be used for mopping the floors. | 1 | |
| B8.5 | Disinfection and washing of mops after every cleaning cycle | SI/OB | Check if cleaning staff disinfect, clean and dry the mop before using it for next cleaning cycle. | 1 | |
| B9 | Monitoring of Cleanliness Activities | | | 5 | |
| B9.1 | Use of Housekeeping Checklist in Toilets | OB/RR | Check that Housekeeping Checklist is displayed in Toilet and updated. Check Housekeeping records if checklists are daily updated for at least last one month | 1 | |
| B9.2 | Use of Housekeeping Checklist in Patient Care Areas | OB/RR | Check that Housekeeping Checklist is displayed in OPD, IPD, Lab, etc. Check Housekeeping records if checklists are daily updated for at least last one month | 1 | |

| | | | | | |
|-------------|--|-------|---|----------|--|
| B9.3 | Use of Housekeeping Checklist in Procedure Areas | OB/RR | Check that Housekeeping Checklist is displayed in Labour room, OT Dressing room etc. Check Housekeeping records if checklist are daily updated for at least last one month. | 1 | |
| B9.4 | A person is designated for monitoring of Housekeeping Activities | SI/RR | Check if a staff-member from the hospital has been designated to monitor the housekeeping activities and verify them with counter signature on housekeeping checklist. | 1 | |
| B9.5 | Monitoring of adequacy and quality of material used for cleaning | SI/RR | Check if there is any system of monitoring that adequate concentration of disinfectant solution is used for cleaning. Hospital administration take feedback from cleaning staff about efficacy of the solution and take corrective action if it is not effective. | 1 | |
| B10. | Drainage and Sewage Management | | | 5 | |
| B10.1 | Availability of closed drainage system | OB | Check if there is any open drain in the hospital premises. Hospital should have a closed drainage system. If, the hospital's infrastructure is old and it is not possible create closed draining system, the open drains should properly covered. | 1 | |
| B10.2 | Gradient of Drains is conducive for adequate for maintaining flow | OB | Check that the drains have adequate slope and there is no accumulation of water or debris in it | 1 | |
| B10.3 | Availability of connection with Municipal Sewage System/ or Soak Pit | OB/SI | Check if Hospital sewage has proper connection with municipal drainage system. If access to municipal system is not accessible, hospital should have a septic tank with in the premises. | 1 | |
| B10.4 | No blocked/ over-flowing drains in the facility | OB | Observe that the drains are not overflowing or blocked | 1 | |
| B10.5 | All the drains are cleaned once in a week | SI/RR | Check with the cleaning staff about the frequency of cleaning of drains. Verify with the records. | 1 | |

| F1 | Community Monitoring & Patient Participation | | | 4 | |
|---------------------------|---|-------|--|-----------|--|
| F1.2 | Local NGO/ Civil Society Organizations are involved in cleanliness of the hospital | SI | Discuss with hospital administration about involvement of local NGOs/Civil society | 1 | |
| F1.3 | Patients are counselled on benefits of Hygiene | PI | Check with patients, if they have been counselled for hygiene practices | 1 | |
| F1.4 | Patients are made aware of their responsibility of keeping the health facility clean | PI/OB | Ask patients about their roles& responsibilities with regards to cleanliness. Patient's responsibilities should be prominently displayed | 1 | |
| F1.5 | The Health facility has a system to take feed-back from patients and visitors for maintaining the cleanliness of the facility | SI/RR | Check if there is a feedback system for the patients. Verify the records | 1 | |
| Total (Kayakalpa) | | | | 63 | |
| ME D46 | The facility has established procedures for pest, rodent and animal control | OB | No stray animal/rodent/birds | 2 | |
| Total (NQAS) | | | | 2 | |
| Other | Documentation - properly maintained as per ToR | RR | | 2 | |
| Other | Modern equipments/ instruments introduced for up keeping of Hospital Building & Premises | OB | | 2 | |
| Total (Other) | | | | 4 | |
| C.1 | Patient satisfaction indicators (in patient & outpatient) | RR | | | |
| C.1.1 | % of people satisfied on cleanliness of the hospital (2 marks if scored $\geq 80\%$ or else 0) | | Patient Satisfaction Study | 2 | |
| C.2 | Health care providers satisfaction indicators | RR | | | |
| C.2.1 | % of Health Care Provider satisfied on cleanliness of the hospital (2 marks if scored $\geq 80\%$ or else 0) | | Feedback form of Health Care Providers | 2 | |

| | | | | | |
|--------------------|--|--|--|-----------|--|
| C.3 | Overall Impression of Head of the Institution on management of services by outsourced agency | | | 2 | |
| Grand Total | | | | 75 | |