



Province of the  
**EASTERN CAPE**  
HEALTH

Office of the Nelson Mandela Bay Health District Manager  
Private Bag X 28000 · Greenacres · Port Elizabeth · 6057

Enquiries : S. Calitz  
Tel : 041 391 8179

Date : 2022-06-01

ADVERTISEMENT OF A 24 DAY BID  
REQUEST FOR PROPOSALS/QUOTATIONS

NELSON MANDELA BAY HEALTH DISTRICT  
REF.NO : SCMU3— 22/23-0116-HO

**MULTI-DISCIPLINE BUILT ENVIRONMENT PROFESSIONAL SERVICES IN CONSORTIUM  
REQUIRED FOR THE INFRASTRUCTURE IMPROVEMENTS, ALTERATIONS AND  
ADDITIONS AT EMPILWENI HOSPITAL IN GQEBERHA, NELSON MANDELA BAY HEALTH  
DISTRICT**

Quotations are hereby invited from a registered supplier/company to provide for the above items at Nelson Mandela Bay Health District. All quotations with necessary documents must be submitted to the Procurement office. It should be in an enclosed envelope indicating the tender number and for the attention of Susan Calitz/Alta Rudman.

Deliver to Supply Chain Management Office situated at the following address:  
Department of Health : Nelson Mandela Bay Health District  
Conyngham Road  
Parsons Hill  
Department of Health Building (Room D16/D15)  
Port Elizabeth

Bidders must immediately ensure that they are **correctly registered on CSD (Central Supplier Database)** when collecting the Bid documents

Bid starting date is 03 June 2022

Closing date is 27 June 2022 at 11:00.  
**No late quotations will be accepted.**

For any queries please call Susan Calitz 041 391 8179 / Alta Rudman 041 391 8131

.....  
**MRS. S. MACINGWANE**  
**SNR MANAGER : FINANCE**  
**NELSON MANDELA BAY HEALTH DISTRICT**

United in achieving quality health care for all  
24 hours Call Centre: 0800032364  
Website: www.ecdo.gov.za

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## BID ADVERTISEMENT

<b>THE EASTERN CAPE DEPARTMENT OF HEALTH INVITES BIDS FOR:</b>					
BID NUMBER:	<b>SCMU-22/23-0116-HO</b>	CLOSING DATE:	<b>27 June 2022</b>	CLOSING TIME:	<b>11h00</b>
DESCRIPTION	<b>MULTI-DISCIPLINE BUILT ENVIRONMENT PROFESSIONAL SERVICES IN CONSORTIUM REQUIRED FOR THE INFRASTRUCTURE IMPROVEMENTS, ALTERATIONS AND ADDITIONS AT EMPILWENI HOSPITAL IN GQEBERHA, NELSON MANDELA BAY HEALTH DISTRICT</b>				
BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)					
<b>Eastern Cape Department of Health - Nelson Mandela Bay Health District</b>					
<b>Conyngham Road, Parsons Hill</b>					
<b>Gqeberha (Port Elizabeth)</b>					
BIDDING PROCEDURE AND TECHNICAL ENQUIRIES MAY BE DIRECTED TO:					
CONTACT PERSON		<b>Ms. S. Calitz</b>			
TELEPHONE NUMBER		<b>041 3918179</b>			
E-MAIL ADDRESS		<b>sussana.calitz@echealth.gov.za</b>			
NO COMPULSORY BID CLARIFICATION MEETING					
BID DOCUMENTS MAY BE OBTAINED FROM THE ABOVE ADDRESS AT A COST OF R 200: <b>Please contact the Bid office for EFT arrangements and collection of bid documents</b>					
BID VALIDITY PERIOD IS 120 DAYS					

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# 1. SCHEDULE A – SBD 1 Invitation to Bid

## 1.1. Part A – Invitation to Bid

<b>THE EASTERN CAPE DEPARTMENT OF HEALTH INVITES BIDS FOR:</b>					
BID NUMBER:	<b>SCMU-22/23-0116-HO</b>	CLOSING DATE:	<b>27 June 2022</b>	CLOSING TIME:	<b>11h00</b>
DESCRIPTION	<b>MULTI-DISCIPLINE BUILT ENVIRONMENT PROFESSIONAL SERVICES IN CONSORTIUM REQUIRED FOR THE INFRASTRUCTURE IMPROVEMENTS, ALTERATIONS AND ADDITIONS AT EMPILWENI HOSPITAL IN GQEBERHA, NELSON MANDELA BAY HEALTH DISTRICT</b>				
BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)					
<b>Nelson Mandela Bay Health District</b>					
<b>Conyngham Road, Parsons Hill</b>					
<b>Gqeberha (Port Elizabeth)</b>					
BIDDING PROCEDURE AND TECHNICAL ENQUIRIES MAY BE DIRECTED TO:					
CONTACT PERSON		<b>Ms. S. Calitz</b>			
TELEPHONE NUMBER		<b>041 3918179</b>			
E-MAIL ADDRESS		<b>Sussana.calitz@echealth.gov.za</b>			
<b>BID DOCUMENTS MAY BE OBTAINED FROM THE ABOVE ADDRESS AT A COST OF R 200: Please contact the Bid office for EFT arrangements and collection of bid documents</b>					
<b>BID VALIDITY PERIOD IS 120 DAYS</b>					
NO COMPULSORY BID CLARIFICATION MEETING					
<b>1. SUPPLIER INFORMATION – CONSORTIUM LEADER / CONSORTIUM MEMBER No.1</b>					
1.1.	NAME OF BIDDER NOMINATED CONSORTIUM LEAD ENTERPRISE - CONSORTIUM MEMBER No.1 (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of nominated Consortium Lead ENTERPRISE]			
1.2.	CONSORTIUM AGREEMENT ATTACHED	YES [tick]		NO [tick]	
1.3.	NAME OF NOMINATED CONSORTIUM LEAD PROFESSIONAL - (NAME OF A PROFESSIONAL ARCHITECT)	[Name of nominated Lead Professional Architect]			
	SACAP REGISTRATION No,	[SACAP No.]			
1.4.	STREET ADDRESS OF CONSORTIUM	[Street Address]			
1.5.	TELEPHONE NUMBER OF CONSORTIUM LEADER -	[Telephone landline No.]			
1.6.	CELLPHONE NUMBER OF CONSORTIUM LEADER -	[Cell No.]			
1.7.	E-MAIL ADDRESS OF CONSORTIUM LEADER -	[E-mail]			
<b>2. SUPPLIER INFORMATION – CONSORTIUM MEMBER No. 2</b>					

2.1.	NAME OF CONSORTIUM MEMBER No.2 – ARCHITECTURAL SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
2.2.	STREET ADDRESS OF CONSORTIUM MEMBER No.2	[Street Address]
2.3.	TELEPHONE NUMBER OF CONSORTIUM MEMBER No.2	[Telephone landline No.]
2.4.	CELLPHONE NUMBER OF CONSORTIUM MEMBER No.2-	[Cell No.]
2.5.	E-MAIL ADDRESS OF CONSORTIUM MEMBER No.2	[E-mail]
<b>3. SUPPLIER INFORMATION – CONSORTIUM MEMBER No. 3</b>		
3.1.	NAME OF CONSORTIUM MEMBER No.3 – QUANTITY SURVEYING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
3.2.	STREET ADDRESS OF CONSORTIUM MEMBER No.2	[Street Address]
3.3.	TELEPHONE NUMBER OF CONSORTIUM MEMBER No.2	[Telephone landline No.]
3.4.	CELLPHONE NUMBER OF CONSORTIUM MEMBER No.2	[Cell No.]
3.5.	E-MAIL ADDRESS OF CONSORTIUM MEMBER No.2	[E-mail]
<b>4. SUPPLIER INFORMATION – CONSORTIUM MEMBER NO. 4</b>		
4.1.	NAME OF CONSORTIUM MEMBER No.4 – CIVIL ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
4.2.	STREET ADDRESS OF CONSORTIUM MEMBER No.4	[Street Address]
4.3.	TELEPHONE NUMBER OF CONSORTIUM MEMBER No.4	[Telephone landline No.]
4.4.	CELLPHONE NUMBER OF CONSORTIUM MEMBER No.4	[Cell No.]
4.5.	E-MAIL ADDRESS OF CONSORTIUM MEMBER No.4	[E-mail]

5. SUPPLIER INFORMATION – CONSORTIUM MEMBER NO. 5		
5.1.	NAME OF CONSORTIUM MEMBER No.5 – STRUCTURAL ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
5.2.	STREET ADDRESS OF CONSORTIUM MEMBER No.5	[Street Address]
5.3.	TELEPHONE NUMBER OF CONSORTIUM MEMBER No.5	[Telephone landline No.]
5.4.	CELLPHONE NUMBER OF CONSORTIUM MEMBER No.5	[Cell No.]
5.5.	E-MAIL ADDRESS OF CONSORTIUM MEMBER No.5	[E-mail]
6. SUPPLIER INFORMATION – CONSORTIUM MEMBER NO. 6 (MANDATORY)		
6.1.	NAME OF CONSORTIUM MEMBER No.6 – ELECTRICAL AND ELECTRONIC ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
6.2.	STREET ADDRESS OF CONSORTIUM MEMBER No.6	[Street Address]
6.3.	TELEPHONE NUMBER OF CONSORTIUM MEMBER No.6	[Telephone landline No.]
6.4.	CELLPHONE NUMBER OF CONSORTIUM MEMBER No.6	[Cell No.]
5.5.	E-MAIL ADDRESS OF CONSORTIUM MEMBER No.6	[E-mail]
7. SUPPLIER INFORMATION – CONSORTIUM MEMBER NO. 7		
7.1.	NAME OF CONSORTIUM MEMBER No.7 – MECHANICAL ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
7.2.	STREET ADDRESS OF CONSORTIUM MEMBER No.6	[Street Address]
7.3.	TELEPHONE NUMBER OF CONSORTIUM MEMBER No.6	[Telephone landline No.]



7.4.	CELLPHONE NUMBER OF CONSORTIUM MEMBER No.6	[Cell No.]
7.5.	E-MAIL ADDRESS OF CONSORTIUM MEMBER No.6	[E-mail]
<b>8. SUPPLIER INFORMATION – CONSORTIUM MEMBER NO. 8</b>		
8.1.	NAME OF CONSORTIUM MEMBER No.8 – PRINCIPAL AGENT SERVICES FOR ADMINISTRATION OF THE JBCC AGREEMENT (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
8.2.	STREET ADDRESS OF CONSORTIUM MEMBER No.8	[Street Address]
8.3.	TELEPHONE NUMBER OF CONSORTIUM MEMBER No.8	[Telephone landline No.]
8.4.	CELLPHONE NUMBER OF CONSORTIUM MEMBER No.8	[Cell No.]
8.5.	E-MAIL ADDRESS OF CONSORTIUM MEMBER No.8	[E-mail]
<b>9. SUPPLIER INFORMATION – CONSORTIUM MEMBER NO. 9</b>		
9.1.	NAME OF CONSORTIUM MEMBER No.9 – CONSTRUCTION HEALTH & SAFETY AGENT SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
9.2.	STREET ADDRESS OF CONSORTIUM MEMBER No.9	[Street Address]
9.3.	TELEPHONE NUMBER OF CONSORTIUM MEMBER No.9	[Telephone landline No.]
9.4.	CELLPHONE NUMBER OF CONSORTIUM MEMBER No.9	[Cell No.]
9.5.	E-MAIL ADDRESS OF CONSORTIUM MEMBER No.9	[E-mail]
<b>10. SUPPLIER INFORMATION – CONSORTIUM MEMBER NO. 10</b>		
10.1.	NAME OF CONSORTIUM MEMBER No.10 – PROFESSIONAL CONSTRUCTION PROJECT MANAGEMENT SERVICES – EXTERNAL STAKEHOLDER ENGAGEMENT AND SECONDARY SOCIAL	[Name of Trading ENTERPRISE]

	DELIVERABLES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	
10.2.	STREET ADDRESS OF CONSORTIUM MEMBER No.10	[Street Address]
10.3.	TELEPHONE NUMBER OF CONSORTIUM MEMBER No.10	[Telephone landline No.]
10.4.	CELLPHONE NUMBER OF CONSORTIUM MEMBER No.10	[Cell No.]
10.5.	E-MAIL ADDRESS OF CONSORTIUM MEMBER No.10	[E-mail]
<b>11. CSD SUPPLIER COMPLIANCE STATUS OF BUILT ENVIRONMENT DISCIPLINE SPECIFIC CONSORTIUM MEMBERS</b>		
11.1.	NAME OF CONSORTIUM MEMBER No.1 – NOMINATED CONSORTIUM LEAD ENTERPRISE - CONSORTIUM MEMBER (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
	CENTRAL SUPPLIER DATABASE No. OF CONSORTIUM MEMBER No.1	[CSD No.]
11.2.	NAME OF CONSORTIUM MEMBER No.2 – ARCHITECTURAL SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
	CENTRAL SUPPLIER DATABASE No. OF CONSORTIUM MEMBER No.2	[CSD No.]
11.3.	NAME OF CONSORTIUM MEMBER No.3 – QUANTITY SURVEYING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
	CENTRAL SUPPLIER DATABASE No. OF CONSORTIUM MEMBER No.2	[CSD No.]
11.4.	NAME OF CONSORTIUM MEMBER No.4 – CIVIL ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
	CENTRAL SUPPLIER DATABASE No. OF	[CSD No.]

	CONSORTIUM MEMBER No.4	
11.5.	NAME OF CONSORTIUM MEMBER No.5 – STRUCTURAL ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
	CENTRAL SUPPLIER DATABASE No. OF CONSORTIUM MEMBER No.5	[CSD No.]
11.6.	NAME OF CONSORTIUM MEMBER No.6 – ELECTRICAL AND ELECTRONIC ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
	CENTRAL SUPPLIER DATABASE No. OF CONSORTIUM MEMBER No.6	[CSD No.]
11.7.	NAME OF CONSORTIUM MEMBER No.7 – MECHANICAL ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
	CENTRAL SUPPLIER DATABASE No. OF CONSORTIUM MEMBER No.7	[CSD No.]
11.8.	NAME OF CONSORTIUM MEMBER No.8 – PRINCIPAL AGENT SERVICES FOR ADMINISTRATION OF THE JBCC AGREEMENT (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
	CENTRAL SUPPLIER DATABASE No. OF CONSORTIUM MEMBER No.7	[CSD No.]
11.9.	NAME OF CONSORTIUM MEMBER No.9 – CONSTRUCTION HEALTH & SAFETY AGENT SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
	CENTRAL SUPPLIER DATABASE No. OF CONSORTIUM MEMBER No.9	[CSD No.]

11.10	NAME OF CONSORTIUM MEMBER No.10 – PROFESSIONAL CONSTRUCTION PROJECT MANAGEMENT SERVICES – EXTERNAL STAKEHOLDER ENGAGEMENT AND SECONDARY SOCIAL DELIVERABLES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]	
	CENTRAL SUPPLIER DATABASE No. OF CONSORTIUM MEMBER No.10	[CSD No.]	
<b>12. PROFESSIONAL REGISTRATION COMPLIANCE STATUS OF PROFESSIONALS EMPLOYED BY THE BUILT ENVIRONMENT DISCIPLINE SPECIFIC CONSORTIUM MEMBERS</b>			
12.1.	NAME OF CONSORTIUM MEMBER No.1 – NOMINATED CONSORTIUM LEAD ENTERPRISE - CONSORTIUM MEMBER (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]	
	INITIALS & SURNAME OF PROFESSIONAL EMPLOYED	SACAP CATEGORY OF REGISTRATION	SACAP REGISTRATION No.
	1	Architect	
12.2.	NAME OF CONSORTIUM MEMBER No.2 – ARCHITECTURAL SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]	
	INITIALS & SURNAME OF PROFESSIONALS EMPLOYED	SACAP CATEGORY OF REGISTRATION: Architect, Senior Architectural Technologist, Architectural Technologist, Candidate Architect, Candidate Senior Architectural Technologist, Candidate Architectural Technologist	SACAP REGISTRATION No.
	1		
	2		
	3		
	4		
	5		
	6		
	7		
12.3.	NAME OF CONSORTIUM MEMBER No.3 – QUANTITY SURVEYING SERVICES	[Name of Trading ENTERPRISE]	

	(NAME OF THE TRADING ENTERPRISE AS PER CSD)			
	INITIALS & SURNAME OF PROFESSIONALS EMPLOYED FOR THE SERVICES OFFERED IN THIS BID		SACQSP CATEGORY OF REGISTRATION: Professional Quantity Surveyor, Candidate Quantity Surveyor	SACQSP REGISTRATION No.
	1			
	2			
	3			
	4			
12.4.	NAME OF CONSORTIUM MEMBER No.4 – CIVIL ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)		[Name of Trading ENTERPRISE]	
	INITIALS & SURNAME OF PROFESSIONALS EMPLOYED FOR THE SERVICES OFFERED IN THIS BID		ECSA CATEGORY OF REGISTRATION: Professional Engineer, Professional Engineering Technologist, Professional Certificated Engineer, Professional Engineering Technician. Candidate Engineer, Candidate Engineering Technologist, Candidate Certificated Engineer, Candidate Certificated Engineer, Candidate Engineering Technician	ECSA REGISTRATION No.
	1			
	2			
	3			
	4			
	5			
	6			
	7			
	8			
12.5.	NAME OF CONSORTIUM MEMBER No.5 – STRUCTURAL ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)		[Name of Trading ENTERPRISE]	
	INITIALS & SURNAME OF PROFESSIONALS EMPLOYED FOR THE SERVICES OFFERED IN THIS BID		ECSA CATEGORY OF REGISTRATION: Professional Engineer, Professional Engineering Technologist, Professional Certificated Engineer, Professional Engineering Technician. Candidate Engineer,	ECSA REGISTRATION No.

		Candidate Engineering Technologist, Candidate Certificated Engineer, Candidate Certificated Engineer, Candidate Engineering Technician	
	1		
	2		
	3		
	4		
	5		
	6		
	7		
	8		
12.6.	NAME OF CONSORTIUM MEMBER No.6 – ELECTRICAL AND ELECTRONIC ENGINEERING SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]	
	INITIALS & SURNAME OF PROFESSIONALS EMPLOYED FOR THE SERVICES OFFERED IN THIS BID	ECSA CATEGORY OF REGISTRATION: Professional Engineer, Professional Engineering Technologist, Professional Certificated Engineer, Professional Engineering Technician. Candidate Engineer, Candidate Engineering Technologist, Candidate Certificated Engineer, Candidate Certificated Engineer, Candidate Engineering Technician	ECSA REGISTRATION No.
	1		
	2		
	3		
	4		
	5		
	6		
	7		
	8		
12.7.	NAME OF CONSORTIUM MEMBER No.6 – MECHANICAL ENGINEERING SERVICES	[Name of Trading ENTERPRISE]	

	(NAME OF THE TRADING ENTERPRISE AS PER CSD)			
	INITIALS & SURNAME OF PROFESSIONALS EMPLOYED FOR THE SERVICES OFFERED IN THIS BID		ECSA CATEGORY OF REGISTRATION: Professional Engineer, Professional Engineering Technologist, Professional Certificated Engineer, Professional Engineering Technician. Candidate Engineer, Candidate Engineering Technologist, Candidate Certificated Engineer, Candidate Certificated Engineer, Candidate Engineering Technician	ECSA REGISTRATION No.
	1			
	2			
	3			
	4			
	5			
	6			
	7			
8				
12.8.	NAME OF CONSORTIUM MEMBER No.8 – PRINCIPAL AGENT SERVICES FOR ADMINISTRATION OF THE JBCC AGREEMENT (NAME OF THE TRADING ENTERPRISE AS PER CSD)		[Name of Trading ENTERPRISE]	
	INITIALS & SURNAME OF PROFESSIONAL EMPLOYED FOR THE SERVICES OFFERED IN THIS BID		DISCIPLINE & CATEGORY OF REGISTRATION	REGISTRATION No.
	1			
12.9.	NAME OF CONSORTIUM MEMBER No.9 – CONSTRUCTION HEALTH & SAFETY AGENT SERVICES (NAME OF THE TRADING ENTERPRISE AS PER CSD)		[Name of Trading ENTERPRISE]	
	INITIALS & SURNAME OF PROFESSIONAL EMPLOYED FOR THE SERVICES OFFERED IN THIS BID		SACPCMP CATEGORY OF REGISTRATION: Professional Construction Health & Safety Agent (PrCHSA), Candidate Professional Construction Health & Safety Agent (PrCHSA)	SACPCMP REGISTRATION No.
	1			
	2			

	3			
12.10.	NAME OF CONSORTIUM MEMBER No.10 – PROFESSIONAL CONSTRUCTION PROJECT MANAGEMENT SERVICES – EXTERNAL STAKEHOLDER ENGAGEMENT AND SECONDARY SOCIAL DELIVERABLES (NAME OF THE TRADING ENTERPRISE AS PER CSD)		[Name of Trading ENTERPRISE]	
	INITIALS & SURNAME OF PROFESSIONAL EMPLOYED FOR THE SERVICES OFFERED IN THIS BID		SACPCMP CATEGORY OF REGISTRATION: Professional Construction Project Manager, Candidate Professional Construction Project Manager	SACPCMP REGISTRATION No.
	1			
	2			
	3			
<b>13. B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE (COMBINED)</b>				
	B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE ATTACHED (COMBINED CONSORTIUM B-BBEE STATUS LEVEL SWORN AFFIDAVIT BY ACCREDITED AUTHORITY)		YES [tick]	NO [tick]



**1.2. Part B – Terms and Conditions of Bidding**

<b>1. BID SUBMISSION:</b>
1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.
1.2. ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED – (NOT TO BE RE-TYPED) OR IN THE MANNER PRESCRIBED IN THE BID DOCUMENT. ALL MANDATORY RETURNABLE SCHEDULES TO BE COMPLETED IN FULL.
1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT, 2000 THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT (act 5 of 2011), AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017, AS AMENDED, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND SPECIAL CONDITIONS OF CONTRACT.
1.4. THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM WHICH WILL CONSIST AS A MINIMUM OF THE FOLLOWING AS DESCRIBED HEREIN. General Conditions of Contract (GCC) - Annexure B; Special Conditions of Contract – Annexure C; Form of offer – Schedule O; Contract Data – Annexure E; All other Relevant Returnable Schedules A – O.
1.5. ONLY BIDS FROM BUILT ENVIRONMENT PROFESSIONAL SERVICE PROVIDERS WHO ARE REGISTERED WITH THE RELEVANT STATUTORY BUILT ENVIRONMENT COUNCILS WILL BE CONSIDERED.
<b>2. TAX COMPLIANCE REQUIREMENTS</b>
2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.
2.2 EACH MEMBER OF THE CONSORTIUM MUST SUBMIT A SEPARATE CSD NUMBER AND PROOF OF CSD REGISTRATION COMPLIANCE
2.3 NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE, COMPANIES WITH DIRECTORS WHO ARE PERSONS IN THE SERVICE OF THE STATE, OR CLOSE CORPORATIONS WITH MEMBERS PERSONS IN THE SERVICE OF THE STATE.”

**NB: FAILURE TO PROVIDE / OR COMPLY WITH ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.**

SIGNATURE OF BIDDER: .....

CAPACITY UNDER WHICH THIS BID IS SIGNED: (CONSORTIUM LEADER)

NAME OF CONSORTIUM LEAD ENTERPRISE

.....

.....

(Proof of authority in the form of a signed Consortium agreement attached hereto)

DATE: .....

## 2. TERMS OF REFERENCE

### 2.1. Background

On 2 February 2018, the National Minister of Health, in Government Gazette No. 41419 21, published Regulation 672: Norms and Standards Regulations applicable to Different Categories of Health Establishments.

The Regulations are outlined in the accompanying document; *Ideal Hospital Realisation and Maintenance Framework Manual 2018*.

The objective of the manual is to promote and protect the health and safety of users and healthcare personnel.

This manual contains 22 sub-regulations across the following domains: User Rights, Clinical Governance and Clinical Care, Clinical Support Services, Facilities and Infrastructure, Governance and Human Resources and General Provisions.

The development of the Ideal Hospital Realisation and Maintenance Framework (IHRM-F) is a critical strategy and intervention to facilitate improved health service delivery and strengthen health system effectiveness by capacitating hospitals to identify and address key issues. The IHRM-F will serve as a benchmark mechanism to monitor Health System Strengthening activities,

An Integrated People-centred Health Services approach that encompass a continuum of care of health promotion, disease prevention, diagnosis, treatment, disease-management, rehabilitation and palliative care services, through the different levels and sites of care within the health system, over the different stages in the lifecycle of a person will be adopted.

Clinical services will be organised in terms of 24-hour services (emergency health services, obstetric and in-patient services) and eight hour services (ambulatory health services to outpatients (ideally on referral from a lower level of care), obstetric services, health support services, rehabilitation and palliative care services, diagnostic and therapeutic services). Integrated Clinical Services Management framework using the four streams of care is the platform for providing ambulatory services.

The characteristics of an “Ideal Hospital” is the following:

- Good infrastructure (i.e. physical condition and spaces, health technology, information and communication technology, adequate bulk supplies, and an appropriately managed and maintained motor vehicle fleet).
- Efficient patient administrative processes.
- Adequate and appropriately managed staff.
- Provides evidence based clinical, therapeutic and diagnostic services consistent with the defined Package of services.
- Uses patient experiences, communication and information for continuously improving quality of clinical care, optimisation of hospital processes, finance, system and risks mitigation and management.
- Complies with highest standards of corporate governance and is accountable to the community, internal and external stakeholders.

## **2.2. Clinical Service Delivery Model for the Nelson Mandela Bay Health District**

Against the background of the Ideal Hospital Realisation and Maintenance Framework (IHRM-F), the Eastern Cape Department of Health embarked on the development of a new Clinical Service Delivery Model for the Nelson Mandela Bay Health District to ensure that the goal of improved clinical outcomes in the short, medium and long term is achieved.

To achieve this goal the Eastern Cape Department of Health decided to implement infrastructure improvement projects at various Health Facilities in the Nelson Mandela Bay Health District.

## **2.3. Empilweni Hospital identified to become a District Hospital**

In terms of the proposed Service Delivery Model, the Empilweni Hospital, previously a TB Hospital was identified to accommodate District Hospital Clinical Services, including Level 1 Maternity Obstetrics Services, Casualty Centre, Mental Health, Infectious Diseases Unit and related clinical services and support services.

## **2.4. Objective of the proposed Infrastructure Improvement Scheme**

The objective is to:

- Create a conducive Hospital space which accommodates all District Hospital Clinical services and support areas to ensure the rendering of quality services in the short, medium and long term.
- Make all buildings compliant with safety regulations.
- Deliver approved building plans for all buildings at the hospital.
- Obtain Occupation Certificates for all buildings.

## **2.5. Size and Scope of Infrastructure Improvements**

The detailed Brief and Scope of the proposed infrastructure Improvements required to convert the Empilweni TB Hospital into a District Hospital is attached hereto (**Annexure A**) and as a summary, the proposed scheme consist of the following:

- **Infrastructure Scope Area 1** - Infrastructure improvements, alterations and additions to existing buildings to accommodate Level 1 Maternity & Obstetrics Services (892.32 m<sup>2</sup>)
- **Infrastructure Scope Area 2** - Alterations & Additions to existing buildings to accommodate an Accident & Emergency Centre (650 m<sup>2</sup>)
- **Infrastructure Scope Area 3** - Alterations & Additions to existing buildings to accommodate theatres (400 m<sup>2</sup>)
- **Infrastructure Scope Area 4** - Infrastructure improvements, alterations and additions to existing buildings & external works to accommodate other Clinical & Support Services (3607.68 m<sup>2</sup>)

## **2.6. Planning, Delivery, Procurement and Management of the Proposed Infrastructure**

### **Scope in terms of the FIDPM**

The strategic approach for the planning, delivery and management of *infrastructure maintenance, improvements, alterations and additions or new infrastructure* is guided by the concept of the Infrastructure Delivery Management System (IDMS), the chosen government wide system for Infrastructure Delivery.

In order to establish a common approach to infrastructure delivery across all organs of state, the National Treasury adopted the Standard for Infrastructure Procurement and Delivery Management (SIPDM). In order to give effect to the SIPDM the following guidelines were issued:

- Treasury Instructions Notes No. 4 of 2015/16 in terms of Public Finance Management Act (PFMA); and
- Circular 77 for Model Supply Chain Management (SCM) policy for Infrastructure Procurement and delivery management.

The National Treasury, in consultation with relevant stakeholders, conducted the SIPDM review, which resulted in the **Framework for Infrastructure Delivery and Procurement Management (FIDPM)**. The FIDPM prescribes minimum requirements for effective governance of infrastructure delivery and procurement management.

The Framework specifies the allocation of clear responsibilities for performing activities and making decisions at control points, stages and procurement gates. The Framework promotes the concept ‘value for money’ by organs of state throughout all the Infrastructure Delivery Management and Infrastructure Procurement Management processes and activities to promote optimal use of resources to achieve the intended outcomes. The expected deliverables shall be executed in accordance with the FIDM Project Life-cycle stages as follow:

### **STAGE 1 - INITIATION**

The details contained in this Bid Document as prescribed by the Department of Health defines project objectives, needs, acceptance criteria, organization’s priorities and aspirations, procurement strategies, and which sets out the basis for the development of the Concept Report. Planning for the Proposed Projects under the Health Department’s Infrastructure Programme focuses primarily on the Packaging” of projects, i.e. the identification of a “package” or scope to be implemented in one single contract.

The identification of a “package” or scope in one single contract is informed and guided by Need & priorities as determined by the U-Amp (User Asset Management Plan), IAMP (Infrastructure Asset Management Plan) and Strategic priorities of the Department as depicted in the IPMP Infrastructure Programme Management Plan) and B5 project list.

The proposed Infrastructure improvements at this facility form part of the list of identified facilities strategically prioritized for improvement.

### **STAGE 2 - CONCEPT**

The Concept Stage represents an opportunity for the development of different design concepts to satisfy the project requirements, as developed during Stage 1. It also presents, through the testing of alternative approaches, an opportunity to select a conceptual approach. The ultimate objective of this stage is to determine whether the project is viable to proceed, with respect to available budget, technical solutions, timeframe and other information that may be required.

The Concept Report should as a minimum, provide the following information:

- a) Condition and suitability assessment reports and as-built drawings of all buildings (all disciplines). Document the initial design criteria, cost plan, design options and the selection of the preferred design option, or the methods and procedures required to maintain the condition of infrastructure for the project.
- b) Establish the detailed brief, scope, scale, form and cost plan for the project, including, where necessary, the obtaining of site studies and construction and specialist advice.
- c) Provide an indicative schedule for documentation and construction or maintenance services, associated with the project.

- d) Include a site development plan, and other suitable schematic layouts of the architectural, civil, structural, electrical and mechanical works and bulk services.
- e) Describe the statutory permissions, funding approvals and utility approvals required to proceed with the works associated with the project.
- f) Include a baseline risk assessment for the project, and a health and safety plan, which is a requirement of the Construction Regulations, issued in terms of the Occupational Health and Safety Act.
- g) Contain a risk report linked to the need for further surveys, tests, other investigations and consents and approvals, if any, during subsequent stages and identified health, safety and environmental risk.
- h) Condition & Functionality Assessment reports of all buildings in terms of the GIAMA guidelines.

### **STAGE 3 - DESIGN DEVELOPMENT**

The Design Development Report shall as necessary:

- a) Develop in detail the approved concept to finalize the design and definition criteria.
- b) Establish the detailed form, character, function and costings.
- c) Define all components in terms of overall size, typical detail, performance and outline specification.
- d) Describe how infrastructure, elements, or components thereof are to function, how they are to be safely constructed, how they are to be maintained and how they are to be commissioned.
- e) Confirm that the project scope can be completed within the budget or propose a revision to the budget.
- f) Approved Site Development Plan from the Local Municipality Building Control Office.

### **STAGE 4 - DESIGN DOCUMENTATION**

Design documentation provides the:

- a) production information that details, performance definition, specification, sizing and positioning of all systems and components that would enable construction;
- b) manufacture, fabrication and construction information for specific components of the work informed by the production information.
- c) Approved Municipal Building Plans.

### **STAGE 5 - WORKS**

The following is required for completion of the Works Stage:

- a) Completion of the works is certified in accordance with the provisions of the contract; or
- b) The goods and associated services are certified as being delivered in accordance with the provisions of the contract.
- c) Occupation Certificate from the from the Local Municipality Building Control Office.

### **STAGE 6 – HANDOVER**

The following activities shall be undertaken during the handover stage:

- a) Finalize and assemble record information which accurately reflects the infrastructure that is acquired, rehabilitated, refurbished or maintained;
- b) Hand over the works and record information to the user organization and where necessary, train end user staff in the operation of the works.

### **STAGE 7 - CLOSE OUT**

The Close-Out Stage commences when the end user accepts liability for the works. It is complete when:

- a) Record information is archived;
- b) Defects certificates and certificates of completion are issued in terms of the contract;

## **2.7. Procurement Strategy**

- a) The type of Infrastructure Improvements required for the various Scope Areas is complex and specialist in nature and the bulk of the professional services required involves technically complex work which calls for considerable innovation, creativity, expertise and/or skills.
- b) The SANS 294, Construction Procurement Processes, Procedures and Methods, states that a contract shall not be awarded to a tenderer who cannot demonstrate that he possesses the necessary professional and technical qualifications, professional and technical competence, financial resources, equipment and other physical facilities, managerial capability, reliability, experience and reputation, and the personnel, to perform the contract. The procurement of professional services should result in the award of a professional service contract based on demonstrated competence and qualifications for the type of services required, at fair and reasonable prices.
- c) To ensure that professional service contracts are awarded to firms which have both the capacity and capability to provide the quality of the service at a reasonable price and not necessarily to those that are the least costly, the procurement strategy, pricing strategy and contracting strategy adopted to achieve quality and value for money in the professional service appointments, have the following features and elements:
  - 1. A competitive bidding procedure has been adopted, whereby Built Environment Professional Service Providers who are eligible in terms of the pre-qualification criteria applicable to this bid are invited to submit bids.
  - 2. The full and unambiguous requirements in the scope of work required have been specified with clear quantities and timelines.
  - 3. Bids are invited from Consortiums consisting of multi-discipline Built Environment Professional Members with a nominated Consortium Leader responsible for the overall co-ordination of the professional services of all the Consortium Members.
  - 4. The objective of having a consortium is to allow for an association of two or more individuals, companies, or organisations with the objective of participating in a common activity, pooling their resources to achieve a common goal. Within the consortium, each participant retains their separate legal status and the consortium's control over each participant is limited to activities involving the joint endeavour, particularly the division of profits. The consortium shall be formed by contract.
  - 5. The nominated Consortium Leader shall be a professionally registered Architect with relevant experience in the planning, delivery and management of complex health facility projects. Proof of experience of the Consortium Leader / Architect shall include the submission of copies of Practical Completion Certificates of completed health facilities related projects to the combined value of R30 million (Thirty million Rand). This forms part of the Administrative Compliance / pre-qualification Stage 1 Evaluation Criteria.
  - 6. Pricing Strategy: For the feasibility stages of the Infrastructure Improvement projects, the time-base proven cost Pricing Method has been adopted for the professional services required and once the feasibility and estimated cost have been established, a fixed Primary Fee and a Percentage Fee based on an estimated infrastructure

improvement value per Built Environment Professional Discipline Pricing Method applies.

7. The minimum qualifications of persons required to perform specific functions have been specified and proof of professional registration forms part of the Administrative Compliance / pre-qualification Stage 1 Evaluation Criteria.
8. Bidders may not claim Professional Fees for resources that are not registered with the relevant Statutory bodies. Professional Resources, including candidate professional resources employed to render services related to this bid, must be professionally registered with the relevant statutory bodies and proof of Professional Registration shall be provided on the SBD 1 form if the service is offered on the SBD 3.3 Pricing Schedule.
9. In terms of the contracting strategy, the Professional Services Contract shall be a Term Contract with the following featuring elements:
  - i. Duration of the Term Contract is a minimum of 36 months or until all milestones have been achieved by the Service Providers under conditions as described in the Special Conditions of Contract (SCC).
  - ii. Fixed hourly rates for certain time-based services shall be based on a predetermined time period during which these services must be rendered;
  - iii. A fixed Primary Fee and a Percentage Fee based on an estimated infrastructure improvement value per Built Environment Professional Discipline can be charged once the feasibility and estimated Infrastructure Improvement Cost has been established.
  - iv. Special Conditions of Contract applies to this bid and services offered. The Special Conditions of Contract (SCC) supplements the General Conditions of Contract. Whenever there is a conflict, the provisions in the SCC shall prevail.

## 2.8. Scope of Built Environment Professional Services required

The Scope of Discipline Specific Built Environment Professional Services required in this bid shall be delivered in accordance with the relevant Statutory Council's professional services guidelines and code of conduct to achieve the (FIDPM) deliverables, consisting in summary of the following as illustrated in *Table 1* here below:

*Table 1 - Summary of services required*

Infrastructure Scope Areas	Infrastructure Scope Description	Discipline Specific Built Environment Professional Services required to deliver the FIDPM End of Stage Deliverables for the Infrastructure Scope Areas	Applicable Project life-cycle Stages for this specific Infrastructure Scope Area in terms of the Framework for Infrastructure Delivery and Procurement Management (FIDPM)
			Concept Stage 2

<b>Infrastructure Scope Area 1</b>	Infrastructure improvements, alterations and additions to existing buildings to accommodate Level 1 Maternity & Obstetrics Services (892.32 m <sup>2</sup> )	1. Consortium Lead Consultancy Services; 2. Architectural Services; 3. Quantity Surveying Services; 4. Civil Engineering Services; 5. Structural Engineering Services; 6. Electrical and Electronic Engineering Services; 7. Mechanical Engineering Services; 8. Principal Agent Services; 9. Construction Health & Safety Agent Services; 10. Professional Construction Project	Design Development Stage 3
			Design Documentation Stage 4
			Works Stage 5
			Handover Stage 6
			Close-out Stage 7
		Management Services – External Stakeholder Engagement and Secondary Social Deliverables.	
<b>Infrastructure Scope Area 2</b>	Alterations & Additions to existing buildings to accommodate an Accident & Emergency Centre (650 m <sup>2</sup> )	1. Consortium Lead Consultancy Services; 2. Architectural Services; 3. Quantity Surveying Services; 4. Civil Engineering Services; 5. Structural Engineering Services; 6. Electrical and Electronic Engineering Services; 7. Mechanical Engineering Services; 8. Principal Agent Services; 9. Construction Health & Safety Agent Services; 10. Professional Construction Project Management Services – External Stakeholder Engagement and Secondary Social Deliverables.	Concept Stage 2
			Design Development Stage 3
			Design Documentation Stage 4
			Works Stage 5
			Handover Stage 6
			Close-out Stage 7
<b>Infrastructure Scope Area 3</b>	Alterations & Additions to existing buildings to accommodate theatres (400 m <sup>2</sup> )	1. Consortium Lead Consultancy Services; 2. Architectural Services; 3. Quantity Surveying Services; 4. Civil Engineering Services; 5. Structural Engineering Services; 6. Electrical and Electronic Engineering Services; 7. Mechanical Engineering Services; 8. Principal Agent Services; 9. Construction	Concept Stage 2
			Design Development Stage 3
			Design Documentation Stage 4
			Works Stage 5
			Handover Stage 6
			Close-out Stage 7



		Health & Safety Agent Services; 10. Professional Construction Project Management Services – External Stakeholder Engagement and Secondary Social Deliverables.	
<b>Infrastructure Scope Area 4</b>	Infrastructure improvements, alterations and additions to existing buildings & external works to accommodate other Clinical & Support Services (3607.68 m²)	1. Consortium Lead Consultancy Services; 2. Architectural Services; 3. Quantity Surveying Services; 4. Civil Engineering Services; 5. Structural Engineering Services; 6. Electrical and Electronic Engineering Services; 7. Mechanical Engineering Services; 8. Principal Agent Services; 9. Construction Health & Safety Agent Services; 10. Professional Construction Project Management Services – External Stakeholder Engagement and Secondary Social Deliverables.	Concept Stage 2
			Design Development Stage 3
			Design Documentation Stage 4
			Works Stage 5
			Handover Stage 6
			Close-out Stage 7

**a) Consortium Lead Consultancy Services “Principal Consultant”;**

- i. The Consortium Leader or “Principal Consultant” means the person or ENTERPRISE appointed by the Employer to manage and administer the services of all other consultants.
- ii. The Consortium Leader or “Principal Consultant” shall be a professionally registered Architect with relevant experience in the planning, delivery and management of health facility projects. Registration with the South African Council for the Architectural Profession (SACAP) (Architectural Profession Act of 2000 (Act No. 44 of 2000) is mandatory.
- iii. The Scope of the Professional Services required under this discipline shall be in alignment with the relevant Statutory Council’s professional services guidelines and code of conduct to achieve the (FIDPM) deliverables.
- iv. The “Principal Consultant” will also conduct, administer, and be responsible for minutes of “PCU” (Planning Commissioning Unit) meetings during all FIDPM stages of the proposed infrastructure scheme, with the Facility Manager and his/her core management team, as a minimum, once a month.

**b) Architectural Services.**

- i. The Scope of the Professional Services required under this discipline shall be in alignment with the relevant Statutory Council’s professional services guidelines and code of conduct to achieve the (FIDPM) deliverables.

- ii. The resources employed shall be registered with the South African Council for the Architectural Profession (SACAP) (Architectural Profession Act of 2000 (Act No. 44 of 2000));
- iii. Architectural Services include the planning and design of buildings for the use of people by the creative organization of materials and components with consideration to mass, space, form, volume, texture, structure, light, shadow, materials and the project brief;
- iv. Submit and obtain Municipal approval of a Site Development Plan and Building Plans with the aim of obtaining Occupation certificates for the various Scope Areas.
- v. As-built drawings, Condition & Functionality Assessment reports of all buildings in terms of the GIAMA guidelines
- vi. Preparing and presenting detailed Room data sheet drawings and illustrations for each room during the FIDPM Design Development Stage 3 & Design Documentation Stage 4.

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**c) Quantity Surveying Services.**

- i. The Scope of the Professional Services required under this discipline shall be in alignment with the relevant Statutory Council's professional services guidelines and code of conduct to achieve the (FIDPM) deliverables.
- ii. The resources employed shall be registered with the South African Council for the Quantity Surveying Profession (SACQSP) (Quantity Surveying Profession Act of 2000 (Act No. 49 of 2000)).
- iii. Quantity surveying (cost management) include the provision of expert, professional services and advice on construction procurement, contracting and costs.

**d) Civil Engineering Services.**

- i. The Scope of the Professional Services required under this discipline shall be in alignment with the relevant Statutory Council's professional services guidelines and code of conduct to achieve the (FIDPM) deliverables.
- ii. The resources employed shall be registered with the Engineering Council of South Africa (ECSA) (Engineering Profession Act of 2000 (Act No. 46 of 2000))
- iii. Civil engineering Services include the planning and design of earthworks, dredging and geotechnical processes, transportation, water supply and treatment, drainage and sewerage systems and storm water control and;
- iv. Geotechnical engineering Services which include the evaluation of the geotechnical characteristics of a site and the provision of specialist advice on the behavior and engineering properties of on-site earth materials and the design of earthworks and foundations for structures.
- v. As-built drawings, Condition & Functionality Assessment reports of all buildings in terms of the GIAMA guidelines.

**e) Structural Engineering Services.**

- i. The Scope of the Professional Services required under this discipline shall be in alignment with the relevant Statutory Council's professional services guidelines and code of conduct to achieve the (FIDPM) deliverables.
- ii. The resources employed shall be registered with the Engineering Council of South Africa (ECSA) (Engineering Profession Act of 2000 (Act No. 46 of 2000))
- iii. Structural engineering Services include the designing of the structures to withstand the loads that they are likely to be subjected to safely and without loss of function.

- iv. As-built drawings, Condition & Functionality Assessment reports of all buildings in terms of the GIAMA guidelines
- v. Roof truss inspections, designing new roof trusses and issuing of roof truss compliance certificates for existing trusses and new trusses.

**f) Electrical and Electronic Engineering Services;**

- i. The Scope of the Professional Services required under this discipline shall be in alignment with the relevant Statutory Council's professional services guidelines and code of conduct to achieve the (FIDPM) deliverables.
- ii. The resources employed shall be registered with the Engineering Council of South Africa (ECSA) (Engineering Profession Act of 2000 (Act No. 46 of 2000))
- iii. Electrical and Electronic Engineering Services include the planning and design of systems for generating, transmitting, distributing and utilizing electrical energy.
- iv. Electronic Engineering Services include services related to the provision of electronic systems and detailing the terminations, signals and interconnections of electronic components as distinct from conventional electrical HV, MV and LV systems and related reticulation – including but not limited to access control, nurse call systems, fire detection and alarm systems, CCTV, BMS and ICT.
- v. As-built drawings, Condition & Functionality Assessment reports of all buildings in terms of the GIAMA guidelines.
- vi. Preparing and presenting detailed Room data sheet drawings and illustrations for each room during the FIDPM Design Development Stage 3 & Design Documentation Stage 4.

**g) Mechanical Engineering Services.**

- i. The Scope of the Professional Services required under this discipline shall be in alignment with the relevant Statutory Council's professional services guidelines and code of conduct to achieve the (FIDPM) deliverables.
- ii. The resources employed shall be registered with the Engineering Council of South Africa (ECSA) (Engineering Profession Act of 2000 (Act No. 46 of 2000))
- iii. Mechanical engineering Services include the planning and design of plant and systems for lifting, hoisting and materials handling, turbines, pumps and fluid power, heating, cooling, and ventilating and air-conditioning and;
- iv. Fire engineering which includes the planning and designing of fire protection system to protect people and their environments from the destructive effects of fire and smoke.
- v. As-built drawings, Condition & Functionality Assessment reports of all buildings in terms of the GIAMA guidelines.
- vi. Preparing and presenting detailed Room data sheet drawings and illustrations for each room during the FIDPM Design Development Stage 3 & Design Documentation Stage 4.

**h) Principal Agent Services.**

- i. The role and functions of the principal agent shall be as described in the JBCC principal agreement.
- ii. Principal Agent means the person appointed to fulfil the obligations of the agreed form of contract during FIDPM Stages 5, 6 & 7.
- iii. The Scope of the Professional Services required under this discipline shall be in alignment with the relevant Statutory Council's professional services guidelines and code of conduct to achieve the (FIDPM) deliverables.

**i) Construction Health & Safety Agent Services.**

- i. The Scope of the Professional Services required under this discipline shall be in alignment with the relevant Statutory Council's professional services guidelines and code of conduct to achieve the (FIDPM) deliverables.
- ii. The Construction Health and Safety Agent shall be registered with the South African Council for the Project and Construction Management Professions (SACPCMP) (Project and Construction Management Profession Act of 2000 (Act No. 48 of 2000) as a Professional Construction Health & Safety Agent (PrCHSA) to perform the required functions.
- iii. The PrCHSA will on behalf of the client apply to the provincial director in writing at least 30 days before construction work is carried out where applicable (Depending on the contract value and the duration of the project) for a construction work permit to perform construction work.
- iv. The Construction Health and Safety Agent will manage health and safety on a construction project for the client to prevent and limit project risks.

**j) Professional Construction Project Management Services – External Stakeholder Engagement and Secondary Social Deliverables.**

- i. The Scope of the Professional Services required under this discipline shall be in alignment with the relevant Statutory Council's professional services guidelines and code of conduct to achieve the (FIDPM) deliverables.
- ii. The delivery of construction projects involves the manufacturing of a product on a site. The desire and expectations of the surrounding communities to become involved in and gain economically from projects in their area are genuine and cannot be dismissed and must be met. Local communities expect and demand participation in projects given that there are opportunities for numbers of skilled and semi-skilled persons on a site.
- iii. The SACPCMP Professional responsible for External Stakeholder Engagement and Secondary Social Deliverables management, shall under the guidance of the Consortium Lead Consultant and in liaison with all the other Consortium members:
  - a. Deal with the demands of local communities and business forums through early and regular engagements and;
  - b. Deal with the risks posed by not accommodating the demands;
  - c. Depending upon the nature of the works, identify SMME subcontracting opportunities and requirements for several trades and local materials and facilitate, conduct and manage engagements with the stakeholders.
- iv. For this programme to be successful and sustainable, the social facilitator must perform strategic and technical support in line with the expected deliverables of the programme:
  - a. To develop a social facilitation Implementing Plan.
  - b. To facilitate stakeholder engagement both at management and stakeholder level
  - c. To provide inputs to the Risk Management Plan
  - d. To develop and manage the Communication Plan
  - e. To provide input into the Monitoring and Reporting tool for the projects (with reference to employment, training and SMME development reports)
  - f. To develop and apply conflict resolution mechanisms
  - g. To craft and implement interventions and mitigation strategies

- v. Furthermore, Social facilitators deal with the day-to-day operations of the project such as:
  - a. Environmental scanning;
  - b. Identification of existing stakeholders and their role thereof;
  - c. Setting up the local governing structures, provide capacitation and ensure sign-off of the Development Charters;
  - d. Ensure smooth decanting and beneficiation processes;
  - e. Manage and monitor risk;
  - f. Manage conflict resolution between the communities and site agents.
  - g. Formulate co-ordination of the strategies and the implementation of the systems of regular reporting to the relevant structures such as PSP Team, PSC Committee, the DEPARTMENT OF HEALTH, including local structures linked to the projects such as Building Steering Committees for Health programme and other stakeholders in accordance with relevant protocols;
  - h. Create an enabling environment for the implementation of the programme, through the promotion of partnerships between the Health Districts, community structures, and the DEPARTMENT OF HEALTH & DPW & I.
  - i. Prepare documentation for proper handover of the projects once completed (report);
- vi. Ensure that all relevant legislation is complied with during project implementation;
- vii. Project Outputs/Deliverables;
  - a. Inception Report: The report shall cover an overall project plan (inclusive of a project schedule) with intermediate and final outputs, proposed methodology and identified timeframes/milestones.
  - b. Stakeholder mapping report: The report shall indicate all stakeholders that are relevant to the projects include, their interests, influence,
  - c. Evidence of stakeholder consultation and community mobilization: The minutes of all meetings held with the relevant stakeholders, including a summary of community mobilization meeting outcomes, shall be provided. In addition, practical information with clear step-by-step guidelines for field facilitators (inclusive of local community members) engaging with the community shall also be provided.
  - d. Evidence of community awareness raising: Report on all community awareness raising activities shall be provided.
  - e. Evidence of Project Steering Committee establishment: The Terms of Reference for each project Steering Committee shall be provided in a format to be agreed to with DEPARTMENT OF HEALTH. Project Steering Committee Skills Audit Report: A report outlining the skills set of members of the Project Steering Committee shall be provided.
  - f. Project Steering Committee Members' Capacitation Report: A report regarding the training of Project Steering Committee on their roles and responsibilities, procedural terms for meetings and conflict resolution shall be provided.
  - g. Final Report: An overall Social Facilitation report shall be submitted to, and accepted by the DEPARTMENT OF HEALTH & DPW & I.
  - h. Monthly EPWP Reporting
  - i. CLO duties and responsibilities

## 2.9. Sequence of Implementation of the Infrastructure Scope areas, 1, 2, 3 & 4

The Infrastructure Scope areas, 1, 2, 3 & 4 can be improved in chronological order, one Infrastructure area after another but not necessarily in the order as described, as the sequence of implementation shall be decided by the Employer on confirmation of the feasibility outcomes of the FIDPM Stages 2 & 3 and confirmation of budget.

## 2.10. Professional Services delivery sequence, duration and pricing method

The Professional Services delivery sequence, duration and pricing method in relation to the various Infrastructure Scope Areas shall be in accordance with *Tables 2 & 3* here below.

The Concept Stage 2 and Design Development Stage 3 PSP deliverables for all disciplines in relation to the different Infrastructure Scope areas, 1, 2, 3 & 4 shall be rendered simultaneously as depicted in *Table 3* here below. This is required to determine the overall feasibility of the proposed Infrastructure interventions.

**Table 2 – Concept Stage 2 & Design Development Stage 3 – Sequence of delivery of PSP Services & Pricing Method**

FIDPM Project life-cycle Stages	Infrastructure Scope Areas	Sequence of Delivery of PSP Services in relation to the Infrastructure Scope Areas	Duration (weeks)	Pricing Method (All Disciplines)
Concept Stage 2	Infrastructure Scope Area 1 (892.32 m <sup>2</sup> )	Simultaneous	6	Time based fee
	Infrastructure Scope Area 2 (650 m <sup>2</sup> )			
	Infrastructure Scope Area 3 (400 m <sup>2</sup> )			
	Infrastructure Scope Area 4 (3607.68 m <sup>2</sup> )			
Design Development Stage 3	Infrastructure Scope Area 1 (892.32 m <sup>2</sup> )	Simultaneous	8	Time based fee
	Infrastructure Scope Area 2 (650 m <sup>2</sup> )			
	Infrastructure Scope Area 3 (400 m <sup>2</sup> )			
	Infrastructure Scope Area 4 (3607.68 m <sup>2</sup> )			

The Infrastructure Scope areas, 1, 2, 3 & 4 shall be improved in chronological order, one Infrastructure area after the other but the sequence of implementation shall finally be decided by the Employer on confirmation of the feasibility outcomes of the FIDPM Stages 2 & 3 and confirmation of budget.

The Design Documentation Stage 4, Works Stage 5, Handover Stage 6 and Close-out Stage 7 PSP deliverables shall then be rendered in alignment with the order of implementation as instructed by the Employer and as preliminary depicted in *Table 3* here below:

**Table 3 – Design Documentation Stage 4, Works Stage 5, Handover Stage 6 and Close-out Stage 7 - Sequence of delivery of PSP Services & Pricing Method**

<b>FIDPM Project life-cycle Stages</b>	<b>Infrastructure Scope Areas</b>	<b>Estimated Infrastructure Improvement value</b>	<b>Sequence of Delivery of Services in relation to the Infrastructure Scope Areas</b>	<b>Duration (weeks)</b>	<b>Pricing Method (For all disciplines except SACPCMP Services)</b>
Design Documentation Stage 4	Infrastructure Scope Area 1 (892.32 m <sup>2</sup> )	R 10 707 840.00	Chronological order	8	Fixed & % Based fee
Works Stage 5	Infrastructure Scope Area 1 (892.32 m <sup>2</sup> )	R 10 707 840.00	Chronological order	52	Fixed & % Based fee
Handover Stage 6	Infrastructure Scope Area 1 (892.32 m <sup>2</sup> )	R 10 707 840.00	Chronological order	8	Fixed & % Based fee
Close-out Stage 7	Infrastructure Scope Area 1 (892.32 m <sup>2</sup> )	R 10 707 840.00	Chronological order	24	Fixed & % Based fee
Design Documentation Stage 4	Infrastructure Scope Area 2 (650 m <sup>2</sup> )	R 18 200 000.00	Chronological order	8	Fixed & % Based fee
Works Stage 5	Infrastructure Scope Area 2 (650 m <sup>2</sup> )	R 18 200 000.00	Chronological order	52	Fixed & % Based fee
Handover Stage 6	Infrastructure Scope Area 2 (650 m <sup>2</sup> )	R 18 200 000.00	Chronological order	8	Fixed & % Based fee
Close-out Stage 7	Infrastructure Scope Area 2 (650 m <sup>2</sup> )	R 18 200 000.00	Chronological order	24	Fixed & % Based fee
Design Documentation Stage 4	Infrastructure Scope Area 3 (400 m <sup>2</sup> )	R 11 200 000.00	Chronological order	8	Fixed & % Based fee
Works Stage 5	Infrastructure Scope Area 3 (400 m <sup>2</sup> )	R 11 200 000.00	Chronological order	48	Fixed & % Based fee
Handover Stage 6	Infrastructure Scope Area 3 (400 m <sup>2</sup> )	R 11 200 000.00	Chronological order	8	Fixed & % Based fee
Close-out Stage 7	Infrastructure Scope Area 3 (400 m <sup>2</sup> )	R 11 200 000.00	Chronological order	24	Fixed & % Based fee
Design Documentation Stage 4	Infrastructure Scope Area 4 (3607.68 m <sup>2</sup> )	R 12 987 648.00	Chronological order	8	Fixed & % Based fee
Works Stage 5	Infrastructure Scope Area 4 (3607.68 m <sup>2</sup> )	R 12 987 648.00	Chronological order	72	Fixed & % Based fee
Handover Stage 6	Infrastructure Scope Area 4 (3607.68 m <sup>2</sup> )	R 12 987 648.00	Chronological order	8	Fixed & % Based fee
Close-out Stage 7	Infrastructure Scope Area 4 (3607.68 m <sup>2</sup> )	R 12 987 648.00	Chronological order	24	Fixed & % Based fee

The Professional Service Provider will be appointed for the duration of the 4 Infrastructure Scope area projects, which incorporates any necessary project related extensions. Service Providers are to note

that once appointed, they will be expected to commence the work at possibly very short notices. This is due to the urgent nature of the projects. Failure to adhere to this may result in the service provider being removed from the project.

## **2.11. Pricing of Professional Fees and Disbursements**

The pricing of the Professional Fees and disbursements shall be done in accordance with the Pricing Schedule SBD 3.3. The Pricing Schedule consist of 3 Parts as follows:

### **Part 1 - Time Based Fees.**

1. Time-Based proven cost Pricing as prescribed, is applicable to all disciplines:
  - a. For FIDPM Concept Stage 2 & Design Development Stage 3;
  - b. For the Construction Health & Safety Agent Professional Services & Construction Project Management Services required for external Stakeholder Engagement & Secondary Social Deliverables during FIDPM Stages 2 to 7;
  - c. To have a basis for paying any additional Professional Services that may be required for reasons provided for in the Special Conditions of Contract (SCC).
2. The bidders shall indicate the quantity of the various categories of resources offered to perform the Services and if offered and priced, provide proof of Professional Registration on the SBD 1 form. This requirement forms part of the Special Conditions of Contract (SCC) and applicable bid responsiveness evaluation criteria.
3. The number of Hours offered and distributed across the categories of professional service shall add up and be equal to hours where prescribed by the Employer per discipline.
4. The Charge Rate / Hour offered shall include cost of the professionals employed to render the services, overheads, mark-up and profit.
5. Fee payment claims shall be on a proven cost basis with portfolio of evidence of meeting and site attendance registers, travelling log sheets and copies of deliverables etc.

### **Part 2 – Fixed Primary Fee and Percentage Based Fees**

1. Bidders are required to offer a fixed Primary Fee and a Percentage Fee based on an estimated infrastructure improvement value per Built Environment Discipline during FIDPM Stages 4-7 on all 4 Scope areas. (excluding Construction Health & Safety Agent Professional Services & Construction Project Management Services required for external Stakeholder Engagement & Secondary Social Deliverables).
2. The fees offered shall cover cost of the professionals employed to render the services, overheads, mark-up and profit.
3. Fee payment claims shall be on a proven cost basis with portfolio of evidence of meeting and site attendance registers, travelling log sheets and copies of deliverables etc.

### **Part 3 – Disbursements: Reimbursable Expenses:**

#### **1. Vehicle Travelling Costs.**

On the Pricing schedule, the following is to be noted:

- a. Bidders shall indicate the distance (return trip) from the various discipline specific PSP Office locations (As per SBD1) to various destinations as prescribed.



- b. Bidders shall indicate the Maximum Vehicle Engine Size to be used by the various discipline specific PSP's.
- c. Bidders shall indicate the Charge Rate per Km (As per Department of Transport published tariffs at the time of closing of bid).
- d. The Employer pre-determined and prescribed the number of trips for this bid in order to have a set basis to compare the bids.
- e. Reimbursement of these costs shall be on a proven cost basis with portfolio of evidence, meeting and site attendance registers, travelling log sheets and copies of deliverables etc. in support of claims.

## **2. Time Travelling Costs.**

On the Pricing schedule, the following is to be noted:

- a. Bidders shall indicate the quantity of the various categories of resources who will be travelling. In certain instances, the Employer pre-determined and prescribed the category and number of PSP's for this bid in order to have a set basis to compare the bids.
- b. Bidders shall indicate the distance (return trip) from the various discipline specific PSP Office locations (As per SBD1) to various destinations as prescribed.
- c. Bidders shall indicate the Travel Time, the No. of Hours (return trip).
- d. Bidders shall indicate the Charge Rate per Hour offered. The Charge Rate shall be fixed.
- e. The Employer pre-determined and prescribed the number of trips for this bid in order to have a set basis to compare the bids.
- f. Reimbursement of these costs shall be on a proven cost basis with portfolio of evidence, meeting and site attendance registers, travelling log sheets and copies of deliverables etc. in support of claims.

## **Part 4 – Provisional Sums**

### **1. Special Studies and Investigation Costs.**

Reimbursement of these items shall be on a proven cost basis and estimated Provisional Sums have been allowed for in the Pricing Schedule in order to have a set basis to compare the bids for:

- a. Geotechnical Investigations including laboratory tests;
- b. Topographical Technical Survey;
- c. Traffic Impact Assessment.

### **2. Typing, duplicating Costs.**

- a. Reimbursement of these costs shall be in accordance with the Public Works & Infrastructure Reimbursable tariffs applicable. An estimated Provisional Sum has been allowed for in the Pricing Schedule in order to have a set basis to compare the bids.
- b. The costs of typing, printing and duplicating work in connection with the documentation which must be done shall be reimbursable at rates applicable at the time of the execution of such work. The document "Rates for Reimbursable Expenses" as adjusted from time to time and referred to below, is obtainable on the Website: <http://www.publicworks.gov.za/> under "Documents"; "Service providers Guidelines"; item 1.

- c. If the Service Provider cannot undertake the work himself, he/she may have it done by another service provider which specialises in this type of work and he/she shall be paid the actual costs incurred upon submission of statements and receipts which have been endorsed by him/her confirming that the tariff is the most economical for the locality concerned.
  - d. Typing and duplicating expenses shall only be refunded in respect of the final copies of the following documents namely formal reports, formal soil investigation reports, specifications, feasibility reports, bills of quantities, minutes of site meetings and final accounts. The cost of printed hard covers shall only be paid in respect of documents which will be made available to the public such as bills of quantities and specifications or where provision of hard covers is specifically approved.
  - e. The typing of correspondence, appendices and covering letters are deemed to be included in the fees.
- 

### **3. EVALUATION CRITERIA**

The bid shall be evaluated as follows:

Stage 1: Administrative Compliance / pre-qualification

Stage 2: Price and B-BBEE Points

Stage 3: In Loco Inspection of all Consortium Members

#### **3.1. Stage 1: Administrative Compliance / pre-qualification**

- a. The purpose of the Administrative Compliance / pre-qualification is to determine which bid responses are compliant and non-compliant with the bid conditions issued by the Health Department as part of the bidding process.
- b. The Health Department has defined minimum pre-qualification criteria that must be met by the Bidder for the Health Department to accept a bid for evaluation. In this regard a pre-qualification verification will be carried out by the Health Department in order to determine whether a bid complies.
- c. Where the Bidder's bid fails to comply fully with any of the pre-qualification criteria, or the Health Department is for any reason unable to verify whether the pre-qualification criteria are fully complied with, the Health Department shall have the right to either:
  - i. Reject the Bid in question and not to evaluate it at all;
  - ii. Give the Bidder an opportunity to submit/or supplement the information and/or documentation provided, so as to achieve full compliance with the pre-qualification criteria, provided that such information and/or documentation can be provided within a period of 7 (seven) days, or such alternative period as the Health Department may determine, of it being requested by the Health Department and is administrative in nature, as opposed to forming a material part of the Bidder's Bid;
  - iii. In any event permit the Bid to be evaluated, subject to the outstanding information and/or documentation being submitted prior to the award of the Bid.

#### **3.2. Evaluation Criteria for Stage 1: Administrative Compliance / pre-qualification**

The following criteria shall apply:

- a. The bid documentation must be completed comprehensively and correctly.

- b. Declaration forms (SBD) must be signed.
- c. All Mandatory Returnable Schedules and information required therein to be completed in full and submitted.
- d. Bidders shall be Consortia with a Consortium Agreement and the name of the Consortium shall be the nominated Consortium Lead ENTERPRISE.
- e. Bids will only be considered from Consortia where Individual Members of the Consortium are registered Built Environment Professional Service Providers who are eligible to take part in terms of the pre-qualification criteria applicable.
- f. The nominated Consortium Leader shall be a professionally registered Architect with relevant experience in the planning, delivery and management of complex health facility projects. Proof of experience of the Consortium Leader / Architect shall include the submission of copies of Practical Completion Certificates of completed projects to the combined value of R30 million (Thirty million Rand). The value of the projects shall be indicated on the Practical Completion Certificates for ease of reference and verification and certified by a Commissioner of Oath.
- g. Bidders may not offer or claim Professional Fees and or disbursements for resources that are not registered with the relevant Statutory bodies. Professional Resources, including candidate professional resources employed to render services related to this bid, must be professionally registered with the relevant statutory bodies and proof of Professional Registration shall be provided on the SBD 1 form and Mandatory returnable schedules, if the service is offered on the SBD 3.3 Pricing Schedule.
- h. All Parts, Items and sub-items listed in the Pricing Schedule SBD 3.3 must be completed in full. In the event where the bidder elects not to offer a resource, rate fee or disbursements, the items or sub-items shall not be left blank but populated to indicate the value of NIL (0).
- i. All Consortium Members must be CSD compliant. CSD registration numbers must be provided on the SBD 1 form for all Consortium Members and proof of registration to be provided in the Mandatory returnable schedules.
- j. Only Bidders who complied with the Stage 1 Evaluation criteria may proceed to the Evaluation Stage 2.

### **3.3. Stage 2: Evaluation in terms of Price and B-BBEE Preference Point System**

#### **Step 1: Calculation of points for price**

1. The PPPFA prescribes that the lowest acceptable bid will score 80 points for price. Bidders that quoted higher prices will score lower points for price on a pro-rata basis.
2. In terms of regulation 6 of the Preferential Procurement Regulations pertaining to the Preferential Procurement Policy Framework Act, 2011 (act 5 of 2011), and the Preferential Procurement Regulations 2017 as amended, responsive bids shall be adjudicated on the 80/20 preference point system in terms of which points awarded to bidders for price is calculated as follow:

$$P_s = 80 \left( 1 - \frac{P_t - P_{\min}}{P_{\min}} \right)$$

Where:

Ps: Points scored for comparative price of bid under consideration

Pt: Comparative price of bid under consideration

Pmin: Comparative price of lowest acceptable bid

### Step 2: Calculation of points for B-BBEE status level of contributor

3. Preference points will be allocated according to the following \*table:

B-BBEE Status Level of Contributor	Number of points (80/20 system)
1	20
2	18
3	14
4	12
5	8
6	6
7	4
8	2
Non-compliant contributor	0

\* PPPFA Regulations 2017 – Reg. 5(2) and Reg.6 (2).

- Bidders are required to complete the preference claim form (SBD 6.1) and submit their original and valid B-BBEE status level verification certificate or a certified copy thereof or sworn affidavit in case of a Consortium, EMEs and QSEs at the closing date and time of the bid in order to claim the B-BBEE status level points.
- Only bidders who have completed and signed the declaration part of the preference claim form and who have submitted a B-BBEE status level certificate issued by a SANAS accredited verification agency will be considered for preference points.
- Failure on the part of the bidder to comply with above paragraphs will be deemed that preference points for B-BBEE status level of contribution are not claimed and will therefore be allocated a zero (0).
- The Department of Health may, before the bid is adjudicated or at any time, require a bidder to substantiate claims it has made regarding preference.

### Step 3: Calculation of total points scored for price and B-BBEE status level of contributor

- The points scored for price must be added to the points scored for B-BBEE status level of contributor to obtain the bidder's total points scored out of 100.
- The points scored will be rounded off to the nearest 2 decimals.
- The Bidder who scored the highest number of points out of a 100 (hundred), may proceed to the next Evaluation Stage 3.

4. In the event where the Bidder who scored the highest number of points has failed to comply with the Due Diligence In-Loco Inspection evaluation criteria, the Health Department may consider the Bidder who scored the 2nd highest points, to proceed to the next Evaluation Stage 3.

### **3.4. Stage 3: Due Diligence In-Loco Inspection of all Consortium Members**

1. As part of its due diligence obligations, the Department of Health shall do an In-Loco inspection of the offices of all Consortium Members to verify the following details:
  - a. The existence of the business ENTERPRISE as declared on the SBD1 form.
  - b. The existence of the professional resources as declared on the SBD1 and SBD 3.3 forms.
2. In the event where the In-Loco Inspections find inconsistencies and or misrepresentation in terms of what has been declared on the SBD 1 and SBD 3.3 forms, the Bidder will be notified of such inconsistencies and or misrepresentations in writing and allowed 7 (seven) days to rectify such.
3. The Bidder who complies with the Due Diligence In-Loco Inspection evaluation criteria, may then be considered for recommendation for award.
4. In the event where the Bidder has failed to rectify the inconsistencies and or misrepresentations within the 7 (seven) day period, the Health Department shall consider the Bidder who scored the 2<sup>nd</sup> highest points to proceed to the Evaluation Stage 3.

## **4. CHECKLIST OF MANDATORY RETURNABLE DOCUMENTS**

<b>Schedule List</b>	<b>Description</b>	<b>YES</b>	<b>NO</b>
Schedule A	SBD 1 - Invitation to Bid		
Schedule B	SBD 3.3 - Pricing Schedule		
Schedule C	SBD 4 - Declaration of Interest		
Schedule D	SBD 6.1 - Preference Points Claim		
Schedule E	SBD 8 - Declaration of Bidder's past Supply Chain Management practices		
Schedule F	SBD 9 - Certificate of Independent Bid Determination		
Schedule G	Signed Consortium Agreement		
Schedule H	Proof of CSD Registration of All Consortium Members		
Schedule I	B-BBEE Status Level Verification Certificate (Combined for the Consortium)		
Schedule J	Copy of letter of Good Standing with Compensation for Occupational and Injuries Disease Act (COIDA/FEM) REGISTRATION CERTIFICATE		
Schedule K	Proof of Professional Indemnity Insurance Documents		
Schedule L	Proof of Experience of the Consortium Leader / Principal Consultant - Copies of Practical Completion Certificates (Total Value of R30m)		
Schedule M	Proof of Professional Registration of all Professional and Candidate Professional Resources offered to render services and incur disbursements as per the SBD 1 and SBD 3.3 Pricing Schedule.		
Schedule N	Confirmation of Receipt of Addenda to Bid Documents		

Schedule O	Form of Offer and Acceptance		
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## 5. THE CONTRACT

1. The Contract consist of the following:
  - a. General Conditions of Contract (GCC) - Annexure B.
  - b. Special Conditions of Contract – Annexure C
  - c. Form of Offer and Acceptance – Schedule O
  - d. Contract Data – Annexure E
  - e. All returnable Schedules A – O)

## 6. ANNEXURES & RETURNABLE SCHEDULES

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### ANNEXURE A – SIZE AND SCOPE OF INFRASTRUCTURE IMPROVEMENTS

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#### CONTENTS

1. Introduction
2. Clinical Brief - Level 1 Maternity Services required at a District Hospital
3. Condition & Suitability Assessment
4. End User minimum Infrastructure improvement requirements
5. Priorities and order of intervention
6. Accommodation Schedule
7. Location Plan and Existing Layout Drawings
8. Masterplan Zoning Proposal

#### 1. INTRODUCTION

The population of Nelson Mandela Metro is currently served by 1 hospital offering a district hospital service, Uitenhage Hospital. Uitenhage Hospital, although gazetted as a provincial hospital, receives referrals from 9 CHCs, 5 of which operate 24 hours and only 2 of the 9 CHCs have A&E units. It primarily offers a district level service the population of Subdistrict B due to its location within the far North Western region of the metro.

According to the Optimum Distribution Model of the Eastern Cape Department of Health Service Delivery Model of 2017, efficient planning would see that a Level 1 district hospital is serviced by 6 CHCs. This basic information indicates a red flag that hints to a poorly functioning referral system that could place unnecessary burdens on higher levels of care.

Empilweni Hospital is conveniently situated in the South Eastern region of the metro and could, with interventions (including that of infrastructure), successfully offer a District Level 1 service to the Subdistricts A and C.

#### 2. LEVEL 1 MATERNITY SERVICES AT A DISTRICT HOSPITAL

The package of services provided at district hospitals includes trauma and emergency care, in-patient and outpatient visits; paediatrics and obstetric care. These hospitals may employ specialist family physicians, obstetrician/gynaecologists and paediatricians.

#### Functions

1. Antenatal care for high-risk women.
2. Antenatal ultrasound service.
3. Treatment of pregnancy problems, including admission to hospital.
4. Comprehensive emergency obstetric care signal functions: magnesium sulphate, intravenous antibiotics, oxytocic, vacuum delivery, removal of retained placenta, manual vacuum aspiration, neonatal resuscitation, caesarean section and blood transfusion.
5. 24-hour labour and delivery service including caesarean sections.
6. Regional and general anaesthesia.
7. Essential special investigations.
8. Postnatal care and postoperative care.
9. Contraceptive services including postpartum and elective tubal ligation.
10. Referral centre for clinics and community health centres in the district.
11. Supervision of clinics and community health centres in the district.
12. Referral of complicated problems to regional or tertiary hospitals.
13. Counselling and support services.
14. Genetic screening and counselling services.

#### Staffing

1. Advanced midwives, midwives, enrolled nurses, nursing assistants, social workers, dietician, full time medical officers and visiting specialist obstetricians.

#### Facilities & Health Technology

1. All the necessities to run an antenatal clinic including an ultrasound scanner.
2. All equipment to run a high-risk labour ward including a vacuum extractor, cardiotocograph (CTG) machines, pulse oximeters and intravenous fluid infusion pumps.
3. A 24-hour laboratory service.
4. Anthropometric equipment
5. Emergency blood.
6. Equipment and drugs for obstetric emergencies including a fully equipped resuscitation trolley and
7. defibrillator.
8. Fully equipped operating theatre.
9. X-ray facilities.
10. Reliable transport service for emergency transfer to regional or tertiary hospitals.
11. A mothers' waiting area before discharge or transfer.

### 3. CONDITION & SUITABILITY OF EXISTING HOSPITAL

The current Empilweni Hospital is classified as a specialized TB Hospital with a gazetted number of beds of 333.

The structure, however, was originally designed to function as a district hospital. Over the years, the requirements of clinical spaces and the relationship of these spaces to each other has changed, hence a condition & functional suitability assessment is needed to determine the suitability of the structure to serve as a district hospital.

With a condition & functional suitability assessment, the assessors in the built environment field will be required to evaluate the condition of the facility and its equipment to ensure that assets are operating according to established operational and safety guidelines.

#### 4. END USER MINIMUM INFRASTRUCTURE IMPROVEMENT REQUIREMENTS

The following is a needs list arising from a briefing by the Nelson Mandela Bay Health District, end users and clinicians:

##### ADMISSIONS

1. The existing admissions may be used as such in the interim, but it may need to be extended.
  2. Enough ablutions must be provided in the admissions.
- 

##### OPD

3. Remove existing furniture and open the floor plan
4. 6 consulting rooms required
5. Improve ventilation
6. Add WHBs
7. Require the following specialized services – dietician, social worker, O.T, Physio.

##### A&E/CASUALTY

8. Provide a new Casualty Emergency Centre with enough space for resus, procedure room and related services
9. A dedicated covered ambulance bay with easy access must be provided

##### X-RAY

10. Existing but needs to be upgraded and updated

##### PHARMACY

11. Must be upgraded to ensure compliance
12. Require waiting area

##### STAFF ROOMS

13. 2x Doctors' on call rooms with showers
14. Staff green room with kitchenette and lockers

##### THEATRE

15. Old theatre is being used as the boardroom
16. Relook at relationship of theatre to main corridor access – infection control
17. 2x Theatres are required



## SERVICE BUILDINGS

- 18. Laundry building to be structurally assessed
- 19. Waste area to be upgraded
- 20. Kitchen to be upgraded and number of entrances reduced
- 21. Bulk stores to be upgraded

## LEVEL 1 MATERNITY SERVICES

Focus on providing as a first step in repurposed buildings:

- 22. Post Natal & Post Operations Care Services
- 23. 2 incubators
- 24. KMC area (Kangaroo Mothers Care)
- 25. 6 Bed Nursery

## GENERAL

- 26. Filing system required
- 27. IT to be installed
- 28. Doctors' offices are required
- 29. Board room and training room are required

## PRELIMINARY CHALLENGES IDENTIFIED

- 30. Site access off the main road, traffic impact assessment and re-design of ingress and egress in compliance with relevant road traffic guidelines required.
- 31. Building orientation, functional flow and ability to expand as is
- 32. Theatre location off the main corridor
- 33. Structural stability concerns in the laundry building

## 5. SIZE AND SCOPE OF INFRASTRUCTURE IMPROVEMENTS

- 34. Infrastructure Scope Area 1 - Infrastructure improvements, alterations and additions to existing buildings to accommodate Level 1 Maternity & Obstetrics Services (892.32 m<sup>2</sup>)
- 35. Infrastructure Scope Area 2 - Alterations & Additions to existing buildings to accommodate an Accident & Emergency Centre (650 m<sup>2</sup>)
- 36. Infrastructure Scope Area 3 - Alterations & Additions to existing buildings to accommodate theatres (400 m<sup>2</sup>)
- 37. Infrastructure Scope Area 4 - Infrastructure improvements, alterations and additions to existing buildings & external works to accommodate other Clinical & Support Services (3607.68 m<sup>2</sup>)

## 6. PRIORITIES AND ORDER OF INTERVENTION

Even though the order of intervention can be prioritized and phased, a preliminary master plan has been developed from the outset. The final master planning requires allocation of spaces and indicate the relationships and flow between the different departments overall. The indicative room list guidelines (accommodation schedule) for all the departments is included under section 6.

The order of priorities are as follows:

1. Short term (80-90 beds) low acuity and step-down patients
    - a. Start with providing space for 40 adult beds – 20 male and 20 females (This service is already functioning in the existing Male & Female Medical Wards. Improvements are required for temporary interim separate admissions areas)
    - b. Provide space for Ante-Natal Post-op recovery Maternity Patients received from Dora Nganza Hospital and other facilities)
    - c. Provide space 10 KMC (Kangaroo Mother Care) beds
    - d. Provide space for 10 Paediatric beds
  2. Medium to Long term (100 - 140 beds)
    - a. Provide space for an Out-patient and Emergency Departments
    - b. Provide Space for Level 1 Maternity Services
    - c. Provide space for Theatres and post-operation short stay ward
    - d. Provide space for 24 Paediatric beds – 18 + 6 isolation
    - e. Provide Space for the Male Medical & Female Wards
-

## 7. ROOM LIST GUIDELINES FOR A 100 BED DISTRICT HOSPITAL

100 Bed District Hospital

List of Rooms

100 Bed				
Recommended Areas				
Department	Room	Qty	m <sup>2</sup> /Room	Total
<b>Front of House</b>				
<b>Main Hospital entrance &amp; reception area</b>				
Front of house- security	Security/Porters	1	9.00	9.00
Front of house- patient area	Main Waiting(40)	1	48.00	48.00
Front of house- patient area	Play area	1	9.00	9.00
Front of house- patient area	Toilets - female	2	3.50	7.00
Front of house- patient area	Toilets - male	2	3.50	7.00
Front of house- patient area	Wheelchair accessible toilet	1	4.00	4.00
Front of house- patient area	Baby Change	1	4.00	4.00
Front of house- patient area	Outpatient admissions counter/cubicles	2	3.50	7.00
Front of house- patient area	Inpatient admissions/discharge cubicles	1	3.50	3.50
Front of house- admin	Office- Transport	1	9.00	9.00
Front of house- patient area	Cashier	1	5.00	5.00
Front of house- admin	Strong Room	1	4.00	4.00
Front of house- admin	Medical Records Store	1	35.00	35.00
Front of house- admin	Open plan office - Data capturers	1	9.00	9.00
Front of house- admin	Office -Medical Records Manager's	1	12.00	12.00
Front of house- admin	Central copy area	1	4.00	4.00
Front of house- admin	Archive Store	1	25.00	25.00
Front of house- admin	Office - Home Affairs	1	10.00	10.00
Front of house- staff	Staff toilet	1	4.00	4.00
Front of house- communications	PABX - Telephone Exchange Room	1	12.00	12.00
Front of house- communications	Telkom Server	1	9.00	9.00
Nett Departmental Area				236.50
20% circulation				47.30
Total				283.80
<b>Emergency Centre</b>				
<b>Emergency Centre</b>				
Emergency Centre (External)	Helistop			
Emergency Centre (Entrance)	Ambulance Drop off	1	30.00	30.00
Emergency Centre (Entrance)	Trolley wash area (external)	1	6.00	6.00
Emergency Centre (Entrance)	Ambulance lobby	1	12.00	12.00
Emergency Centre (Entrance)	Trolley/wheelchair park	1	2.00	2.00
Emergency Centre (Entrance)	Decontamination Shower (HAZMAT), will also double up as Isolation area (include an assisted toilet)	1	14.00	14.00
Emergency Centre (Resus Area)	Resuscitation bays - adult/paediatric	2	25.00	50.00
Emergency Centre ( Majors Area)	Treatment bays	4	10.00	40.00
Emergency Centre ( Majors Area)	Nebulising chair area	1	6.00	6.00
Emergency Centre ( Majors Area)	Observation/Overnight 4 bed unit	1	41.00	41.00
Emergency Centre ( Majors Area)	Toilet and assisted shower - female	1	4.00	4.00
Emergency Centre ( Majors Area)	Toilet and assisted shower - male	1	4.00	4.00
Emergency Centre (Victims of violence)	Counselling Room	1	12.00	12.00
Emergency Centre (Victims of violence)	En suite shower & toilet to counselling	1	5.00	5.00
Emergency Centre (Support Spaces)	Body Room	1	12.00	12.00
Emergency Centre (Support Spaces)	Bay- Resuscitation trolley	1	1.00	1.00

1

# 100 Bed District Hospital

## List of Rooms

Emergency Centre (Staff Areas)	Doctors overnight facility	1	9.00	9.00
Emergency Centre (Staff Areas)	Shower/Toilet -doctors overnight	1	4.00	4.00
Emergency Centre & Outpatients share	Triage bays	1	8.00	8.00
Emergency Centre & Outpatients share	Treatment room	1	18.00	18.00
Emergency Centre & Outpatients share	Sub wait POP room & treatment	1	12.00	12.00
Emergency Centre & Outpatients share	Procedure room (scrub/setup inside)	1	32.00	32.00
Emergency Centre & Outpatients share	POP room	1	18.00	18.00
Emergency Centre & Outpatients share	POP store	1	6.00	6.00
Emergency Centre & Outpatients share	Store - Disaster	1	12.00	12.00
Emergency Centre & Outpatients share	Store - Clean Linen	1	9.00	9.00
Emergency Centre & Outpatients share	Store - Equipment	1	12.00	12.00
Emergency Centre & Outpatients share	Store - Surgical packs	1	8.00	8.00
Emergency Centre & Outpatients share	Store - Medicine	1	8.00	8.00
Emergency Centre & Outpatients share	Store - 24 hour Emergency Medicine	1	9.00	9.00
Emergency Centre & Outpatients share	Store - Medical & surgical sundries	1	8.00	8.00
Emergency Centre & Outpatients share	Store - IV fluids	1	8.00	8.00
Emergency Centre & Outpatients share	Clean Utility	1	10.00	10.00
Emergency Centre & Outpatients share	Sluice Room	1	11.00	11.00
Emergency Centre & Outpatients share	Dirty Utility	1	7.00	7.00
Emergency Centre & Outpatients share	Cleaners Room	1	5.00	5.00
Emergency Centre & Outpatients share	Staff Room with lockers	1	18.00	18.00
Emergency Centre & Outpatients share	Staff Toilet	1	3.50	3.50

*Nett Departmental Area* **474.50**  
*32% circulation* **151.84**  
*Total* **626.34**

Department	Room	Qty	m <sup>2</sup> /Room	
<b>Out-Patient Department</b>	<b>Out-Patient Department</b>			
Outpatients - patient area	Specimen collection toilet	1	4.00	4.00
Outpatients - patient area	Specimen testing area	1	4.00	4.00
Outpatients - patient area	Preparation/vitals room	1	12.00	12.00
Outpatients (TÜ)	Sputum Booth	1	4.00	4.00
Outpatients - patient area	Consulting/Counselling - Paediatrics	1	16.00	16.00
Outpatients - patient area	Consulting room adults	3	14.00	42.00
Outpatients - women's health	Consulting Room- womens health	2	14.00	28.00
Outpatients (Optometry & Ophthalmic)	Sub waiting (6)	1	10.00	10.00
Outpatients (Optometry & Ophthalmic)	Optometry - Examination room	1	20.00	20.00
Outpatients (Dental)	Sub waiting (6)	1	8.00	8.00
Outpatients (Dental)	Dental surgery	1	18.00	18.00
Outpatients (Dental)	Dental lab	1	8.00	8.00
Outpatients (Dental)	Electrical Service/Compressor	1	9.00	9.00
Outpatients ( Staff Wellness)	Sub-waiting area	1	8	8.00
Outpatients ( Staff Wellness)	Consulting/Counselling Room	1	14	14.00

*Nett Departmental Area* **205.00**  
*20% circulation* **41**  
*Total* **246.00**

100 Bed District Hospital

List of Rooms

Surgical Day & TOP Ward (4 bed/ct	Surgical Day & TOP Ward (4 bed/chairs)			
Outpatients Day Surgery & TOP	Sub Waiting	1	12.00	12.00
Outpatients Day Surgery & TOP	Nurses Station	1	9.00	9.00
Outpatients Day Surgery & TOP	Consulting room	1	14.00	14.00
Outpatients Day Surgery & TOP	Procedure room	1	32.00	32.00
Outpatients Day Surgery & TOP	4 bed unit- post op	1	41.00	41.00
Outpatients Day Surgery & TOP	En suite toilet & shower	1	5.00	5.00
Nett Departmental Area				113.00
32% circulation				36.16
Total				149.16

Department	Room	Qty	m <sup>2</sup> /Room	
<b>General Male Ward A (28 Beds)</b>				
General Male Ward A (28 Beds)	Nurses Station	1	14.00	14.00
General Male Ward A (28 Beds)	Unit Manager's Office	1	12.00	12.00
General Male Ward A (28 Beds)	Clinical administration (DUTY) room	1	12.00	12.00
General Male Ward A (28 Beds)	1 Bed unit	2	14.00	28.00
General Male Ward A (28 Beds)	En suite 1 bed unit	2	5.00	10.00
General Male Ward A (28 Beds)	2 Bed unit observation -Mental Health	1	27.00	27.00
General Male Ward A (28 Beds)	En-Suite - 2 bed unit	1	7.00	7.00
General Male Ward A (28 Beds)	6 Bed unit	4	64.00	256.00
General Male Ward A (28 Beds)	En-suite 6 bed	4	7.00	28.00
General Male Ward A (28 Beds)	Bay- Resuscitation trolley	1	1.00	1.00
General Male Ward A (28 Beds)	Bay - wheelchairs	1	2.00	2.00
General Male Ward A (28 Beds)	Clean Utility/Treatment	1	18.00	18.00
General Male Ward A (28 Beds)	Cleaners Room	1	5.00	5.00
General Male Ward A (28 Beds)	Dirty Utility	1	7.00	7.00
General Male Ward A (28 Beds)	Patient Day Lounge	1	16.00	16.00
General Male Ward A (28 Beds)	Sluice Room	1	12.00	12.00
General Male Ward A (28 Beds)	Store - Medicine	1	8.00	8.00
General Male Ward A (28 Beds)	Store - Clean Linen	1	10.00	10.00
General Male Ward A (28 Beds)	Store - Equipment	1	12.00	12.00
General Male Ward A (28 Beds)	Store - Kit	1	6.00	6.00
General Male Ward A (28 Beds)	Store - Medical/Surgical supplies	1	8.00	8.00
General Male Ward A (28 Beds)	Shared Staff Room with lockers(28)	1	16.00	16.00
General Male Ward A (28 Beds)	Staff Ablution	1	4.00	4.00
General Male Ward A (28 Beds)	Ward Kitchen	1	12.00	12.00
Nett Departmental Area				531.00
32% circulation				169.92
Total				700.92

Department	Room	Qty	m <sup>2</sup> /Room	
<b>General Female Ward B (28 Beds)</b>				
General Female Ward B (28 beds)	Nurses Station	1	14.00	14.00
General Female Ward B (28 beds)	Unit Manager's Office	1	12.00	12.00
General Female Ward B (28 beds)	Clinical administration (DUTY) room	1	12.00	12.00
General Female Ward B (28 beds)	1 Bed unit	2	14.00	28.00
General Female Ward B (28 beds)	En suite 1 bed unit	2	5.00	10.00

## 100 Bed District Hospital

## List of Rooms

General Female Ward B (28 beds)	2 Bed unit observation -Mental Health	1	27.00	27.00
General Female Ward B (28 beds)	En-Suite - 2 bed unit	1	7.00	7.00
General Female Ward B (28 beds)	6 Bed unit	4	64.00	256.00
General Female Ward B (28 beds)	En-suite 6 bed	4	7.00	28.00
General Female Ward B (28 beds)	Bay- Resuscitation trolley	1	1.00	1.00
General Female Ward B (28 beds)	Bay - wheelchairs	1	2.00	2.00
General Female Ward B (28 beds)	Clean Utility/Treatment	1	18.00	18.00
General Female Ward B (28 beds)	Cleaners Room	1	5.00	5.00
General Female Ward B (28 beds)	Dirty Utility	1	7.00	7.00
General Female Ward B (28 beds)	Patient Day Lounge	1	16.00	16.00
General Female Ward B (28 beds)	Sluice Room	1	12.00	12.00
General Female Ward B (28 beds)	Store - Medicine	1	8.00	8.00
General Female Ward B (28 beds)	Store - Clean Linen	1	10.00	10.00
General Female Ward B (28 beds)	Store - Equipment	1	12.00	12.00
General Female Ward B (28 beds)	Store - Kit	1	6.00	6.00
General Female Ward B (28 beds)	Store - Medical/Surgical supplies	1	8.00	8.00
General Female Ward B (28 beds)	Shared Staff Room with lockers(28)	1	16.00	16.00
General Female Ward B (28 beds)	Staff Ablution	1	4.00	4.00
General Female Ward B (28 beds)	Ward Kitchen	1	12.00	12.00
Nett Departmental Area				531.00
32% circulation				169.92
Total				700.92

Infectious Diseases Unit (4 Beds)				
Infectious Diseases (4 Beds)	Nurses Station	1	9.00	9.00
Infectious Diseases (6 Beds)	1 Bed male unit- XDR/MDR	2	14.00	28.00
Infectious Diseases (6 Beds)	1 Bed female unit- XDR/MDR	2	14.00	28.00
Infectious Diseases (6 Beds)	En-Suite - 1 bed unit	4	7.00	28.00
Infectious Diseases (6 Beds)	Ante Room/Gowning	2	9.00	18.00
Infectious Diseases (6 Beds)	Bay- Resuscitation trolley	1	1.00	1.00
Infectious Diseases (6 Beds)	Clean Utility/Treatment	1	18.00	18.00
Infectious Diseases (6 Beds)	Cleaners Room	1	5.00	5.00
Infectious Diseases (6 Beds)	Dirty Utility	1	7.00	7.00
Infectious Diseases (6 Beds)	Patient Day Lounge/Dining	1	16.00	16.00
Infectious Diseases (6 Beds)	Sluice Room	1	9.00	9.00
Infectious Diseases (6 Beds)	Store - Medicine	1	2.00	2.00
Infectious Diseases (6 Beds)	Store - Clean Linen	1	8.00	8.00
Infectious Diseases (6 Beds)	Store - Equipment (shared with medical ward)	0	9.00	0.00
Infectious Diseases (6 Beds)	Store - Kit- at bedside	0	6.00	0.00
Infectious Diseases (6 Beds)	Store - Medical/Surgical supplies	1	2.00	2.00
Infectious Diseases (6 Beds)	Staff Room with lockers(shared with medical ward)	0	12.00	0.00
Infectious Diseases (6 Beds)	Staff Ablution (shared with medical ward)	0	4.00	0.00
Infectious Diseases (6 Beds)	Ward Kitchen (shared with medical ward)	0	12.00	0.00
Nett Departmental Area				179.00
32% circulation				57.28
Total				236.28

Department Room Qty m<sup>2</sup>/Room

## 100 Bed District Hospital

## List of Rooms

Paediatric Ward (16 beds)				
Paediatric (16 Beds)	Nurses Station	1	12.00	12.00
Paediatric (16 Beds)	Unit Manager's Office	1	12.00	12.00
Paediatric (16 Beds)	Doctors Consulting	1	16.00	16.00
Paediatric (16 Beds) Neonates	4 incubator unit	1	36.00	36.00
Paediatric (16 Beds) Babies & Toddlers	4 Cot unit- Toddlers & Babies	1	36.00	36.00
Paediatric (16 Beds) 6 - 10 Years	4 Bed unit (juveniles)	1	45.00	45.00
Paediatric (16 Beds) 6 - 10 Years	en suite to juveniles	1	7.00	7.00
Paediatric (16 Beds) Isolation	1-bed unit - isolation	2	14.00	28.00
	en suite to isolation	2	5.00	10.00
Paediatric (16 Beds) Isolation	Ante room for isolation rooms	1	9.00	9.00
Paediatric (16 Beds) adolescents	1 bed unit - adolescents	2	14.00	28.00
Paediatric (16 Beds) adolescents	en suite to adolescents	2	5.00	10.00
Paediatric (16 Beds) 6 - 10 Years	Bathroom - shared	1	16.00	16.00
Paediatric (16 Beds) Adolescents	Patient toilet	2	4.00	8.00
Paediatric (16 Beds)	Clean Utility/Treatment	1	18.00	18.00
Paediatric (16 Beds)	Cleaners Room	1	5.00	5.00
Paediatric (16 Beds)	Sluice Room	1	11.00	11.00
Paediatric (16 Beds)	Dirty Utility	1	8.00	8.00
Paediatric (16 Beds)	Play room	1	18.00	18.00
Paediatric (16 Beds)	Store - Medicine	1	8.00	8.00
Paediatric (16 Beds)	Store - Clean Linen	1	10.00	10.00
Paediatric (16 Beds)	Store - Equipment	1	12.00	12.00
Paediatric (16 Beds)	Store - Medical/Surgical supplies	1	8.00	8.00
Paediatric (16 Beds)	Store-Toys	1	6.00	6.00
Paediatric (16 Beds)	Staff Room with lockers	1	12.00	12.00
Paediatric (16 Beds)	Staff Ablution	1	4.00	4.00
Paediatric (16 Beds)	Toilet - wheelchair accessible	1	4.00	4.00
Paediatric (16 Beds)	Bay- Resuscitation trolley	1	1.00	1.00
Paediatric (16 Beds)	Bay- Mobile equipment	1	2.00	2.00
Paediatric (16 Beds)	Bay - wheelchairs	1	1.00	1.00
Paediatric (16 Beds)	Milk Kitchen	1	12.00	12.00
Nett Departmental Area				413.00
32% circulation				132.16
Total				545.16

Department	Room	Qty	m <sup>2</sup> /Room	
<b>OBSTETRICS</b>				
Emergency Centre entrance	Covered drop off	1	12.00	12.00
Maternity (Reception)	Waiting	1	16.00	16.00
Maternity (Reception)	Reception counter	1	6.00	6.00
Maternity (Reception)	Records	1	12.00	12.00
Maternity (Reception)	Unit Manager's Office	1	12.00	12.00
Maternity (Reception)	Toilet-Wheelchair accessible	1	4.00	4.00
Maternity (Reception)	Clinical Assessment room	1	22.00	22.00
Maternity (Reception)	En suite shower & toilet assessment	1	7.00	7.00
Maternity (High Risk)	High Risk Clinic Consulting Room	1	16.00	16.00
<b>Maternity ward (24 beds)</b>				
Maternity(24 Beds)	Nurses Station	1	14.00	14.00

## 100 Bed District Hospital

## List of Rooms

Maternity(24 Beds)	1 Bed unit	2	14.00	28.00
Maternity(24 Beds)	En suite 1 bed unit	2	7.00	14.00
Maternity(24 Beds)	4 bed ante natal unit	1	45.00	45.00
Maternity(24 Beds)	En-Suite-4bed unit	1	7.00	7.00
Maternity(24 Beds)	6 Bed post natal unit	2	45.00	90.00
Maternity(24 Beds)	En-Suite- 6 bed unit	2	7.00	14.00
Maternity(24 Beds)	6 Bed Kangaroo Mother bed unit	1	45.00	45.00
Maternity(24 Beds)	En suite 3 bed unit	1	7.00	7.00
Maternity(24 Beds)	Bay- Resuscitation trolley	1	1.00	1.00
Maternity(24 Beds)	Clean Utility	1	16.00	16.00
Maternity(24 Beds)	Cleaners Room	1	5.00	5.00
Maternity(24 Beds)	Dirty Utility	1	8.00	8.00
Maternity(24 Beds)	Patient Day Lounge	1	16.00	16.00
Maternity(24 Beds)	Sluice Room (with freezer)	1	12.00	12.00
Maternity(24 Beds)	Store - Medicine	1	8.00	8.00
Maternity(24 Beds)	Store - Clean Linen	1	10.00	10.00
Maternity(24 Beds)	Store - Equipment	1	12.00	12.00
Maternity(24 Beds)	Store - Kit	1	6.00	6.00
Maternity(24 Beds)	Store - Medical/Surgical supplies	1	9.00	9.00
Maternity(24 Beds)	Staff Room with lockers	1	16.00	16.00
Maternity(24 Beds)	Staff Ablution	1	4.00	4.00
Maternity(24 Beds)	Well baby room (4 bassinets)	1	20.00	20.00
Maternity(24 Beds)	Ward Kitchen	1	10.00	10.00
	Outside recreation area			
<b>Delivery Unit</b>	<b>Birthing Unit</b>			
Maternity (Delivery)	Nurses Station	1	9.00	9.00
Maternity (Delivery)	2 bed first stage delivery room	1	30.00	30.00
Maternity (Delivery)	en suite to First stage room	1	7.00	7.00
Maternity (Delivery)	Birthing room	2	22.00	44.00
Maternity (Delivery)	Neonatal baby resus (2 stations)	1	20.00	20.00
Maternity (Delivery)	Patients Shower-assisted	1	4.00	4.00
Maternity (Delivery)	Patients Toilet- wheelchair accessible	1	4.00	4.00
Maternity (Delivery)	Store - Sterile packs	1	8.00	8.00
Maternity (Delivery)	staff change- male?	1	9.00	9.00
Maternity (Delivery)	Staff change room	1	9.00	9.00
Maternity (Delivery)	Staff shower off change area	1	3.50	3.50
Maternity (Delivery)	Staff toilet off change area	1	3.50	3.50
Maternity (Delivery)	Bay- Resuscitation trolley	1	1.00	1.00
	<i>Nett Departmental Area</i>			<b>676.00</b>
	<i>32% circulation</i>			<b>216.32</b>
	<i>Total</i>			<b>892.32</b>
<b>Mothers Lodge</b>	<b>Mothers lodge (12 beds)</b>			
Mothers' Lodge	Lounge/Dining/Kitchenette	1	25.00	25.00
Mothers' Lodge	6 Bed Unit	2	42.00	84.00
Mothers' Lodge	En-suite 6 bed unit	2	7.00	14.00
Lodge shared	Laundry & ironing room	1	12.00	12.00
Lodge shared	Outside area with clothing line	1		0.00
Lodge shared	Outside sitting area (shaded)	1		0.00
	<i>Nett Departmental Area</i>			<b>135.00</b>



100 Bed District Hospital

List of Rooms

10% circulation 21.20  
Total 156.20

Department	Room	Qty	m <sup>2</sup> /Room	
<b>Operating Theatre Suite</b>	<b>Operating Theatre Suite</b>			
OT - Entrance area	Trolley park	1	2.00	2.00
OT - Entrance area	Patient Transfer Lobby	1	9.00	9.00
OT-Pre Op area	Pre OP holding bays	2	8.00	16.00
OT-Pre Op area	Patient Toilet	1	4.00	4.00
OT - Post Op	Post Op Recovery bays	3	12.00	36.00
OT - Admin	Work station	1	6.00	6.00
OT & CSSD-Staff	Change Room with lockers -Female	1	12.00	12.00
OT & CSSD-Staff	Toilets & Showers Female	1	4.00	4.00
OT & CSSD-Staff	Change Roomwith lockers - Male	1	12.00	12.00
OT & CSSD-Staff	Toilets & Showers Male	1	4.00	4.00
OT - Clean area	Provide parking space for mobile C-arm x-ray machine	1	2.00	2.00
OT - Sterile areas	Scrub	1	11.00	11.00
OT - Sterile areas	Setting UP	1	16.00	16.00
	Theatres (general surgery ) with shared setting out room and shared scrub/gowning area	1	45.00	45.00
OT - Sterile areas	Theatre (for caesarean section 55 sqm)	1	55.00	55.00
OT - Support areas	Store - Clean Linen	1	2.00	2.00
OT - Support areas	Store - Medicine	1	6.00	6.00
OT - Support areas	Store - Medical/Surgical sundries	1	6.00	6.00
OT - Support areas	Store - Sterile packs	1	8.00	8.00
OT - Support areas	Store -Pharmaceuticals	1	4.00	4.00
OT - Support areas	Store -Anaesthetics	1	9.00	9.00
OT & CSSD- Support areas	Cleaners Room	1	5.00	5.00
OT - Support areas	Medical Gas Storage	1	2.00	2.00
	Nett Departmental Area			276.00
	35% circulation			96.6
	Total			372.60

Department	Room	Qty	m <sup>2</sup> /Room	
<b>CSSD</b>	<b>Central Sterile Supply Department</b>			
CSSD- Dirty Zone	Dirty Receiving Theatre	1	2.00	2.00
CSSD- Dirty Zone	Dirty Receiving Wards	1	2.00	2.00
CSSD & OT- Dirty Zone	Sluice Room (with freezer)	1	9.00	9.00
	Decontamination and cleaning/wash area with throughput instrument washing & drying machines	1	12.00	12.00
CSSD- Dirty Zone	Dirty Utility	1	7.00	7.00
CSSD- Dirty Zone	Trolley wash/Park	1	4.00	4.00
CSSD- Clean Zone	Clean Line Store	1	9.00	9.00
CSSD- Clean Zone	Consumables Store	1	9.00	9.00
CSSD- Clean Zone	Clean Packing area	1	12.00	12.00
CSSD- Clean Zone	Autoclaves(2 x 400Lt)	2	4.00	8.00
CSSD	Autoclave plant Room	1	8.00	8.00
CSSD- Sterile Zone	Sterile pack store	1	12.00	12.00

# 100 Bed District Hospital

## List of Rooms

CSSD- Sterile Zone	Issue - Theatre collection hatch	1	1.00	1.00
CSSD- Sterile Zone	Issue- Ward collection hatch	1	1.00	1.00
Nett Departmental Area				96.00
10% circulation				28.2
Total				124.20

Department	Room	Qty	m <sup>2</sup> /Room	
<b>Radiology</b>	<b>Diagnostic Radiology</b>			
Radiology- patient area	Waiting area (6 people)	1	12.00	12.00
Radiology- admin	Office/reception	1	9.00	9.00
Radiology support area	Trolley (patients from wards) park	1	2.00	2.00
Radiology support area	Records (electronic records will be kept, but 1x hard copy to be filed)	1	8.00	8.00
Radiology- patient area	Change cubicle patient	1	2.50	2.50
Radiology- patient area	Change cubicle wheelchair accessible	1	4.00	4.00
Radiology support area	Bay - Resuscitation trolley	1	1.00	1.00
Radiology- patient area	General X-Ray Room	1	35.00	35.00
Radiology- patient area	Ultrasound Room	1	15.00	15.00
Radiology- patient area	En suite toilet to ultrasound	1	4.00	4.00
Radiology support area	Provide parking space for 1x mobile x-ray machine	1	3.00	3.00
Radiology support area	Reporting/Viewing Room	1	9.00	9.00
Radiology support area	PACS-RIS /server room	1	6.00	6.00
Radiology support area	Store - Equipment	1	8.00	8.00
Radiology support area	Store - Consumables/Stock	1	4.00	4.00
Radiology support area	Office - Chief Radiologist	1	12.00	12.00
Nett Departmental Area				134.50
32% circulation				43.04
Total				177.54

Department	Room	Qty	m <sup>2</sup> /Room	
<b>Pharmacy</b>	<b>Pharmacy</b>			
Pharmacy- dispensing	Dispensary Waiting Area (20)	1	18.00	18.00
Pharmacy- dispensing	Dispensing counters	2	3.50	7.00
Pharmacy- dispensing	Dispensing picking - shelving area	1	18.00	18.00
Pharmacy- dispensing	Fridges area	1	2.00	2.00
Pharmacy- dispensing	Counselling/dispensing room	1	9.00	9.00
Pharmacy- admin	Office - Pharmacy Manager	1	12.00	12.00
Pharmacy- admin	Work area data capturer	1	3.00	3.00
Pharmacy-ward stock	Ward dispensing counter	1	4.00	4.00
Pharmacy-ward stock	Ward med script preparation area	1	8.00	8.00
Pharmacy - Bulk Storage	Goods Receiving enclosed area (clinic collections as well)	1	18.00	18.00
Pharmacy - Bulk Storage	Unpacking area	1	6.00	6.00
Pharmacy - Bulk Storage	Bulk Store - general	1	25.00	25.00
Pharmacy - Bulk Storage	Bulk store - ARV	1	8.00	8.00
Pharmacy - Bulk Storage	Flammable store	1	8.00	8.00
Pharmacy - Bulk Storage	Cold Room and fridges	1	4.00	4.00
Pharmacy - Bulk Storage	Schedule Drugs	1	1.00	1.00
Pharmacy - Bulk Storage	Vacoliter store with mobile racking	1	9.00	9.00

# 100 Bed District Hospital

# List of Rooms

Pharmacy- manufacturing	Store empty boxes	1	4.00	4.00
Pharmacy- manufacturing	Store bottles	1	2.00	2.00
Pharmacy- manufacturing	Store Expired or waste medicines	1	2.00	2.00
Pharmacy- Staff	Staff toilet - (wheelchair friendly)	1	4.00	4.00
Pharmacy- Clinics	Clinic stock Holding area	1	8.00	8.00
Pharmacy- Clinics	Clinic Stock Preparation area	1	6.00	6.00
Nett Departmental Area				186.00
20% circulation				37.20
Total				223.20

Department	Room	Qty	m <sup>2</sup> /Room	
<b>Allied Services</b>	<b>Allied Services (Rehabilitation)</b>			
Rehabilitation (Entrance)	Waiting	1	12.00	12.00
Rehabilitation (Entrance)	Wheelchair accessible toilet	1	4.00	4.00
Rehabilitation (Physiotherapy)	Office/Consulting - Physiotherapist/OT	1	14.00	14.00
Rehabilitation (Physiotherapy)	Gymnasium (shared Physio/OT)	1	36.00	36.00
Rehabilitation (Physiotherapy)	Gym store	1	9.00	9.00
Rehabilitation (Physio & Occupational Therapy)	Outside training area	1		0.00
Rehabilitation (Physio & Occupational Therapy)	Bay- Resuscitation trolley	1	1.00	1.00
Rehabilitation (Occupational Therapy)	Store - assistive devices	1	9.00	9.00
Rehabilitation (Audiology & Speech Therapy)	Consult/Off - Audiologist /Speech therapy	1	12.00	12.00
Rehabilitation (Audiology & Speech Therapy)	Sound Booth	1	4.00	4.00
Rehabilitation (Psychologist/Social worker)	Office/Consulting - Psychologist/Social Worker	1	12.00	12.00
Rehabilitation (Dietician)	Office/consulting - Dietician	1	12.00	12.00
Rehabilitation (Dietician)	Store room dietician	1	8.00	8.00
Rehabilitation (Storage Facilities)	Store - linen	1	2.00	2.00
Rehabilitation (Occupational Therapy)	Store - Wheelchair	1	9.00	9.00
Nett Departmental Area				144.00
25% circulation				46.08
Total				190.08

Department	Room	Qty	m <sup>2</sup> /Room	
	<b>ADMINISTRATION</b>			
Administration - Senior Management	Waiting	1	8.00	8.00
Administration - Senior Management	Reception/Admin clerks office	1	16.00	16.00
Administration - Senior Management	Office CEO	1	18.00	18.00
Administration - Senior Management	Office - Clinical services manager	1	16.00	16.00
Administration - Senior Management	Office - Nursing Services manager	1	16.00	16.00
Administration - Senior Management	Office - Human resources manager	1	12.00	12.00
Administration - HR	Strongroom	1	4.00	4.00
Administration - Senior Management	Office - Facilities Management	1	12.00	12.00
Administration - Senior Management	Office - Senior Finance Manager	1	12.00	12.00
Administration - Nursing Services	Office - Night Matron	1	12.00	12.00
Administration - Nursing Services	Office - QA manager/Infection control	1	12.00	12.00
Administration - shared	Staff Ablution - Female	1	3.50	3.50
Administration - shared	Staff Ablution - Male	1	3.50	3.50

# 100 Bed District Hospital

# List of Rooms

Administration - shared	Staff ablution - Disabled Staff	1	4.00	4.00
Administration - shared	Reprographics room (fax, photocopy, etc.)	1	9.00	9.00
Administration - shared	Telemedicine Room	1	20.00	20.00
Administration - shared	Boardroom - kitchenette adjacent	1	36.00	36.00
Administration - shared	Telemedicine Room	1	25.00	25.00
Administration - shared	Kitchen	1	7.00	7.00
Administration - shared	Store	1	4.00	4.00
Nett Departmental Area				250.00
10% circulation				25.00
Total				275.00

Department	Room	Qty	m <sup>2</sup> /Room	
<b>Bulk Stores</b>				
Supply Chain Management	Office - Supply Chain Manager's Office	1	12.00	12.00
Supply Chain Management	Offices - Clerks	1	12.00	12.00
Stores	Good receiving	1	6.00	6.00
Stores	Dispatch area	1	6.00	6.00
Stores	Secure store - surgical supplies	1	9.00	9.00
Stores	Secure store - medical supplies	1	9.00	9.00
Stores	Secure store - stationary store	1	6.00	6.00
Stores	Secure store - soap and cleaning consumables	1	9.00	9.00
Stores	Secure store - Hardware store	1	12.00	12.00
Stores	Secure store - Medical equipment Store	1	6.00	6.00
Stores	Secure store - Office equipment store	1	9.00	9.00
Stores	Secure store - Large dry store	1	9.00	9.00
Stores	Secure store - Toxic material store	1	2.00	2.00
Stores	Secure store - Flammable store	1	4.00	4.00
Stores	Condemned equipment store	1	25.00	25.00
Stores	Staff ablution - Disabled Staff	1	4.00	4.00
Stores	Dirty Utility, with space for empty boxes	1	8.00	8.00
Nett Departmental Area				148.00
15% circulation				22.20
Total				170.20

Department	Room	Qty	m <sup>2</sup> /Room	
<b>Maintenance</b>				
Maintenance Services (Management)	Hospital Engineers Office	1	10.00	10.00
Maintenance Services (Building)	General Workshop (3 work benches, 1x whb, 1x potwash sink)	1	30.00	30.00
Maintenance Services (Building)	Stores	1	12.00	12.00
Maintenance Services (Painting)	Paint Store	1	6.00	6.00
Maintenance Services (Shared)	Staff toilet	1	3.50	3.50
Nett Departmental Area				61.50
15% circulation				9.23
Total				70.73