



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: 2022-06-14

ADVERTISEMENT OF A 24 DAY BID  
REQUEST FOR PROPOSALS/QUOTATIONS

NELSON MANDELA BAY HEALTH DISTRICT  
REF.NO : SCMU3-22/23-0140-HO

**MULTI-DISCIPLINE BUILT ENVIRONMENT PROFESSIONAL SERVICES IN  
CONSORTIUM REQUIRED FOR THE INFRASTRUCTURE IMPROVEMENTS,  
ALTERATIONS AND ADDITIONS AT MAKHANDA & PORT ALFRED FORENSIC  
PATHOLOGY LABORATORIES IN SARAH BAARTHMAN HEALTH DISTRICT**

Bids/Quotations are hereby invited from a registered supplier/company to provide the above services at Nelson Mandela Bay Health District. All Bids/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 **01 JULY 2022**

Closing date is **25 JULY 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**

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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>SCMU3-22/23-0140-HO</b>	CLOSING DATE:	<b>25 JULY 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 MAKANDA &amp; PORT ALFRED FORENSIC PATHOLOGY LABORATORIES IN SARAH BAARTHMAN 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>Mrs. S. Calitz</b>				
TELEPHONE NUMBER	<b>041 3918179</b>				
E-MAIL ADDRESS	<b>susanna.calitz@echealth.gov.za</b>				
<b>NO COMPULSORY BID CLARIFICATION MEETING</b>					
<b>BID DOCUMENTS MAY BE OBTAINED FROM THE ABOVE ADDRESS AT A COST OF R 100:</b>					
<b>Please contact the Bid office for EFT arrangements and collection of bid documents</b>					
<b>BID VALIDITY PERIOD IS 120 DAYS</b>					

<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]
<b>5. SUPPLIER INFORMATION – CONSORTIUM MEMBER NO. 5</b>		
5.1.	NAME OF CONSORTIUM MEMBER No.5 – STRUCTURAL ENGINEERING SERVICES (NAME OF THE	[Name of Trading ENTERPRISE]

	TRADING ENTERPRISE AS PER CSD)	
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]
<b>6. SUPPLIER INFORMATION – CONSORTIUM MEMBER NO. 6</b>		
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]
<b>7. SUPPLIER INFORMATION – CONSORTIUM MEMBER NO. 7</b>		
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 DELIVERABLES (NAME OF THE TRADING ENTERPRISE AS PER CSD)	[Name of Trading ENTERPRISE]
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	[Name of Trading ENTERPRISE]

	ENTERPRISE - CONSORTIUM MEMBER (NAME OF THE TRADING ENTERPRISE AS PER CSD)	
	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 CONSORTIUM MEMBER No.4	[CSD No.]
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 Trading ENTERPRISE]



	(NAME OF THE TRADING ENTERPRISE AS PER CSD)		
	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.
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12.3.	NAME OF CONSORTIUM MEMBER No.3 – QUANTITY SURVEYING 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		SACQSP CATEGORY OF REGISTRATION: Professional Quantity Surveyor, Candidate Quantity Surveyor	SACQSP REGISTRATION No.
	1			
	2			
	3			
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.

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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, Candidate Engineering Technologist, Candidate Certificated Engineer, Candidate Certificated Engineer, Candidate Engineering Technician	ECSA REGISTRATION No.
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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		ECSA CATEGORY OF REGISTRATION: Professional Engineer, Professional Engineering	ECSA REGISTRATION No.

	FOR THE SERVICES OFFERED IN THIS BID	Technologist, Professional Certificated Engineer, Professional Engineering Technician. Candidate Engineer, Candidate Engineering Technologist, Candidate Certificated Engineer, Candidate Certificated Engineer, Candidate Engineering Technician	
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12.7.	NAME OF CONSORTIUM MEMBER No.7 – MECHANICAL 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.
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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]	

**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 AND SUBMITTED.
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; 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: .....

### **3. BACKGROUND AND TERMS OF REFERENCE**

#### **3.1. VARIOUS FORENSIC PATHOLOGY LABORATORIES**

When a person dies due to unnatural causes, it is required by South African Law that a post-mortem examination be performed on the deceased. Forensic Pathology Service, which is a sub-specialty of pathology, is mandated by law to investigate all these unnatural deaths.

Forensic Pathology Service (FPS) was established within the Department of Health (DoH) in 2006. The service is being rendered in 25 forensic pathology facilities across the Eastern Cape Province. Some of these facilities are classified as holding facilities, while others are classified to perform post-mortem examinations.

Forensic Pathology Service Laboratories are sensitive environments, and the related buildings are expected to maintain a high standard due to the nature of the work that is carried out in these facilities. The facilities must possess a Certificate of Compliance in terms of Regulation 363 to fulfil its mandate in terms of the management of human remains and the combatting the spread of Covid-19 and other infectious diseases. The facility must also comply with the National Health Act of 2003 (Act no. 61 of 2003) in terms of the Regulations Regarding the Rendering of Forensic Pathology Service. The facility must also satisfy the Occupational Health requirements as defined by the local authorities. Apart from the above requirements, the facilities need to comply with Chapters 10 & 11 of Section C of “National Code of Guidelines for Forensic Pathology Practice in South Africa” attached hereto as Annexure A, and “IUSS Health Facility Guides for Hospital Mortuary Services”. Over and above this, optimal security at the facility is of paramount importance.

Staff working in these environments endure a high level of stress. The Strategic Plan of ECDoH notes that “The nature of work of the department is caring for the sick and vulnerable members of the community, and therefore interventions of caring for the carers are key in delivery of quality health services...”. “There is a need to provide safe conducive working environments for all employees...”. This is especially pertinent in the sphere of FPS.

The infrastructure that accommodates FPS needs to support the vital functions of FPS, ensure compliance with relevant codes, ensure infection control is practiced; and provide for a space that supports the staff working within this challenging sphere of service.

#### **3.2. Service Delivery Optimization in the Nelson Mandela Bay Health District.**

During 2021 the Nelson Mandela Bay District held engagements with management teams across the service delivery platform and the need for a service delivery platform review was identified as a key area for attention. The appointment of the HOD in August 2021 allowed for several sessions with different stakeholders to take place where the HOD was able to convey her vision for the Department of Health. Among the key priorities highlighted by the HOD was the need to optimize the service delivery platform to achieve an efficient and cost-effective health care service delivery model.

To this end, the District Manager invited sector departments and social partners, inclusive of organised labour and NPOs as well as head office Program Managers to a service delivery platform review session held on 19 October 2021. This session was facilitated by experienced, retired health system and service managers through the Clinton Health Access Initiative (CHAI) that supports the District with MCWH and SRH.

The outcome of this session highlighted the following:



- Service delivery optimization and review is not an event but a process.
- The establishment/repurposing of a fully-fledged District Hospital at the site of Empilweni Hospital that has been identified as a quick win that would assuage the burden on both the regional and tertiary hospital platform.
- Infrastructure Improvements to all Clinics and CHC's including Forensic Pathology Laboratories to achieve Service Optimization.

#### **4. OBJECTIVE OF THIS PROPOSED INFRASTRUCTURE IMPROVEMENT SCHEME**

The objective is to:

- Create a conducive space which accommodates the identified FPL Services, bodies, staff 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.
- Obtain Occupation Certificates for all buildings.

#### **5. SCOPE OF INFRASTRUCTURE IMPROVEMENTS REQUIRED**

##### **5.1. SCOPE Areas:**

The Brief and Scope of the proposed infrastructure Improvements required at MAKHANDA, and PORT ALFRED FORENSIC PATHOLOGY LABORATORIES is described in **Annexure A** and in summary, consist of the following:

- **Infrastructure Scope Area 1** - Infrastructure improvements, including alterations & refurbishments to the Makhanda Forensic Pathology Laboratory comprising approximately, comprising 2597 sqm site area, including minor infrastructure improvements at Settlers Hospital.
- **Infrastructure Scope Area 2** - Infrastructure improvements, including alterations & refurbishments to the Port Alfred Forensic Pathology Laboratory comprising approximately 798 sqm site area, including minor infrastructure improvements at Port Alfred Hospital.

##### **5.2. Sequence of Implementation of the Infrastructure Scope areas as projects**

The sequence of and rendering of built environment professional services and or implementation of the Scope improvements as one contract or multiple contracts shall be decided by the Employer on confirmation of the feasibility outcomes of the FIDPM Stages 2 & 3 and confirmation of budget.

#### **6. INFRASTRUCTURE PLANNING, DELIVERY, PROCUREMENT AND MANAGEMENT**

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.

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). 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 FIDPM 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 these facilities 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.

### **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.

## **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 R5 million (Five 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.

## **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 PSP services required***

<b>Infrastructure Scope Areas</b>	<b>Infrastructure Scope Description</b>	<b>Discipline Specific Built Environment Professional Services required to deliver the FIDPM End of Stage Deliverables for the Infrastructure Scope Areas</b>	<b>Applicable Project life-cycle Stages for this specific Infrastructure Scope Area in terms of the Framework for Infrastructure Delivery and Procurement Management (FIDPM)</b>
<b>Infrastructure Scope Area 1 &amp; 2</b>	Infrastructure improvements, including alterations & refurbishments to existing buildings at Makhandia, comprising 2597 sqm site area & Port Alfred comprising 798 sqm site area, including minor infrastructure improvements at Settlers & Port Alfred Hospital.	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 Condition & Suitability Assessments, preparation of as-built drawings, 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.

**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

### 8.1. 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 & 4* here below.

The Concept Stage 2 and Design Development Stage 3 PSP deliverables for all disciplines in relation to the identified Infrastructure Scope areas 1 & 2 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**

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

The identified Infrastructure Scope areas 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, 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 & 2	R 5,000,000.00	Chronological order	8	Fixed & % Based fee
Works Stage 5	Infrastructure Scope Area 1 & 2	R 5,000,000.00	Chronological order	78	Fixed & % Based fee
Handover Stage 6	Infrastructure Scope Area 1 & 2	R 5,000,000.00	Chronological order	8	Fixed & % Based fee
Close-out Stage 7	Infrastructure Scope Area 1 & 2	R 5,000,000.00	Chronological order	24	Fixed & % Based fee

The Professional Service Provider will be appointed for the duration of the identified 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.

## **8.2. 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, time 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 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 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 PSPs for this bid 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 for certain categories of PSP 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 to have a set basis to compare the bids for:

- a. Geotechnical Investigations including laboratory tests.
- b. Topographical Technical and contour Survey.
- c. Tests for traces of asbestos.

### **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 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.

## **9. 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

### **9.1. 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 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.

### **9.2. 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 R5 million (Five 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.

### 9.3. 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

\* Preferential Procurement Policy Framework Act, 2011 (act 5 of 2011),

- 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.

#### **9.4. 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.

#### **10. 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 R5m)		
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		

## 11. THE CONTRACT

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

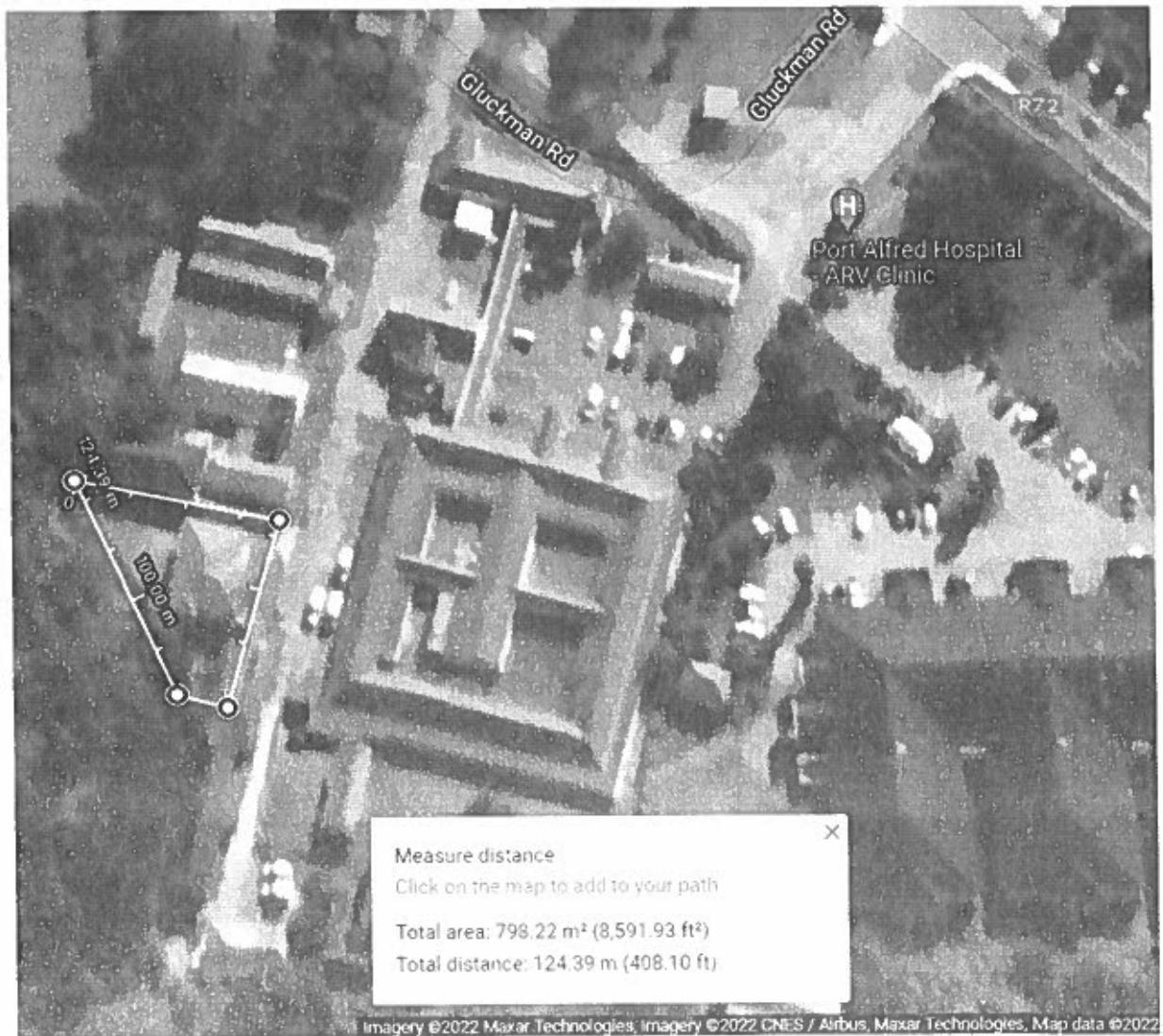
## 12. ANNEXURES & RETURNABLE SCHEDULES

### ANNEXURE A – SITE DIAGRAMS, MINIMUM INFRASTRUCTURE REQUIREMENTS AND SCOPE DESCRIPTIONS



**Site Diagram: Makhanda Forensic Pathology Laboratory – 16 Beaufort Street, Makhanda**

-33.31234215877969, 26.534403137191852



**Site Diagram: Port Alfred Forensic Pathology Laboratory**

-33.59578609617894, 26.883247851640824

## FORENSIC PATHOLOGY INFRASTRUCTURE MINIMUM REQUIREMENTS

### 1. Administration

- Offices
- Staff Green Area
- Staff ablutions
- Transition Space (between “clean” admin and “dirty” dissection)

### 2. Public

- Reception
  - Waiting Area
  - Public Ablutions
  - Body Viewing Room (This must link to the body viewing area on the dissection side, but must have no visual link to the remainder of the dissection area)
3. Police
- Separate Entrance (some facilities have requested this)
  - Police Debriefing/Interview Room
  - Police Ablutions
4. Dissection and Body Storage
- Covered Drop Off (for pathology vans and funeral parlours. Accessed via the “Yard” described below)
  - Receiving Lobby (with water point, floor drain and smooth impervious flooring. Must have adequate ventilation)
  - Dissection Area (with water point, floor drain and smooth impervious flooring. Must have adequate ventilation)
  - Body Hold with fridges and freezers (with water point, floor drain and smooth impervious flooring. Must have adequate ventilation)
  - Space for washing of equipment (this has been included in the dissection area of some of the facilities)
  - Body Viewing Area, entering from the waiting room (visual link to body viewing space on the public side) and additional bereavement office space.
  - Staff Ablutions (including toilets, showers and changing area with lockers and PPE for both male and female staff. This area works like the theatre changing rooms. It serves as a transition space between the “clean” admin and “dirty” dissection)
5. Clinical Support
- Office or space for Pathologist to write the report (within the admin area)
  - X-Ray Room (the X-Ray machines that are required are called Lodox machines. They are low radiology and may not need the usual infrastructure requirements as a general radiology space). Close access to dissection area.
6. Storage and General Services

- Specimen Store – close to dissection area, cold room and mechanically ventilates (specimens shouldn't be stored at these facilities, but it happens so there needs to be a secure space)
- Records Room
- PPE Store
- Chemical Store
- Cleaner's Store
- General Storage
- Separate Liquid Store

#### 7. External

- Secure Yard with sufficient vehicular access that will house the areas listed below (yard should have remoted controlled gates and cameras. The yard should not be visible from outside the mortuary complex)
- Medical and Municipal Waste Areas
- Covered Vehicle Wash Bay (linked to the sewer with the appropriate traps)
- Parking for visitors and staff at the front of the facility
- Generator Storage (must be secure due to theft)
- Backup Water Storage

#### 8. General Notes

- Sufficient and appropriate ventilation is important to alleviate smells in non-dissection areas
- Infection control is lacking in many of the facilities due to the requirements listed above not being in place
- Surfaces in clinical areas must be smooth and impervious (e.g., epoxy etc)
- Accessible floor drains must be installed
- Clinical WHBs should be installed in clinical area
- Access control through biometric system
- Centralised and integrated ICT system – reporting and tracing

### **SCOPE AREA 1 – Makhanda Forensic Pathology Laboratory**

#### a. General overview & Background

1. Makhanda Forensic Pathology Laboratory is situated within the town of Makhanda (previously Grahamstown), Eastern Cape Province and is attached to the Makhanda SAPS Complex.

2. The mortuary now falls under the auspices of the Eastern Cape Department of Health: Forensic Pathological Services. They assumed control in 2007.
3. The mortuary is a new facility and was built in 1992 and was upgraded in 2011.
4. The facility is a good example of a well-planned and functional Forensic Pathology Laboratory in the Eastern Cape Province.
5. There are pending building fabric maintenance issues requiring attention.
6. The mortuary is well managed.

b. The Makhanda Forensic Pathology Laboratory comprise of the following:

1. Public entrance and Reception.
2. Strong room / records room (archive).
3. Public ablutions & staff ablutions.
4. Staff change rooms with ablutions.
5. Ablution for paraplegics.
6. Public waiting room.
7. Tea Kitchen for admin offices.
8. 8 x Offices includes for:
9. Office for mortuary manager.
10. Office for visiting district medical officer.
11. General offices & spare offices.
12. 2 x -20o C Deep freeze cabinets: Trays for 06 bodies
13. 1 x +2o C Short stay cold room: Trays for 18 bodies.
14. 4 x +2o C Short stay cabinets: Trays for 24 bodies.
15. 2 x Dissection rooms with instrument storage.
16. 2 x Body viewing rooms (public trolley bay & ablutions).
17. Body reception.
18. Secure and covered off-loading bay.
19. Carports with shade cloth.
20. 4 x Service courtyards.
21. Standby generator (3 Ph).
22. 1 x Plant room with ventilation equipment & plant serving 2 x dissection rooms
23. 1 x Plant room & refrigeration space for cold room, freezers & body cabinets.
24. X-Ray facility with redundant X-ray equipment.
25. Incinerator room with incinerator – mothballed – no longer in use.

26. General storage.
27. Gatehouse & refuse facilities.
28. General external hardstand.
29. The current average annual usage is approx. 600 cases per annum. With a capacity for 48 cases at any one time, the facility has excess capacity.

c. The Makhanda Forensic Pathology Laboratory recommended Infrastructure improvements comprise of the following:

1. Floors: Carpet tiles lifting / missing. Carpet tiles badly worn in some areas. General replacement of carpet tiles recommended. Porcelain tiles in public spaces in good condition. Carpet finish in cleaners store to be replaced with porcelain tile. Epoxy floor finish, cove skirting in working areas is worn and lifting. Needs replacement. Kitchen to get porcelain tile finish.
2. Floor drains are open channel and non-complaint/unhygienic. These should be replaced with: "Rofo" type stainless steel drains with integral trap.
3. Doors: Locksets missing/malfunctioning. General maintenance required. Replace inappropriate doors. Doorstops outstanding generally. External doors badly weathered: These to be replaced with glazed aluminium. Badly damaged doors and frames in working areas to be replaced. Some doors have been broken off the hinges and floor springs.
4. Windows: Missing burglar bars. Some broken glazing to be replaced.
5. Walls /Masonry: Cracks - to be opened and exposed for assessment. Remedial work as required. Mesh key and plaster and paint. Corner protectors needed generally. Painted finish in circulation areas and working areas in bad condition. Complete redecoration / repaint is required. Bump rails to be repaired /reinstated. New bump rails required in high traffic areas. Paint finish in dissection rooms to be replaced with porcelain tiles and or polyurethane non-porous finishes.
6. Ceilings: General repainting required. Damaged/collapsed ceilings to be replaced.
7. Eaves: Cover strips loose/missing. To be re-fixed.
8. Fascia's loose – to be re-fixed. General repainting required.
9. Plumbing: No splashbacks. No elbow action taps. Exposed plumbing pipes in walls after repair. Remedial plaster and paint outstanding. Flush master at disabled ablution malfunctioning. Inappropriate. Fit cistern with fittings for disabled people. Low water pressure renders flush masters inoperable generally.

10. Refrigeration: Compressors at body cabinets and cold room are old and constantly break down. Replacement/upgrade is recommended.
11. Electrical: UPS back up inoperable. Repair required. Main D.B. No labels. No C.O.C. Daylight switches malfunctioning & need manual overrides.
12. Lighting: Lights malfunction. General upgrade needed. Check general reticulation & confirm C.O.C. Generator does not start. External lighting – upgrade required.
13. Security Items Requiring Upgrade: Burglar Bars not installed at all windows. To be corrected and a uniform level of security applied. Electric fence is required on top of perimeter fence. CCTV system ineffective. Needs to be expanded.
14. Mechanical Ventilation: Ventilation at the dissecting room is not to IUS standard. This requires upgrade to include Fresh Air injection and extraction. No “Air zone” purifies. Split unit air-conditioners & space heaters require maintenance. Ventilation at reception to be upgraded. The provision of A.C. is inconsistent. Rational approach required. Ventilation at dissection rooms malfunctioning. Fans have been removed and not returned. There is no fresh air injection where split unit A.C. units have been installed. Ventilation system required complete overhaul/rational design.
15. Functionality:
  1. Storage: Additional file storage required at reception. Additional file storage required at Manager’s office. Archive storage is inadequate. This is a problem as case files cannot be destroyed and need to be kept well after the usual 5-year term. Additional archive required.
  2. Planning of door swings and plinths at main store to be addressed.
  3. Unit manager requested provision of additional storage and suggested conversion of delivery bay adjacent to garage into an additional store.
  4. Dissection rooms: Poorly planned. A lot of wasted space. Insufficient work surface. Ventilation inoperative. Poor lighting.
  5. X – Ray: X ray inoperative: No electrical connection. Unsafe door: No lead lining for radiation protection. No bump rails.
16. General:
  1. Body scale (on site) has never been installed.
  2. There is no vehicle wash bay. Service vehicle is washed in the access road and wastewater run off (contaminated) is into the S.W. system.



3. Replace wash line for drying of dissection clothes when washed.
4. Computer system is out of date (still works on DOS) and should be upgraded. Courtyard braai facility adjacent to dissection room is inappropriate. Should be removed.
5. Rainwater tank plumbing incorrectly installed. Water recirculates. To be rectified.
6. Polyurethane non-porous flooring finish required.

## **SCOPE AREA 2 – Port Alfred Forensic Pathology Laboratory.**

### **a. GENERAL OVERVIEW:**

1. Port Alfred Mortuary is situated within the town of Port Alfred, Eastern Cape Province and is part of the Port Alfred Provincial Hospital infrastructure. This is adjacent to but should not be confused with the Port Alfred Netcare Facility. The mortuary falls under the auspices of the Eastern Cape Department of Health: Forensic Pathological Services, managed from Grahamstown. The mortuary is a new facility and was built approximately between 2005 – 2008. The facility is currently in infrequent use and not adequately staffed.
2. The facility is poorly planned and does not comply with IUSS planning requirements.
3. The mortuary is well managed and has been well maintained generally.

### **b. The mortuary comprises of the following:**

1. Public entrance and Reception.
2. Public ablutions.
3. Staff ablutions & shower.
4. Managers Office.
5. Tea Kitchen (accessed through Managers office).
6. 2 x Offices for staff (access from body reception area).
7. Public waiting area.
8. Trays for 09 bodies.
9. Body reception & viewing space (one space: no privacy).
10. External covered loading bay.
11. Service yard (walled).
12. The current average annual usage is a maximum 200 cases per annum.  
With a capacity for 9 cases at any one time, the facility has excess capacity.

13. In the event of cold storage failure or an emergency, arrangements are in place with Netcare and Marjorie Parrish hospital to accommodate any overflow
- c. The Port Alfred Forensic Pathology Laboratory recommended Infrastructure improvements comprise of the following:
1. Functionality & recommended Infrastructure improvements:
  2. The facility is poorly planned and does not comply with IUSS norms & standards. The facility is unmanned (has no permanent staff). The facility acts as a holding unit only and cases are transferred to Grahamstown for dissection / autopsy. Body viewing arrangements are poor.
  3. There is no dedicated viewing room.
  4. There is no sensitivity regarding accommodation of the family of the bereaved.
  5. There is currently direct access to the body display area from the viewing passage, which is also a general circulation area.
  6. There is no dissection facility and no storage of dissection equipment.
  7. There is minimal general storage. Should the facility become manned and operational in future, additional storage will be required (filing, stationery, records, equipment, chemicals).
  8. There is no archive.
  9. There is no standby generator.
  10. There is no Telkom connection (There is a network box – unused).
  11. Body reception & offloading bay is secured by a galvanised security gate only & is not weatherproof:
  12. Body cabinets are exposed to the elements and are rusting as window openings are unglazed.
  13. Security:
  14. There is no burglar alarm.
  15. Burglar bars are not secure (light weight).
  16. The periphery of the building (yard and parking) can be easily accessed. The perimeter wall does not offer a high level of security. Installation of electric fencing recommended.
  17. Galvanised security gates (front & rear entrance doors) are of good robust quality.
  18. 3 x Body Cabinets: Rusting – exposed to the elements. 1 x body cabinet is not working. There is no hydraulic body lift. Top tiers of body cabinets

cannot be accessed unaided by mortuary vehicle driver on his own. The actual maximum usage potential is 6 body trays (lower 2 tiers). There is no long stay (-20oC ) facility.

19. General

1. Plumbing / taps. Water pressure is low. There is no hot water.
2. Inadequate fire-fighting equipment.
3. Electrical – fluorescent lights in operative.
4. Storage should the facility become operational:
5. Additional file storage at reception.
6. Additional file storage required at Manager's office.
7. There is no archive. This is a problem as case files cannot be destroyed and need to be kept well after the usual 5-year term.
8. There is no storage for chemicals. According to OHS these elements are to be stored independently.
9. There is adequate space on site or in the service yard to position a storage container if needed.
10. New HVAC installation to existing Identification Room required.
11. Polyurethane non-porous flooring finish required.

## **ANNEXURE B – (GCC) GENERAL CONDITIONS OF CONTRACT**

### **THE NATIONAL TREASURY**

**Republic of South Africa**



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### **GOVERNMENT PROCUREMENT: GENERAL CONDITIONS OF CONTRACT**

**July 2010**

**GOVERNMENT PROCUREMENT**  
**GENERAL CONDITIONS OF CONTRACT**  
**July 2010**

**NOTES**

The purpose of this document is to:

- (i) Draw special attention to certain general conditions applicable to government bids, contracts and orders; and
- (ii) To ensure that clients be familiar with regard to the rights and obligations of all parties involved in doing business with government.

In this document words in the singular also mean in the plural and vice versa and words in the masculine also mean in the feminine and neuter.

- The General Conditions of Contract will form part of all bid documents and may not be amended.
- Special Conditions of Contract (SCC) relevant to a specific bid, should be compiled separately for every bid (if applicable) and will supplement the General Conditions of Contract. Whenever there is a conflict, the provisions in the SCC shall prevail.