

Detailed Evaluation Criteria –Rendering of Fire, Rescue and Medical services for Grootvlei Power Station

	Factors (Desktop evaluation) Phase 1	Weight	Sub-factor	Score	Weight xScore
1	Mandatory Requirements 1. Submit two valid EMS operating license certificates from Department of Health, issued at Mpumalanga province and Gauteng province.	Yes/No	If No: company automatically fails		
2	Calibration certificates Submit valid calibration certificates of all electronic medical equipment, up to a scope of an ILS. As per table 3.	0-25	No submission	0	
			All calibration certificates submitted	25	
3	Company experience and Refence to provide the service: (Tracible refences and experience) Number of years for similar work. Provide Evidence(Contracts, purchase orders or appointment letters)	0-15	No Experience	0	
			3 Years (with Proof)	5	
			5 Years (with Proof)	10	
			7 Years and more (with Proof)	15	
4	Health Professions Council of South AfricaCompliance. Submit valid HPCSA practice cards including CPDand CPGs for all personnel that will report on site.(18 Personnel)	0-25	No submission	0	
			Valid HPCSA Practice cards only.	15	
			Valid HPCSA Practice cards andCPDs only.	20	
			All- Valid HPCSA Practice cards, CPDs and CPGs.	25	

5	Organogram, Curriculum Vitae, and Qualifications. Has the contractor supplied an organogram reflecting all the skills and qualifications (qualifications for critical skills as listed in the scope of work) required to execute the scope? Submit Curriculum Vitae of 18 personnel that will report on site with their Qualifications as per Annexure A on the Scope of Work.	0-25	No Submission	0	
			Organogram only	5	
			Organogram, Curriculum Vitae with Qualifications as Per Annexure A on the Scope of Work.	25	
6	List of Equipment Has the contractor provided a list of equipment available to execute the task as prescribed in table 3 of the scope of work? Did the contractor produce proof of ownership of the equipment, or a lease agreement between the Contractor (lessee) and the lender (lessor) in the case of leased equipment?	0-10	No Submission	0	
			35 With proof of ownership	10	
			70 With proof of ownership	15	
Total		100%			

Threshold for (Desktop evaluation)Phase 1

The threshold on the technical evaluation criteria for phase 1 is 80%. Suppliers / Service providers would be deemed unacceptable if they score less than the threshold score and will thus not be evaluated further.

The Employer reserves a right to re-interview/re-assess employees whenever a need arises. Should an employee be found not to be performing according to expectations, the Employer may request the employee to be removed from site and be replaced by a suitable candidate.

Base evaluation (Phase 2)					
1	Ambulance evaluation (List of equipment) Physical evaluation of the ambulance and equipment up to the scope of an ILS. As per table 3 of the scope of work	0-40	No ambulance and equipment	0	
			Ambulance up to the scope of an ILS and equipment all in place.	40	
2	Medical Record books (with company letter head and practice number) Patient Report Form Declaration of death book ILS and BLS drug book Refusal of hospital treatment Ambulance checklist	0-25	No record books	0	
			All required books in place	25	
3	Functionality of the Ambulance stretcher Is the stretcher adjusting to different positions, including a flat position for patient transport, a seated position for patient care.	0-15	Stretcher not functioning properly	0	
			Full functionality of the stretcher	15	
4	Oxygen Cylinders Physical condition of the cylinders and valid proof of hydrostatic pressure test. (Two x Main O2 cylinders and 3x portable ones)	0-20	Poor physical condition of cylinders and no proof of pressure test	0	
			Good physical condition of cylinders and with proof of pressure test.	20	
TOTAL		100 %			

Threshold for (Base evaluation)Phase 2

The threshold on the technical evaluation criteria for phase 2 is 80%. Suppliers / Service providers would be deemed unacceptable if they score less than the threshold score and will thus not be evaluated further.

The Employer reserves a right to re-interview/re-assess employees whenever a need arises. Should an employee be found not to be performing according to expectations, the Employer may request the employee to be removed from site and be replaced by a suitable candidate.

Technical evaluation done by: _____ (Name of end-user)

Signature: _____

Date: _____

Approved By: _____ (Name of line manager)

Signature: _____

Date: _____