



TENDER FOR THE PROVISION OF SUPPORT SERVICES
AT UNIVERSITY HOSPITAL SHARJAH

TENDER NO. **UHS/SERVICES/TENDER/0001/2022**
Closing Date: **10th of January 2022**

University Hospital Sharjah
University City Sharjah
United Arab Emirates

SECTION 1 INSTRUCTIONS AND INFORMATION FOR TENDERERS

1. INVITATION TO TENDER

Tenders are sought by University Hospital Sharjah for the provision of support services listed below:

- 1) Housekeeping Services & Glass Cleaning Services – Document A
- 2) Laundry Services- – Document B
- 3) Porter Services – Document C
- 4) Catering Services- – Document D

The Tenderer shall be deemed to have satisfied themselves before submitting its tender as to the accuracy and sufficiency of the rates and prices stated in their tender which shall (except in so far as is otherwise provided in the Contract) cover all the Contractor's obligations under the Contract and the Contractor shall be deemed to have obtained for itself all necessary information as to risks and any other circumstances which might reasonably influence or affect the Contractor's tender.

2. SUBMISSION OF TENDER

Tenders should be submitted in two sealed envelope and submitted to Administration Office Finance Department- UHS not later than **4pm on 10th January 2021** (Tenders received after this time will NOT be considered):

- a. **The Service Specification Offer** (PLEASE DO NOT INDICATE ANY FINANCIAL VALUE IN THIS). If requested for additional clarifications and details these needs to be submitted to University Hospital Sharjah- (Engineering and Support Services Department).
 - i. The Service Specification offer should conform to the requirement specified in the "Compliance Sheet" in this tender.
 - ii. The tenderer shall submit valid Commercial Licenses and other permits from various Government Agencies.
 - iii. Bills of Quantities/ Pricing Schedule (Unpriced Part).
- b. **The Financial Offer** address to Director of Finance and Administration, University Hospital Sharjah.
 - i. The Service specification offer should conform to the requirement specified in the "Compliance Sheet" in this tender.
 - ii. List of Reference hospitals where the tenderer has existing contracts related to the services being sought by University Hospital.
 - iii. The tenderer shall submit valid Commercial Licenses and other permits from various Government Agencies.
 - iv. Bills of Quantities/ Pricing Schedule (Priced Part).

Should you have any queries or if you are having any problems in submitting your offers you may contact Materials Management Department- University Hospital Sharjah.

Contact Details: Christopher Claveria

Mobile No. 0566 737 139

Email: christopher.claveria@uhs.ae

The tender submission must be submitted in hard copy in 2 separate envelopes labeled as service specification and financial as stated above. Telephoned, faxed or emailed submissions will not be accepted.

It is the responsibility of the Tenderer to ensure that its tender submission and clarification, responses has been submitted in the prescribed manner and in accordance with the specified deadline issued by the University Hospital Sharjah.

Incomplete and late response from the tenderer will be considered as incomplete submission of tender and may be rejected.

All submissions must be in English and prices in AED, exclusive of VAT.

2. PAYMENT TERMS

The University Hospital Sharjah shall pay the contractor within 60 (sixty) days of the date of receipt of the completed invoices together with the necessary supporting documents.

3. CONTRACT PERIOD

The Contract is anticipated to start on 1st of March and will initially be awarded for a period of two years and subject to performance as agreed on contract award, there will be an option to extend for a further 1 year, to be reviewed annually and subject to written agreement by both parties.

4. CLARIFICATION

Before submitting a tender, clarification should be sought on any points of doubt. The deadline for receipt of points for clarification if any shall be sought by the tenderer until 3 days from closing date of the tender. During the tender period requests for clarification can be made by email or in person, requests for clarification must be made via the email Ruschell.Querubin@uhs.ae

Responses to clarification will be communicated by University hospital Sharjah by email. University Hospital Sharjah reserves the right to issue clarification responses to all tenderer at any stage when it believes, at its sole discretion if the clarification is valid (not mentioned in the tender document) or if necessary.

The tenderer will be expected to have satisfied itself that the tender price submitted will cover all expenses and obligations under the Contract, the

Specification and the Conditions are acceptable, before the tender is submitted. No claims can subsequently be made for omissions.

5. DOCUMENTS

As a part of the Tender document, the contractor are requested to provide their valid Trade License, Name and Designation of the Managing Director/General Manager/Sr. Manager who has authority to bind their company for business relationship and power of attorney if authority are delegated.

6. WRITTEN ACCEPTANCE

Acceptance by the University Hospital Sharjah will only be made by written service contract to the successful tenderer.

7. EXPENDITURES

The University Hospital Sharjah shall not be responsible for, or pay for, any expenses or losses that may be incurred by any tenderer in preparing their tender proposals. It is the responsibility of prospective tenderers to obtain for themselves, at their own expense, any additional information necessary for the preparation of their tenders.

8. CONFIDENTIALITY

Tenderers should treat the tender documents as private and confidential between the tenderer and the University Hospital Sharjah. Tenderers should note that the UHS shall use the tender documents for the purposes of evaluation and that the tender documents held will be kept in line with UHS policy.

9. RIGHT TO ISSUE FURTHER INSTRUCTIONS

During the tendering period, the University Hospital Sharjah reserves the right to make changes to the Contract Documentation and the tenderer upon mutual agreement shall accept such changes. Should it be necessary for the UHS to amend the tender documentation in any way, prior to receipt of tenders, all tenderers who have submitted documents will be notified simultaneously via updating documents in UHS website or by email.

10. SUSTAINABLE DEVELOPMENT, ENVIRONMENTAL MANAGEMENT AND BIODIVERSITY

The University Hospital Sharjah is committed to the principles of Sustainable Development, Environmental Management and protection of biodiversity. All tenderers should be aware of the Hospital Sustainability and Environmental

Policy and agree to abide within its principles. Tenders must follow and adhere to any Environmental Management procedures concerning the provision of goods, supplies and services to the UHS. The UHS is committed to furthering the conservation of biodiversity and requires tenders to be mindful of this and where appropriate ensure that goods and services do not adversely affect local or global biodiversity.

11. TRAININGS

The tenderer must provide schedule list of continuous training programs for various services offered by the tenderer, and shall undertake those programs during the contract period in a manner compliant with the hospital policies and procedure.

12. COMPLIANCE

Tenders must be submitted in accordance with the tender compliance sheet. Failure to comply may result in a Tender being rejected by the UHS. *(Tenderer shall submit the compliance sheet with stamp and signed by authorized signatory as acceptance of the terms and condition of the tender)*

University Hospital Sharjah will be constantly evaluating the compliance of Contracted Terms and consistency throughout the duration of the contract. Should Vendors not be meeting the requirements of University Hospital Sharjah, we reserve the right to cancel the contract giving 1 month notice.

13. PERIOD TENDERS ARE TO BE HELD OPEN

Tenders must remain valid for acceptance for a period of **three months** from the closing date for submission of tenders.

COMPLIANCE SHEET

(Tenderer shall submit the compliance sheet with stamp and signed by authorized signatory as acceptance of the terms and condition of the tender)

TENDERERS AGREES TO THE SCOPE OF WORK AND COMPLETE DOCUMENT A – HOUSEKEEPING SERVICES

Scope of Work

The contractor shall comply with all the requirements set out in this General Service specification relevant to the delivery of the Housekeeping and Glass cleaning services.

- a. Complete Housekeeping services for all internal and common areas of the hospital and administration offices.
- b. Complete Glass Cleaning Services, The glass cleaning services consists of:
 - i. Cleaning services including schedule and reactive cleaning;
 - ii. Planned cleaning
 - iii. Dome cleaning
 - iv. Staff accommodation glass areas
- c. The contractor shall be responsible for the cleaning of all external and internal areas, to the standards and monitoring frequencies required and agreed with the UHS to ensure highest standard of cleanliness, these includes functional areas as mentioned in table 2 below.
- d. The contractor shall be responsible for deploying the necessary cleaning devices to facilitate housekeeping including external glass cleaning.
- e. Complete external glass cleaning services including the glass dome and atrium roofs and all high level glass.

PART 1

- 2) Tenderers must list **three** contracts that are similar in scope and complexity to this contract and that have been operational for a minimum of one year within the past **five** years.
- 3) Tenderers must give a detailed description of these contracts scope and number of manpower, validity dates and copies of KPI's, awards or recommendations.

PART 2- Specification Requirements

Service Specification

A Service specification together with a reference data sheet as attached in table 1 (performance monitoring method). The reference data sheet provides the following key information together with specific recommendation data:-

- 1) Performance Monitoring Methods
 - a. This is generic list of various methods available. For each entry on the service specification, one or more of the methodologies needs to be selected.
- 2) Risk Categories and Audit Frequencies
 - a. Five generic risk categories are defined together with the frequency of service output audit required for each level. The higher the risk group, the more frequent the audits needs to be.
- 3) Reactive Cleaning response and rectification times
 - a. Definition of reactive cleaning request categories and the response and rectification time that needs to be achieved for each type of request.

The service specification incorporates the following key elements:

- a. Policies and Procedures

The service specification provides cross reference to our policies and standard Operating Procedures (SOPs) in relation to management, staffing and service. For each and every key tasks a cross reference is provided. The referenced policy or SOP defines their performance level as per table 1 (performance monitoring method).
- b. Service Inputs

For the above scope of work, the service specification shall provide full input details for each key task as follows:

 - Location – based on a 5 level tree structure i.e. Site, Building, Floor, Section and Rooms
 - Elements- all elements to be cleaned in the specific location.
 - Performance level- cross reference to policies, SOPs and other performance specification documents that will required to be mutually agreed e.q. service timings, etc.
 - Task Frequency- how frequency the task is carried out
 - Risk group- the level of risk associated with the location or task (audit frequencies shall be set as per table 2)
 - Monitoring method- the method by which the specified performance levels shall be measured and monitored.

Table 1 (*Performance Monitoring Method*)

Ref	Performance Parameters	Performance Failure Category	Tolerance	Remedial Period	Monitoring Method
1	<p>The contractor shall submit to the hospital for approval prior to service commencement and undertake quarterly review of this schedule to ensure they continue to support hospital activities.</p> <p>The contractor shall ensure that schedule cleaning is undertaken within the access time included within the Appendix A except where expressly permitted by the hospital representative in advance.</p>	Major	5%	3 Days	Schedules in place. Quarterly review undertaken.
2	The Contractor shall make available a current cleaning schedule to the hospital within 2 hours of the request.	Major	5%	2 hours	Determined by Default
3	The contractor shall ensure that schedule cleaning in VERY HIGH RISK function areas has been completed in accordance with the cleaning schedules agreed with the hospital and the services standards	Major (for each room affected)	0%	10 minutes	Determined by Default
4	The contractor shall ensure that schedule cleaning in HIGH RISK function areas has been completed in accordance with the cleaning schedules agreed with the hospital and the services standards	Major (for each room affected)	0%	20 minutes	Determined by Default
5	The contractor shall ensure that schedule cleaning in SIGNIFICANT RISK function areas has been completed in accordance with the cleaning schedules agreed with the hospital and the services standards	Medium (for each room affected)	0%	30 minutes	Determined by Default
6	The contractor shall ensure that schedule cleaning in LOW RISK function areas has been completed in accordance with the cleaning schedules agreed with the hospital and the services standards	Minor (for each room affected)	5%	1 hour	Determined by Default
7	The contractor shall ensure that all cleaning practices comply with the hospital Infection control Policy and Procedure	Major	5%	1 Day	Monthly Review of cleaning practices. Determined by Default

8	Emergency Ad-Hoc Services Requests for cleaning duties are attended within the attendance time.	Major (for each room affected)	0%	15 minutes	Determined by Default
9	Emergency Ad-Hoc Services Requests for cleaning duties are attended within the completion time.	Major (for each room affected)	0%	30 minutes	Determined by Default
10	Urgent Ad-Hoc Services Requests for cleaning duties are attended within the Attendance time.	Medium (for each room affected)	0%	45 minutes	Determined by Default
11	Urgent Ad-Hoc Services Requests for cleaning duties are attended within the completion time.	Medium (for each room affected)	0%	2 hours	Determined by Default
12	Routine Ad Hoc Services request for cleaning duties are attended within attendance time	Minor (for each room affected)	5%	30 minutes	Determined by Default
13	Routine Ad Hoc Services request for cleaning duties are attended within completion time	Minor (for each room affected)	5%	4 hours	Determined by Default
Planned Cleaning					
14	the contractor shall agree the requirements for planned cleaning with the hospital prior to service commencement and undertake a quarterly review of this activity to ensure they continue to support hospital activities	Medium	0%	1 week	Quarterly review undertaken with hospital representative.
15	The contractor shall ensure that planned activities have been completed within the completion times within the service standards	Medium (for each room affected)	0%	1 week	Determined by Default
Barrier Cleaning					
16	The contractor shall undertake barrier cleaning procedures to include MRSA cleans, when requested by the hospital, in accordance with the hospital policies and 'Saving Lives: a delivery program to reduce healthcare associated infection (HCAI) including MRSA (reference and published by NHS UK)	Major (for each room affected)	0%	1 hour	Determined by Default
17	The contractor shall ensure that the procedures to be adopted for barrier cleaning have been agreed with the hospital prior to implantation	Major	0%	1 week	Quarterly review undertaken
Materials and Cleaning Equipment					
18	The contractor shall ensure all cleaning equipment used in the delivery of the cleaning services shall be cleaned in	Major	0%	1 Day	Determined by Default

	accordance with the Hospital control Infection policies.				
19	The contractor shall ensure that all cleaning equipment used in the in the delivery of the services is stored to avoid any disruption to the hospital activities when not in use.	Major	0%	1 Day	Determined by Default
20	The contractor shall ensure that cleaning equipment and materials designated for use in specific location are clearly marked and used only those specific locations	Major	0%	30 minutes	Determined by Default
Additional Domestic Duties					
21	The contractor shall ensure feminine hygiene dispensers are stocked and disposal	Major	0%	1 hour	Determined by Default

Table 2 – Functional Area categorization

Category	Operational Status	Functional Areas included in Category
1	Very High Risk	Intensive Care Unit (ICU) Neonatal ICU and Special Baby Care Unit Isolation Rooms Operating Theatres Special Needs Areas
2	High Risk	CSSD Accident and Emergency Unit (Pharmacy Specialist Areas) Wards Maternity CCU Pathology/Laboratory Public thoroughfares
3	Significant Risk	Day Activity Areas Rehabilitation Areas Residential Accommodation General Pharmacy Kitchens Mortuary Medical Imaging Outpatient clinics Treatment and procedure rooms Cafeteria On-call bedrooms/Overnight stay rooms Engineering/ Technical Areas
4	Low Risk	Administrative Areas Non Sterile Supplies Areas Storage Areas

Table 3- Attendance and Completion times

Category	Attendance Time	Completion Time
Emergency	15 minutes	1 hour
Urgent	20 minutes	2 hours
Routine	30 minutes	3 hours
Planned		Within 20 minutes of agreed start time.

PART 3 - BOQ

Housekeeping Services pricing- BOQ

Item	Description	Number	Rate/ Number	Total Rate
1	Male Housekeepers	23		
2	Female Housekeepers	38		
3	Male Supervisor	2		
4	Female Supervisor	1		
5	Male Glass Cleaning Staff	2		
Total		66		

Note: Above rates are applicable for 12 hour per day duty completion by each staff.

Part 4- Assumptions

Item	Description	Reference
1	Price are quoted by UAE Dirhams	All
2	Prices are quoted on per calendar month basis	All
3	Distribution of staff to various areas within University Hospital Sharjah & Staff Accommodation shall be manage by the Cleaning Services upon approval from the Support Services Department of the Hospital. The proposed staff distribution as per table below.	All
4	Staff will work 6 days per week and 12 hours per day. All Staff will make use of the University Hospital Sharjah's electronic attendance system. To allow for minor delays in staff transportation and queuing for registration a tolerance of +/- 10 minutes will be applied for all staff. However that delays if any are to be adequately compensated. They payment shall be made on the basis of aggregate attendance of the month. The contractor may also maintain a manual	All

	attendance record which will be signed off daily by the hospital representative to verify the University Hospital Sharjahs electronic records.	
5	Rates include the adequate provision and maintenance of all cleaning equipment, consumables and standard paper hygiene products. The cost of biocidal hand soap and sanitizer is not included. The UHS shall provide them which shall be refilled by the contractor housekeeping staff.	All
6	The List of quantity and specification of all cleaning equipment will be provided by the tenderer and shall ensure availability upon commencement of the contract.	All
7	All Glass surface frames must be free from concrete, paints, glue and other building waste material prior to commencement of the glass cleaning services.	All
8	A provision sum of 25,000/- AED for high level access equipment (reach and wash) shall be procured and deployed by the contract and the pricing reference above has taken into account the deployment of the equipment	All
9	Maintenance, repair and replacement of all equipment supplied by UHS is excluded.	All
10	Completion and adherence to Key Performance Indicators monitoring	All

Distribution Table (Housekeeping):

Sample Distribution of Staff to be decided by the University Hospital Sharjah.

SN	Location	SHIFTS			
		7am to 7pm		7pm to 7am	
		M	F	M	F
1	Ground Floor				
	Main Lobby/ OPD				
	Cath-lab				
	Emergency				
	NICU/Pediatric				
	OB-Gyne Ward				
	Imaging Department				
2	First Floor				
	Surgical Ward				
	Operation Theatre				
	Labour & Delivery				
	ICU				
	Himchan- UHS Spine and Join				
	Laboratory				
	Administration				
3	2 nd Floor and 3 rd Floor VIP				
	Nursing Accommodation				
	Doctors Accommodation				
	Basement				
	CCU				
	Garbage Collection				
	Floor Maintainer (Floor Polishing)				
	Male Supervisor				
	Female Supervisor				
	Total				
	Total Male Cleaner	23			
	Total Female Cleaner	38			
	Housekeeping Supervisor	2			
	Female Supervisor	1			
	Total Staff	64			

Key Performance Indicators (Housekeeping):



PERFORMANCE INDICATOR MONITORING				
Department	Housekeeping			
Indicator title	Patient Room Cleaning Monitoring (inpatient rooms)			
Dimensions of Healthcare Quality	<input type="checkbox"/> Safety	<input type="checkbox"/> Effective	<input checked="" type="checkbox"/> Efficient	<input type="checkbox"/> Equitable Healthcare
	<input type="checkbox"/> Timeliness	<input type="checkbox"/> Patient - Centered		
Rationale	To monitor the cleaning in the patient room with high quality of standard to ensure the readiness of the room for the next admission.			
Selection Criteria	<input type="checkbox"/> High Risk	<input checked="" type="checkbox"/> Problem Prone	<input type="checkbox"/> Others:	
	<input type="checkbox"/> High Volume	<input type="checkbox"/> High Cost		
Data Definition:	Monitoring of the cleanliness of discharged inpatient rooms			
Numerator	Number of items done on the discharged patient rooms in the audit checklist			
Denominator	Total number of items on the discharged patient room audit checklist			
Data Outcome	<input type="checkbox"/> Percentage	<input type="checkbox"/> Number	<input type="checkbox"/> Ratio	<input type="checkbox"/> Others:
Inclusion(s)	All cleanable items and areas inside the discharged inpatient rooms			
Exclusion(s)	Medical equipments and bed linens			
Type of measure	<input checked="" type="checkbox"/> Process	<input type="checkbox"/> Structure	<input type="checkbox"/> Outcome	
Source of Data	Cleaning audit checklist for inpatient rooms			
Data collection tool				
Data Collection Methodology				
Reporting Frequency	Monthly	Data Collection Methodology	<input type="checkbox"/> Retrospective	<input checked="" type="checkbox"/> Concurrent
Target	100%			
Benchmark & Reference	Internal Comparison			
Responsibility	Facility and Support Services Manager			
Data Collector				
Reported to	Quality Department			

PERFORMANCE INDICATOR MONITORING				
Department	Housekeeping			
Indicator title	Emergency Room Cleaning Monitoring			
Dimensions of Healthcare Quality	<input type="checkbox"/> Safety	<input type="checkbox"/> Effective	<input checked="" type="checkbox"/> Efficient	
	<input type="checkbox"/> Timeliness	<input type="checkbox"/> Patient - Centered	<input type="checkbox"/> Equitable Healthcare	
Rationale	To monitor the cleaning in the emergency room with high quality of standard to ensure the readiness of the room for the next admission.			
Selection Criteria	<input type="checkbox"/> High Risk	<input checked="" type="checkbox"/> Problem Prone	<input type="checkbox"/> Others:	
	<input type="checkbox"/> High Volume	<input type="checkbox"/> High Cost		
Data Definition	Monitoring of the cleanliness of discharged emergency rooms			
Numerator	Number of items done on the discharged emergency rooms in the audit checklist			
Denominator	Total number of items on the discharged emergency room audit checklist			
Data Outcome	<input type="checkbox"/> Percentage	<input type="checkbox"/> Number	<input type="checkbox"/> Ratio	<input type="checkbox"/> Others:
Inclusion(s)	all cleanable items and areas inside the discharged emergency rooms			
Exclusion(s)	Medical equipments and bed linens			
Type of measure	<input checked="" type="checkbox"/> Process	<input type="checkbox"/> Structure	<input type="checkbox"/> Outcome	
Source of Data	Cleaning audit checklist for inpatient rooms			
Data collection tool				
Data Collection Methodology				
Reporting Frequency	Monthly	Data Collection Methodology	<input type="checkbox"/> Retrospective	<input checked="" type="checkbox"/> Concurrent
Target	100%			
Benchmark & Reference	Internal Comparison			
Responsibility	Director of Engineering and Support Services			
Data Collector				
Reported to	Quality Department			

TENDERERS MUST COMPLETE DOCUMENT B – LAUNDRY SERVICES

Scope of Work

The following list of activities represents our proposed scope of work. The following included and excluded services have been considered.

1. Included
 - a. Full support for JCI accreditation and re-accreditation including documented policies and procedure as required.
 - b. Full training, support and supervision from laundry services provider.
 - c. Collect and segregate all laundry items from the hospital.
 - d. Complete Linen laundry management (washing, Drying, press, storage and distribution across the hospital functional areas, including collection of soiled linens/uniforms)
 - e. Continuously review and monitor the quality standards in the performance of the laundry services.
 - f. Electronic Records keeping of laundry items in circulation along with the laundry items collected and delivered by third party laundry provider (if applicable) and prepare monthly invoices based on the rates agreed.
 - g. Check, repair and recycle for alternative use all items of the linen whenever possible. Maintaining the record soft copy and hard copy of linens issued to the external laundry team for cleaning and a monthly report to be submitted for review.
 - h. Working in coordination with the Infection Control team to ensure working practices are aligned and the infection risk are minimized at all times.
 - i. Linen stock and management and linen inventory.

2. Exclusion
 - a. Replacement of laundry items.

PART 1 - BOQ

Laundry Services pricing- BOQ

Item	Description	Number	Rate/ Number	Total Rate
1.01	Laundry Staff	2		

Note: Above rates are applicable for 12 hour per day duty completion by each staff.

Part 2- Assumptions

Item	Description	Reference
2.1	Price are quoted by UAE Dirhams	All
2.2	Prices are quoted on per calendar month basis	All
2.3	Laundry prices are quoted on a per piece basis as per table below. The fixed monthly rate in above 1.01 is charged on a calendar month basis.	All
2.4	The fixed monthly charge is for the provisions of 2 laundry staff (Tailor and laundryman)	All
2.5	Staff will work 6 days per week and 12 hours per day. All Staff will make use of the University Hospital Sharjah's electronic attendance system. To allow for minor delays in staff transportation and queuing for registration a tolerance of +/- 10 minutes will be applied for all staff. However that delays if any are to be adequately compensated. They payment shall be made on the basis of aggregate attendance of the month. The contractor may also maintain a manual attendance record which will be signed off daily by the hospital representative to verify the University Hospital Sharjahs electronic records.	All

Part 2- Laundry Rates

No.	Description	Contracted Rate
1	Bed Sheet	
2	Blanket	
3	Pillow Case	
4	Bath Towel	
5	Hand Towel	
6	Fitted Sheet	
7	Mattress Protector	
8	Pillow	
9	Duvet	
10	Duvet Cover	
11	Pjyama Top	
12	Pjyama Bottom	
13	Scrub Suit Top	
14	Scrub Suit Bottom	
15	Patient Gown Adult	
16	Patient Gown Child	
17	Baby Dress/ NBG	
18	Baby Towel	
19	Baby Blanket	
20	Baby Sheet	
21	Baby Mittens	
22	Baby Cap	
23	Draw Sheet	
24	Laundry Bag	
25	Prayer Mat/Bath Math	
26	Curtain	
27	Dr. Coat	
28	CSSD Towels	
29	Small Blanket	
30	Incubator/ NICU Bed Cover	
31	Snudgel Up	
32	New Born Gown/ Jump Suit	

Tenderers agrees to the scope of work and complete **Document C – Portering Services**

Scope of Work

The following list of activities represents our proposed scope of work. The following included and excluded services have been considered.

3. Included

- a. Complete portering services for all internal areas of the hospital and administrative offices.
- b. External grounds portering within the boundary wall
- c. Portering services for all hospital inpatient and outpatient clinics
- d. Movement of hospital line and staff uniforms laundry to the nominated sites
- e. Items/task identified elsewhere in this agreement.

4. Exclusion

- a. Portering outside the scope of this agreement
- b. Portering jobs undertaken voluntarily and at the request of patients which are not forming part of the agreement.

Part 1 Service Specifications

A Service Specification together with a Reference Data sheet is attached. The Reference Data sheet provides the following key information together with specific recommended data:-

- **Table 1 – Performance Monitoring Methods**

This is a generic list of various methods available. For each entry on the Service Specification, one or more of these methodologies needs to be selected.

- **Table 2 – Risk Categories and Audit Frequencies**

Five generic risk categories are defined together with the frequency of service output audits required for each level. The higher the risk group, the more frequent the audits need to be.

- **Table 3 – Reactive Portering response and rectification times**

Definition of reactive Portering request categories and the response and rectification time that needs to be achieved for each type of request.

The draft Service Specification incorporates the following key elements:-

- **Policies and Procedures**

The Service Specification provides cross-references to our Policies and Standard Operating Procedures (SOPs) in relation to management, staffing and services. For each and every key task a cross-reference is provided. The referenced Policy or SOP defines our performance level.

- **Service Inputs**

For the above scope of work, the Service Specification shall provide full input details for each key task as follows:-

- Location
Based on a 5-level tree-structure i.e. Site. Building, Floor, Section and Room
- Performance Level
Cross-reference to Policies, SOPs and other performance specification documents that will be required to be mutually agreed e.g. menu profiles, Service timings, Laundry stock levels, etc.
- Task Frequency
How frequently the task is carried out
- Risk Group
The level of risk associated with the location or task (audit frequencies shall be set as per Table 2)
- Monitoring Method
The method by which the specified performance levels shall be measured and monitored

Table-1 (Performance Monitoring Method)

1. Specific Requirements

Ref	Performance Parameters	Performance Failure Category	Tolerance	Remedial Period	Monitoring Method
<i>Movement of patients</i>					
	The Contractor shall respond to requests for the intra-site movement of patients utilising appropriate forms of patient transport in accordance within the Attendance Times and Patient Movement Times set out in Appendix A.	Major	5%	1 Hour	Helpdesk records. Determined by default.
SP01	Emergency requests for patient movements are Attended within the Attendance Time.	Major	0%	20 minutes	Helpdesk records. Determined by default.
SP02	Emergency requests for patient movements are Completed within the Patient Movement Time.	Major	0%	30 minutes	Helpdesk records. Determined by default.
SP03	Urgent requests for patient movements are Attended within the Attendance Time.	Medium	0%	30 minutes	Helpdesk records. Determined by default.
SP04	Urgent requests for patient movements are Completed within the Patient Movement Time.	Medium	0%	30 minutes	Helpdesk records. Determined by default.

SP05	Routine requests for patient movements are Attended within the Attendance Time.	Minor	5%	3 hours	Helpdesk records. Determined by default.
SP06	Routine requests for patient movements are Completed within the Patient Movement Time.	Minor	5%	30 minutes	Helpdesk records. Determined by default.
SP07	Planned requests for patient movements are Attended within the Attendance Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
SP08	Planned requests for patient movements are Completed within the Patient Movement Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
SP09	Dedicated Portering Staff will be required to operate in the following departments under the direct supervision of a clinical manager performing Portering related tasks as directed: A&E; Assessment Unit; Diagnostic Imaging; Pharmacy; Pathology; Endoscopy OutPatients; Theatres, Wards	Medium	5%	1 hour	Suitably qualified Staff available in accordance with agreed roster.
<i>Movement of deceased patients and mortuary duties.</i>					
SP10	The Contractor shall Attend requests to move deceased patients from clinical areas to the mortuary in accordance with the Urgent Attendance Time as set out in Appendix A.	Medium	[5%]	30 minutes	Helpdesk records. Determined by default.
SP11	The Contractor shall Complete the movement of deceased patients to the mortuary in a sensitive manner that maintains the dignity of the deceased at all times. The route taken should avoid public areas wherever possible. Requests shall be Completed within the Urgent Completion Time as set out in Appendix A.	Medium	5%	30 minutes	Helpdesk records. Determined by default.
SP12	Any Porters used in the movement of the deceased	Medium	5%	1 day	Monthly review of

	must receive training relating to the needs of the bereaved appropriate to the religious beliefs of the deceased.				Staff records. No reported non-compliances.
SP13	The Contractor shall, in accordance with Helpdesk records. Determined by default. procedures, provide out of hours non clinical mortuary duties in order to support: a) Viewing of deceased persons by police, relatives and other authorised individuals; and b) Receiving of deceased persons. Requests shall be Attended in accordance with the Urgent Attendance Time as set out in Appendix A.	Medium	5%	30 minutes	Helpdesk records. Determined by default.
<i>Movement of Pathology items</i>					
	The Contractor shall respond to requests for the delivery and collection of specimens, samples and Pathology related items (including blood, plasma and reports) in accordance with the Attendance Times and Completion Times set out in Appendix A.	Major	5%	20 minutes	Helpdesk records. Determined by default.
SP14	Emergency requests for specimen, sample or pathology item movements are Attended within the Attendance Time.	Major	5%	20 minutes	Helpdesk records. Determined by default.
SP15	Emergency requests for specimen, sample or pathology item movements are Completed within the Completion Time.	Major	5%	30 minutes	Helpdesk records. Determined by default.
SP16	Urgent requests for specimen, sample or pathology item movements are Attended within the Attendance Time.	Medium	5%	30 minutes	Helpdesk records. Determined by default.
SP17	Urgent requests for specimen, sample or pathology item movements	Medium	5%	30 minutes	Helpdesk records. Determined by

	are Completed within the Completion Time.				default.
SP18	Routine requests for specimen, sample or pathology item movements are Attended within the Attendance Time.	Minor	5%	3 hours	Helpdesk records. Determined by default.
SP19	Routine requests for specimen, sample or pathology item movements are Completed within the Completion Time.	Minor	5%	30 minutes	Helpdesk records. Determined by default.
SP20	Planned requests for specimen, sample or pathology item movements are Attended within the Attendance Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
SP21	Planned requests for specimen, sample or pathology item movements are Completed within the Completion Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
SP22	Scheduled specimen, sample or pathology item movements are Attended within Service Attendance Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
SP23	Scheduled specimen, sample or pathology item movements are Completed within the Completion Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
Delivery & collection of Linen					
	The Contractor shall respond to requests for the provision and collection of Linen in accordance with the Attendance Times and Completion Times set out in Appendix A.				
SP24	Emergency requests for Linen collection are Attended to within the Attendance Time	Major	5%	20 minutes	Helpdesk records. Determined by default.
SP25	Emergency requests for Linen provision are Completed within the Completion Time.	Major	[5%]	30 minutes	Helpdesk records. Determined by default.
SP26	Urgent requests for Linen collection are Attended to within the Attendance Time.	Medium	[5%]	30 minutes	Helpdesk records. Determined by default.
SP27	Urgent requests for Linen provision are Completed within the Completion Time.	Medium	[5%]	30 minutes	Helpdesk records. Determined by

					default.
SP28	<p>Scheduled Linen movements are carried out in accordance with the Schedule agreed with the Hospital's Representative /Ward Housekeeper. This shall include deliveries of Linen to Residential Accommodation, On- Call Rooms and Relatives Rooms, prior to occupation by a new user. The Contractor shall Complete the provision of Clean Linen to local storage facilities, at times notified to the Hospital, and on a frequency that ensures sufficient Linen is available for planned clinical demand. The Contractor shall Attend to the collection of Used Linen from local storage facilities, at times notified to the Helpdesk records. Determined by default. And on a frequency that avoids excessive Used Linen build-ups based on planned clinical demand. Scheduled requests for Linen movements are Attended to / Completed within the Attendance / Completion Time.</p>	Minor	5%	10 minutes	Helpdesk records. Determined by default.
SP29	<p>The Contractor shall ensure that segregation of Clean and Soiled Linen (as defined in the Linen Service Specification) is maintained at all times.</p>	Major	5%	1 hour	Determined by default.
SP30	<p>The Contractor shall ensure that used trolleys are returned to their designated despatch / collection point in a clean and Contamination free condition.</p>	Medium	5%	1 hour	Determined by default.
Local Waste movement to nominated areas					
SP31	<p>The Contractor shall submit to the Hospital and review on a monthly basis, a schedule of local Waste collection</p>	Medium	5%	1 day	Scheduled provided and monthly review undertaken.

	activities, at a frequency that avoids excessive build-up based on planned Hospital activity, to ensure disruption to patients and Hospital activities is minimised, and to ensure additional hazards are not introduced because of Waste being left for a period of time.				
	The Contractor shall respond to requests for the local collection of Waste in accordance with the Attendance Times set out in Appendix A.				
SP32	Emergency requests for Waste movements are Attended within the Attendance Time.	Major	5%	20 minutes	Helpdesk records.
SP33	Urgent requests for Waste movements are Attended within the Attendance Time.	Medium	5%	30 minutes	Helpdesk records. Determined by default.
SP34	Routine requests for Waste movement are Attended within the Attendance Time.	Minor	5%	2 hours	Helpdesk records. Determined by default.
SP35	Planned Waste movements are Attended within the Attendance Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
SP36	Scheduled Waste movements are Attended within the Service Attendance Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
SP37	The Contractor shall ensure a sufficient availability of local Waste receptacles for Hospital use recognising the segregation requirements of the various categories of Waste.	Medium	5%	30 minutes	Helpdesk records. Determined by default.
SP38	The Contractor shall ensure that Confidential Waste remains secure.	Major	5%	30 minutes*.	Determined by default.
SP39	The Contractor shall ensure that any accidental spillages of Waste are cleaned in accordance with a procedure approved by the Hospital.	Major	5%	30 minutes	Determined by default.
SP40	The Contractor shall ensure that all Waste storage areas	Minor	5%	1hour	Determined by default.

	are safe, secure, maintain appropriate segregation, free from pests, odours and debris.				
SP41	The Contractor shall ensure local Waste movements are undertaken in accordance with the Service Standards set out within the Waste Management and Disposal Service Specification.	Medium	5%	1 hour	Monthly review of procedures. Determined by default.
<i>Distribution of Non-Stock Items</i>					
	The Contractor shall respond to requests for the movement of Non-Stock Items in accordance with the Completion Time set out in Appendix A. [This shall include but not be limited to: - pharmacy bulk fluids, paper products such as patient bottles, delivery items etc.]	Medium	5%	1 hour	Determined by default.
SP42	Emergency distribution of Non-Stock Item(s) is/are Completed within the Completion Time.	Major	5%	30 minutes	Helpdesk records. Determined by default.
SP43	Urgent distribution of Non-Stock Item(s) is/are Completed within the Completion Time.	Medium	5%	30 minutes	Helpdesk records. Determined by default.
SP44	Routine distribution of Non-Stock Item(s) is/are Completed within the Completion Time.	Minor	5%	30 minutes	Helpdesk records. Determined by default.
SP45	Planned distribution of Non-Stock Item(s) is/are Completed within the Completion Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
SP46	Scheduled distribution of Non-Stock Item(s) is/are carried out within agreed Completion Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
<i>Movement of equipment and furniture</i>					
	The Contractor shall respond to requests for the movement of general furniture and equipment in accordance with the Completion Time set out in Appendix A.	Minor	5%	1 hour	Helpdesk records. Determined by default.
SP47	Routine movement of equipment and or furniture is	Minor	5%	30 minutes	Helpdesk records.

	Completed within the Completion Time.				Determined by default.
SP48	Planned movement of equipment and or furniture is Completed within Completion Time.	Minor	5%	1 hour	Helpdesk records. Determined by default.
Postal services					
SP49	The Contractor shall ensure that outgoing mail leaves the Hospital accurately categorised on the same day as released by the originator, ready for onward delivery. For the avoidance of doubt the postal cost of franking / stamping outgoing Hospital mail shall be borne by the Hospital.	Medium	5%	1 day	Helpdesk records. Determined by default.
SP50	The Contractor shall ensure that all incoming mail is security checked in accordance with Hospital Policies / a protocol agreed with the Hospital.	Medium	5%	1 hour	Determined by default.
SP51	The Contractor shall ensure that all internal mail (to include faxes newsletters / flyers / posters etc) is delivered to its intended recipient within [24 hours].	Medium	5%	1 hour	Determined by default.
SP52	The Contractor shall ensure courier items are despatched in accordance with the timescale stipulated by the member of Hospital staff. For the avoidance of doubt the courier cost shall be borne by the Hospital.	Major	5%	1 hour	Determined by default.
SP53	The Contractor shall ensure that all incoming couriered items are delivered to the recipient with 30 minutes of receipt.	Major	5%	1 hour	Determined by default.
SP54	The Contractor shall ensure that during normal office hours on delivery days all post is delivered to its intended recipient within 2 hours of arrival in the post room.	Medium	5%	1 hour	Determined by default.
SP55	The Contractor shall provide information to the Hospital's Representative on a monthly basis, including but not	Minor	5%	1 day	Completed output issued to the Hospital by due date.

	limited to: franking machine totals; total number of mail items received and distributed from the post room; number of return to sender items; special deliveries and recorded mail; and post received or sent on behalf of Service Providers/ Contractors.				
Medical gas services					
	The Contractor shall ensure that bottled medical gas deliveries, to the correct type, size and volume, are undertaken in accordance with the Completion Times in Appendix A.	Medium	5%	30 minutes	Helpdesk records. Determined by default.
SP56	Emergency distribution of bottled medical gases is Completed within the Emergency Completion Time.	Major	5%	30 minutes	Helpdesk records. Determined by default.
SP57	Urgent distribution of bottled medical gases is Completed within the Urgent Completion Time.	Medium	5%	30 minutes	Helpdesk records. Determined by default.
SP58	Routine distribution of bottled medical gases is Completed within the Routine Completion Time.	Minor	5%	30 minutes	Helpdesk records. Determined by default.
SP59	Planned tasks associated with the distribution of medical gases are Completed within the Planned Completion Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
SP60	Scheduled tasks associated with the distribution of medical gases to meet the planned demand of the Hospital as agreed with the local Hospital manager are Completed within the Scheduled Completion Time.	Medium	5%	10 minutes	Helpdesk records. Determined by default.
SP61	The Contractor shall ensure that medical gas cylinders are transported, handled and stored securely and safely in the appropriate manner to meet statutory obligations and HTM 2010.(United Kingdom)	Medium	5%	30 minutes	Determined by default.

Emergency procedures					
SP62	The Contractor shall establish a procedure, to be agreed with the Hospital, for the duties of Porter Staff in the event of cardiac arrests, major incidents and other clinical emergencies.	Major	5%	1 day	Procedures agreed with the Trust.

PART 2 - BOQ

Portering Service pricing- BOQ

Item	Description	Number	Rate/ Number	Total Rate
1	Male/ Porters	21		
2	Female/ Porters	5		
3	Female Porter in Family Medicine	1		
4	Female Porter in Himchan Clinic	1		
	Total	28		

Note: Above rates are applicable for 12 hour per day duty completion by each staff. For any additional porters at the demand and discretion of the facility management and support services manager, if any these shall be provided by the contractor.

Part 3- Assumptions

Item	Description	Reference
2.1	Price are quoted by UAE Dirhams	All
2.2	Prices are quoted on per calendar month basis	All
2.3	Portering staff will be managed by the service provider in accordance with the service agreement and approval from the support service department manager.	All
2.4	The services to be provided by the Contractor is for full week from Saturday to Friday. The Staff of Contractor will however work 6 days per week and 12 hours per day, while the coverage during full week is ensured by rotational weekly off. All staff will make use of the University Hospital Sharjah electronic attendance system. To allow for small delays in staff transportation and queuing for registration, a tolerance of +/- 20 minutes will be applied for all staff so however that the delays if any are adequately compensated. The payment shall be made on the basis of aggregate attendance for the	All

	<p>month. Example if a member of staff on an 0600-1800 shift is recorded as 'clocking in' at 0620 and 'clocking out' at 1700, this will not be considered as failure to attend if the shortage is compensated on another day by the staff. They will be assumed to have worked a 12 hour shift based on aggregate attendance hours. The Contractor may also maintain a manual attendance record which will be signed off daily by the University Hospital Sharjah to verify the University Hospital Sharjah's electronic records.</p>	
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Terms and Conditions

The following Terms and Conditions apply to all of the above Pricing Schedules and supersede any previously agreed or discussed commercial terms.

1. The University Hospital Sharjah shall pay the Contractor within 60 (sixty) days of the date of receipt of the completed invoice together with the necessary supporting documentation.
2. It is agreed between Contractor and University Hospital Sharjah that the Porter staff and Supervisors will be required to mark their attendance at the University Hospital Sharjah's site using the Time Recording device(s) that are provided to the employees of the University Hospital Sharjah.
3. The Number of staff shall therefore be reckoned on the basis of attendance data generated through the Computer System of the University Hospital Sharjah.
4. All Porter consumables shall be sourced by the Contractor at their cost.
5. The payment contemplated on the amounts billed shall be paid on a 60-day credit terms.
6. It is further agreed that the Contractor will instruct and provide appropriate training for the Porter staff on any tasks which require special areas of expertise/techniques in order to provide a safe service. Such training will include, but not be limited to, lifting and handling, patient movement, transferring patients from/to beds/trolleys/chairs etc.
7. The Contractor's staff will work 12 hours per day and six days per week, while the covered services by the Contractor needs to be for all days of the week. This will be ensured by considering the rotational weekly off for their staff.

TENDERERS AGREES TO THE SCOPE OF WORK AND COMPLETE DOCUMENT D – CATERING SERVICES

- SCHEDULE -1 A - Specific Requirements
 - Service Specifications

The Service Specification together with a Reference Data sheet are attached. The Reference Data sheet provides the following key information together with specific recommended data :-

- Table 1 – Performance Monitoring Methods
This is a generic list of various methods available. For each entry on the Service Specification , one or more of these methodologies needs to be selected.
- Table 2 – Risk Categories and Audit Frequencies
Generic risk categories are defined together with the frequency of service output audits required for each level. The higher the risk group, the more frequent the audits need to be.
- Table 3 – Reactive Catering response and rectification times
Definition of reactive Catering request categories and the response and rectification time that needs to be achieved for each type of request.

The Service Specification incorporates the following key elements:-

- Policies and Procedures
The Service Specification provides cross-references to our Policies and Standard Operating Procedures (SOPs) in relation to management, staffing and services. For each and every key task a cross-reference is provided. The referenced Policy or SOP defines our performance level.
- Service Inputs
For the above scope of work, the Service Specification, shall provide full input details for each key task as follows:-
 - Performance Level
Cross-reference to Policies, SOPs and other performance specification documents that will be required to be mutually agreed e.g. menu profiles, Service timings, etc.

- Task Frequency
How frequently the task is carried out
- Risk Group
The level of risk associated with the location or task
(audit frequencies shall be set as per Table 2)
- Monitoring Method
The method by which the specified performance levels shall be measured and monitored

○ TABLE-1 (PERFORMANCE MONITORING METHOD)

Performance Parameter	Method of Measurement	Level of Performance	Frequency	Rectification Time
Food Service Plan in place with internal audit processes	Documented Continual Improvement Activities	Achieve minimum score of 95%	Monthly	1 day
Independent third party audit of Food Safety Plan	External auditor	Full compliance	Annually	Immediate to 5 days
Microbiological testing	Results from food samples, bench swabbing and kitchen/ cafeteria equipment testing	Full compliance	Monthly	Immediate to 7 days
Patients provided with meal service in accordance to dietary requirements	Number of failures to provide special meal requirements within 24 hours of request	No more than 2 occasions for each patient	Daily	Immediate to 1 day
Patients to be served meals in accordance to scheduled times	Number of meals not served at scheduled times	No more than 2 occasions within a month	Monthly	5 days
Patients' Satisfaction Survey	Results of Patients' Satisfaction Survey	Exceeds 95% high levels of satisfaction with 90% of respondents confirming service is 'Good', 'Very Good' or	Bi Annual	1 month

Performance Parameter	Method of Measurement	Level of Performance	Frequency	Rectification Time
		'Excellent', on the basis of Patient survey statistics.		
Patients' complaints	Number of complaints about food services	All complaints to be resolved within 14 days	Daily	Immediate to 14 days
Meal Quality	Meals are prepared in accordance to an agreed and approved cycle menu, tested standardised recipes, standard portion serves, appropriate meal temperatures at bed-sides established in the Specification	No more than 2 (two) occasions in a month where meals do not meet bedside temperatures or complaints received from patients	Monthly	7 days
The agreed menu is provided	Number of departures from published menu without prior notice	No more than 1 (one) occasion in a month where a menu item is not provided without prior notice	Monthly	10 days
Tray Accuracy	All meal trays must be assembled with accurate selected meal items and appropriate utensils	Full compliance	Monthly	5 days
Meal Quality in Restaurant/ Cafeteria	Number of complaints received from staff and visitors in relation to menu choice and meal temperatures	No more than 3 (three) written complaints received in a week	Monthly	1 month
Service Response Time	Number of complaints received from	No more than 3 (three) written complaints	Monthly	1 month

Performance Parameter	Method of Measurement	Level of Performance	Frequency	Rectification Time
	staff and visitors in relation to queuing for meal orders and accessibility to clean tables and chairs	received in a week		
Staff at all times extend a high level of courtesy to patients, staff, visitors as well as maintain appropriate business relationships, dress codes and personal hygiene	Number of substantiated verbal and written complaints made to Facility Management and Support Services Manager and Hospital management regarding level of courtesy to patients, staff and visitors, or failure to maintain appropriate business relationships, dress codes and personal hygiene.	No more than 2 (two) written complaints per quarter which are subsequently found to be substantiated and valid	Quarterly	1 month
Maintenance of Ward Imprest Stocks (applicable for VIP rooms only)	Wards and departments are supplied items such as tea/coffee/milk/sugar	No more than 2 (two) regular imprest products are out-of-stock from any ward or department imprest stocks	Weekly	1 week
Compliance with Contract Specification	Random independent external audit inspections to ensure service delivery meets all legislative standards and specifications set in the Contract	Exceeds 95%	Annually	1 month

SCHEDULE 1-B

Conditions and stipulations of Asset Management

- Food Service Equipment

The University Hospital Sharjah shall provide to Contractor the equipment identified in- Assets Listing, and the University Hospital Sharjah shall assume responsibility for maintaining, repairing or replacing parts provided that the Equipment is treated by the Contractor with due care and attention and there is no willful or negligent damage to the Equipment in which case, it will be the Contractors responsibility to repair the damaged Equipment.

The maintenance of all items listed in the Assets Listing is to be in accordance with the manufacturers' specifications.

The University Hospital Sharjah shall ensure that the equipment is serviceable at all times. The Contractor must immediately report to the University Hospital Sharjah any Equipment maintenance requirements. A summary of the report shall be included in the Contractor's monthly report.

The University Hospital Sharjah shall ensure that all the equipment are tested regularly for safety, and are tagged with the current electrical safety testing date.

In the event of moving the Contractor's equipment at the expiration of the Contract, particularly in the Cafeteria/ Restaurant, the Contractor shall ensure that all surfaces (floors, walls, ceilings) which have been affected by installation, are restored to their original state.

- Facilities

The Contractor shall use the designated offices UHS provides in a safe, serviceable and clean manner.

All faults, defects and maintenance requirements pertaining to the provision of facilities are to be reported to the Facility Management and Support Services Manager.

The Contractor shall exercise care when maneuvering trolleys, or any equipment throughout UHS so as to avoid damage to any walls, floors, furniture or fixtures.

- Utilities

The Contractor shall not move or remove an installation, operate any valves or fittings, water faucets or electric power points without written approval from the Facility Management and Support Services Manager.

The Contractor shall report any faults, damage, malfunction of blown light bulbs, electrical faults, plumbing, frayed or damaged floor coverings, damaged walls to the Engineering department as soon as it is noticed.

SCHEDULE 1-C - Quality Management & Risk Management

○ Quality Management System

Quality Improvement Programs

- a. The Contractor is required to establish and maintain a Quality Assurance System for the management of the Food Service operations.
- b. Quality Improvement Activities will be carried out by the Contractor to satisfy the requirements of UHS and the hospital's accreditation standards. The Contractor will assist UHS in attaining external Hospital Accreditation and will follow the direction of the Facility Management and Support Services Manager and UHS Quality Manager in this regard.
- c. The Contractor must establish systems and recording mechanisms to regularly monitor and ensure that standards detailed below are observed in respect of:
 - patients' satisfaction
 - receiving and inspection of food
 - portion sizes and plate waste
 - temperature controls for food and refrigeration
 - hygiene and cleaning
 - tray accuracy
- c. The Contractor shall develop and maintain an Equipment Maintenance Record document detailing all damage, repairs and maintenance of UHS kitchen equipment.
- d. The Contractor together with the Facility Management and Support Services Manager shall institute and maintain a system of periodic inspections of all food service facilities and equipment utilized in the provision of the services.
- e. The Contractor shall record in detail the results of such periodic inspections and shall furnish the Facility Management and Support Services Manager with written reports.

- f. The Contractor shall submit all results of Quality Improvement Activities in such manner and/or form advised by the Facility Management and Support Services Manager.
- g. The Contractor shall compile a Quality Plan incorporating an Operations Manual, Quality Improvement Activities, Equipment Maintenance, Staff Training, Food Safety Plan, Occupational Health and Safety Manual for the approval of the Facility Management and Support Services Manager.
- h. The Contractor shall attend departmental Quality Improvement meetings organized by UHS as requested.
- i. The Contractor shall be subject to external independent audits, conducted randomly in accordance with an overall contract provision as outlined in this agreement.

Quality Measurements

- a. UHS shall measure the performance of the Contractor's service regularly, with the establishment of the Key Performance Indicators as enclosed in Part F Appendix 6.
- b. The consequence for the Contractor in relation to non-performance, failure to reach acceptable standards and non-compliance may trigger penalties to apply. For serious, persistent or significant failures the University Hospital Sharjah will assess the level of penalty and will deduct the amount from the Contractor's next invoice due for payment. Under no circumstances, for the most serious, persistent or significant failures, can the penalty exceed 10% of the monthly invoice total.

○ Risk Management

Risk Management Plan

- a. The Contractor shall provide details of systems and procedures that will be used to minimize the potential risks in the delivery of the Food Services.
- b. The Contractor shall provide details of a Risk Management Plan that includes:
 - areas of perceived primary potential risk
 - prioritization of risk in terms of possible impact
 - risk review/ assessment measures

Contingency Plan

The Contractor shall submit a contingency plan to the Facility Management and Support Services Manager for the provision of safe meals to all the patients, staff and visitors in the event of natural disasters. The Contractor will, during the first 2 (two) months of the period of this Agreement provide a Business Continuity Plan to the University Hospital Sharjah

- Management of Contract
- Staff Profile
 - a. The Contractor shall provide their organizational structure identifying functional reporting lines between the Contractor and UHS.
 - b. The Contractor shall identify the roles of sub-contractors (if any) within the proposed organizational structure, and provide details of responsibilities.
 - c. The Contractor shall describe in detail how the Contract will be managed and controlled by the Contractor, including specific details of the on-site management.
 - d. The Contractor shall provide details of personnel resources that will be used in the delivery of the Contract. Details are to include all levels of management, supervisory and operational staff.
 - e. The Contractor shall include the proposed staffing numbers and input hours by grade that will be applied for the delivery of the Contract.
 - f. The Contractor shall provide a summary of the skills and qualifications profile that will apply to the personnel to be employed in the delivery of the Contract.
 - g. The Contractor shall detail the roles and responsibilities of on-site and off-site line managers who will be involved in the delivery of the Contract.
 - h. The Contractor shall include the resume details of on-site and off-site line managers who will be involved in the delivery of the Contract.
 - i. The Contractor shall provide details of the appropriate technology to be used to deliver the services consistent with the specifications.

- j. The Contractor shall provide details of rosters outlining roles, responsibilities and typical tasks to be performed during rostered shifts to ensure there is no degradation of service performance.
 - k. The Contractor shall identify strategies for managing peak workloads in staffing requirements such as functions, emergencies, annual leave and sick leave.
- Operational Capability
 - 2. The Contractor shall provide Occupational Health and Safety records in a format to be agreed with the University Hospital Sharjah.
 - 3. The Contractor shall provide details of how it is intended to maintain and monitor satisfactory Occupational Health and Safety regulatory requirements.
 - Sustainability of Contract

The Contractor shall ensure continuing availability of sufficient skilled personnel over the contract period. Whereas the following elements to be focused on:

- a. On-site management and technical experience to be provided for the purpose of conducting each task
- b. Specific qualifications and skills profile of the proposed personnel
- c. Service delivery arrangement already tested in place
- d. Experience of on-site management has in managing quality plans and systems.

Schedule 2

The following pricing schedules have been prepared on the basis of the information currently available and the above scope of work. All pricing schedules are subject to the Terms and Conditions detailed below.

Table 1 - Pricing Schedules and Terms and Conditions	
1.1	<p>Contractor to charge the University Hospital Sharjah a fixed monthly charge for staff on the basis of actual attendance with a ceiling of the staff number as stipulated and applicable as per the below schedules (Schedule 2A). The increase in staff numbers above the base level of 12 will be mutually agreed but broadly in-line with the suggested schedules. Staff costs are fully inclusive and valid for duration of the contract. Staff costs are determined considering that they will work for 12 hours per day and 6 days per week. What about the seventh day. Any overtime payments or extra compensation arising as a result of such working hours shall be the responsibility of the Contractor.</p>
1.2	<p>Staff will work 6 days per week and 12 hours per day. All staff will make use of the University Hospital Sharjah's electronic attendance system. To allow for small delays in staff transportation and queuing for registration, a tolerance of +/- 20 minutes will be applied for all staff, so however that the delays if any are adequately compensated. The payment shall be made on the basis of aggregate attendance for the month.</p> <p>Example, if a member of staff on an 0600-1800 shift is recorded as 'clocking in' at 0620 and 'clocking out' at 1700, this will not be considered as failure to attend if the shortage is compensated on another day by the staff. They will be assumed to have worked a 12 hour shift based on aggregate attendance hours. The Contractor may also maintain a manual attendance record which will be signed off daily by the University Hospital Sharjah to verify the University Hospital Sharjah's electronic records.</p>
1.3	<p>The number of staff will be increased in accordance with the attached staffing schedules (Schedule 2A-item 1 to 6) and in-line with the hospital patient numbers. The Fixed manpower costs shall be billed accordingly. Any change/shift in staffing schedules require prior approval of the Hospital's Senior Management Team.</p>

1.4	Supplier to charge the University Hospital Sharjah a fixed monthly charge of AED XX for non-food kitchen supplies list to provide that would be mutually agreed pricing.
1.5	Supplier to charge the University Hospital Sharjah a rate of AED XX per patient per day for the food costs incurred in serving the attached menu profile (Schedule 2B read with Appendix 1 – Cycle Menu). This charge is not subject to a minimum guarantee and will be charged based upon the actual number of patients served. For the VIP patient meals the rate applicable shall be AED XX per patient per day (including the welcome pack).
1.6	Supplier to charge the University Hospital Sharjah a rate of AED X per patient per day for the non-food costs incurred in serving the attached menu profile (Appendix 1- Cycle Menu) specified. An appropriate additional payment up to AED X per bed day for Isolation Beds, towards the cost of Disposables will be considered for Isolation patients based on the materiality of the numbers (e.g., if more than 10% of total bed days). This charge is not subject to a minimum guarantee and will be charged based upon the actual number of patients served.
1.7	<p>For the Cafeteria run by Contractor (measuring the counter area of 50 Sq Meters and the sitting area of around 182 sq meters to be used the customers).</p> <p>The following shall be basis of terms: The compensation that will be payable shall be either of the two amounts whichever is higher:</p> <p>a) The expected rental amount will be charged at an annual rate of AED 2000 per Sq Mtr for Counter area, and AED 550 per sq Mtr for the Dining area, which translates to AED 200,000 per annum of Rental.</p> <p>OR</p> <p>b) An amount calculated at 35% of the value of NET SALES, as evidenced by the daily report in the form of Cash Register reading which is aggregated on monthly basis.</p> <p>Provided that higher of the two shall be considered on month-to-month basis and final adjustment will be made based on annual figures in total. The</p>

	<p>above will be subjected to VAT as per the Federal Tax Legislation.</p> <p>It is clarified that for the purpose of calculating the NET SALES (without VAT) mentioned in (b) above, all the sales from the Cafeteria including the catering functions, parties, events shall be considered.</p> <p>For the above purpose, the prices are to be regulated and approved by the University Hospital Sharjah on quarterly basis with the agreed charges, separately applicable to staff and other beneficiaries. The staff rates shall be discounted by 20% of standard rates.</p> <p>This will be monitored on the basis of the recorded X and Z readings from the cash register. These readings will be taken each day by the main cashier from the hospital at an agreed time.</p>
1.8	Supplier to charge the University Hospital Sharjah an agreed amount as per the attached schedule (Schedule 2A read with Appendix 1- Cycle Menu) for all other items sold in the staff restaurant facility. Sale price for these items to be mutually agreed between the Parties.
1.9	Supplier to charge the University Hospital Sharjah an agreed amount as per a mutually agreed price list for all items sold to patients and visitors as Room Service. Menu and sale price for these items is also to be mutually agreed between the Parties.
1.10	Supplier to provide function and event catering services to the University Hospital Sharjah upon request as per the attached menu and price list (Schedule 2B) from the University Hospital Sharjah's kitchen.
1.11	University Hospital Sharjah to pay all other kitchen operating expenses including but not limited to gas, sewerage, pest control, equipment supply, small operating equipment, Equipment maintenance, equipment replacement (including all spare parts), grease trap cleaning, specialist exhaust hood and extract cleaning, general maintenance of all MEP (mechanical, electrical and plumbing) services. The supplier shall be paying for a fixed SEWA/Cooking gas charges of AED 6,000 per month and shall also maintain and bear the cost of the cutlery, crockery and Glassware, after agreeing

	with the University Hospital Sharjah the type and nature of these items.
1.12	Supplier to assist in maintaining the University Hospital Sharjah's kitchen equipment used by the Supplier excluding the provision of all spare parts or replacement of equipment both of which will remain the responsibility of the University Hospital Sharjah.
1.13	All food items including the vegetables, canned food, processed food, chicken, meat, fish shall be fresh item and shall be inspected and certified by the Kitchen Supervisor of the University Hospital Sharjah. The items that are rejected and not certified by the Kitchen Supervisor of the University Hospital Sharjah needs to be removed and not used, while arranging to immediately get a replacement for such items.

Terms and Conditions

1. The payment will billed once in a month supported by a documented invoice in original. The basis of the invoice will be the meals served based on the Hospital's midnight bed census.
2. The University Hospital Sharjah reserves the right to use other methods of recording the attendance hours, if such change is contemplated.
3. The provision for use in the kitchen of disposable material, tissue boxes, wiping material, hand-wash liquid, Catering chemicals etc., shall be provided by the Contractor the cost of which are included in the Pricing referred above.
4. The payment contemplated on the amounts billed shall be paid on a 60-day (sixty days from date of receipt of invoice) credit terms.
5. It is further agreed that the Contractor will produce within 7 (seven) days of the month end a written report in a format to be agreed by the University Hospital Sharjah.
 6. The Pricing of the Saleable items at the cafeteria are to be pre-approved by the University Hospital Sharjah from time to time on Quarterly basis and those which are approved shall be the implemented for the quarter and shall remain so until the new list is approved. The initial list of items to be sold and their prices are indicated in Schedule 2-B.

Schedule 2A
Staffing schedules (excluding staff restaurant)

1) Staff Schedule and Costs per month			
Position	No.	Monthly Charge	Total Charge
Chef (Male)	1		
Ward Service Staff (Female)	9		
Ward Service Staff (Male)	2		
Cooks (Male)	10		
Steward (Male)	6		
Cashier (Female)	2		
Supervisor (Male)	1		
Supervisor (Female)	1		
Chief Steward (Male)	1		
Asst. Mgr. (Male)	1		
Storekeeper (Male)	1		
	35		

Note: Above rates are applicable for 12 hour per day duty completion by each staff. For any additional staff at the demand and discretion of University Hospital Sharjah, if any these shall be provided by the contractor.

SCHEDULE -2B

SALE PRICES OF CAFETERIA ITEMS:

Sample List			
CAFETERIA SALES PRICE LIST		Agreed Prices	
		Staff	Guest/Non-staff
SL NO:	DESCRIPTION	New Retail Pricing including VAT	New Retail Pricing including VAT
1	Mineral Water- 500ml - logo		
2	Water Big – 1.5ltr		
3	Main Course R		
4	Full lunch		
5	Al Rabie Juice 200 ml		
6	Al Rabie Juice 330 ml		
7	Lacnor Juice Asst. 180ml		

8	Lacnor Milk		
9	Soft Drinks		
10	Melco Juice		
11	Pokka Juice Asst. 330ML		
12	Viteane C		
13	Perrier Water		
14	Fruto		
15	Chocolates		
16	Tea (lipton)		
17	Coffee		
18	Lemon 1000		
19	Peach Tea		
20	Red Bull		
21	Pringles		
22	Twistos		
23	Nutro Digestive		
24	Marie Biscuits		
25	Asst.Sandwich		
26	Asst. Croissant		
27	Doughnut		
28	Muffin		
29	Danish Pastry		
30	Cak/ Pastry		
31	Banna Cake / English Cake		
32	Sweet Pudding		
33	Fresh Fruits Salad		
34	Chips Small		
35	Chips Big		
36	Fresh Milk / Low Fat/ Narmal		
37	Yoghurt		
38	Labna Up		
39	Cutlets		
40	Samosa		
41	Baguette Pizza		
42	Reguler veg. Pizza		
43	Vegetable Puff		
44	Chicken PIZZA		
45	Fresh Orange Juice		
46	Chef Salad		
47	Green Salad (s)		
48	Green Salad Large		
49	Fresh Fruits		
50	Full Break Fast		
51	Boilled Egg		

52	Full Lunch UHS Staff		
53	Soup		
55	Vegetable		
56	Rice		
57	veg. meal		
58	Coconut Water		
59	Sausage 3Pce		
60	Fre. Toast		
61	Pl. Omelets		
62	Pl. Parota		
63	Aloo Parota		
64	Housekeeping staff Break Fast		
65	Housekeeping staff Lunch		
66	Housekeeping staff Main Course		
67	Dhal		
68	Spring Roll		
69	Chicken Cesar Salads		
70	Greek Salad		
71	Idli W/ Chutney		
72	Dosa W/ Chutney		
73	Dhal Vada		
74	Bread /Jam/Butter		
75	Foul /Bread		
76	Egg/ Bread		
77	Oat Meal		
78	Asst Fruits yoghurt		
79	Green Tea		
80	Coffee/ M		
81	Cappchino/M		
82	Espresso/M		
83	Hot Chocolate/M		
84	Lemon/Tea		
85	Cadaman Tea		
86	Ice Cream L/Diary		
87	Ice Cream Igloo/Quanta		
88	Parcel charge		
89	Chips medium		
90	Roasted Almond		
91	Arabian Mix Nut		
92	Roasted Cashew nut		
93	Mix Nut(salad big)		
94	Geco & security staff meal price		
95	Beef Kebab Roll		

96	Bread Chicken masala		
97	Bread Balbakeya		
98	Bread Chicken Kabab		
99	Safeeya		
100	French Fries		
101	Barbican Non Alcoholic		
102	Rani Float		
103	Chicken Burger W/ Chips		
104	Beef burger W/ Chips		
105	Fish N Chips		
106	Smoked Turkey S/W & Chips		
107	Beef S/W & Chips		
108	Grilled Chix W/ Croqt Potatos		
109	Snapple Juices		
110	Wrap Sandwiches		
111	Room Service B/Fast patients		
112	Room Service Meals patients		
113	Pasta cafeteria		
114	Slice/ ocacc bread only		
115	Cheese		
116	Jam		
117	Butter		
118	Honey		
119	Club Sandwich W/ Chips		
120	Sausage Roll		
121	Mars/Galaxy drink		
122	Young Coconut Juice		
123	Pizza		
124	Pizza spcl		
125	Pizza Adtnl Topings		
126	Pasta special		
127	Live Pancake		
128	Type of egg Prepartion		
129	Sandwich or wraps – Grilled/plain(shawarma, Multigrain, Pita,ciabatta, ocaccia)		
130	Fresh juice		
	A La Carte Menu		

131	Snacks-Freshly Prepared,Veg and Non veg and Seafood		
132	Salads –Choose your own recipe		
133	Italian –Choose your own recipe		
134	Grill – Chicken, Meat, Fish, Vegetables		
135	Sea food – Grilled or Fried		
136	steaks-Salmon, Beef-Choose your own recipe		
137	Biryani- Chicken or Mutton Or Fish,Vegetables		
138	Rice , Noodles-Choose your own recipe		
Note: The staff prices are applicable to all temporary, permanent and Hospital nominated Guests.			
The staff ID or authorization from Hospital can be asked for Staff Rates.			
All other visitors to the Cafeteria than the above, shall be applied with Guest rates			
The Cash Register to be configured as above, under supervision from UHS Supervisor/Manager			

APPENDIX 1

Sample Proposed 7-Day Cycle Menu

The actual Menu will have to be agreed in consultation with Dietician of the Client.

Provisional and example:

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
BREAKFAST							
Fruit	Sliced Pears	Sliced Peaches	Pineapple Pieces	Apricot Halves	Two Fruits	Fruit Salad	Peaches & Pears
Eggs	Poached Eggs	Poached Eggs	Poached Eggs	Poached Eggs	Poached Eggs	Poached Eggs	Poached Eggs
	Scrambled Eggs	Scrambled Eggs	Scrambled Eggs	Scrambled Eggs	Scrambled Eggs	Scrambled Eggs	Scrambled Eggs
Hot Main	Saute Mushrooms	Grilled Herbed Tomato	Pikelets with Maple Syrup	Baked Beans on Toast	Olive, Rosemary & Cheese Muffin	Corn Fritters	Grilled Beef Sausages
MORNING TEA	Scone, Jam & Cream	Zucchini Bread	Orange Cake	Apple Nut Bread	Pear Ginger Tea Cake	Shortbread	Cheese & Chive Scone
LUNCH							
Starters	Turkish Bread with Hummus & Greens	Tabouli Salad	Strawberry, Date & Fig Salad	Smoked Trout Mousse & Toast Fingers	Marinated Vegetable Platter (<i>Mezze</i>)	Chickpea & Tomato Salad	Orange Salad (<i>Salata al-Burtuqa</i>)
Main 1	Roast Beef with Pan Gravy	Tandoori Chicken with Cucumber & Yoghurt Sauce	Beef Schnitzel with Light Demi Glaze	Roast Turkey with Cranberry Sauce & Gravy	Battered Fish with Tartare Sauce	Beefburgers with Pineapple Chutney	Roast Chicken with Pan Gravy
Main 2	Poached Fish with Tarragon Sauce (<i>Samak Hara</i>)	Meatballs in Tomato Gravy (<i>Dawood Basha</i>)	Grilled Fish Steak with Lemon Sauce (<i>Hammour Meshwi</i>)	Lamb Korma with Rice (<i>Bamia Bil Laham</i>)	Chicken & Mushroom Risotto	Salmon Mornay	Spaghetti Bolognaise
Main Vegetarian	Vegetarian Lasagne	Thai Vegetable Curry with Jasmine Rice	Mushroom, Pumpkin & Spinach Risotto	Chickpea Fritters with Honey Tahini Dip	Macaroni Cheese	Artichoke, Tomato & Black Olive Pizza	Baked Potato with Cheese, Coleslaw & Sour Cream
Sandwich	Assorted Ribbon	Assorted Ribbon	Assorted Ribbon	Assorted Ribbon	Assorted Ribbon	Assorted Ribbon	Assorted Ribbon
Vegetables	Roast Potato	Creamed Potato	Steamed Potato	Roast Potato	Chipped Potato	Creamed Potato	Roast Potato
	Baked Pumpkin	Buttered Corn	Honey Glazed Carrots	Grilled Tomato	Steamed Pumpkin	Baked Sweet Potato	Roasted Root Vegetables
	Peas with Sage	Saute Spinach	Zucchini with Diced Capsicum	Broccoli Florets	Baby Beans	Peas with Sage	Cauliflower Mornay
Dessert	Crème Caramel	Glazed Lemon Tart with Cream	White Chocolate Timbale & Fresh Fruits	Classic Baked Cheesecake	Butterscotch & Banana Parfait	Semolina Cake with Custard (<i>Basbousa</i>)	Creamed Rice with Berry Sauce
Fruit	Apples	Peach & Pears	Fruit Salad	Two Fruits	Apricots	Pineapple Pieces	Sliced Peaches
AFTERNOON TEA	Cheese & Crackers	Shortbread	Choc Chip Muffin	Date Scone	Cheese & Crackers	Banana Cake	Chocolate Brownies
DINNER							
Soup	Potato & Leek	Lentil Soup	Minestrone	Chicken & Sweet Corn	Cream of Pumpkin (<i>Qishda al-qara</i>)	Carrot & Coriander	Spring Vegetable
Main 1	Chicken Filo Parcels	Roast Lamb with Mint Gravy (<i>Lamb Taouk</i>)	Stir Fry Chicken with Rice Noodles	Parmesan Fish Bake	Roast Veal with Gravy	Baked Chicken with Cous Cous & Raisin Stuffing (<i>Farj Mahshu bi-l-sami wa-lsabib</i>)	Veal Medallions with Saute Mushrooms
Main 2	Curried Lamb with Saffron Rice (<i>Kabseh</i>)	Leek & Mushroom Frittata	Lamb, Apricot & Date Tagine (<i>Lamb Tagine</i>)	Mongolian Beef with Pistachio Cous Cous	Lamb Parcel with Mango Curry Sauce	Lentil Patties with Tomato Relish	Fish Curry, Tomato Salsa & Rice
Vegetables	Steamed Potato	Roast Potato	Scallop Potato	Lyonnais Potato	Roast Potato	Scallop Potato	Steamed Potato
	Buttered Carrots	Roasted Root Vegetables	Baked Sweet Potato	Saute Golden Squash	Honey Glazed Carrots	Ratatouille	Baked Pumpkin
	String Beans	Cauliflower Mornay	Minted Peas	Vegetable Medley	Saute Spinach	Braised Cabbage	Zucchini with Diced Capsicum
Main Salad	Corned Beef with Caper Creamed Cheese	Beef & Noodle Salad with Coriander Dressing	Tandoori Chicken Salad	Tuna Salad with Lime Dressing	Waldorf Chicken Salad	Nicoise Salad	Falafel & Tabouli Salad (<i>Salata Falafel</i>)

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
							<i>Tabouli</i>
Sandwich	Assorted Ribbon	Assorted Ribbon	Assorted Ribbon	Assorted Ribbon	Assorted Ribbon	Assorted Ribbon	Assorted Ribbon
Dessert	Cherry Crumble & Vanilla Custard	Mixed Berry Mousse	Vanilla Panna Cotta	Baked Rice Custard (<i>Umm Ali</i>)	Apple Strudel & Cream	Tiramisu with Vanilla Sauce	Mango & Yoghurt Whip
Fruit	Pineapples Pieces	Apricots	Two Fruits	Sliced Pears	Peaches & Pears	Stewed Apple	Sliced Pears

-END-