

ZILLA SWASTHYA SAMITI, ANGUL
O/o- CDM & PHO Cum- District Mission Director, Angul
TENDER CALL NOTICE

Date: 20/12/2022

Sealed tenders are invited from Registered Agencies/ Firms/Individuals to undertake Housekeeping Services in Angul district under NIRMAL & any other schemes. Details regarding eligibility criteria, terms & conditions and the formats for submission of tender (Technical & Price bid) may be downloaded from the website i.e. www.angul.nic.in. The undersigned reserves the rights to reject any or all the tenders without assigning any reason thereof.

Sd/-

CDM & PHO Cum District Mission Director, Angul

CDM & PHO -cam- Dist. Mission Director NHM, Angul



# REQUEST FOR PROPOSAL

Outsourcing of Housekeeping Services -at Govt. Health Institutions of ANGUL District

RFP Reference Nos: Nirmal/Housekeeping / Angul Specific

Date: 20/12/2022





Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

### DISCLAIMER

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

### NOTICE INVITING PROPOSAL

RFP No. : Nirmal/Housekeeping/ Dist. Name – Angul Specific Dated: \_\_\_\_\_

	er the RFP no ( hission)	of Angul specific Dist. mentioned in the <b>Section 1</b> :Schedule of
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		FROM ELIGIBLE AGENCYS FOR SELECTION OF THE MOST SUITABLE EEPING SERVICES AT GOVT. HEALTH INSTITUTIONS of ANGUL.
1	Period of Availability of RFP Document	From 21-12-2022 to 12.01.2023 (Downloadable from website: www.angul.nic.in)
2	Pre-bid Meeting	Date : <u>29-12-2022</u> , Time : 11.30 AM  Address: Conference Hall of CDM & PHO, Angul-759122
3	Last date for submission of Proposal.	Date: 12-01-2023, Time: 12 Noon Address:
4	Date, time and place of opening of Proposal and presentation	<ul> <li>a) Technical Proposal (Part A) opening: 12-01-2023 at 12.30 PM at DTU, DHH (Name of the Dist. &amp; Venue is mentioned at Section 1: Schedule of proposal Submission)</li> <li>b) Financial Proposal (Part B):         The date of opening of financial proposals will be intimated by the CDM&amp;PHO, Angul, to the agency found successful in the technical proposal evaluation.     </li> <li>(Name of the Dist. &amp; Venue is mentioned at Section 1: Schedule of proposal Submission)         (Bidders / authorized representative may remain present at the time of opening of proposal)     </li> </ul>

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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### SECTION 1: SCHEDULE OF PROPOSAL SUBMISSION

SI.	RFP No. & date	Name of District / Institution	Address of submission of Proposal & Opening of Proposal	Last date & time of submission of Proposal	Date & time of opening of Technical Proposal
Α	Districts				
1	Nirmal/Housekeeping – Angul Specific dated 18.10.2022	Angul	The Chief District Medical & Public Health Officer, O/o the CDM & PHO, District Head Quarter Hospital, At/P.O. Angul, Dist. Angul, Odisha-759122.	12-01-2023 12 Noon	12-01-2023 12.30 PM

### **SECTION 2 - INSTRUCTIONS TO BIDDERS**

### 2.1 Scope of Proposal

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

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### 2.2 Eligibility Criteria

The bidder should fulfil the following Eligibility Criteria:

- 1. Should be registered in India as a Company, Firm, Society or a Trust.
- II. Consortium is not allowed
- III. Should have an average Annual Turnover of Rs. 8 Crores or more during the last three financial years (2019-20, 2020-21 & 2021-22)
- IV. Should have minimum 3 years of working experience in the field of housekeeping & cleaning services in Public / Private sector [State Govt. / Govt. of India Institution / Govt. undertaking / Corporation / Banks / Govt. & Pvt. Hospitals / Pvt. Organizations] on the stipulated date of bid submission.
- V. Should have enrolled at least 100 personnel in housekeeping & cleaning works as on date of bid submission. Work Order / Contract copies in support of such enrolment must be submitted by the agency as per Format T4.
- VI. The Bidder must not have been blacklisted either by the tender inviting authority or by any State Govt. or Govt. of India organization. The agency shall submit undertaking regarding the same on Non Judicial Stamp paper of Rs. 20/- as per Format T6
- VII. Must have labour registration certificate
- VIII. Must have ISO 9001 certification
- IX. Must be registered under EPF
- X. Must be registered under ESI
- XI. Must have a PAN
- XII. Must have GST registration number
- XIII. A firm/organization/company etc already involved in NIRMAL House Keeping & Cleaning services in districts including Medical Colleges, Capital Hospital and RGH & having 05 or more in numbers are not eligible.

### 2.3 Proposal Submission

Interested eligible bidders may submit their bid(s) to the CDM&PHO, Angul in the address below:

The Chief District Medical & Public Health Officer, O/o the CDM & PHO, District Head Quarter Hospital, At/P.O. Angul, Dist. Angul, Odisha-759122 within the stipulated date and time.

The proposal shall be submitted in two parts:

- (1) Part A Bid Security & Technical Proposal as per format set out in RFP.
- (2) Part B Financial Proposal as per the format set out in RFP.
- The Proposal shall be typed or written legibly in indelible ink and shall be signed the authorized representative of the bidder.
- (ii) Power of Attorney for signing of bid: The bidder should submit a Power of Attorney as per the Form T5, authorizing the signatory of the bid to commit the bidder.
- iii) Any interlineations, erasures or overwriting shall be valid only if the person or persons signing the Proposal have put his/their initial prior to submission of the same.

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### 2.4 Bid Document Cost

The bidders shall have to furnish a bid document cost of Rs.2,000/- (non-refundable) in the shape of a Banker's cheques / Demand Draft from any Nationalized / Schedule Bank payable at Angul and in favour of ZSS, Non-NRHM Account, Angul'

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

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

### 2.5 Earnest Money Deposit (EMD)

The bidder along with the technical proposal shall have to furnish Earnest Money Deposit (EMD) amounting to Rs. 1,00,000/- (refundable) in the shape of Banker's cheques / Demand Draft from any Nationalized / Schedule Bank in favour of the ZSS, non-NRHM Angul.

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

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

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

### 2.6 Packing, Sealing and Marking of Proposal

- (a) The Technical Proposal (Cover A) and Financial Proposal (Cover B) must be inserted in separate sealed envelopes, along with applicant's name and address in the left-hand corner of the envelope and super scribed in the following manner.
  - Cover-A Technical Proposal for "Housekeeping Services at Health Facilities, Angul".
  - Cover-B Financial Proposal for "Housekeeping Services at Health Facilities, Angul".
- (b) The two envelopes, i.e. envelope for Part-A, Part-B must be packed in a separate sealed outer cover and clearly super scribed with the following:
  - Proposal for "Housekeeping Services at Health Facilities, Angul".

	RFP no	& Angul	(The bidder should clearly me	ention the RFP no. & District
	for which the pro	oposal is submitted)		

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- The bidder's Name & address shall be mentioned in the left hand corner of the outer envelope.
- (c) The inner and outer envelopes shall be addressed to the Chief District Medical Public Health Officer ,Angul at the detail address mentioned at the Section - 1: Schedule of Proposal Submission.

If the outer envelope is not sealed and marked as mentioned above, then the O/o the CDM& PHO, Angul will assume no responsibility for the tender's misplacement or premature opening. Telex, cable or facsimile tenders will be rejected.

### (d) Content of the Proposal

### I. Cover A (Technical Proposal)

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

- EMD of Rs.1,00,000/- (Rupees One Lakh) in the shape of a Demand Draft in favour of ZSS, Non NRHM Account, Angul for which the bidder is interested to bid)
- Bid document cost of Rs.1,500/- (Rupees One Thousand Five hundred) in the shape of a Demand Draft in favour of ZSS, Non NRHM Account, Angul.
- 3. Form T1
- 4. Form T2
- 5. Photocopy of the Registration Certificate of the Agency
- 6. Photocopy of PAN
- 7. Photocopy of GST, EPF, ESI Registration
- Photocopy of the ECR of EPF and Challans of ESI for the month of October, 2022 towards EPF
  / ESI payment of the personnel deployed by the agency.
- 9. Photocopy of ISO 9001 certification
- 10. Form T3 (Turnover Certificate from the Chartered Accountant)
- 11. Photocopy of the audited Profit & Loss Statement in the last three financial years in support of the turnover certificate [2019-20, 2020-21 & 2021-2022]
- Form T4 Relevant Experience Details in managing housekeeping & cleanlinesş services in State Govt. / Govt. of India Institution / Govt. undertaking / Corporation / Banks / Govt. & Pvt. Hospitals / Pvt. Organizations during the last three years.
- Photocopies of work orders / contracts executed in support of the information furnished in Form T4
- Form T5 Power of Attorney authorizing the signatory for signing the proposal on behalf of the proposer/Bidder
- Form T6 Affidavit certifying that the Entity/Promoter(s)/Directors/Partner(s) of Entity are not blacklisted.
- Form T7 Letter of Declaration (Anti Collusion Certificate) mentioning that the bidder will not collude with the other bidders.
- 17. Any other details, the bidder like to include in the proposal.

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### II. Cover B (Financial Proposal)

- 1. The bidder must submit the Financial Proposal using Form specified in Form F1, F2, F3 with proper signature and seal of the bidder.
- In case of any discrepancy between figures and words in the financial proposal, the one described in words shall be taken into consideration.
- 3. The same person signing the RFP shall sign the financial part also.

### 2.6 Validity of Proposals

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

### 2.7 Cost of Proposal

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

### 2.8 Acknowledgement by the bidder

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

### 2.9 Language

The Proposal with all accompanying documents (the "Documents") and all communications in relation to or concerning the Selection Process shall be in English language and strictly as per the forms provided in this RFP. No supporting document or printed literature shall be submitted with

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the Proposal unless specifically asked for and in case any of these Documents is in another language, it must be accompanied by an accurate translation of the relevant passages in English, in which case, for all purposes of interpretation of the Proposal, the translation in English shall prevail.

### 2.10 Proposal Due Date

RFP filled in all respect must reach O/o the CDM&PHO, ANGUL within the time and date specified in the Section-1: Schedule of Proposal Submission, through Speed Post/ Regd. Post / Courier only. If the specified date for the submission of RFPs is declared as a holiday, the RFPs will be received up to the stipulated time on the next working day.

### 2.11 RFP Opening

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

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### SECTION 3 - TERMS OF REFERENCE

### 3.1 Background

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

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

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

### 3.2 Modalities of Housekeeping & Cleaning Services

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

### 3.2.1 Classification of Hospital Area

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

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Central sterile supply department/Theatre sterile supply unit	Nurses/ Doctors rest rooms	Manifold services/room
Chemotherapy ward/room	Psychiatric wards	Telephone rooms, electrical, mechanical, External surroundings
	X-ray Room	
Burn Unit		Staff Areas
Dialysis Unit	i	
Isolation wards/ rooms including DR TB Centre & ART Centre		
Attached internal areas like bathrooms & Toilets		
4.Other Areas		

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

Functional Area Risk Category	Frequency of cleaning	Method of cleaning/Disinfection	Evaluation/auditing procedures &frequency
High risk areas	Once in two hours and spot cleaning as required	Cleaning with soap & detergent plus disinfection with alcohol compound, aldehyde compounds (Formaldehyde, glutardehyde) hydrogen peroxide and phenolics	Procedures/ Frequency-  Display of service parameters / maintenance of Unit wise performance register (updated on daily basis)  Swab culture of critical areas (Monthly once)  Over all remarks of SN I/c of concerned unit (Monthly)  Use of housekeeping checklist & updated on daily basis

Functional Area Risk Category	Frequency of cleaning	Method of cleaning/Disinfection	Evaluation/auditing procedures &frequency
Moderate risk areas	Once in four hours and spot cleaning as required	Cleaning with soap & detergent plus disinfection with aldehyde compounds (Formaldehyde, glutardehyde) hydrogen peroxide phenolics	Procedures/ Frequency- Swab culture of lab & Blood bank ( Quarterly once)  Use of housekeeping checklist & updated on daily basis Overall remarks of SN I/c / Sr. LT of concerned unit ( Monthly once)
Low risk areas	For areas working round the clock at least once in a shift or  For areas having general shift at least twice in the shift & Spot cleaning as required	Physical removal of soil, dust or foreign material followed by cleaning with water and detergent	Procedures/ Frequency  Use of housekeeping checklist & updated on daily basis  Overall remarks of SN I/c / Sr. LT of concerned unit ( Monthly once)
Other Areas	Drains once in a week & spot cleaning as required Other Areas - once in a day	Clearing & cleaning of drains using bleach to both clean and deodorize the sewerage system.  Physical removal of foreign particles through sweeping.	Procedures/ Frequency Overall remarks of Hospital In- Charge once in a month.

### 3.2.3 Cleaning Schedule for other Items:

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

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

### 3.2.4 Maintenance Schedule & Deliverables of major Housekeeping Items

Assignment	Deliverables
Electrical Works – Minor Repair & Check up, Electrical Systems (HT & LT), Electrical fixtures and appliances	<ul> <li>Daily operation of all electrical power system as &amp; when required-incoming and outgoing</li> <li>Minor maintenance and replacing fuse, tube lights, bulbs, minor wiring etc.</li> <li>Switching on pumps for filling water to tanks.</li> <li>Attending to power breakdowns in case of internal faults.</li> <li>Providing electricians for preventive maintenance of power panels, maintenance of all accessories including Fans, light fixtures, power points, and replacement of spares, mechanical &amp; electrical equipments.</li> <li>Coordination with AMC agency for trouble free operation.</li> <li>Unhealthy systems, abnormalities in performance or malfunctioning if any will be reported / rectified within a reasonable time period (Maximum within 1 hour).</li> <li>Regular checking of all the electrical panels and distribution boards.</li> <li>Logging of all parameters like meter readings, power factor, power consumption etc. and highlight discrepancies or variances.</li> <li>Clean all panels, switchgears controls etc on regular basis.</li> <li>Daily check of all light fixtures, points, bulbs and power sockets wiring and changing defective ones within the premises under maintenance.</li> <li>Check earth pit resistance and watering earth pit.</li> <li>Check and all the switches on standby equipment and ensure that all are in operating condition.</li> <li>Inspect and clean contacts if necessary &amp; check connections of Motors/ switchboards / equipment etc. on routine basis.</li> <li>Check correct operations of all safety circuits and equipment.</li> <li>To attend all service calls and breakdowns within the minimum possible time period (Maximum within 1 hour).</li> <li>To carry out preventive maintenance to ensure minimum breakdowns.</li> </ul>

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Assignment	Deliverables
	<ul> <li>Prepare inventory of spares and ensure that critical spares are always available.</li> <li>To ensure that all equipment / plants has sequential running and all equipment, pumps including the standby equipment work on operating time equalization basis.</li> <li>To keep day to day reading of energy meter</li> <li>Thoroughly clean all electrical fixtures and appliances and insect killing devices.</li> <li>Periodically clean all motor vents, etc.</li> </ul>
Water Management, Plumbing and Sewerage System, STP (if installed)	<ul> <li>Thoroughly clean all overhead and underground water storage tanks periodically.</li> <li>Water management, operational records, inflow and outflow control.</li> <li>Regular checking and repairs of all sanitary fixtures and supply lines.</li> <li>Checkup of all valves, taps, floats and other plumbing and sanitary fittings free from leakage.</li> <li>To operate &amp; maintain the STP (if installed later)</li> <li>Follow up for AMC of the STP or any other accessories.</li> </ul>
Water Pumps	<ul> <li>Ensuring trouble free and smoothing operations and no disruption in water supply to Hospital Building &amp; Quarters in the Campus</li> </ul>
	<ul> <li>Regular routine maintenance of the pumps and associated equipment, pressure gauges etc.</li> </ul>
	<ul> <li>Logging of all maintenance data in the approved formats.</li> </ul>
	<ul> <li>Maintenance of the panels of the system.</li> </ul>
	<ul> <li>Ensuring that the equipment is functioning as per the design parameters.</li> </ul>
	<ul> <li>Prepare inventory of spares and ensure that critical spares are always available.</li> </ul>
A I	<ul> <li>To ensure that all equipment / plants has sequential running and all equipment, pumps including the standby equipment work on operating time equalization basis.</li> </ul>
Carpenter Work	<ul> <li>Regular checking and minor repair of all carpentry fitting &amp; fixture like door, window, lock, door closer, chair etc</li> </ul>
DG sets, associated panel, boards etc	<ul> <li>DG sets are to be maintained clean, operate as per the requirement or approved Schedules.</li> </ul>
	<ul> <li>To carry out day to day maintenance work as per activity chart</li> </ul>

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Assignment	Deliverables
	<ul> <li>Battery check for electrolyte level.</li> </ul>
, 1	<ul> <li>Specific gravity check.</li> </ul>
	<ul> <li>Oil level and temperature check.</li> </ul>
	<ul> <li>Fuel Leak.</li> </ul>
	<ul> <li>Cooling Hose check.</li> </ul>
	<ul> <li>Oil pressure check.</li> </ul>
	<ul> <li>Voltage and current check in each phase.</li> </ul>
	<ul> <li>Engine run hour and RPM.</li> </ul>
	<ul> <li>KWH generated.</li> </ul>
	<ul> <li>Checking general functioning of all gadgets observe noise and vibration levels.</li> </ul>
4	<ul> <li>Prepare inventory of spares and ensure that critical spares are always available.</li> </ul>
	<ul> <li>To ensure that minimum one day fuel for continuous running of all DG's is always available and keep record of diesel/oil consumption and maintain the record.</li> </ul>
	<ul> <li>To keep records of diesel receipts and consumption and submit daily report to appropriate authority</li> </ul>

### Deliverables to achieve Kayakalpa: (Angul Specific)

As per PIP 2022-24 there is more focus to promote quality health care standard as per Govt. of India mandate like KAYAKALP, LaQshya, NQAS, MUSQAN, SUMAN etc. For the above reason the target has been divided to all district as per the total number of public health facilities in the district from DHH to SC HWC level.

To promote quality health care standard there are some certifications as per Govt. of India i.e, KAYAKALP, LaQshya, NQAS, MUSQAN, SUMAN etc. To achieve these standards, we have to maintain cleanliness, hygiene, infection control practices etc. which will add maximum points/marks for getting the certification to the hospital.

For achieving the above certifications, dedicated HR (Supervisors having Bachelor degree in science)- who will focus mainly on all indicators of NQAS & KAYAKALP was proposed in RKS GB meeting of DHQ Hospital Angul held on dt. 21.06.2022. Moreover, it was suggested in the same meeting to include the parameters of KAYAKALP/NQAS as a deliverable by the agency for tendering of NIRMAL.

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Healthcare-associated infections (HAIs) are the most common adverse outcomes due to delivery of medical care. HAIs increase morbidity and mortality, prolong hospital stay, and are associated with additional healthcare costs. Contaminated surfaces, particularly those that are touched frequently, act as reservoirs for pathogens and contribute towards pathogen transmission. Therefore, healthcare hygiene requires a comprehensive approach whereby different strategies may be implemented together, next to targeted, risk-based approaches, in order to reduce the risk of HAIs for patients.

For the above reason the following additional manpower will be required with support from DMF, Angul to achieve the national Certifications as well as better Patient satisfaction and healthy ambience of all hospitals of this industrial District.

### 3.2.5 Other Conditions:

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

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

### 3.3.1 Cleaning Equipment: New Equipment should be provided at all Levels.

2. Floor scrubbing Machine
4. Glass Cleaning Kit
6. Bucket Trolley
8. High Pressure Cleaner

N.B. Bidders are requested to provide all nine equipment mentioned above in DHH (03 Sets minimum), all SDH (01 set minimum) and all CHC (01 set minimum) of Angul District. Similarly, Small Vaccum Cleaner(Point No-1), small backpack vacuum machine (Point No-3) and Point No-4,5,6,9 must be available at PHCs level. Bidders have to quote accordingly in appropriate place of Form-F3. The MOU is liable to be Terminated if Quality is compromised due to non-availability of Point Number 3.3.1.

### 3.3.2 Cleaning Materials (Durables & Consumables)

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1. Floor Duster	2. Urinal Cubes	3. Floor cleaning liquid / Phenyl

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4. White dusters, Yellow dusters	5. Naphthalene balls	6. Brooms (Hard and Soft with long and short handles)
7. Nylon scrubber	8. Glass & plastic surface cleaning liquid (Colin)	9. Brasso
10. Room Fresheners	11. Sponges	12. Liquid toilet cleaner
13. Floor/dish cleaner	14. Multipurpose cleaner	15. Plastic Scrubber
16. Floor Polish	17. Acid	18. Drain openers (large and small)
19. Scrubbing Brush Hard	20. Dettol / Lysol	21. Scrub Pad (Scotch Brite)
22. Feather duster	23. Blue Dry Mop	24. Toilet Brush
25. Dustpan	26. Spray bottles	27. Glass Wiper
28. Vacuum pump	29. Kentucky Mop	30.Floor wiper/ Rubber Squeeze
31. Dust Control mop	32.Three Bucket System	33. Bleaching Powder
34. Black Phenyl		6

Minimum requirement of consumables may be calculated cautiously, bidders are requested to keep in mind the numbers of Health institutions and Monthly Requirement at Each Hospital before Quoting at appropriate place of the Form F-3. No compromise in Quality of Cleaning will be allowed. The MOU is liable to be Terminated if Quality is compromised due to shortage of Materials in Point Number 3.3.2 above.

### HR requirement for House Keeping & Cleanliness services 3.4

### 3.4.1 Norms for HR engagement (tentative):

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

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

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

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

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

Quality Supervisor- 1 Quality Supervisor at SDHs(3 in Numbers) and @1 at each CHC (9 in Numbers)

Note: The details of the required HR Personnel and Bed Strength are attached at Section 6. Bidders are requested to refer this section carefully to know the HR personnel requirement

and the bed strength of Angul /DHH,SDHs,CHCs and bedded PHCs/non bedded & Other Institution before quoting their prices in the Price Format F-3.

### 3.4.2 Working Shifts:

The hospitals level staffs are expected to work in three shifts

First Shift

: 7 AM - 2 PM

Second Shift

: 2 PM - 9 PM

Third Shift

: 9 PM - 7 AM

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

Hospital Key Personnel			
Supervisor (Skilled)	Any Graduate Degree	Minimum 2 years of experience in housekeeping & Cleanliness Services particularly in Hospital Sector.	
Sanitation Worker (Semi-Skilled)	field		
Electrician (Skilled)	certificate course experience in similar f		
Plumber (Skilled)	ITI passed / any other certificate course	Minimum 1 Year post qualification experience in similar field	
Quality Supervisor (High Skilled) (DMFT-Angul)	Having Minimum B.sc Degree.	Minimum 1 Year post qualification experience in similar field. In absence of suitable candidates Freshers may be engaged.	

### 3.4.4 Age Limit:

SI. No.	Category	Qualification Experience		
1.	Supervisor	Age Limit: Minimum 21 years & Maximum 60 years as on 01.12.2022		
2. Sanitation Worker		Age Limit: Minimum 21 years & Maximum 50 years as on 01.12.2022		
3 Electrician Age Limit: Minimum 21 years & Maximum 50 on 01.12.2022		Age Limit: Minimum 21 years & Maximum 50 years as on 01.12.2022		
4 Plumber Age Limit: Minimum 21 years & Maximum 5		Age Limit: Minimum 21 years & Maximum 50 years as		

		on 01.12.2022
5	Quality Supervisor (DMFT-Angul)	Age Limit: Minimum 21 years & Maximum 45 years as on 01.12.2022

- 3.4.5 Attendance: Biometric attendance system will be introduced to track availability of staff on duty, engaged under the said contract. The outsourced workers should be given weekly off by the agency as per the labor rules of State Government. Any deviation of the rules is liability of the agency.
- 3.4.6 Uniform: A uniform dress code (Colour) will be recommended for all House Keeping staff across the State.
- 3.4.7 Training: Staff training and development is a core activity in the sanitation service and a structured approach to training should be imparted by the agency with direct inputs from Hospital Authority, Nursing Superintendent and other relevant healthcare professionals, as required.
  - a) Induction Training Topics for Sanitation Workers
    - 1. Job Description—duties & responsibility
    - 2. Uniform and protective gear
    - 3. Leave Procedures
    - 4. Cleaning chemical—Use & dilution rate
    - 5. Handling equipment with demonstration
    - 6. Step by step cleaning procedures for different areas and surfaces
    - 7. Reporting repair and maintenance
    - 8. Safety & security
    - 9. Garbage removal & BMW Management
    - 10. Fire safety
    - 11. Penalties for misconduct/ not working
  - b) Induction Training Topics for Hospital Supervisor
    - 1. Additional activities other than topics as mentioned in induction training
    - 2. Inspection and filling up checklist
    - Documentation of records (work done, attendance, leave etc.) and knowledge of computers
- 3.4.8 Duration and Frequency of Training for Housekeeping staff as per risk Categorization of patient care areas:

Worker	Training	Refresher Training	Responsibility
Sanitation Worker	1 day Induction Training	Training of two hours every month from 2nd month onwards	Selected Agency

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Supervisor	2 days Induction training at State level	1 day on quarterly basis	Selected Agency
Electrician	½ day Orientation at State level		Selected Agency
Plumber	½ day Orientation at State level		Selected Agency
Quality Supervisor, DMFT	3 days orientation, district level	Training of two hours every month from 1st month onwards	Selected Agency- AM (QA), HM,BPM

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

### 3.4.9 Other Conditions

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

### 3.5 Data Management:

a) The agency needs to manage the data obtained from the hospitals on a regular basis utilizing special software (State to develop & share with the agency). The agency needs to provide exclusive facilities (computers with broadband internet connection) for the same at all hospitals.

### b) Daily Report expected from the agency

- 1. A daily report of staff on duty in all the shifts.
- 2. A daily report of the status of the equipment and its utilization.
- 3. A daily report of the chemicals and the consumables used.
- A daily report of the general sanitation from the Officer in charge / Superintendent or any other officer deputed for the purpose of program.
- 5. Evaluation report

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6. Any other reporting mechanism as desired by the Hospital.

### 3.6 Performance Review Criteria and Penalty from Bill Payment:

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

### 3.6.2 Scoring Indicators & Extent of Penalty:

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

### 3.6 Responsibilities of the Implementing Agency & Hospital Administration

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

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In case of any accident/ mishap of any nature occurred during performing the duty, the liability will be borne by the agency.

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

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

### SECTION 4 - TERMS & CONDITIONS

### 4.1 Period of Engagement

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

### 4.2 Award of Contract

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

### 4.3 Allotment of districts / Institutions:

- a) If any L1 bidder of the district / other institution decline the work order, in such case the concerned district / other institution has to negotiate with L2 (L3, L4..and so on in that order) bidder of that District / other institution to agree to the L1 price and to finalize the bidder & issue work order.
- b) If in the negotiation process mentioned in clause 4.3 (c), none of the bidder (L2, L3.... & so on in that order) agrees to the L1 price, then the L1 bidder may be awarded the

contract, even if the said firm has been awarded the contract in 5 districts.

### 4.4 Performance Security

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

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

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

### 4.5 Commencement of Service

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

### 4.6 Payment & Price Validity

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

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Payment to such workers must be made by the agency through e-transfer only. To ensure this, service providers will get a bank account opened for every engaged worker.

### 4.7 Penalty

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

### a) Commencement of the Work:

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

### b) During Implementation

### i. Disincentive / Penalty:

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

### ii. Other Penalty Clauses:

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

SI.	Offences	Penalties (In Rupees)
1	Not found keeping photo ID	Rs.50 /- per person/per day
2	Worker not in proper Uniform	Rs.50 /- per person/per day
3	Indulging in smoking/ drinking alcohol/ Substance abuse or any other misconduct during duty hours (need to be established)	Rs.500/- with removal of the offender
4	Duty performed by a worker for more than one shift in 24 hours	With Due permission from the Hospital authority, linked to Biometric attendance system, Not more than 5% of the total attendance. Beyond which, penalty of 200/- per instance/per person in case of non-compliance
5	Short supply of Consumables/Chemicals	Rs.1,000/- per Item/month

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SI.	Offences	Penalties (In Rupees)
	and any violation of specifications/ Quantity etc.	
6	Absence of personal protective gears	Rs.200/- per person/per day
7	If any person is found performing duty by submitting a fake name and address.	Rs.500/- per person/per day
8	If required number of manpower is not deployed by the Agency,	The proportionate amount (Total monthly bidding Cost / Total no of persons engaged X no of person absent on that particular day) will be deducted from payment with other penalties as applicable.

### 4.8 General Conditions of the Contract

- The personnel provided shall be the employees of the service provider and all statutory liabilities will be paid by the service provider such as ESI, PF, Workmen's Compensation Act. etc.
- b) The persons deployed by the service provider should be properly trained, have requisite experience and having the skills for carrying out a wide variety of housekeeping & cleaning services using appropriate materials and tools/ equipment.
- The service provider shall have his own Establishment/Set up/Mechanism to provide training of housekeeping personnel to ensure correct and satisfactory performance of his / her duties and responsibilities under the contract.
- d) The service provider at their end should ensure the Health and Safety measures of the outsourced staffs, deputed for the works.
- The contracting authority if required may also conduct health checkup of the staff deployed at regular intervals at the cost of the service provider.
- The service provider shall engage only such workers, whose antecedents and health have been thoroughly verified including character and police verification and other formalities. The service provider shall be fully responsible for the conduct of their staff.
- The service provider at all times should indemnify the contracting Authority against all claims, damages or compensation under the provisions of payment of wages Act; Minimum Wages Act; Employer's Liability Act the Workmen Compensation Act; Industrial Disputes Act; Maternity Benefit Act, or any modification thereof or any other law relating thereof and rules made hereunder from time to time. Contracting authority will not own any responsibility in this regard. Payment of minimum wages, notified by the government, shall be ensured all the time.
- h) The staff deployed through the service provider in the health facility (ies) shall not claim any benefit, compensation, absorption or regularization of their services in the Govt. establishment either under the provision of Industrial Disputes Act. or Contract Labour (Regulation & Abolition) Act. The Agency should have to obtain an undertaking from the deployed persons to the effect that the deployed person is the employee of the

Service Provider and shall submit the said undertaking to the Contracting Authority. In the event of any litigation on the status of the deployed persons, the Contracting Authority/Society shall not be a necessary party, however in any event, either the deployed persons or to the order of the hon'ble court, the District Health Society / Institution may be a party in dispute to adjudicate the matter. The service provider has to reimburse the expenditure that would have been borne by the Contracting Authority.

- The staffs deployed by the service provider shall not divulge or disclose any details of office, operational process, technical know-how, administrative/ organizational matters to any third person, as all of that are confidential and secret in nature. In the event of being found that the official secrecy has been disclosed, it is desirable to remove the said person. The nodal officer of the health facility has every right to remove the said person immediately and the responsibility if any in this context is to be borne by the service provider.
- All liabilities arising out of accident or death of the personnel provided by the service provider while on duty shall be borne by the service provider.
- k) Adequate supervision will be provided to ensure correct & effective performance of the services in accordance with the prevailing assignment and instructions agreed upon between the two parties.
- The service provider and its staff shall take proper and reasonable precautions to prevent loss, destruction, waste or misuse of the areas of the Hospital premises.
- m) That in the event of any loss occasioned to the Hospital, as a result of any lapse on the part of the service provider as may be established after an enquiry conducted by the hospital, such loss will be made good from the amount payable to the service provider. The decision of the district / institution authority in this regard will be final and binding on the service provider.
- n) The service provider shall be responsible to protect all properties and equipment of the health facility entrusted to it.
- o) Any damage or loss caused by service provider's persons to the hospital in whatever form, would be recovered from the service provider.
- p) In the event of any breach/violation or contravention of any terms and conditions contained herein by the service provider, the performance security deposit of the service provider shall be forfeited.
- q) Any liability arising out of any litigation (including those in consumer courts) due to any act of service provider's personnel shall be directly borne by the service provider including all expenses/fines. The concerned service provider's personnel shall attend the court as and when required.
- The service provider shall not engage any such sub-contractor or transfer the contract to any other person in any manner.
- The staffs engaged by the service provider shall not take part in any staff union and 5) association activities.
- The Hospital shall not be responsible for providing residential accommodation to any of the deployed personnel of the service provider.

- u) If as a result of post payment audit any overpayment is detected in respect of any work done by the service provider or alleged to have been done by the service provider under the tender, it shall be recovered by the authority of the concerned health institution from the service provider.
- v) If any underpayment is discovered, the amount shall be duly paid to the service provider by the authority of the concerned health institution.
- w) The service provider shall provide the copies of relevant records during the period of contract or otherwise even after the contract is over whenever required by the Tender Inviting Authority / Authority of the concerned health institution.
- x) The service provider will have to enclose the proof / copies of the challans showing payment of statutory dues for the previous month along with monthly bills.
- y) All necessary reports and other information will be supplied on a mutually agreed basis and regular meetings will be held with the nodal officer of the respective health facility (ies)/ Tender Inviting Authority/Contracting Authority. The service provider and its staff shall take proper and reasonable precautions to preserve from loss, destruction, waste or misuse the areas of responsibility given to them by the Hospital, and shall not knowingly lend to any person or company any of the effects or assets of the Hospital, under its control.
- z) The service provider shall immediately intimate to the Controlling Authority about any criminal charge framed against the persons or supervisor engaged or employed by the agency, in the course of their performance of duties. A copy of such communication shall also be sent to the officer-in-charge of the Police Station where the person charged against resides.
- aa) The service provider shall be blacklisted if miserably performed as per assessment based on score card even after repeated notice for improving performance i.e. minimum 3 times. The service provider shall also be blacklisted if found indulging in such activity which will affect name & fame of the implementing agency.
- bb) The service provider shall not assign or sublet this Agreement or any part thereof to any third party.
- cc) The contract can be terminated at any time prior to its completion by either Party with 30 days of notice period.
- dd) In case of breach of any terms and conditions attached to the contract, the Performance Security Deposit of the service provider will be liable to be forfeited by contracting authority besides annulment of the contract.
- ee) The service provider shall ensure that the person deployed are disciplined and shall enforce prohibition of consumption of alcoholic drinks, paan, gutkha, smoking, loitering and shall not engage in gambling or any immoral act.

### 4.9 Termination / Suspension of Contract

The District Authority / Institution may by a notice in writing, suspend the contract if the selected agency fails to perform any of his obligations including carrying out the services, provided that such notice of suspension shall specify the nature of failure, and shall

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request remedy of such failure within a period not exceeding 15 days after the receipt of such notice.

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

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

### 4.10 Modifications

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

### 4.11 Force Majeure

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

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

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

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

### 4.12 Settlement of Dispute

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

### 4.13 Jurisdiction of Court

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

### 4.14 Right to Accept and Reject any Proposal

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

### SECTION 5 - CRITERIA FOR EVALUATION

### 5.1 Evaluation of Technical Proposals

Evaluation of proposals shall be made at the distinct level by the concerned district authority and Committee.

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

SI. No	Evaluation of Parameters	Total Mark	Criteria for award of Mark
1	Working Experience		
1.1	Experience in Hospital House Keeping & Cleanliness Services in Public / Private Sector	5	<ul><li>&gt;3 year ≤ 5 years : 3 marks</li><li>&gt;5 years : 5 marks</li></ul>
1.2	Experience in handling any Hospital House Keeping & Cleanliness Services or other allied works with regards to <b>no. of beds</b> - Average per Annum in last three years: 2015-16, 2016-17 & 2017-18 (to be determined from the work order / contract copies) – Details to be furnished Form T4	15	<ul> <li>≥ 500 beds &lt; 700 beds: 3 marks</li> <li>≥ 700 beds &lt; 900 beds: 5 marks</li> <li>≥ 900 beds &lt; 1100 beds: 7 marks</li> <li>≥1100 beds&lt;1500: 9 marks</li> <li>≥1500 beds&lt;1800:12 marks</li> </ul>

1.2	Experience in handling any Hospital House Keeping & Cleanliness Services or other allied works with regards to no. of beds - Average per Annum in last three years: 2015-16, 2016-17 & 2017-18 (to be determined from the work order / contract copies) - Details to be furnished Form T4	15	<ul> <li>≥ 500 beds &lt; 700 beds: 3 marks</li> <li>≥ 700 beds &lt; 900 beds: 5 marks</li> <li>≥ 900 beds &lt; 1100 beds: 7 marks</li> <li>≥1100 beds&lt;1500: 9 marks</li> <li>≥1500 beds&lt;1800:12 marks</li> <li>≥1800 beds and above 15 marks</li> </ul>
1.3	Experience in handling mechanised system (electrical / battery operated) of House Keeping & Cleaning in previous assignments (Similar to the current proposal defined in point no 3.3 in RFP) at least in one previous assignment in past 3 years.	5	Submitted documentary proof (work order / contract) from the concerned organization : 5 marks
2	Performance Certificates of previous assignments.	5	Satisfactory Work Performance Submitted from clients during las 3 years : 5 marks or other wise 0 marks
3	Total Average Annual tumover (In last 3 financial years 2019-20, 2020-2021 & 2021-22)	15	<ul> <li>&gt; 8 ≤ 12 crores : 5 Marks</li> <li>&gt; 12 ≤ 16 crores : 7 Marks</li> <li>&gt; 16 ≤ 22 crores : 10 Marks</li> <li>&gt; 22crores &amp; above : 15 Mark</li> </ul>
4	Average no of manpower engaged in last 3 years: 2019-20, 2020-21 & 2021-22 (to be determined from the work order / contract copies) – Details to be furnished Form T4	10	<ul> <li>201- 300 persons : 5 marks</li> <li>300-500 persons : 7marks</li> <li>&gt;500 persons : 10 marks</li> </ul>
5	Work Plan Presentation	10	Presentation of the work plan i consonance with the tende document and guidelines, not mor than 15-20 min.  Total Marks: 10
	Total Marks	65	

Financial proposal shall be opened after the technical evaluation is completed and **only those bidders** who score <u>at least 40 marks or more</u> in technical evaluation shall qualify for **financial bid opening**. In the financial bid, the bidder with the **lowest price** shall be awarded the contract.

### 5.2 Evaluation of Financial Proposal

The total price (exclusive of GST) as per price format F2 shall be considered for price evaluation. However, in case two bidders quote the same lowest price, then the agency with the highest mark in the

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# **SECTION 6**

# LIST OF GOVT. HEALTH INSTITUTIONS & REQUIRED MANPOER FOR HOUSEKEEPING & CLEANING SERVICES, ANGUL

	2	2	-	Α	SI.		
DMF Funding- Kayakalp Readines		NIRMAL	Bed Nos / Category of Institutio	В	the District / Other Institutio	Name of	
Th		380	Bed	С	DHH		
ese pe		1	0 Z	D	丑		
as per		252	Bed	ল	SDH		
el will NQA: day s	el will be on	w	0 Z	স	H	No. of expected Beds / No. of Institutions	
be onl S/Kays upervi		290	Bed	G	CHCs		
ly dep kalaj sion c		9	۰Z	Н	CS		
oloyed pa Che of clear	ployed to observe and train the Paran	50	Bed	Ι	PH		
These personnel will be only deployed to observe and train the Paramedics to practice as per NQAS/Kayakalapa Checklists and not to be engaged for day to day supervision of cleanliness under NIRMAL.		12	No No	J	PHC / UPHC / OH		
		20	n No Be de	×	HC/		
		972	Total Beds	F	Total No. of Beds of all Institutions		
		25	Tot al	M	vo. of of all tions		
nedics to or day to		240		Z	No of Sanitati on Worker (semi Skilled)		
Super		24		0	No of Supervis or (Skilled)	Required Manpower	
12 Numbers Quality Supervisors having Bsc Qualification.	High skilled	9		P	No of Plumb er (Skille d)	Manpower	
		9		Q	No of Electrici an (Skilled)		
·	Angul Specific					Remarks	

sanctioned for the above purpose especially Supervisors will be responsible for achieving the Kayakalpa for the deployed institution/ as a minimum Qualification) which are not approved under NIRMAL Scheme and to be funded from DMFT, Angul. The manpower \*Note: The calculation of no. of housekeeping & Cleaning Personnel for Angul Health Institutions are based on the requirement of to achieve Kayakalpa/ NQAS in near future, the PHCs/CHCs/ SDHs/ DHH need some extra manpower i.e. Supervisors (having B.sc DHH, SDHs, CHCs, PHCs as per the functional bed strengths in the year 2022-23. As per approval of District Technical Committee Hospital.

ping & Cleaning Services at Govt. Health Institutions

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## **RFP FORMATS**

Housekeeping Services at Govt. Health Institutions

TECHNICAL PROPOSAL

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

Page 3 Z

### Check List (Technical Proposal)

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

Sl.	Particulars	Whether Submitted (Yes / No)	Page No.
1	EMD (DD of Rs. 1,00,000/-)		
2	Bid document Cost (DD of Rs. 2,000/-)		
3	Form T1		
4	Form T2		
5	Photocopy of the company/Agency Registration certificate		
6	Photocopy of the GST registration certificate		
7	Photocopy of the EPF registration certificate		6
8	Photocopy of the ESI registration certificate		
9	Photocopy of the ECR of EPF and Challans of ESI for the month of Sep 2022 towards EPF / ESI payment of the personnel deployed by the agency.		
10	Photocopy of the Labour Registration Certificate		
11	Copy of PAN		V
12	Photocopy of ISO 9001 certification		
13	Form T3		
14	Photocopies of the audited P/L account of each year highlighting the turnover in support of that		
15	Form T4		
16	Copies of Work Order/Contract certificates from the clients in support of housekeeping & cleaning services executed in support of the information provided in Form T4		
17	Form T5		
18	Form T6		
19	Form T7		
20	Any other document		

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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### FORM-T1

(to be furnished in the technical proposal)

### **TECHNICAL TENDER SUBMISSION FORM**

(On the letterhead of the agency)

10
The Chief District Medical & Public Health Officer,ANGUL
Re.: RFP Reference no dated (pl. mention the RFP reference no. against the concerned district / institution from the table at Section 1-Schedule of Proposal submission)
Dear Sir / Madam,
We, the undersigned, offer to provide the Housekeeping & Cleanliness Services at District Health Institutions. We are hereby submitting our Proposal, which includes this Technical Proposal and a Commercial Proposal sealed under a separate envelope-
We hereby declare our Confirmation of acceptance of the Conditions of Contract mentioned in the RFF document under reference cited above.
We hereby declare that all the information and statements made in this Proposal are true and accept that any of our misrepresentations contained in it may lead to our disqualification.
Our proposal shall be binding upon us for a period of 180 days from the date of bid opening, subject to the modifications resulting from Contract negotiations you may subsequently carry out with us to accept ou bid. If we are assigned the work during the period of validity of the Proposal, we undertake to carry out the same as per the terms and conditions of this tender document.
I hereby declare that my company has not been debarred / black listed by any Government/ Sem Government organizations. I further certify that I am the competent authority in my company authorized to make this declaration.
We understand you are not bound to accept any Proposal you receive.
Yours sincerely,
Authorized Signatory [In full and initials]:
Name and Title of Signatory:
Name of Agency:
Address:
(Organization Seal)

### FORM-T2

# (to be furnished in the technical proposal) PROFILE OF THE AGENCY

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

Name and Title of Signatory: \_ (Organization Seal)

# FORM T3

(to be furnished in the technical proposal)

# ANNUAL AVERAGE TURN OVER STATEMENT

(To be furnished in the letter head of the Chartered Accountant)

	Financial Year	Turn	over in Rs.	_
1	2019-20			
2	2020-21			_
3	2021-22			
Ave	rage Annual Turnover in Rs.			
rovisional audi ate:	ted statement shall not be considered		Chartered Acc	countant
ace:		(Nam	e in Capital)	
			Seal	

Note:

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

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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# FORM T4

(to be furnished in the technical proposal)

# PAST EXPERIENCE IN HOUSEKEEPING & CLEANING SERVICES DURING THE LAST THREE YEARS (attach separate sheets if the space provided is not sufficient)

# A) Experience in Hospitals

# F.Y. 2019-20

SI.	*Name /address of the Hospitals for which Housekeeping & Cleaning & Cleaning services assignments were undertaken	Date of award of Assignment	Date of completion of assignment	Value of the Assignment	Role of your agency	**No. of Beds in the hospital	***No. of personnel deployed (Houseke eping & Cleaning & Cleaning services only)	Whether Mechanized Cleaning System / Manual Cleaning System	Performance Certificate enclosed (Yes / No)
1								4	
2									
.,									

# F.Y. 2020-21

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

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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#### F.Y. 2021-22

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

\* Please furnish the Work order / Contract copies of the works executed in support of the information mentioned above along with the performance certificate of the client, serially in the same order as mentioned in the above format for ease of scrutiny.

\*\* No. of Beds needs to be certified by the concerned hospital / any proof regarding no. of bed to be furnished for all hospitals, the information of which is mentioned above.

\*\*\* No. of housekeeping personnel deployed should be clearly mentioned in the relevant work order / contract copies

\*\*\*\* Mechanized / Manual Cleaning system undertaken should be mentioned in the relevant work order / contract /copies / certificate from the client.

# B) Experience in Other Organizations (Other than Hospital)

#### F.Y. 2019-20

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

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

# F.Y. 2020-21

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

# F.Y. 2021-22

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

Please furnish the Work order / Contract copies of the works executed in support of the information mentioned above along with the performance certificate of the client, serially in the same order as mentioned in the above format for ease of scrutiny.

No. of Housekeeping & Cleaning personnel deployed should be clearly mentioned in the relevant work order / contract copies

\*\*\* Mechanized / Manual Cleaning system undertaken should be mentioned in the relevant work order / contract /copies / certificate from the client.

Authorized Signatory/Signature [In full and initials]:	
Name and Title of Signatory:	100-00-1
(Organization Seal)	

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

# Form T5

(to be furnished in the technical proposal)

# Format for Power of Attorney for Signing of Proposal

(On a Stamp Paper of relevant value)

# Power of Attorney

Know all persons by these presents, We	(name and address of
the registered office) do hereby constitu	te, appoint and authorize Mr /
Ms	(name and residential address) who is
presently employed with us and holding the positi	on ofas our
attorney, to do in our name and on our behalf, all	such acts, deeds and things necessary in
connection with or incidental to our bid for Housel	keeping & Cleanliness Services at District
health institutions including signing and submission of	of all documents and providing information
/ responses to the District / Institution Authority, rep	resenting us in all matters before District /
Institution authority and generally dealing with Distr	
connection with our bid for the said Project. We here	성용하는 얼마를 가장하는 것이다. 이 급하게 하나 아이는 사람들 것이 되었다. 그리고 살아가는 그리고 있는데 그렇게 다른다.
lawfully done by our said attorney pursuant to this	
and things done by our aforesaid attorney shall and s	shall always be deemed to have been done
by us.	
Dated this the day of202	
Dated this the day of202	
For	
	(Name, Designation and Address)
	Accepted
	(Signature)
	(Name, Title and Address of the Attorney)
	Date :
	Date !

# Note:

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

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

# FORM T6

(to be furnished in the technical proposal)

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

# Affidavit

I, M/s (the name of the agency with address
f the registered office) hereby certify and confirm that we or any of our promoter(s) /
pirector(s) are not barred by Department of Health & FW, Govt. of Odisha / or any other entity
f GoO or blacklisted by any State Government or Central Government / Department /
Organization in India at the time of participating in this Tenders as on the (Date of
igning of this proposal).
We further confirm that we are aware that, our proposal for the captioned Project
vould be liable for rejection in case any material misrepresentation is made or discovered at
ny stage of the Bidding Process or thereafter during the agreement period.
D-1-144:
Dated thisDay of, 2022
Authorized Signatory/Signature [In full and initials]:
Name and Title of Signatory:
(Organization Seal)

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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# FORM T 7

(to be furnished in the technical proposal)

# **Anti Collusion Certificate**

We hereby certify and confirm that in the preparation and submission of our Proposal for
Housekeeping & Cleanliness Services at health institutions under this RFP Reference
No, We have not acted in concert or in collusion with any other Bidder of
other person(s) and also not done any act, deed or thing, which is or could be regarded as ant
competitive. We further confirm that we have not offered nor will offer any illegal gratification
in cash or kind to any person or organization in connection with the instant proposal.
Dated this Day of, 2022
Authorized Circulator (Circulator Education Circulator)
Authorized Signatory/Signature [In full and initials]:
Name and Title of Signatory:
(Organization Seal)

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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# **FORMATS**

Housekeeping & Cleanliness Services at Govt. Health Institutions

FINANCIAL PROPOSAL

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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# Check List (Financial Proposal)

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

(please arrange the documents serially in the following order)

1.	Form F1	Yes/No	
2.	Form F2	Yes/No	
3.	Form F3	Yes/No	

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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# FORM F-1 (To be submitted with Financial Proposal)

	e Chief District Medical & PH Officer, IGUL
(pl.	: RFP Reference no dated mention the RFP reference no. against the concerned district / institution from the table at Section 1- hedule of Proposal submission)
Sul	o: Request for Proposal for Housekeeping & Cleanliness Services at Govt. Health Institutions
Sir,	
1.	Having carefully examined all the parts of the RFP documents and having obtained all the requisite information affecting this proposal and being aware of all conditions and difficulties likely to affect the execution of the contract, I/We hereby propose to offer the services as described in the RFP document in conformity with the conditions of contract technical aspects and the sums indicated in this financial proposal.
2.	I/We declare that we have read and understood and that we accept all clauses, conditions and descriptions of the RFP document without any change, reservations and conditions.
3.	If our proposal is accepted, we undertake to deposit the performance security deposit at the time of execution of the formal agreement
4.	I/We agree to abide by this proposal/bid for a period of 180 days from the date of its opening and also undertake not to withdraw and to make any modifications unless asked for by you and that the proposal may be accepted at any time before the expiry of the validity period.
5.	Unless and until the formal agreement is signed, this offer together with your writter acceptance thereof shall constitute a binding contract between me/us and the District Authority.
6.	We submit the Schedule of Prices as appended herewith.
	Encl: Schedule of Prices (Form F2 & F3)
	Yours sincerely,
	Authorized Signatory [In full and initials]:
	Name and Title of Signatory:
	Name of Agency:
	Address:

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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(Organization Seal)

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

Name of the District	/ Other Institution:	
radific of the District	/ Stilet illistitution	

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

# Note:

- The bidder has to furnish the cost calculation format Form F-3 for arriving at the cost / bed per Month for the Housekeeping & Cleanliness Services
- The cost per Bed per Month (in Rs.) (exclusive of tax) as mentioned in the column 'a' above must be same as the figure mentioned column 'g' against Sl. No. 5 of Form F3

Authorized Signatory [In full and initial	/s]:
Name and Title of Signatory:	
Name of Agency:	
Address:	
	(Organization Seal)

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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FORM F-3 (To be submitted with Financial Proposal)

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

Name of the District /Other Institution:

		Mo	Monthly Cost per Personnel (Rs.) exclusive of GST	sonnel (Rs.) exc	lusive of G	ST	***No.	Total Cost /
SI.	Particulars	*Take home Remuneration / Month (to be quoted based on 30 days service)	EPF (Employer's share of (13%)/existing Govt. Rate	ESI (Employer's share of (3.25%)/ existing Govt. Rate	Service Charge **	Total (per personnel per Month)	of Personnel	(Rs.) (up to two decimal places only)
-	Human Resource	а	В	C	р	e =a+b+c+d	ш	g = e x f
1.1	Remuneration of Sanitation worker (Semi-Skilled)							
1.2	Remuneration of Plumber (Skilled)							
1.3	Remuneration of Electrician (Skilled)							
4.	Remuneration of Sanitation Supervisor (Skilled)							
1.5	1.5 Remuneration of Quality Supervisor ( High Skilled)			4				

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Outsourcing of Housekerping & Cleaning Services at Goyt. Health Institutions

As per Actual & to be deposited with EO, Municipality							(up to two decimal places	(yluo
	ve	it's	,		of +g	**	4	
Lifting of General waste from the District Head Quarter Hospital to the nearest municipal dumping ground (Angul Specific)	Cleaning Equipment & Material Cost (exclusive of GST) per Month	Cleaning Equipment & it's Consumables Cost / Month****	Cleaning Material Cost / Month****	Total Cost / Month (exclusive of GST)	[g of 1.1 + g of 1.2 + g of 1.3 + g of 1.4 + g of 1.5 + g of 2.1 + g of 2.1 + g of 2.2]	Total No. of Beds *****	Cost per bed per Month (exclusive of GST)	(g of SI. 3 ÷ g of SI. 4)
1.6	2	2.1	2.2	m		4	2	

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

Department, Odisha for Semi-skilled, Skilled and High Skilled personnel. This should take into account 24 x 7 x 365 days service of housekeeping & cleaning \* The monthly take home remuneration must be based as per minimum wages act vide the recent gazette notification no.6078 dated 19/10/2022 issued by Labour & ESI personnel required at the all the health institutions of Angul District.

<sup>\*\*</sup> The service charge shall be quoted by taking into account the managing cost of the personnel including statutory requirement. The bidders are required to quote the price (Service Charge) in whole Rupees & no fraction of Rupee will be considered and quoting in fraction of Rupee will be lead to summarily rejection

mechanized cleaning equipment to be used as mentioned in Section 3 - Clause 3.3.1. Feasible Service charges should be quoted by avoiding Unrealistic amount for example Re -1, Rs- 10 and Rs-100. Bidder has to show a Power Point Presentation in this regard to the technical committee as to how the agency will ensure the quality of the service within the quoted service charge. The Committee has all the power to reject the financial Bid in writing, if the service charge is too low and unjustifiable. of financial bid. There must not be any compromise on the take home remuneration mentioned above. The service charge should include all the charges of

- The no. of housekeeping personnel (Sanitation worker / Plumber / Electrician / Sanitation Supervisor/Quality Supervisors) against District / Other institution is mentioned at Section 6, the bidders are requested to go through the Section 6 & put the no. of personnel figure in the column 'F' against Sl. No.1.1, 1.2, 1.3, 1.4 & 1.5 etc of Form F3. \*\*\*
- Cleaning Equipment (Clause-3.3.1) & it's consumable cost for the contract period should take into account the total no. of beds of all the institutions and total no. of institutions of Angul district and accordingly calculate the Cleaning Equipment Cost. 北京市市
- \*\*\*\*\* Cleaning Material cost / Month should take into account the total no. of beds of all the institutions of district Angul as mentioned in Section-6 and the consumable list mentioned in Section-3 (Clause 3.3.2). The bidders are required to quote the Price in Whole rupees and no fraction of Rupee will be accepted
- \*\*\*\*\*\* The no. of Beds against Angul district / other institution is mentioned at Section 6. The bidders are requested to go through the Section 6 carefully against the The cost per Bed per Month (in Rs.) (exclusive of GST) as mentioned against SI. No.5 above must be the same as the figure mentioned column 'a' of Form District Angul / other Institution for which they want to quote and according put the no. of beds figure in the column 'g' against SI. No. 4 of Form F3.

**Authorized Signature** 

Full Name:

Organization Seal

Date:

Place:

& Cleaning Services at Govt. Health Institut

# Annexure - I

# **AGREEMENT**

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

(i)	RFP I	Reference No		dated		and subseque	ent Amendment /
	Pre-bie	d clarification	issued by the	ender Invitin	g Authority		
(ii)	Service	e provider's b	id submitted da	ted			
1	provi his h "the	VEENider", which e eirs successor Distric District Autho	expression shales es executors an et, Odisha / Di	(h l, where the d administrat rector, pression shall	ereinafter context so a cors) of the context of(name of context), where the	called "the a admits, be de- one part AND Institution) (he context so ad	2022 pproved service emed to include the CDM& PHO, ereinafter called mits be deemed
	in th sum of	e manner set	age the Housel forth in the t	keeping & Cle erms of the I whereas the a formance Sec	anliness Ser Request for approved se curity of the	vices in the He Proposal (RF) rvice provider	rict Authority / ealth Institutions  P) reference no. has deposited a only in the form
	10. 10.		documents sh			n part of an	d be read and
	i) ii) iii)	Terms & co	onditions of the eference of the	RFP reference RFP reference	e no. cited ce no. cited	above.	· erence no. cited
	fin	- 10/1973	sal towards mo				by them in the aning Services as
			ation Worker /r nitation Worke			nonth,	

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

ii)	Per Sanitation Supervisor/month : Rs/month  No. of Sanitation Supervisor / Month:
iii)	Per Plumber/month : Rs/month No. of Plumber / Month:
iv)	Per Electrician / month : Rs/month  No. of Electrician / Month:
v)	Cleaning Material Cost (Durable & Consumable) / month : Rs/month
vi)	Cleaning equipment & it's consumable cost / month : Rs/month
vii)	Total Cost / Month (exclusive of GST) :
viii	) GST (%):

- (c) In consideration of the payment to be made by the District Authority / Institution as above, the approved service provider will duly implement the project in the manner set forth in the terms of the RFP.
- (d) The terms & conditions and terms of reference of the RFP appended to this agreement will be deemed to be taken as integral part of this agreement and are binding on the parties executing this agreement.
- (e) Following documents / letters /correspondence undertaken between the parties shall also form part of this agreement:

a) Re							Approved Service Provider
2018W 12312	equest mendme	for	proposal	and	any	a)	Proposal Submitted in response to RFP
ai	mendine	ne en	cicoi.			b)	SOPs in respect to Housekeeping & Cleaning
b) O	ffice Ord	der su	ıbsequent t	o RFP			Service Operation

# 4. Payment

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

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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

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

# 5. Operational Parameter and Penalty

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

# 6. Period of Engagement/Duration of Contract

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

# 7. Schedule of Implementation

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

#### 8. Termination /Suspension of Agreement

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

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

- a) If the service provider do not remedy a failure in the performance of his obligations within 15 days of receipt of notice or within such further period as the District Authority / Institution have subsequently approve in writing.
- b) If the service provider becomes insolvent or bankrupt.

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Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

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- If, as a result of force majeure, the service provider is unable to perform a material portion of the services for a period of not less than 60 days: or
- d) If, in the judgment of the District Authority / Institution, the service provider is engaged in corrupt or fraudulent practices in competing for or in implementation of the project.

# 9. Settlement of Dispute

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

0.	. Jurisdiction of Court	
	Legal proceedings if any shall be subject to the/ place of the Institution) jurisdiction only.	District (name of the District
	In witness whereof the parties hereto have set of2022.	their hands on theday
	Signature of the Approved Service Provider	Signature of CDM & PHO / Director
	Date:	Date:
	1.Witness	1. Witness
	2.Witness	2. Witness

Outsourcing of Housekeeping & Cleaning Services at Govt. Health Institutions

# Annexure-II

# Score Card of Housekeeping & Cleanliness Services for Performance Review

3 - N 3 G					
Ker. No. or Kayakalp Document / NQAS / Other allotted number	Criteria *	Assessment	Means of Verification	Compliance	Secured
	Sanitation & Hygiene				
A1	Staff management			5	
A.1.1	% of staff recruited as per contract	SI/ RR	HR documents	2	
A.1.2	No of staff turnover per month (Standard <10%)	RR	HR documents	2	
A.1.3	% of staff immunized for hepatitis B	SI/ RR	Immunisation Register	1	
A2	Capacity building			4	
A.2.1	% of staff provided induction training	SI/ RR	Training Documents	2	
A.2.2	% of staff provided Refresher Training	SI/ RR	Training Documents	2	
81	Cleanliness of Circulation Area			5	
B1.1	No dirt/Grease/Stains in the Circulation area	90	Check that floors and walls of Corridors, Waiting area, stairs, roof top for any visible or tangible dirt, grease, stains, etc.	1	
B1.2	No Cobwebs/Bird Nest/ Dust on walls and roofs of corridors	08	Check that roof, walls, corners of Corridors, Waiting area, stairs, roof top for any Cobweb, Bird Nest, etc.	-	
B1.3	Corridors are cleaned at least twice in the day with wet mop	SI/RR	Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records	1	
B1.4	Corridors are rigorously cleaned with scrubbing / flooding once in a month	SI/RR	Ask the staff about cleaning schedule and activities	-	
81.5	Surfaces are conducive of effective cleaning	90	Check if surfaces are smooth enough for cleaning	1	
82	Cleanliness of Wards			5	
B2.1	No dirt/Grease/ Stains/ Garbage in wards	OB	Check that floors and walls of indoor department for any visible or tangible	1	
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Ker. No. of Kayakalp Document / NQAS / Other	Criteria *	Assessment	Means of Verification	Compliance	Secured
			dirt, grease, stains, etc.		
	No Cobwebs/Bird Nest/ Dust/Seepage on walls and roofs of wards	90	Check for the roof, corners of ward for any Cobweb, Bird Nest, Dust etc.	-	
	Wards are cleaned at least thrice in the day with wet mop	OB	Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records	-	
	Patient Furniture, Mattresses, Fixtures are without grease and dust	OB	Check for visible dirt, dust, grease etc. Check if the items are wiped/dusted daily	-	
	Floors, walls, furniture and fixture are thoroughly cleaned once in a week.	OB	Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records if available	1	
	Cleanliness of Procedure Areas			5	
	No dirt/Grease/ Stains/ Garbage in Procedure Areas	OB	Check that floors and walls of Labour room, OT, Dressing room for any visible or tangible dirt, grease, stains etc.	-	
	No Cobwebs/Bird Nest/ Seepage in OT & Labour Room	90	Check for roof, walls, corners of Labour Room, OT, Dressing Room for any Cobweb, Bird Nest, Seepage, etc.	-	
	OT/Labour Room floors and procedures surfaces are cleaned at least twice a day / after every surgery	SI/RR	Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records.	-	
	OT & Labour Room Tables are without grease, body fluid and dust	90	Check that Top, side and legs of OT Tables, Dressing Room Tables, Labour Room Tables for dirt, dried human tissue, body fluid etc.	-	
	Floors, walls, furniture and fixture are thoroughly cleaned once in a week.	SI/RR	Ask cleaning staff about frequency of cleaning day. Verify with Housekeeping records if available.	-	
	Cleanliness of Ambulatory Area (OPD, Emergency, Lab)	gency, Lab)		5	

Secured						- Selection					
Compliance	-	1	1	1	-	5	-	1	1	-	-
Means of Verification	Check for floors and walls of OPD, Emergency, Laboratory, Radiology for any visible or tangible dirt, grease, stains, etc.	Check for roof, walls, corners of OPD, Emergency, Laboratory, Radiology for any Cobweb, Bird Nest, Dust, Seepage, etc.	Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records	Observe and ask the staff about frequency for cleaning	Ask staff about schedule of cleaning and verify with records		Check for the floors and walls of Pharmacy, Kitchen, Laundry, Mortuary, Administrative offices, for any visible or tangible dirt, grease, stains, etc.	Check the roof , walls, corners of Pharmacy, Kitchen, Laundry, Mortuary, Administrative offices for any Cobweb, Bird Nest, Seepage, etc.	Ask cleaning staff about frequency of cleaning in a day. Verify with Housekeeping records.	Observe and ask the staff about frequency for cleaning	Ask staff about schedule of cleaning and verify with records
Assessment	OB	OB	SI/RR	OB/SI	SI/RR		OB	OB	SI/RR	OB/SI	SI/RR
Criteria *	No dirt/Grease/Stains / Garbage in Ambulatory Area	No Cobwebs/Bird Nest/ Seepage on walls and roofs of ambulatory area	Ambulatory Areas are cleaned at least thrice in the day with wet mop	Furniture, & Fixtures are without grease and dust and cleaned daily	Floors, walls, furniture and fixture are thoroughly cleaned once in a week.	Cleanliness of Auxiliary Areas	No dirt/Grease/ Stains/ Garbage in Auxiliary Area	No Cobwebs/Bird Nest/ Seepage on walls and roofs of Auxiliary Area	Auxiliary Areas are cleaned at least twice in the day with wet mop	Furniture & Fixtures are without grease and dust and cleaned daily	Floors, walls, furniture and fixture are thoroughly cleaned once in a month
Ref. No. of Kayakalp Document / NQAS / Other allotted number	84.1	84.2	84.3	84.4	84.5	85	B5.1	B5.2	85.3	85.4	85.5

Score Secured	2	-	-	1	1	1	1	5	- 1	2
Means of Verification		Check some of the toilets randomly in indoor and outdoor areas for any visible dirt, grease, stains, water accumulation in toilets	Check some of the toilets randomly in indoor and outdoor areas for foul smell	Ask cleaning staff to operate cistern and water taps	Ask cleaning staff for frequency of cleaning and verify it with house keeping records	Check some of the toilets randomly for dryness of floors and without residue water accumulation			Check for good quality Hospital cleaning solution preferably a ISI mark. Composition and concentration of solution is written on label. Check with cleaning staff if they are getting adequate supply. Verify the consumption records.	Check for good quality Hospital cleaning solution preferably a ISI mark. Composition and concentration of solution is written on label. Check with cleaning staff if they are getting adequate supply. Verify the consumption records. Check, if the cleaning staff is aware of correct concentration and dilution method for preparing cleaning solution. Ask them to demonstrate. Verify it with the instruction given solution bottle.
Assessment		80	80	OB	SI/RR	80		r Cleaning		
Criteria *	Cleanliness of Toilets	No dirt/Grease/Stains/ Garbage in Toilets	No foul smell in the Toilets	Toilets have running water and functional cistern	Sinks and Cistern are cleaned every two hours or whenever required	Floors of Toilets are Dry	Use of standards materials and Equipment for Cleaning		Availability of Detergent Disinfectant solution / Hospital Grade Phenyl for Cleaning purpose	Availability of Detergent Disinfectant solution / Hospital Grade Phenyl for Cleaning purpose  Cleaning staff uses correct concentration of cleaning solution
Ref. No. of Kayakalp Document / NQAS / Other allotted number	86	B6.1	86.2	86.3	B6.4	B6.5	87		B7.1	B7.1



Secured							
Compliance	-	-	5	-	ь	-	-
Means of Verification	Check if adequate numbers of Buckets and carts are available. General and critical areas should have separate bucket and carts.	Check the availability of mops, brooms, collection buckets etc. as per requirement. Hospital with a size of more than 300 beds should have mechanized mopping machine.		Check if cleaning staff uses three bucket system for cleaning. One bucket for Cleaning solution, second for plain water and third one for wringing the mop. Ask the cleaning staff about the process	Ask cleaning staff to demonstrate the how they apply mop on floors. It should be in one direction without returning to the starting point. The mop should move from inner area to outer area of the room.	Check if brooms are stored in patient care areas. Ask cleaning staff if they are using brooms for sweeping in wards, OT, Labour room. Brooms should not be used in patient care areas.	Check if cleaning staff is using same mop for outer general areas and critical areas like OT and labour room. The mops should not be shared between critical and general area. The clothes used for cleaning procedure surfaces like OT Table and Labour Room Tables should
Assessment	SI/RR	SI/OB		SI/OB	SI/OB	SI/OB	SI/OB
Criteria *	Availability of Buckets and carts for Mopping	Availability of Cleaning Equipment	Use of Standard Methods Cleaning	Use of Three bucket system for cleaning	Use unidirectional method and out word mopping	No use of brooms in patient care areas	Use of separate mops for critical and semi critical areas and procedures surfaces
Ref. No. of Kayakalp Document / NQAS / Other allotted number	87.4	87.5	B8	88.1	B8.2	88.3	B8.4

ance Score					1		
Compliance		-	5	-	1	-	-
Means of Verification	not be used for mopping the floors.	Check if cleaning staff disinfect, clean and dry the mop before using it for next cleaning cycle.		Check that Housekeeping Checklist is displayed in Toilet and updated. Check Housekeeping records if checklists are daily updated for at least last one month	Check that Housekeeping Checklist is displayed in OPD, IPD, Lab, etc. Check Housekeeping records if checklists are daily updated for at least last one month	Check that Housekeeping Checklist is displayed in Labour room, OT Dressing room etc. Check Housekeeping records if checklist are daily updated for at least last one month.	Check if a staff-member from the hospital has been designated to monitor the housekeeping activities and verify them with counter signature on housekeeping checklist.
Assessment		SI/OB		OB/RR	OB/RR	OB/RR	SI/RR
Criteria *		Disinfection and washing of mops after every cleaning cycle	Monitoring of Cleanliness Activities	Use of Housekeeping Checklist in Toilets	Use of Housekeeping Checklist in Patient Care Areas	Use of Housekeeping Checklist in Procedure Areas	A person is designated for monitoring of Housekeeping Activities
Ref. No. of Kayakalp Document / NQAS / Other allotted number		88.5	89	B9.1	89.2	89.3	89.4

Secured									
Compliance	-	5	-	-	-	1	-	4	-
Means of Verification	Check if there is any system of monitoring that adequate concentration of disinfectant solution is used for cleaning. Hospital administration take feedback from cleaning staff about efficacy of the solution and take corrective action if it is not effective.		Check if there is any open drain in the hospital premises. Hospital should have a closed drainage system. If, the hospital's infrastructure is old and it is not possible create closed draining system, the open drains should properly covered.	Check that the drains have adequate slope and there is no accumulation of water or debris in it	Check if Hospital sewage has proper connection with municipal drainage system. If access to municipal system is not accessible, hospital should have a septic tank with in the premises.	Observe that the drains are not overflowing or blocked	Check with the cleaning staff about the frequency of cleaning of drains. Verify with the records.		Discuss with hospital administration about involvement of local NGOs/Civil society
Assessment	SI/RR		OB	OB	OB/5I	OB	SI/RR	nc	SI
Criteria *	Monitoring of adequacy and quality of material used for cleaning	Drainage and Sewage Management	Availability of closed drainage system	Gradient of Drains is conducive for adequate for maintaining flow	Availability of connection with Municipal Sewage System/ or Soak Pit	No blocked/ over-flowing drains in the facility	All the drains are cleaned once in a week	Community Monitoring & Patient Participation	Local NGO/ Civil Society Organizations are involved in cleanliness of the hospital
Ref. No. of Kayakalp Document / NQAS / Other allotted number	B9.5	B10.	810.1	B10.2	B10.3	810.4	810.5	FI	F1.2

Ker. No. or Kayakalp Document / NQAS / Other allotted number	Criteria *	Assessment	Means of Verification	Compliance	Secured
	Patients are counselled on benefits of Hygiene	Ы	Check with patients, if they have been counselled for hygiene practices	-	
	Patients are made aware of their responsibility of keeping the health facility clean	PI/OB	Ask patients about their roles& responsibilities with regards to cleanliness. Patient's responsibilities should be prominently displayed	-	
	The Health facility has a system to take feed-back from patients and visitors for maintaining the cleanliness of the facility	SI/RR	Check if there is a feedback system for the patients. Verify the records	1	
	Total ( Kayakalpa)			63	
	The facility has established procedures for pest, rodent and animal control	OB	No stray animal/rodent/birds	2	
	Total (NQAS)			2	
	Documentation - properly maintained as per ToR	RR		2	
	Modern equipments/ instruments introduced for up keeping of Hospital Building & Premises	80		2	
	Total (Other)			4	
	Patient satisfaction indicators (in patient & outpatient)	RR			
	% of people satisfied on cleanliness of the hospital (2 marks if scored >=80% or else 0)		Patient Satisfaction Study	7	
	Health care providers satisfaction indicators	RR			
	% of Health Care Provider satisfied on cleanliness of the hospital (2 marks if scored >=80% or else 0)		Feedback form of Health Care Providers	2	

Score Secured	2	75
Means of Verification Cor		
Assessment		
Criteria *	Overall Impression of Head of the Institution on management of services by outsourced agency	
Ref. No. of Kayakalp Document / NQAS / Other allotted number	C.3	Grand Total

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