

Evaluation Certeria For EXPRESSION OF Interest (EOI) / Pre-Qualification Of Consulting Firms/ JOINT VENTURES For DHQ Teaching Hospital Gujranwala

Department of Health, Government of Punjab is constructing a **502 bedded, six story building**, (approximate cost of the project is 4.435 Billion capital and revenue components) tertiary care Teaching Hospital with a covered area of approximately 400,000 square feet. The hospital is under construction and is likely to be completed by **August 2018**. The Hospital will have 15 operation theatres 80 bedded medical and surgical emergency department and 20 bedded two ICUs. The procuring agency represented by the Principal GMC Gujranwala wishes to solicit EOI for pre-qualification of legally registered Consulting firms/ Joint ventures giving total solution inclusive of plan, design, cost estimation & assistance in supervision by Resident Consultant.

1. I.T networking.
2. Telecommunication and public-address system networking.
3. Assessment of electrical load with complete distribution plan and power backup.
4. HVAC system for entire hospital.
5. Surveillance and monitoring system with security plan.
6. Firefighting, Fire alarm system and evacuation plan.

The interested consultancy firms having experience of similar nature works may apply for pre-qualification containing firms the following information / particulars duly supported with necessary documents:

- Name of firm / address of the registered office with telephone / fax number and E-mail address including organization chart showing management structure.
- Memorandum and Articles of Association of the firms. (in case of association/JV)
- Certificate of Registration with the Pakistan Engineering Council, Islamabad Along with the valid renewal letter in relevant project profile category
- Copy of Registration with Securities and Exchange Commission of Pakistan or Registrar of Firms.
- Complete information of the Firms as per PPRA Rule 47.
- Project wise experience with time duration for each Project.
- List of similar works completed by the Firm during the last 10-years and similar Works in hand, indicating total cost of such works and cost of Consultancy Services received against those works along with date of start and Expected date of completion.
- An undertaking by the consulting firms / JVs to the effect that “Neither the firm/ Consultants / JVs nor its Directors / Stakeholders, as a whole or as a part of the Firm have even been black listed / defaulted by any Government Agency / Department / Organization and also that the information supplied by the Consultants / firm / JVs are correct.
- Superfluous / irrelevant information shall lead to disqualification. Audited Statement of Account for the last 03-years. Copy of Registration with Income Tax Department, Active Tax Payer.
- List of permanent professional staff along with CVs of relevant core staff showing Project wise experience with exact time duration for each project.

SR#	Designation
1	Team Leader

2	Electrical Expert
3	HVAC Expert
4	IT Networking Expert.
5	Telecommunication Expert.
6	Relevant Expert

Short listing will be done by the consultant Selection Committee

Short listed eligible consulting firm/joint ventures will be requested for proposals, in accordance of PPRA rule No.48, by **PROJECT DIRECTOR (PMU), GUJRANWALA MEDICAL COLLEGE, GUJRANWALA.**

NOTE: -

- The minimum prequalification marks are **65%**.
evaluation criteria is annexed as flags A,B,C,D,E.

CHECK LIST OF PRE-REQUISITES DOCUMENTS REGARDING
"MISSING SPECIALITIES HOSPITAL 502 BEDDED TO BE CONSTRUCTED BESIDES GUJRANWALA MEDICAL COLLEGE, GUJRANWALA."

GROUP-1

Sr. No.	Name of Firm	Memorandum and Articles of Association of the firms	Certificate of Registration with the Pakistan Engineering Council	Copy of Registration with Securities and Exchange Commission of Pakistan or Registrar of Firms	Project wise experience with time duration for each Project	List of similar works completed by the Firm during the last 10-years and similar Works in hand	An undertaking by the consultants	Certificate / Affidavit that the consultants / firms /JVs is not in litigation with any CLIENT	Audited Statement of Account for the last 03-years. Copy of Registration with Income Tax Department.	List of permanent professional staff along with CVs of relevant core staff showing Project wise experience	Remarks
1											
2											
3											
4											
5											
6											

EVALUATION OF FIRMS FOR EOIs OF PROJECT "MISSING SPECIALITIES HOSPITAL 502 BEDDED TO BE CONSTRUCTED BESIDES GUJRANWALA MEDICAL COLLEGE, GUJRANWALA.

FOR GROUP 1

Firm Name:

Part 1 **Relevant Experience and Understanding**

Firms should provide detail of Two similar projects (FORMAT ATTACHED ANNEXTURE "E") showing consultancy fee charged which will be evaluated as per following :

Maximum Marks = 20

similarity	RELATIVE SIZE OF ASSIGNMENT			REMARKS
	80% or More	50%-80%	Less than 50%	
Strong	1	0.65	0.3	TOTAL
Medium	0.65	0.4225	0.195	
Weak	0.3	0.195	0.09	

Part - 2 **Personnel**

Consulting firm should provide details of following Experts on attached CV format (ANNEXTURE "D")

Maximum Marks = 80

S.No.	Name of Experts	Marks	Education <small>*Max 20% (16)marks</small>	Experience	Experience	Total
				Year wise <small>full marks 40% Max 32 marks (for 10 years)</small>	Project Wise <small>full marks 40% for Max 32 marks 5 similar projects</small>	
1	TEAM LEADER (with relevant qualification & experience)	25	5.00	10.00	10.00	25.00
2	Electrical Expert	15	3.00	6.00	6.00	15.00
3	Mechanical Expert	15	3.00	6.00	6.00	15.00
4	IT Networking expert	15	3.00	6.00	6.00	15.00
5s	Telecommunication & public address system Expert	10	2.00	4.00	4.00	10.00
TOTAL		80.00	16.00	32.00	32.00	
GRAND TOTAL						80.00

Phd	100%
Msc	90%
B.Sc	80%

Evaluation of Expression of Interest (EOIs)

"MISSING SPECIALITIES HOSPITAL 502 BEDDED TO BE CONSTRUCTED BESIDES GUJRANWALA MEDICAL COLLEGE, GUJRANWALA. "
(Qualifying Marks=65%)

Sr. No.	Name of Firm	Experience & Standing	Personnel	Total	Remarks
		Max (20)	Max (80)		
1				0.00	
2				0.00	
3				0.00	
4				0.00	
5				0.00	
6				0.00	
7				0.00	
8				0.00	
9				0.00	
10				0.00	
11				0.00	
12				0.00	

ANNEXTURE "D"

Curriculum Vitae (CV) for Proposed Professional Staff

1. Proposed Position [*only one candidate shall be nominated for each position*]:

2. Name of Firm [*Insert name of firm proposing the staff*]:

3. Name of Staff [*Insert full name*]:

4. Date of Birth: **Nationality:**

5. CNIC No (if Pakistani): **or Passport No:**

6. Education :

<i>Degree</i>	<i>Major/Minor</i>	<i>Institution</i>	<i>Date (MM/YYYY)</i>

7. Membership of Professional Associations:	_____

8. Other Training [<i>Indicate significant training since degrees under 6 - Education were obtained</i>]:	_____

9. Languages [For each language indicate proficiency: good, fair, or poor in speaking, reading, and writing]:	_____

10. Employment Record [<i>Starting with present position, list in reverse order every employment held by staff member since graduation, giving for each employment (see format here below): dates of employment, name of employing organization, positions held.</i>]:	_____

<i>Employer</i>	<i>Position</i>	<i>From (MM/YYYY)</i>	<i>To (MM/YYYY)</i>

11. Detailed Tasks Assigned. [List all tasks to be performed under this assignment]	[List

12. Work Undertaken that Best Illustrates Capability to Handle the Tasks Assigned
<p><i>[Among the assignments in which the staff has been involved, indicate the following information for those assignments that best illustrate staff capability to handle the tasks listed under point 11.]</i></p>
1) Name of assignment or project & Location: _____ Cost of Project _____
Date of Start _____ Date of Completion _____
Actual Time Spent on the Project: _____ in months.
Client: _____
Main project features: _____
Positions held: _____
Activities performed: _____

2) Name of assignment or project & Location: _____ **Cost of project** _____

Date of Start _____ Date of Completion _____

Actual Time Spent on the Project: _____ in months.

Client: _____

Main project features: _____

Positions held: _____

Activities performed: _____

3) Name of assignment or project & Location: _____ **Cost of Project** _____

Date of Start _____ Date of Completion _____

Actual Time Spent on the Project: _____ in months.

Client: _____

Main project features: _____

Positions held: _____

Activities performed: _____

4) Name of assignment or project & Location: _____ **Cost of project** _____

Date of Start _____ Date of Completion _____

Actual Time Spent on the Project: _____ in months.

Client: _____

Main project features: _____

Positions held: _____

Activities performed: _____

5) Name of assignment or project & Location: _____ **Cost of project** _____

Date of Start _____ Date of Completion _____

Actual Time Spent on the Project: _____ in months.

Client: _____

Main project features: _____

Positions held: _____

Activities performed: _____

13 Certification:

I, the undersigned, certify that to the best of my knowledge and belief, this CV correctly describes myself, my qualifications, and my experience. I understand that any willful misstatement described herein may lead to my disqualification or dismissal, if engaged.

_____ Date: _____

[Signature of staff member or authorized representative of the staff] *Day/Month/Year*

Full name of authorized representative: _____

ANNEXTURE 'E'

CONSULTING FIRM EXPERIENCE

Assignment name:	Cost of the Project
Country: Location within country:	Duration of assignment (months):
Name of Client:	Total N ^o of staff-months (by your firm) on the assignment:
Start date (month/year): Completion date (month/year):	1- Total Value of the Consultancy Agreement. 2- Value of consultancy services provided by your firm under the agreement (in current PKR or US\$):
Name of associated Consultants, if any:	N ^o of professional staff-months provided by associated Consultants:
Name of senior professional staff of your firm involved and functions performed (indicate most significant profiles such as Project Director/Coordinator, Team Leader):	
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Narrative description of Project:	
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Description of actual services provided by your staff within the assignment:	
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1. Firms Name:	
2. Certificate by the Client / Employer that the work was successfully completed by the consultant.	