

**EVALUATION CRITERIA FOR EXPRESSION OF INTEREST (EOI) / PRE-QUALIFICATION
OF CONSULTING FIRMS/ JOINT VENTURES FOR DHQ TEACHING HOSPITAL**

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. Medical gases and suction system.
2. CSSD (central sterile supply Department)
3. Medical Laundry System

The interested consultancy firms having experience of similar nature works may apply for pre-qualification containing the following information / particulars duly supported with necessarily 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).
- 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 consultants / 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 is correct.
- Superfluous / irrelevant information shall lead to disqualification. 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 with exact time duration for each project.

SR#	Designation
1	Team Leader
2	Experts for C.S.S. D
3	Experts for Medical Gases and suction system
4	Experts for Medical Laundry system

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 certeria is annexed as flags A,B,C.

ANNEXTURE "B"

**PRE-QUALIFY EVALUATION OF FIRMS FOR EOIs OF PROJECT "MISSING SPECIALITY HOSPITAL 502
BEDDED TO BE CONSTRUCTED BESIDES GUJRANWALA MEDICAL COLLEGE, GUJRANWALA.**

GROUP 2

Firm Name:

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

		RELATIVE SIZE OF ASSIGNMENT			REMARKS
		80% or More	50%-80%	Less than 50%	
similarity	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	Experience	understanding	Total
				Year wise	Project Wise	
				*Max 20% marks/each	full marks 40% for 5 similar projects each	
1-	TEAM LEADER (with relevant qualification & experience)	30	6.00	12.00	12.00	30.00
2-	CSSD Expert	15	3.00	6.00	6.00	15.00
3-	Laundry system Expert.	10	2.00	4.00	4.00	10.00

4-	Medical Gases and suction system Experts.	25	5.00	10.00	10.00	25.00
total		80.00	16.00	32.00	32.00	
Total						80.00
phd:	100%					
msc:	90%					
bsc:	80%					

ANNEXTURE "C"

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]
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12. Work Undertaken that Best Illustrates Capability to Handle the Tasks Assigned
<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>
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 wilful 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.	