**aNNEXURE A 1: Bidder TECHNICAL Compliance Checklist**

**The form must be submitted in File 1, Exhibit 2**

**Example of how to complete the compliance checklist:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Section No.** | **Technical Criteria** | **Compliant** | **Partially Compliant** | **Non-Compliant** | **Reference page in proposal** | **Comments** |
| 1.1 | Full details of the mobile clinic/s it will be utilising in the selected province provide the services to SARS; and this should include but not be limited to proof of ownership with copies of registration documents for each vehicle, copies of lease agreements where applicable, or copies of any other contract entered into in relation to the mobile clinics. | Ye |  |  | Page 9 to 12 - Exhibit 2 |  |
| 1.2 | A detailed list of all equipment available to conduct the required services, including their calibration certificates. |  | Yes |  | Page 11 to 12 - Exhibit 2 | Bidder to state reason for partial compliance |

1. **MEDICAL SURVEILLANCE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Section No.** | **Technical Criteria** | **Compliant** | **Partially Compliant** | **Non-Compliant** | **Reference page in proposal** | **Comments** |
| 14.1.1 | Provide a methodology and rollout plan for the provisioning of the services. |  |  |  |  |  |
| 14.1.2 | Provide full details of the mobile clinic(s) it will be utilising in the selected province to provide the services to SARS, and this should include but not be limited to proof of ownership with copies of registration documents for each vehicle, copies of lease agreements where applicable, or copies of any other contract entered into in relation to the mobile clinic(s). |  |  |  |  |  |
| 14.1.3 | A detailed list of all equipment available to conduct the required services, including their calibration certificates. |  |  |  |  |  |
| 14.1.4 | Valid proof of current professional registration for each of its key personnel who will be involved in medical surveillance ; and Indicate the Bidder’s relevant experience in the field of Medical Surveillance.. |  |  |  |  |  |

1. **IMMUNISATIONS**

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| --- | --- | --- | --- | --- | --- | --- |
| **Section No.** | **Technical Criteria** | **Compliant** | **Partially Compliant** | **Non-Compliant** | **Reference page in proposal** | **Comments** |
| 14.2.1 | A description of protocol in cases of an emergency. |  |  |  |  |  |
| 14.2.2 | Provide a description of their medical waste management process. |  |  |  |  |  |

1. **REPORTING**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Section No.** | **Technical Criteria** | **Compliant** | **Partially Compliant** | **Non-Compliant** | **Reference page in proposal** | **Comments** |
| 14.3.1 | A description of document management / record-keeping system that will be used.. |  |  |  |  |  |
| 14.3.2 | A description of its customer care system for the management of complaints. |  |  |  |  |  |
| 14.3.3 | Full details of how electronic, as well as paper-based, confidential client information will be stored and maintained. |  |  |  |  |  |

1. **KEY CONTACT PERSON**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Section No.** | **Technical Criteria** | **Compliant** | **Partially Compliant** | **Non-Compliant** | **Reference page in proposal** | **Comments** |
| 14.4.1 | Provide full contact details of co-ordinator(s) for **each province** a Bidder is tendering for. |  |  |  |  |  |

1. **FOOTPRINT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Section No.** | **Technical Criteria** | **Compliant** | **Partially Compliant** | **Non-Compliant** | **Reference page in proposal** | **Comments** |
| 14.5.1 | Bidders must provide proof of address in the form of a utility bill, for each province they are tendering for. In cases where the Bidder does not have a footprint in a province they are tendering for, the Bidder must provide proof in the form of an agreement with a sub-contractor who has the necessary footprint and will provide the services on the Bidder’s behalf in the province the Bidder is tendering for. |  |  |  |  |  |

1. **REFERENCES**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Section No.** | **Technical Criteria** | **Compliant** | **Partially Compliant** | **Non-Compliant** | **Reference page in proposal** | **Comments** |
| 14.6.1 | Bidders must provide the names of two (2) current/recent customers for each province they are tendering for. References provided must not date back further than 2012. Bidders  must include in such references:  • the company’s name;  • a contact name;  • address;  • phone number;  • the duration of the  contract, and  • a brief description of  the services rendered  to the customer |  |  |  |  |  |