**aNNEXURE A2: Bidder TECHNICAL Compliance Checklist**

**The form must be submitted in File 1 (Technical file), Exhibit 2**

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

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Section**  **No** | **Technical Criteria** | **Compliant** | **Partially Compliant** | **Non-Compliant** | **Reference page in Proposal** | **Comments** |
| 1.2 | **Provide a methodology and rollout plan for the provisioning of the services.** | Yes |  |  | Page 9 to 12 - exhibit 2 |  |
| 2.1 | **Provide a detailed list of all equipment available to conduct the required services, including calibration certificates, subcontracting to be stated upfront in SBD 6.1.** |  | Yes |  | Page 13 to 15 - exhibit 4 | Bidder to state reason for partial compliance |
| 2.2 | **Provide 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 and Immunisation.** |  |  | No | Page 17 to 20 - exhibit 5 | Bidder to state reason for non-compliance |

| **No.** | **Technical Evaluation Criterion** | **Compliant** | **Partially Compliant** | **Non-Compliant** | **Reference page in Proposal** | **Comments** |
| --- | --- | --- | --- | --- | --- | --- |
| **15.** | **Company Profile and Resources** |  |  |  |  |  |
| 15.1.1 | Provide a methodology and rollout plan for the provisioning of the services. |  |  |  |  |  |
| 15.1.2 | Provide full details of the mobile clinic/s that will be utilised in the selected region to provide the services to SARS, and this should include but not be limited to:   * Proof of ownership with copies of valid registration documents for each vehicle; and * Copies of lease agreements where applicable, or copies of any other contract entered into in relation to the mobile clinics. |  |  |  |  |  |
| 15.1.3 | Provide a detailed list of all equipment available to conduct the required services, including calibration certificates, subcontracting to be stated upfront in SBD 6.1. |  |  |  |  |  |
| 15.1.4 | Provide 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 and Immunisation. |  |  |  |  |  |
| 15.1.5 | A short description of how electronic, as well as paper-based, confidential client information will be stored and maintained. |  |  |  |  |  |
| **15.2** | **Immunisation** |  |  |  |  |  |
| 15.2.1 | Bidder(s) must provide a description of the protocol in cases of an emergency. |  |  |  |  |  |
| 15.2.2 | Bidder(s) must provide a description of their medical waste management process |  |  |  |  |  |
| **15.3** | **Reporting** |  |  |  |  |  |
| 15.3.1 | Bidder(s) must provide a description of the document management/record-keeping system. |  |  |  |  |  |
| 15.3.2 | Bidder(s) must provide a complaints management process that will be utilised. |  |  |  |  |  |
| **15.4** | **Key Contact Person** |  |  |  |  |  |
| 15.4.1 | Provide full contact details of the co-ordinator(s) for each region bidders will be tendering for. |  |  |  |  |  |
| **15.5** | **Reference** |  |  |  |  |  |
| 15.5.1 | Bidders must provide the names of two (2) current/recent customers for each region they are tendering for. References provided must not date back further than 2014.  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. |  |  |  |  |  |