

**Pre-Qualification Questionnaire**

|  |  |
| --- | --- |
| **PQQ RESPONSE FROM**       *Please enter your organisation’s name* |  |
| **PQQ SUBMISSION DATE**  *Please enter the date that you have sent this document back to CHS* |  |

**Notes for Suppliers**

* The purpose of this questionnaire is to assist The Cambridge Housing Society Limited and its subsidiaries (CHS) in shortlisting bidders to invite to tender for **VoIP Telephone Services**.
* Guidance is given below each question or section heading as appropriate.
* Bidders are solely responsible for all their own costs in connection with preparing and submitting this PQQ to CHS.
* CHS reserves the right to cancel, modify or postpone this PQQ process and does not guarantee that a procurement exercise will take place after the PQQ process.
* This simplified PQQ form is specifically being used to allow the entry of SMEs into CHS’s supply base.
* Please answer every question.
* Many procurement exercises generate a great deal of interest from potential suppliers, so please ensure that you complete the questionnaire as requested. Failure to do so may result in your application being disqualified.
* If the question does not apply to you, please write N/A. If you do not know the answer, please write N/K.

Please return this form ***no later than 12:00 on 19th July 2024*** to:

**Tenders@chsgroup.org.uk**

*We will contact you again by* ***26th July 2024*** *to let you know whether you have been successful. If so, you will then be invited to tender for the contract.*

***Please address any queries to Claire Hughes-Thomas at the email address above.***

1. **BASIC DETAILS OF YOUR ORGANISATION**

|  |  |  |
| --- | --- | --- |
|  | **Question** | **Response** |
| 1.1 | Name of the organisation: |  |
| 1.2 | Contact name: |  |
| 1.3 | Job title: |  |
| 1.4 | Company address: |  |
| 1.5 | Post code: |  |
| 1.6 | Telephone number: |  |
| 1.7 | Fax number: |  |
| 1.8 | E-mail address: |  |
| 1.9 | Website address: |  |
| 1.10 | Company Registration Number (if this applies): |  |
| 1.11 | Charities or Housing Association or other Registration number (if this applies): |  |
|  | *If 1.11 above applies, please specify registering body* |  |
| 1.11.1 | Date of registration: |  |
| 1.11.2 | Registered address: |  |
| 1.11.3 | Post code: |  |
| 1.12 | Are you registered for VAT? |  |
| 1.12.1 | VAT registration number: |  |
| 1.13 | Is your organisation: *(Please select only one box below with “Yes”)* | |
| 1.13.1 | A public limited company? |  |
| 1.13.2 | A limited company? |  |
| 1.13.3 | A partnership? |  |
| 1.13.4 | Other *(please specify)* |  |
| 1.14 | Are you acting as the lead organisation in a consortium? *(yes/no)* |  |
| 1.15 | If members of your consortium or sub-contractors are likely to deliver a significant (over 50%) proportion of the contract, give each company name and address. |  |
| 1.16 | Name of (ultimate) parent company *(if this applies)*: |  |
| 1.17 | Companies House Registration Number of parent company (if this applies): |  |

2. **ABOUT YOUR APPLICATION**

2.1 **There is one lot in this contract.**

2.2 CHS wishes to appoint one provider of **VoIP Telephone Services** to cover all its requirements.

|  |  |
| --- | --- |
| **Question** | **Response** |
| Please confirm that your organisation can deliver against all CHS’s requirements (yes/no) |  |

***Important:*** *Please note failure to provide a capability for our entire service provision will disqualify your bid submission in its entirety.*

2.3 Our requirements consist of:

2.3.1 ***VoIP Telephone Service Requirement***

*CHS requires an entirely digital telephone system to replace its existing system with the following specification:*

*System to be scalable.*

*Phones:*

* *Predominantly softphone*
* *Ability to receive calls at any location whilst connected to the Internet or mobile data.*

*Customer Services (Switchboard/ call centre)*

* *Call analytics/ reporting – real-time and historic. To include length of call, wait time, abandoned calls, average time to answer.*
* *Incoming menu system for customers with ability to transfer calls externally.*
* *System to distribute calls to agents according to which signed in and available for longest period of time (Hunt group)*
* *Able to divert incoming calls to out of hours call centre with several different recorded messages being available.*
* *Call queues with queue numbers for those waiting.*
* *Music on hold.*
* *Ability to transfer calls both internally and externally.*

*All system users*

* *Easy to transfer between different devices.*
* *Ability to disconnect from Voicemail (mainly switchboard users)*
* *Ability to transfer calls both internally and externally.*
* *Direct call numbers (DDI) preferably taking existing numbers.*
* *Voicemail to email.*
* *Directories – both company wide and personal.*
* *Conference calls.*
* *Call blocking.*
* *Easy Out-of-Office setting across platforms.*
* *Easy setting of voicemail messages.*
* *Group pickup and ring between specified users.*
* *Possible hunt groups at schemes outside of head office*

***Contract Term***

*The prices offered for this 36-month period, that will be a fixed price, with an extension option for a further 2 years..*

**3.** **SUPPLIER PROFILE AND BUSINESS ACTIVITIES**

|  |  |  |
| --- | --- | --- |
|  | **Question** | **Response** |
| 3.1 | What are the main business activities of your organisation? *CHS needs to understand the core business of each bidder’s organisation.* |  |
| 3.2 | What proportion of CHS’s requirement would you deliver directly and what proportion would you provide from a sub-contractor? *CHS needs to understand the percentage of each bidder’s proposed service delivery that will be provided using the bidder’s own resources and how much will be delivered on via a sub-contractor*. |  |
| 3.3 | CHS are aiming for the appropriate service to be in place by September 2024.  Please confirm that your organisation is capable of delivering against this requirement, highlighting how you would perform the necessary activities. *CHS needs to have strong assurance that any provider can provide the appropriate services with no gaps.* |  |
| 3.4 | How many years has your company been in existence offering the services being tendered for? *CHS needs to understand the experience base that your organisation will bring to manage our services.* |  |
| 3.5 | Please describe your organisational approach to operating a formalised quality management system. *CHS needs to understand if your organisation has an organised approach to the management of our service delivery.* |  |

4**. FINANCIAL STANDING**

CHS needs assurance on the financial viability of its suppliers. This section is intended to give CHS the necessary details to make a professional judgement on each bidder’s financial standing.

Important: Please note failure to demonstrate financial viability will disqualify your bid submission in its entirety.

|  |  |  |
| --- | --- | --- |
|  | **Question** | **Response** |
| 4.1 | What was your turnover in each of the last two financial years (if you are bidding as a consortium, please state aggregated turnover)? |  |
| 4.1.1 | For FY 2023 to 2024 | £ |
| 4.1.2 | For FY 2022 to 2023 | £ |
| 4.2 | Please attach a scanned copy (for electronic returns) of one of the following financial statements to your completed PQQ please only answer **yes** or **no** to which of the following documents you are attaching): |  |
| 4.2.1 | *A copy of your audited accounts for the most recent two years (if this applies)* |  |
| 4.2.2 | A statement of your turnover, P&L account and cash flow for the most recent year of trading |  |
| 4.2.3 | A statement of your cash flow forecast for the current year and a bank letter outlining the current cash and credit position |  |
| 4.2.4 | Alternative means of demonstrating financial status if trading for less than a year |  |

**5.** **EQUALITY AND DIVERSITY DECLARATION**

|  |  |  |
| --- | --- | --- |
|  | **Question** | **Response** |
| 5.1 | Do you have a written equalities policy? |  |
| 5.2 | If yes, please send a copy and summarise the areas your policy covers. |  |
| 5.3 | If no, please explain why. |  |
| 5.4 | List any documents you have attached as evidence. |  |

**6.** **ZERO CARBON DECLARATION**

|  |  |  |
| --- | --- | --- |
|  | **Question** | **Response** |
| 6.1 | Do you have a Zero Carbon Plan? |  |
| 6.2 | If yes, please send a copy and summarise the areas your plan covers below. |  |
| 6.3 | If no, please explain why. |  |
| 6.4 | List any documents you have attaching as evidence. |  |

**7.** **MODERN SLAVERY DECLARATION**

This is only a requirement for organisations with a turnover over £36M, however, some organisations are happy to voluntarily issue a Modern Slavery statement.

|  |  |  |
| --- | --- | --- |
|  | **Question** | **Response** |
| 7.1 | Do you have a Modern Slavery Statement? |  |
| 7.2 | If yes, please provide a copy. |  |

**8.** **QUALITY & COMPLIANCE**

|  |  |  |
| --- | --- | --- |
|  | **Question** | **Response** |
| 8.1 | Do you have **ISO9001 Quality Management Systems Certification** Y/N  *If yes, please provide a copy of your current certificate* |  |
| 8.2 | Do you have **ISO14001** **Environmental Management Systems Certification** Y/N  *If yes, please provide a copy of your current certificate* |  |
| 8.3 | Do you have **ISO45001** **Occupational Health & Safety Certification** Y/N  *If yes, please provide a copy of your current certificate* |  |
| 8.4 | Do you have **20400** **Sustainable Procurement Certification** Y/N  *If yes, please provide a copy of your current certificate* |  |
| 8.5 | Do you have **Cyber Essentials or Cyber Essentials Plus** Certification Y/N  *If yes, please provide a copy of your current certificate* |  |

**9.** **INSURANCE**

|  |  |  |
| --- | --- | --- |
|  | **Question** | **Response** |
| 9.1 | Please confirm that you understand and can satisfy CHS’s requirement for your public liability insurance to cover a minimum value of £10,000,000, employers’ liability insurance to cover a minimum value of £10,000,000 and professional indemnity insurance to cover a minimum value of £2,000,000. Please provide an undertaking that you will keep these policies in force throughout the life of the contract. |  |
|  | *Maintaining mandatory levels of insurance throughout the life of any trading relationship is an absolute requirement of CHS.* | ***Important:*** *Please note that failure to provide mandatory insurances will disqualify your bid submission in its entirety.* |
| 9.1.1 | I can confirm that I provide the required level of insurance cover |  |
| 9.1.2 | I cannot confirm that I provide the required level of insurance cover |  |
| 9.1.3 | I undertake to provide valid insurances for the life of the contract |  |
| 9.1.4 | I cannot undertake to provide valid insurances for the life of the contract |  |
|  |  |  |
| 9.2 | Please confirm that you have Data Protection Indemnity Insurance cover |  |

10. **EXPERIENCE AND REFERENCES**

10.1 Please provide details of two reference contracts from either the public sector, third sector (i.e. Charities, etc) or the private sector, in the last three years that are relevant to CHS’s requirement. The reference contact must be prepared to speak to CHS should we wish to contact them.  
*CHS needs to ensure that your organisation has the technical ability and customer service credentials to adequately deliver our services.*   
***Important:*** *Please note that any negative references will disqualify your bid submission in entirety.*

|  |  |
| --- | --- |
| **Reference Contract 1** |  |
| Customer organisation (name): |  |
| Website (if available): |  |
| Customer contact name: |  |
| Phone number: |  |
| Email address: |  |
| Date contract awarded: |  |
| Date contract completed: |  |
| Contract value: |  |
| Brief description of contract (100) |  |
| Brief description of why you feel this reference is relevant to CHS’s requirement (50) |  |

|  |  |
| --- | --- |
| **Reference Contract 2** |  |
| Customer organisation (name): |  |
| Website (if available): |  |
| Customer contact name: |  |
| Phone number: |  |
| Email address: |  |
| Date contract awarded: |  |
| Date contract completed: |  |
| Contract value: |  |
| Brief description of contract (100) |  |
| Brief description of why you feel this reference is relevant to CHS’s requirement (50) |  |

**11.** **CHS TERMS AND CONDITIONS**

11.1 CHS has some standard terms and conditions, set out below, please confirm that you agree to conducting business on these terms.

* Invoices and correspondence addressed to The Cambridge Housing Society Limited
* Payment terms of 21 days from date of a correct and accurate invoice
* Invoices to quote the CHS purchase order number
* Payments will be made by BACS

|  |  |
| --- | --- |
| **Question** | **Response** |
| Please confirm that you agree to conducting business on these terms (yes/no) |  |

12. **PROFESSIONAL AND BUSINESS STANDING**  
*CHS maintains the highest professional business standards. As such, CHS has assurance that your organisation abides by the requirements of The Public Contracts Regulations (2006), regulation 23. (Refer to* [*http://www.opsi.gov.uk/si/si2006/20060005.htm#16*](http://www.opsi.gov.uk/si/si2006/20060005.htm#16)*)*.  
***Important:*** *Please note that any negative responses will disqualify your bid submission in its entirety.*

|  |  |  |
| --- | --- | --- |
|  | **Question** | **Response** |
| 12.1 | Do any of the following apply to your organisation, or to (any of) the director(s) / partners / proprietor(s)?  (Please only answer **yes** or **no** to the following) |  |
| 12.1.1 | Bankruptcy, insolvency, compulsory winding up, receivership, composition with creditors, or subject to relevant proceedings. |  |
| 12.1.2 | A conviction (or convictions) for a criminal offence related to business or professional conduct. |  |
| 12.1.3 | Legal or administrative finding of commission of an act of grave misconduct in the course of business. |  |
| 12.1.4 | Failure to fulfil obligations related to payment of social security contributions. |  |
| 12.1.5 | Failure to fulfil obligations related to the payment of taxes. |  |
| 12.1.6 | Failure to provide information required or providing inaccurate/misleading information when participating in a procurement exercise. |  |
| 12.1.7 | Failure to obtain and maintain relevant licences or membership of an appropriate trading or professional organisation where required by law. |  |

**13.**  **DISCLOSURE OF INTERESTS**

13.1 The principles defined under Schedule 1 of the Housing Act 1996, whereby The Cambridge Housing Society Limited (CHS) and its subsidiaries (CHS Group) are prohibited from engaging contractors or consultants if any director, partner, principal proprietor or person directly involved in the management of the firm, is an employee or Management Board Member (or a close relative of such persons) of any member organisation of the CHS Group shall apply to all tenders undertaken by CHS.

13.2 The ‘Disclosure of Interest’ form is provided for you to complete and return with the PQQ.

**UNDERTAKING**I declare that to the best of my knowledge the answers submitted in this PQQ are correct. I understand that the information will be used in the process to assess my organisation’s suitability to be invited to tender for CHS’s requirement.

I understand that CHS may reject this PQQ if there is a failure to answer all relevant questions fully or if I provide false/misleading information.

I assert that I am authorised to complete this questionnaire on behalf of my organisation.

|  |  |
| --- | --- |
| Name: |  |
| Position/job title: |  |
| Date: |  |
| Telephone number: |  |
| Signature: |  |
| *(for electronic submissions, please type name and state “By email” in the signature box)* | |

PQQ Checklist

|  |  |
| --- | --- |
| 1. Please confirm that you have read and understand the Notes for Suppliers, contained on page one of this document. (yes/no) |  |
| 1. Please confirm that you understand the deadline for submission of this PQQ is **12:00 19th July 2024** (yes/no) |  |
| 1. Please confirm you are attaching the document to meet the requirements of Chapter 4, Financial Standing, clause 4.2. (yes/no) |  |
| 1. Please confirm the Disclosure of Interest form has been completed (yes/no) |  |