

**Specification for Hire of Portable Air Conditioning Units for Maidstone & Tunbridge Wells NHS Trust**

**Introduction**

Maidstone & Tunbridge Wells NHS Trust is a large acute hospital Trust in the South East of England. The Trust was legally established on 14th February 2000 and provides a full range of general hospital services, and some areas of specialist complex care to around 560,000 people living in the South of West Kent and the North of East Sussex.

The Trusts core catchment areas are Maidstone and Tunbridge Wells and their surrounding boroughs, and it operates from two main clinical sites: Maidstone Hospital and Tunbridge Wells Hospital at Pembury. The latter is a Private Finance Initiative (PFI) hospital and provides wholly single bedded en-suite accommodation for in-patients.

The Trust employs a team of over 5000 full and part-time staff. In addition, the Trust provides specialist cancer services to around 1.8 million people across Kent, Hastings and Rother, via the Kent Oncology Centre, which is sited at Maidstone Hospital and at Kent and Canterbury Hospital in Canterbury. The Trust also provides outpatient clinics across a wide range of locations in Kent and East Sussex.

**Duration of Hire Contract**

The contract will be established for an initial period of 1 + 1 + 1 years. Invoiced monthly during the hire period. Contract is intended to start ASAP

**Description of works**

Hire of portable air conditioning units to Maidstone Hospital

**Location**

Maidstone Hospital, Hermitage Lane, Maidstone, Kent, ME16 9QQ

**Equipment required**

* 10 x 3.5kW Portable AC units with exhaust
* 25 x 6.7kW Avalanche with external heat exchanger and push fit hoses. 10m and 5m lengths fitted with HEPA Filters.

**Amount of Units for hire**

* Amount of units hired may vary year to year
* Hire period may vary due to the climatic conditions (Min 12 weeks)

**Delivery & Collection**

* Units to be delivered to Maidstone Hospital Site

**Installation and Initial set up**

* Company to assist with installation and initial set up

**Emergency Breakdown Cover**

* Company to collect and deliver new unit FOC in the case of a breakdown that was not due to damage, fire or theft from staff, patients or visitors of Maidstone Hospital.

**Key Performance Indicators**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| KPI | Good % | Approaching target % | Requires Improvement % | Inadequate % |
| % Response time to reactive works and emergency breakdowns | 98% | 97% | 96% | 95% |
| % Customer satisfaction and aftersales support | 98% | 97% | 96% | 95% |
| % engineer’s competency while attending to breakdowns | 98% | 97% | 96% | 95% |
| % DBS checks for service engineers | 98% | 97% | 96% | 95% |
| % ensuring the quality of the product delivered and service provided | 98% | 97% | 96% | 95% |

KPI rating system:

|  |  |
| --- | --- |
| Good | Performance is meeting or exceeding the Key Performance Indicators |
| Approaching target | Performance is close to meeting the key Performance Indicators |
| Requires Improvement | Performance is below the Key Performance Indicators |
| Inadequate | Performance is significantly below the Key Performance Indicators |

**Quote Form**

For Hire of Portable Air Conditioning Units as per the above specification

**Organisation: ………………………………………………………**

**Print Name: ………………………………………………………**

**Signature: ………………………………………………………**

**Date: ………………………………………………………**

**Telephone: ………………………………………………………**

**Please can you complete the below pricing matrix**

|  |  |
| --- | --- |
| Item | Total Price |
| 3.5kW Portable AC unit with exhaust | £xxx Per unit |
| 6.7kW avalanche with external heat exchanger and push fit hoses. 10m and 5m lengths fitted with HEPA Filters | £xxx per unit |
| Insurance waiver | 10 % of equipment weekly price |
| Delivery |  |
| Collection Cost |  |
| Installation |  |
| De-Commissioning |  |

|  |  |
| --- | --- |
| **Total cost for 2025** | **£** |
| **Total cost for 2026** | **£** |
| **Total cost for 2027** | **£** |
| **Total cost for whole 3-year proposal** | **£** |

**Declaration**

On completion of the response to this Quote, please read and sign the declaration below.

I/We certify that the information supplied in response to this Quote is accurate to the best of my/our knowledge.

I/We also understand it is a criminal offence, punishable by imprisonment, to give or offer any gift or consideration whatsoever as an inducement or reward to any servant of a public body and that such action will empower the Clients to exclude the organisation from any further involvement in the Quote process.

I/We declare that this offer is made in good faith and that the rates and prices quoted have not been fixed or adjusted by or in accordance with any agreement or arrangement with any other party. I/We also declare that I/we have not and will not:

(i) communicate to any person other than the Clients the amount or approximate amount of the offer, except in confidence in order to obtain quotations required for the preparation of the offer or for insurance purposes;

(ii) enter into any arrangement or agreement with any other person that he/she shall refrain from making an offer or as to the amount of any offer to be submitted.

I/We hereby declare that I/we am/are authorised by the under mentioned organisation to supply the information given above and, at the date of signing, the information given is a true and accurate record.

Signed: ………………………………………………

Name: …………………………………..………….

Position: ……………………………………………..

On behalf of: ……………………………………………..

Date: ……………………………………………..

The declaration must be signed by an authorised signatory, in his/her own name, and for and on behalf of the organisation. Where a consortium is submitting a Quote, each member organisation should sign the declaration**.**

**Please return this form with your response to the Quote.**

**Compulsory Questions**

**Confirmation to all of the questions below must be given before the quote will go forward for scoring.**

**Any questions not completed satisfactorily will be disqualified.**

|  |  |  |
| --- | --- | --- |
| **Site Visit** | | |
| Confirmation the site visit has taken place: | | |
| **Date of Visit** | **Accompanied by** | **Signature** |
| ***N/A*** |  |  |

|  |  |  |
| --- | --- | --- |
| **DBS Checks** | | |
| Confirmation that all employed directly or indirectly by the tenderer and working on site will have a current Standard or Enhanced DBS certificate: | | |
| **Date** | **Policy** | **Signature** |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Equality and Diversity** | | |
| Confirmation that all employed directly or indirectly by the tenderer and working on site will adhere to The Trust’s Diversity Policy at all times | | |
| **Date** | **Policy** | **Signature** |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Smoking and Drug and Alcohol Policies** | | |
| Confirmation that all employed directly or indirectly by the tenderer and working on site will adhere to The Trust’s Smoking and Drug and Alcohol Policies at all times | | |
| **Date** | **Policy** | **Signature** |
|  |  |  |

|  |  |
| --- | --- |
| **Net Zero Commitment** | |
| Please confirm that your organisation is taking steps to reduce your greenhouse gas emissions over time and is publicly committed to achieving net zero by 2050.  Please circle yes or no | **Yes / No** |
| Please confirm your Net Zero target date: e.g. 2050 |  |

|  |  |  |
| --- | --- | --- |
| **Business Continuity Plan** | | |
| **Please attach your current Business Continuity Plan** | | |
| **Date** | **Policy** | **Signature** |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Competencies** | | |
| Confirmation that all employed directly or indirectly by the tenderer and working on site will have the necessary competency to carry out their tasks and evidence will be provided during the pre-start meeting and at any time during the works at request of the Trust. | | |
| **Date** |  | **Signature** |
|  |  |  |

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| --- | --- | --- |
| **Site Supervision** | | |
| Confirmation that a competent site supervisor is on site at all time works is being untaken including that of sub-contractors and other services being employed by the tenderer. | | |
| **Date** |  | **Signature** |
|  |  |  |