**Document 8 - Request for References for an Organisation**

**Request for Quotation Exercise - Primary Care Occupational Health Services in Derbyshire**

As part of the Request for Quotation Exercise for Primary Care Occupational Health Services in Derbyshire please complete the template below for [BIDDER TO INSERT THEIR ORGANISATION NAME HERE]

**Background and Context to the Procurement – important information for Referee**

NHS Arden and Greater East Midlands Commissioning Support Unit (AGCSU) on behalf of NHS England – North Midlands (referred to as the Authority) is inviting suitably qualified and experienced providers to deliver Primary Care Occupational Health Services in Derbyshire under a 4 year agreement with the option to extend for up-to a further 9 months.

**Note to Referee**:

Each Bidder is required to provide one reference as part of their bid submission for this tender, which must be in accordance with the following:

1. If the bidder has previously held agreements/contracts for Occupational Health Services in prisons then the referee MUST be from these commissioning organisations.
2. If the bidder has not held agreements with any commissioning organisation they may then include a referee from organisations where they have provided Occupational Health Services.
3. If the bidder is still unable to provide 1 referee from the previous two categories only then can they include a referee from a professional colleague.

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| --- | --- | --- | --- |
| Referee |  | | |
| Position |  | | |
| Organisation |  | | |
| Applicant Organisation |  | | |
| Please state the capacity in which you are providing the reference | 1. As a commissioning organisation that the Bidder has previously held agreements/contracts with where the contract value is similar to that per annum as stated in the background information above; | YES | NO |
|  |  |
| 1. As an organisation where the Bidder has worked as a contractor/provider only; | YES | NO |
|  |  |
| 1. Professional colleague reference. | YES | NO |
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| Has this organisation provided a service similar (or could be viewed as similar) to the proposed one for you/your organisation? | YES | NO |
|  |  |

If answered, “YES” to the above, please could you provide the following information….

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| --- |
| Project/contract description and scope of duties carried out |
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|  |  |
| --- | --- |
| Nature of Services |  |
| Contract Value (Per annum) |  |
| Date of commencement of contract |  |
| Period of contract | Months/years: |
| Contract End Date |  |
| How many contracts of the above nature has this organisation undertaken for you? |  |
| Is this organisation a sole provider or Framework provider |  |

| The headings below show various aspects of the organisation’s performance. Would you please complete the sections below by placing a mark in the appropriate box to indicate your assessment of the organisations performance on the contract(s) you describe above. **You are encouraged to make additional comments in the comments column.** | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Excellent | Good | Average | Poor | N/A | Comments |
| 1 | The ability to comply with the contract specification in relation to cost/quality of service delivery? |  |  |  |  |  |  |
| 2 | The ability to demonstrate an effective management of the service. |  |  |  |  |  |  |
| 3 | The ability of management and supervisory staff. |  |  |  |  |  |  |
| 4 | The ability to achieve the deadlines/ performance targets you specify? |  |  |  |  |  |  |
| 5 | The ability to manage the requirements of the contract |  |  |  |  |  |  |
| 6 | The ability to cope with a diverse service requirement |  |  |  |  |  |  |
| 7 | Communication links with client. |  |  |  |  |  |  |
| 8 | Communication with other organisations e.g. acute services, GPs, other Dental practices |  |  |  |  |  |  |
| 9 | The ability to meet your expectations in terms of the quality of the service delivered? |  |  |  |  |  |  |
| 10 | The ability to demonstrate continuous improvement over the length of the contract |  |  |  |  |  |  |
| 11 | The organisation’s track record for submitting trading statements, accounts, invoices, key performance data and other essential returns? |  |  |  |  |  |  |
| 12 | Organisation’s overall performance |  |  |  |  |  |  |

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| --- | --- | --- |
| Would you recommend the appointment of this organisation? | YES | NO |
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| Please detail any innovation that has been demonstrated in the services provided. |
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| Briefly describe the benefits you feel the contracting Authority has realised since awarding you this contract. |
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| Please make any comments you may feel are appropriate in the space provided below. |
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| Completed by:  Name:  Job Title:  Email address:  For and on behalf of:  Date: |

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| --- |
| **Please return this reference by 12 noon on 5th October 2018 via email to :**  Sarah.groves4@nhs.net  Please title the email *“reference request for Request for Quotation Exercise - Primary Care Occupational Health Services in Derbyshire* |