**Clinical Knowledge Summaries: an Evidence Based Resource for Primary Care**

Supplier Vetting Questionnaire

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Supplier Vetting Questionnaire

* 1. Potential Providers must complete this questionnaire. Any company that fails to return it by the required date will have their proposal rejected.

Organisation Details

* + 1. Full legal name, address and website of the Potential Provider in whose name the tender will be submitted (the Prime or Single contractor):

|  |  |
| --- | --- |
| Company Name |  |
| Address |  |
| Town/City |  |
| Postcode |  |
| Country |  |
| Website (if any) |  |

* + 1. Name, position, telephone number and e-mail address of main contact for this project.

|  |  |
| --- | --- |
| Name |  |
| Position |  |
| Telephone Number |  |
| Fax Number (if available) |  |
| E-mail (if available) |  |

* + 1. Current legal status of the Potential Provider (e.g. partnership, private limited company, etc.)

|  |
| --- |
| Please tick one box |
|  |  |
| Public Sector |  | Please state |
| Sole Trader |  |
| Partnership |  |
| Public Limited Company |  |
| Private Limited Company |  |
| Other  |  | Please state |

* + 1. Date and place of formation of the Potential Provider and, if applicable, registration under the Companies Act 2006. Please provide copies of Certificates of Incorporation (where appropriate) and any changes of name, registered office and principal place of business.

|  |  |
| --- | --- |
| Date of formation |  |
| Place of formation |  |
| Date of registration |  |
| Company registration number |  |
| Certificates enclosed | YES / NO  *(please delete)* |
| Registered Office |  |
| Principal place of business |  |

Ownership structure

* + 1. Full legal name and address of Parent Company if applicable:

|  |  |
| --- | --- |
| Company Name |  |
| Address |  |
| Town/City |  |
| Postcode |  |
| Country |  |
| Company registration number **[[1]](#footnote-1)** |  |

* + 1. Full legal name and address of (ultimate) Parent Company if applicable:

|  |  |
| --- | --- |
| Company Name |  |
| Address |  |
| Town/City |  |
| Postcode |  |
| Country |  |
| Company registration number**[[2]](#footnote-2)** |  |

* + 1. If the Potential Provider is a division or subsidiary, what is its relationship with the Parent Company (ownership, directorship, authority, etc)?

|  |  |
| --- | --- |
| Relationship  |  |

* + 1. Please provide a one-page chart illustrating the ownership structure of the Potential Provider including relations to any parent or other group or holding companies.

|  |  |
| --- | --- |
| Corporate structure enclosed (please tick √) |  |
| Company structure enclosed (please tick √) |  |

* + 1. Charities or Housing Association or other Registration number (if this applies). Please specify registering body.

|  |  |
| --- | --- |
| Registering body |  |
| Registration number |  |

* + 1. VAT registration number (if applicable)

|  |  |
| --- | --- |
| VAT Registration number |  |

Subcontracting and consortia

* + 1. Where a Potential Provider is intending to subcontract they are required to provide the information requested below. Where a Potential Provider is a consortium or intends to be part of a consortium, they should indicate which members are proposing to deliver the services.
		2. Please tick the box below which applies

|  |  |
| --- | --- |
| a) Your organisation is bidding to provide the services required itself (if ticked, go to question 1.5) |  |
| b) Your organisation is bidding in the role of Prime Contractor and intends to use third parties to provide some services |  |
| c) The Potential Provider is an existing consortium |  |
| d) The Potential Provider intends to bid as part of a consortium but the consortium has not yet been established |  |

* + 1. If your answer to 1.4.2 is (b), (c) or (d) please indicate in the table below (by inserting the relevant company/organisation name) the composition of the supply chain, indicating which member of the supply chain (which may include the Potential Provider itself or solely be the Potential Provider) will be responsible for the elements of the requirement.

|  |  |
| --- | --- |
| Company / Organisation | Which element of the service will be provided |
|  |  |
|  |  |

* + 1. If you are unable to confirm all sub-contractors (complete supply chain) at this stage, you will need to demonstrate a satisfactory methodology and track record of delivering a supply chain. Please give a brief outline on policy regarding the use of sub-contractors and, if applicable, the extent to which it is envisaged they may be used in any contract.

|  |
| --- |
| Methodology for procuring subcontractor supply chain (300 words or fewer) |
|  |

Financial

* + 1. Please provide the following financial information:
		2. A copy of the most recent audited accounts for your organisation that cover the last three (3) years of trading or for the period that is available if trading for less than three years.

|  |  |
| --- | --- |
| Year of financial accounts | Included in bid (Y/N). If NO, please provide a brief explanation of why) |
| Year 1 [20xx] | Y/N |
| Year 2 [20xx] | Y/N |
| Year 3 [20xx] | Y/N |

* + 1. If the organisation is a subsidiary of a group, this information is required for both the subsidiary and the ultimate parent company. Where a consortium or association is proposed, the information is requested for each member company.
		2. The following information must be transparent and proven in the audited accounts in order for NICE to assess:
		- Turnover
		- Profit
		- Assets
		- Debt / Liabilities
		1. NICE shall apply a 20% decrease in Turnover, Profit and Assets and 20% increase of Debt/Liabilities calculation to assess the accounts. Where your accounts show a consistent 20% decrease (Turnover, Profit and Assets) or a 20% increase (Debt/Liabilities), please provide an explanation detailing the reason for such decrease or increase.

|  |
| --- |
| 20% Turnover decrease explanation:  |
| 20% Profit decrease explanation: |
| 20% Assets decrease explanation: |
| 20% Debt / Liabilities increase explanation: |

* + 1. Parent company and/or other guarantees of performance and financial standing may be required if considered appropriate as well as confirmation of the organisation’s willingness to arrange for a guarantee or a performance bond
		2. Where the potential provider is dependant financially on a parent company to support its application for this procurement, it must indicate in the box below whether a Parent Guarantee is available if requested.

|  |  |
| --- | --- |
| Where required, Parent Guarantee Available? | YES / NO (please delete) |

Insurance

* + 1. Please provide evidence of the employers' liability, public liability insurance [and professional liability or indemnity if appropriate] insurance held by the Potential Provider.  The evidence should include the name of the insurers, policy numbers, expiry dates and limits for any one incident and annual aggregate caps and the excesses under the policies.
		2. **Employers’ liability insurance**

|  |  |
| --- | --- |
| Name of insurer |  |
| Address |  |
| Type of insurance |  |
| Policy numbers |  |
| Expiry date |  |
| Limits of indemnity *(per occurrence and aggregate)* |  |
| Excess *(if any)* |  |

* + 1. **Public liability insurance**

|  |  |
| --- | --- |
| Name of insurer |  |
| Address |  |
| Type of insurance |  |
| Policy numbers |  |
| Expiry date |  |
| Limits of indemnity *(per occurrence and aggregate)* |  |
| Excess (if any) |  |

* + 1. **Other insurance (please provide details)**

|  |  |
| --- | --- |
| Name of insurer |  |
| Address |  |
| Type of insurance |  |
| Policy numbers |  |
| Expiry date |  |
| Limits of indemnity *(per occurrence and aggregate)* |  |
| Excess *(if any)* |  |

Disputes

* + 1. Is there any material pending or threatened litigation or other legal proceedings connected with similar projects against the Potential Provider and/or any of its named supply chain members (sub-contractors) that may affect delivery of this project?

|  |  |
| --- | --- |
| Legal proceedings pending | YES / NO  *(please delete)* |

* + 1. If ‘Yes’ please give an explanatory statement:

|  |
| --- |
| Brief statement (300 words or fewer)*Either insert required details or state ‘None’* |
|  |

* + 1. Has there been any material litigation or other legal proceedings connected with similar projects against the Potential Provider and/or any of its named supply chain members (sub-contractors) that may affect delivery of this project in the last three years?

|  |  |
| --- | --- |
| Legal proceedings  | YES / NO  *(please delete)* |

* + 1. If ‘Yes’ please give an explanatory statement:

|  |
| --- |
| Brief statement (300 words or fewer)*Either insert required details or state ‘None’* |
|  |

Policies and Procedures

* + 1. Please provide a copy of any Conflicts of Interests Policy and Procedures

|  |  |
| --- | --- |
| Policy attached YES / NO |  |
| Procedures attached YES / NO |  |

* + 1. Please provide details of any Conflicts of Interests in relation to this tender offer and how you manage these conflicts in line with your Conflicts of interest Policy and Procedures

|  |  |
| --- | --- |
| Conflict of Interest YES / NO |  |
| If YES, please provide details |  |
| Details of management process of these conflicts |  |

* + 1. Please provide a copy of your Health & Safety Policy and Procedures

|  |  |
| --- | --- |
| Policy attached YES / NO |  |
| Procedures attached YES / NO |  |

* + 1. Please provide a copy of your Equal Opportunities Policy and Procedures

|  |  |
| --- | --- |
| Policy attached YES / NO |  |
| Procedures attached YES / NO |  |

* + 1. Please provide a copy of your Environment and Sustainability Policy and Procedures

|  |  |
| --- | --- |
| Policy attached YES / NO |  |
| Procedures attached YES / NO |  |

Modern Slavery Act

* 1. If your organisation (whole organisation including parent, group or subsidiary) has a turnover of £36 million pounds or greater then please provide a Modern Slavery Act Transparency Statement: this should set out the steps you have taken to ensure there is no modern slavery in your own organisation/business and that of your supply chain. If your organisation has taken no steps to ensure there is no modern slavery in your own organisation, then your statement should say so.
	2. [Please note: a parent org/ group statement is acceptable, this is compliance with the Modern Slavery Act 2015.]
	3. If your organisation is required to provide a Modern Slavery Act Transparency Statement and you have not done this or are not in the process of doing this, your bid will be rejected

|  |  |
| --- | --- |
| Modern Slavery Act Transparency Statement included in bid | Y/N |

1. Or, for parent companies established outside the United Kingdom, equivalent information as set out in Regulation 23(7) of the Public Contracts Regulations 2006. [↑](#footnote-ref-1)
2. s set out in Regulation 23(7) of the Public Contracts Regulations 2006. [↑](#footnote-ref-2)