Midland Metropolitan Hospital Project

ITPD Volume 4 5th September 2014







Invitation to Participate in Competitive Dialogue Volume Four

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Disclaimer

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1 Introduction

- 1.1.1 Volume One of the Invitation to Participate in Dialogue (ITPD) outlines the structure and content of the four volumes of the ITPD. This is the fourth volume which focuses on the procurement process. ITPD Volume 4 sets out:
 - The approach to Dialogue with Bidders
 - The procurement timetable and process
 - The approach to the Funding Competitions
 - The Bid Deliverables and evaluation process
 - The approach to Variant Bids
 - Project management and administrative processes
- 1.1.2 A list of appendices is presented at Section 7.

2 Competitive Dialogue (CD) Strategy

2.1 Underpinning Regulations

- 2.1.1 The Trust will be procuring the Midland Metropolitan Hospital (**MMH**) through the Government's new approach to the delivery of private finance into public infrastructure and services, Private Finance 2 (**PF2**) route.
- 2.1.2 The procurement is following the Competitive Dialogue procedure under Article 29 of directive 2004/18/EC (the Directive) and Regulation 18 of the Public Contracts Regulations 2006 (SI 2006/5) (as amended).
- 2.1.3 The purpose of this ITPD is to initiate Dialogue with those Bidders shortlisted following evaluation of PQQ responses; and to explain the process which the Trust intends to follow, the requirements of Bidders (in terms of Bid Deliverables) and the Trust's approach to the evaluation of Bids.
- 2.1.4 The purpose of Dialogue is for the Trust to work with Bidders to develop solutions that will meet the Trust's requirements.
- The rules of CD require that Final Bids shall contain all the elements required and necessary for the performance of the project. Bids may be clarified, specified and fine-tuned at the request of the Trust up to the point where a Preferred Bidder can be identified. However, such clarification, specification, fine tuning or additional information may not involve changes to basic features of the bid and / or distort competition or have a discriminatory effect. Once a Preferred Bidder has been identified, the Trust is permitted to "clarify aspects of that tender or confirm commitments contained" in it. Again, such clarification and confirmation may not have the effect of modifying substantial aspects of the tender and should not risk distorting the competition or causing discrimination. In each case therefore, the Trust will undertake this process with care to ensure that the requirements of the rules are observed.
- 2.1.6 This means that a high level of detail will be required such that price and commercial certainty has been achieved prior to Closure of Dialogue.

2.2 Summary of Trust Approach

- 2.2.1 The Dialogue process will follow a 3:2:1 pattern.
- 2.2.2 The aim will be to make the Dialogue process as structured and transparent as possible to achieve the best outcome for the Trust without incurring unnecessary bid costs (see section 2.3). The process will be controlled by the Core Project Team (membership presented in ITPD Volume 1) to retain an overview of all issues and ensure consistency of approach.
- 2.2.3 The draft Project Agreement is based on Department of Health (DH) Standard Form (Version 3, as amended July 2004, February 2006, November 2006) ('DHSF') and has been tailored to reflect SOPC4 amendments, HM Treasury's Standardisation of PF2 Contracts which was issued in December 2012 and the specific elements of this project. It has been prepared with comprehensive bespoke drafting to reflect the Trust's commercial position as outlined in ITPD Volume Three.
- 2.2.4 Delivery of the Project under PF2 means that two separate Funding Competitions will be required. The first will be used to identify the Equity Provider and the second will be used to appoint the Senior Debt Provider. In each case these competitions are mandatory and will be held at the Preferred Bidder stage. Early appointment of due diligence advisors will ensure that potential issues for Funders can be reviewed regularly through the procurement. Further details in relation to the Funding Competitions are included at section 4 of this document.

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- In an effort to minimise costs for Bidders and in order to ensure that the Project can be procured to programme, the Trust has developed an "Exemplar Design" the purpose of which is to provide Bidders with a very comprehensive explanation of the Trust's requirements and expectations in this regard. The Exemplar Design, which has been developed to 1:200 layouts, was produced following very extensive engagement with the Trust's wider stakeholder group. Bidders are not required to simply accept the Exemplar Design as is and all design risk will still pass to the Contractor however they should view it as being a very clear indication as to how the Trust would hope the final design of the hospital would progress. Accordingly, a well-developed design specification, developed to reflect the Trust's Design Vision, is presented in ITPD Volume 2, together with details of the Exemplar Design and how it responds to the specification. Bidders will note the requirement for generic/repeatable design. Trust users have signed off departmental specifications and a good level of clinical engagement has been maintained at each stage.
- A range of stakeholders were involved in the development of the Exemplar Design and the related Design Vision, which together form a set of principles underpinning the design brief. Bidders will be challenged during the procurement process to interpret, develop and improve the Exemplar Design wherever possible as the Trust gives the Design Vision values (summarised in *Appendix 1* of ITPD Volume 1) high priority and will focus on these principles at each stage.
- 2.2.7 Bidders will be required to submit Interim Submissions on the date stated in section 6.4. Interim Submissions will be evaluated, in accordance with the evaluation process set out in Section 5 to select the two highest scoring Bidders to proceed to the next stage of Dialogue. Bidders will be given the opportunity to test their ideas early in Dialogue to allow the Trust to provide clear direction and feedback.
- 2.2.8 Following evaluation of the Interim Bid Submissions, the two remaining Bidders will continue the development of their solutions until both designs are fully worked up and cost, commercial and risk certainty has been achieved. Prior to, and to test readiness to Close Dialogue, Bidders will be required to submit Draft Final Bids. A full evaluation of Draft Final Bids will be undertaken in accordance with the evaluation process set out in Section 5 to facilitate approval for Closure of Dialogue.
- The Trust will only Close Dialogue if at least one Draft Final Bid includes all the elements required and necessary for the performance of the Project and it is satisfied that all material issues relating to a Bidder's solution, in particular those impacting on price and risk, have been scoped and agreed. Approval from DH is required before the Trust is able to close Dialogue. DH will require the Trust to produce and get approval for an Appointment Business case from NHSTDA (or Monitor), DH and HMT before granting permission to close Dialogue. No changes to the basic features of the Bid involving changes to cost or which would otherwise potentially distort competition or result in discrimination will be permitted following Closure of Dialogue.
- 2.2.10 The Trust will evaluate Bidders on the basis of their response to the Bid Deliverables as set out in this ITPD4. The Trust has provided guidance on what the Evaluation Teams will be considering in their evaluation.
- 2.2.11 The Trust reserves the right to vary the procurement procedure to support continued competition, avoid unnecessary Bid costs and adhere to subsequent technical or legal guidance.
- 2.2.12 Formal approvals will be required at key stages to enable progression of the Project. Bidders will need to ensure that they comply with the requirements at each stage. Detail of the approval process at each stage is presented in Section 3.

2.3 Reimbursement of Bid Costs

2.3.1 The Trust intends that the Dialogue process will be conducted in a structured and efficient manner consistent with the achievement of the necessary commercial certainty so that the costs incurred by Bidders and the Trust are proportionate to the project objectives.

- 2.3.2 The Trust's objective is therefore to ensure that the 'at risk' costs of bidding this scheme are no greater than they need to be for a scheme of this size and nature (in terms of service provision). The development of the scheme to date has been designed to achieve that objective and, in meeting its obligations under PF2, the Trust has structured the procurement phase so that it is no longer than 18 months from the issue of the contract notice to the appointment of a Preferred Bidder. The Indicative Timetable in Section 3.1 below demonstrates this.
- 2.3.3 The Trust intends to keep the issue of bid costs under review as its procurement proceeds. Where there has been a robust competition between Bidders, each providing a final bid proposal that is affordable, value for money and complies with the Trust requirements, and the Trust believes that, as a result of new procurement procedures and/or the manner in which the Trust has conducted the procurement, there has been a significant increase in the costs of the unsuccessful Bidder, which the Bidder could not reasonably have controlled or mitigated, the Trust will consider making a contribution towards those costs.
- 2.3.4 When forming a judgment, the Trust will be informed by PFU's recommendation.
- 2.3.5 The Trust would reserve the right to carry out due diligence to confirm the amount of any costs incurred by Bidders should it be minded to make any contribution towards bid costs.
- 2.3.6 The Trust has requested the Bidders confirm acceptance of the Trust's programme and approach at key stages of the Project to support this process.

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3 Procurement Timetable and Process

3.1 Indicative Timetable

3.1.1 The key stages and milestones of the procurement are set out in Table 1 below. Whilst the Trust does not intend to depart from the indicative timetable it reserves the right to do so at any stage.

Table 1 Indicative Procurement Phase Timetable

Procurement Milestones	Date
OJEU	14 th July 2014
Prequalification Stage	
Selection of 3 Bidders and one reserve	4 th September 2014
ITPD Issued	5 th September 2014
CD Stage 1: ITPD Clarification	
Induction activities	8 th September to 19 th
	September 2014
CD Stage2/ 3: Dialogue to Interim Submissions	
Interim submissions	12 th December 2014
Selection of two Bidders	8 th January 2014
CD Stage 4: Dialogue with Two Bidders	
Submission of Draft Final Bids	9 th April 2015
Closure of Dialogue	30 th July 2015
CD Stage 5: Final Bids	
Invitation to submit final bids	31 st July 2015
Trust identifies Bidder it is minded to appoint	3 rd September 2015
Appointment Business Case approval	22 nd October 2015
Preferred Bidder to Financial Close	
Financial Close	15 th April 2016
Construction	
Handover	20 th July 2018

3.1.2 A detailed project plan is presented in *Appendix 1*. The Trust reserves the right to vary the plan to support continued competition, avoid unnecessary Bid costs or adhere to subsequent technical or legal guidance.

3.2 Status Following PQQ

3.2.1 The Trust has invited the following three Bidders to participate in the Dialogue stage of the CD process: Balfour Beatty Investments, Carillion (The Hospital Company), Laing O'Rourke / Interserve (Momentum Healthcare).

3.3 Document Publication

The ITPD documents have been published the Trust website www.swbhbh.nhs.uk/about-us/new-hospital in line with transparency guidance.

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3.4 CD Stage Structure

- 3.4.1 The Dialogue programme has been divided into five stages in accordance with the DH Design Development Protocol for PFI schemes although the Trust intends, in practice, to merge CD stage 2 and 3. The aims and approach proposed for each stage are outlined in the following sections. The intention is to provide opportunities for Bidders to clarify and test ideas before the schemes are too well developed. This will reduce the potential for abortive work and unnecessary Bid costs. There will be no formal evaluation until CD stage 3.
- 3.4.2 A proposed timetable for Dialogue sessions, together with high level agendas, is presented at **Appendix 2**.
- 3.4.3 The Trust believes that the proposed schedule of meetings provides adequate opportunities to develop the Bids to the level required. If Bidders feel that they need to diverge from the timetable to address specific issues they should explain why. The Trust will try to accommodate such ad hoc requests whilst retaining fair access for all Bidders. The Trust may not always be able to change timetables as requested. The Trust reserves the right to change the times and dates of meetings if necessary.
- 3.4.4 The Trust intends to use the core principles of lean procurement. Dialogue sessions will be conducted as "boot camps" where there will be multiple strands of Dialogue taking place in parallel, each with clear objectives to achieve before they are able to conclude. Each work stream will maintain RAG rated issues lists throughout the course of the dialogue.
- 3.4.5 A final boot camp will take place before submission of Draft Final Bids to ensure all red issues raised during Dialogue are resolved.
- 3.4.6 Contemporaneous action/decision logs will be added to the issues lists during each Dialogue session and agreed by the participants before the close so that they can be circulated immediately.
- 3.4.7 Key members of the Core Project Team will be available for all Dialogue sessions (together with the necessary advisors / users). Each Bid team will be provided with equal access.
- 3.4.8 Regular Bid Management Meetings for Bid teams to review progress with the Trust have been arranged as presented in the proposed timetable for Bidder meetings at *Appendix 2*.
- 3.4.9 Bidders will record the outcome of their Bid Management Meeting in notes to be agreed by the Trust. Notes will not be circulated to the other Bidders.

3.5 CD Stage 1: ITPD Clarification

Aims

- 3.5.1 The aims of this stage are to:
 - Initiate the CD process with the Bidders selected
 - Provide the information Bidders need to proceed effectively
 - Allow Bidders to test their understanding of the Trust's brief
 - Respond effectively to queries and requests for clarifications
 - Acknowledge the approach to the Senior Debt Funding Competition
 - Discussion of the intended approach to the Equity Funding Competition
 - Initiate the appointment of the due diligence advisors

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Establish effective lines of communication and rules of engagement

Induction to the Project and Preparation for the Introductory Dialogue Session

- 3.5.2 An induction pack has been provided for Bidders to welcome them to the Project and provide practical information. The Project Office will be the first point of contact during this period and will make every attempt to ensure that Bidders have a good introduction to the Project.
- 3.5.3 The Project Office will ensure that Bidders have access to the electronic Data Room and the information held therein.
- A 'Meet the Organisation' event has been organised for each Bidder to be introduced to the top team. This meeting is presented in the proposed timetable for Bidder meetings at Appendix 2. Up to eight people can be invited and Bidders are asked to submit the names and job titles of attendees to the Project Office by 11th September 2014.
- 3.5.5 Site visits have been arranged to introduce Bidders to the land acquired by the Trust for the project. The dates for these visits are presented in the proposed timetable for Bidder meetings at Appendix 2. Bidders will need to confirm names and job titles of attendees to the Project Office by 9th September 2014. Attendees should bring their own PPE including hats, gloves ,safety specs, boots (not rigger boots) and hi viz vest .On-going arrangements for site access will be managed through the Project Office as outlined at section 6.1.
- 3.5.6 Bidders will review the ITPD documents and will prepare a list of questions / clarifications for discussion at the Introductory Dialogue Session. These should be issued to the Trust by close of play 12th September 2014 and will form part of the agenda for the Introductory Dialogue Sessions.
- 3.5.7 The Request for Information (RFI) process will be initiated at the beginning of this stage, but the Introductory Meetings will be used for areas requiring discussion rather than formal response. Responses will be recorded and made available to all Bidders in the normal way.

Introductory Dialogue Session

- 3.5.8 An Introductory Dialogue Session for each Bidder has been organised during the second week of this stage as shown in the proposed timetable for Bidder meetings at Appendix 2. A full day has been set aside for the meeting and the Core Project Team will be present.
- 3.5.9 The agenda for the Introductory Dialogue Session will include the following items:
 - Questions and Clarifications
 - The Exemplar Design
 - Bidder presentations on 'Opportunities, Constraints and Innovations'
 - Remediation
 - Construction timeline
 - A statement of acceptance of the Trust programme, approach and requirements for the CD process raising any concerns they may have about Bidder resources
 - A statement of acceptance of the Trusts approach to evaluation following review of the Bid Deliverables
 - Meetings and working arrangements
 - Appointment of the due diligence advisors

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- 3.5.10 Bidders will deliver short presentations to demonstrate their understanding of the Project:
 - Opportunities understanding of Trust requirements and aspirations
 - Constraints understanding of site issues, planning etc.
 - Innovations first ideas on innovation at sketch outline level
- 3.5.11 Minimal detail will be required and presentational materials should be kept simple as this will be about testing understanding rather than presenting worked up proposals. Neither the presentation nor the related materials will be evaluated.
- 3.5.12 The Core Project Team will comment and provide feedback to help the Bidders develop understanding of the Trust's design and commercial principles.
- 3.5.13 The Trust will share issues raised since the conclusion of the Exemplar Design and discuss the approach to closing these issues through the CD process.

Preparation for Funding Competitions

- 3.5.14 Bidders will acknowledge the requirement to run an Equity Funding Competition at the Preferred Bidder stage. The Trust will require acceptance from Bidders during this stage as to their acceptance of the process and principles outlined in relation to the Equity Funding Competition process as set out at section 4 of this document (and any supplementary details provided). This will be confirmed with Bidders at the Introductory Dialogue Session.
- 3.5.15 Bidders should be aware of the requirement to run a Senior Debt Funding Competition at the Preferred Bidder stage. The Trust has prepared a Funding Protocol, a process for procurement and novation of Due Diligence Advisors and draft contracts for Due Diligence Advisors. Agreement to this documentation will be required during CD stage 1 to allow the procurement to commence.
- 3.5.16 The Trust will initiate the appointment of the due diligence advisors in consultation with Bidders during this stage. Once the Preferred Bidder is formally appointed, these technical, legal and insurance advisors will be novated to the Preferred Bidder to assist in the Funding Competition. Following appointment of the Funders, they will be novated to the Funders. During the Dialogue process they will act in an administrative capacity only and as trustee for the duty of care to the ultimate funder. The approach to the Due Diligence Reports and the Funding Competition is detailed in Section 4.
- 3.5.17 Draft tender documents for Due Diligence Advisors are attached at Appendix 4 and details on the procurement process are outlined at section 4. Given the need to finalise these during CD stage 1, Bidders are asked to prioritise their review of the documentation and be prepared to raise and discuss any comments, concerns or suggested amendments at the Introductory Dialogue Session.
- 3.5.18 A Stage One Due Diligence Report based on the ITPD documentation will be commissioned following their appointment.

3.6 CD Stage 2/3 Preliminary Proposals and Dialogue to Interim Submissions

Aims

- 3.6.1 The aims of these stages are for:
 - Bidders to indicate how and in what way they would seek to improve Exemplar Design
 - Bidders to have an early opportunity to test their developing ideas and approaches

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- Provision of full feedback on the proposals
- Bidders to work with the Trust to continue development of their design
- Bidders to develop an Interim Bid Submission for evaluation
- The Trust to manage requests for information and to resolve issues raised during the process
- The Trust to evaluate Interim Bid Submissions to shortlist two Bidders
- The Trust Board to consider the evaluation report and approve the two Bidders going forward into CD Stage 4

Preliminary Proposals

- 3.6.2 The expectations at this stage are to seek to understand how Bidders will look to improve the Exemplar Design and to give them the opportunity to present and test preliminary design proposals.
- 3.6.3 A Second Dialogue Session early in this stage will focus on these issues.

Preparation of Interim Bid Submissions

- 3.6.4 The expectations at this stage are to develop the overall design concept, a limited number of 1:200 designs and all other clinical, technical and commercial Bid Deliverables to the level specified in appendix 3 for this stage.
- 3.6.5 The response to the Design Vision and Exemplar Design should be outlined at a level consistent with the developing design at this stage.
- 3.6.6 As many as possible of the project specific commercial issues will be resolved and high level funding proposals will be developed. An agreed list of commercial issues to be resolved in CD Stage 4 will be developed in the commercial workstream and evaluated as part of the Bid Deliverables. The first draft of this list is expected from Bidders on 17th October 2014. The Trust will not discuss commercial issues in CD Stage 4 unless they have been raised on this list or are a legitimate consequence of continuing development of the Bid.
- 3.6.7 The Bidders will work on the Bid Deliverables necessary to prepare and submit their Interim Bid Submission with the Trust through the pre-arranged Dialogue Sessions scheduled in the timetable for Bidder meetings presented in *Appendix 2*.
- 3.6.8 All Requests for Information (RFI) will be submitted through the formal systems specified in section 6.2.
- 3.6.9 The Bid Deliverables for this stage, presented in Appendix 3, will be issued by Bidders for formal evaluation at Interim Bid Submissions. Interim Bid Submissions must be submitted to the Trust in accordance with section 6.4

Evaluation of Interim Bid Submissions

- 3.6.10 The Trust will evaluate the Interim Bid Submissions in accordance with the evaluation criteria set out in section 5.5 and will invite the two highest scoring Bidders to the next stage of the Dialogue Process (i.e. CD Stage 4). The Trust Board will approve the evaluation report to enable the Dialogue process to proceed with the remaining two Bidders.
- 3.6.11 Following approval Bidders will be informed of the result by the Project Director. A debrief will be offered to the unsuccessful Bidder.

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The workstream leads will review issues raised during Dialogue at this stage and may prepare an addendum to the ITPD to clarify the Dialogue process with the remaining two Bidders.

3.7 CD Stage 4: Dialogue with Two Bidders

Aims

- 3.7.1 The aims of CD Stage 4 are for:
 - Bidders to complete development of their proposals
 - The Bidders to resolve all project specific commercial requirements with the Trust
 - Costings and the financial model to be completed ensuring that all price sensitive issues have been resolved
 - The Trust to manage the process ensuring that meetings, requests for information (RFI), issues
 etc. are managed effectively and without incurring unnecessary costs and pressures on Bidders
 and Trust staff
 - Development of all items required for the Bidders to prepare the Draft Final Bids
 - The Trust to prepare an Appointments Business Case in draft and seek approval as a condition of Closure of Dialogue
 - Submission and evaluation of Draft Final Bids
 - Approval for Closure of Dialogue

Scheme Development with 2 Bidders

- 3.7.2 Bidders will continue to develop their schemes to ensure that:
 - Designs are finalised across all areas to a sufficient level that certainty can be achieved around price, risk and commercial position
 - Designs are signed off by the Trust as clinically functional
 - All final project specific issues are resolved and incorporated into the Project Agreement
 - All final ground physical and geophysical surveys are complete
 - Agreement on the process for the Equity and Senior Debt Funding Competitions, funding packages and the financial model will be in place
- 3.7.3 Bidders will have on-going access to meetings with the Core Project Team and users to facilitate preparation of Draft Final Bids as specified in *Appendix 3*.
- 3.7.4 The timetable presented at *Appendix 2* is provided for Bidders at CD Stage 1 so that they can plan resource requirements in advance. The timetable will be reviewed with Bidders at the beginning of CD Stage 4 to ensure that all required areas will be covered. All engagement, DQI, BREEAM and Design Review Panel events / workshops have been scheduled into the Timetable. The requirements for these events / workshops are presented in the Bid Deliverables at *Appendix 3* and will be planned by the Trust's workstream leads well in advance of the events.
- 3.7.5 The Trust will be working closely with the Private Finance Unit, Department of Health and other approval bodies during this period to prepare for Closure of Dialogue and the approvals process.
- 3.7.6 Bid Management Meetings for Bidders to review progress with the Trust will continue during this period to ensure that all issues can be resolved prior to Closure of Dialogue.

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Preparing for Submission of Draft Final Bids

- 3.7.7 Time for Bidders to prepare their Draft Final Bids has been scheduled into the programme to ensure that they are able to complete to the standard required for Closure of Dialogue.
- 3.7.8 The Trust will not allow new issues to be raised after the submission of Draft Final Bids, or issues to be re-opened which have previously been discussed and closed. It is therefore essential that bids are complete in every respect and that all commercial issues have been discussed and agreed with the Trust prior to issue of Draft Final Bids.
- 3.7.9 All of the Bid Deliverables specified in *Appendix 3* for this stage must be presented clearly, using the formats and pro forma layouts specified.

Submission of Draft Final Bids

- 3.7.10 Draft Final Bids must be submitted in accordance with the requirements of section 6.4.
- 3.7.11 The Trust reserves the right to request further information / design in order to fully evaluate Draft Final Bids
- 3.7.12 A full Reference Bid must be submitted as stated in section 5.8. Any Variant Bid will be issued as outlined in section 5.8.
- 3.7.13 At the Draft Final Bid stage, the Trust's advisors will liaise with the due diligence advisors to obtain a review of any key issues that could cause concern to Funders and affect 'bankability' of the Project. It is not intended that the due diligence advisors would be required to carry out any detailed review of draft bids.

Evaluation of Draft Final Bids and Preparing for Conclusion of Dialogue

- 3.7.14 The Trust will undertake compliance tests on the Draft Final Bids (as outlined in Section 5) to ensure that they meet the standards specified and are complete.
- 3.7.15 Draft Final Bids will then be evaluated, in accordance with the evaluation process set out in Section 5 to ensure that the solutions proposed by Bidders meet Trust requirements and are robust enough to secure Department of Health and HM Treasury approval for Closure of Dialogue.
- 3.7.16 The Trust will provide feedback on areas requiring further work prior to closure of the Dialogue and in order to enable Bidders to prepare their Final Bids. Bidders will respond by updating and developing their bids further ensuring that all issues identified are addressed. This is important given that no issues can be raised or price sensitive changes made following Closure of Dialogue.
- 3.7.17 This stage will continue to programme until the Trust is satisfied that one or more of the solutions will meet Trust requirements in relation to proposals for the Project and pricing.

Closure of Dialogue

- 3.7.18 The Trust is required to prepare and obtain approval for a draft Appointments Business Case before Dialogue can be closed. The case will need to be approved by the NHSTDA (or Monitor), DH and HMT before the Trust can be permitted to Close Dialogue.
- 3.7.19 The Trust will write this case in parallel with Dialogue.

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- 3.7.20 It will formally submit the case after the Draft Final Bids have been evaluated, however it will keep all approval bodies informed of progress during Dialogue to endeavour to minimise the time taken to gain approval.
- 3.7.21 A Closure of Dialogue Report will be developed to provide clear evidence that the Trust is satisfied with the Bids and is ready to close dialogue and invite submission of Final Bids.
- 3.7.22 The Dialogue process will not be concluded until the Private Finance Unit approves Closure of Dialogue.
- 3.7.23 Following approval the Trust will formally declare in writing that the Dialogue process is concluded.

3.8 CD Stage 5: Final Bids

Aims

- 3.8.1 The aims of CD Stage 5 are for:
 - Bidders to submit Final Bids
 - The Trust to evaluate the Final Bids to select a Preferred Bidder that it is minded to appoint
 - The Trust to update the Appointment Business Case (ABC)
 - The Trust to coordinate approvals leading to approval of the Preferred Bidder

Invitation to Submit Final Bids

- 3.8.2 The Trust will issue an Invitation to Submit Final Bids (ITFB) to the two Bidders remaining at Conclusion of Dialogue. This document will include addenda to the ITPD, which will capture changes to the brief that have been raised and addressed during the Dialogue process.
- 3.8.3 The ITFB will specify:
 - Confirmation of changes to requirements set out in the ITPD which have arisen from the Dialogue process
 - Reference to previous amendments or addenda which recorded these changes throughout the process
 - The detailed content required for Final Bids
 - The deadline for submission of Final Bids
 - For each Bidder individually, any specific terms agreed with that Bidder during the CD process
- 3.8.4 Bidders must submit Final Bids based on the solutions identified and agreed prior to the Closure of Dialogue.
- 3.8.5 The Trust will have discussed and resolved all commercial and price sensitive issues before Closure of Dialogue. The Project Agreement will therefore be agreed in respect of this position with only minimal non price sensitive issues left to be addressed at Final Bids. Any new issues raised or previously withdrawn points re-raised at Final Bid stage will render the Bid non-compliant.
- 3.8.6 Only items that have changed since Draft Final Bids will be submitted by Bidders when submitting their Final Bids. A schedule of items submitted as part of the Draft Final Bid and that remain unchanged must also be submitted for completeness.

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Evaluation and Selection of Bidder the Trust is Minded to Appoint

- 3.8.7 The Core Project Team will first check bid compliance as described in section 5.3.
- 3.8.8 Evaluation of items that have changed since Draft Final Bids will then be undertaken as described in section 5.4 and Core Project Team will produce an Evaluation Report.
- 3.8.9 The Core Project Team will also consider whether there is any potential for changes to items submitted at Final Bids to impact on the Draft Final Bids previously issued. Bidders are reminded that at this stage the Trust is only permitted to "clarify, specify and fine tune" Bidder Submissions.
- 3.8.10 The Evaluation Report will identify the Preferred Bidder that the Trust is minded to appoint by application of the evaluation criteria identified in section 5.5. The report will be considered by the Trust Board to confirm the provisional appointment subject to approval of the ABC.
- 3.8.11 The Trust will inform the Bidders of the outcome of its Final Bid evaluation.
- 3.8.12 A Stage Two due diligence report will be commissioned after the Trust has identified the Preferred Bidder it is minded to appoint. This report will review any risks that need to be settled before submission of the final ABC and appointment of Preferred Bidder .It also informs the Funding Competition.

Planning Permission

3.8.13 The Trust will expect the "minded to appoint preferred bidder" to commence the full planning application at risk at this stage.

Funding Competition

- 3.8.14 The Trust will expect the "minded to appoint preferred bidder" to
 - send letters to the agreed long-list of equity funding candidates with initial scheme information
 - liaise with sponsor's lawyers re carrying out DD (on behalf of equity provider).
 - liaise with shadow funder's lawyers re carrying out DD (on behalf of debt funders).

Gateway Review

- 3.8.15 A Gate 3a will be planned towards the end of this stage to investigate progress towards the investment decision at Appointment Business Case (ABC).
- 3.8.16 A Gate 3b will be planned before submission of the Confirmatory Business Case (CBC) to assess readiness for Financial Close and in preparation for the construction phase of the project.

ABC Approval

- 3.8.17 The final ABC will need to be approved by the Department of Health before appointment of the Preferred Bidder.
- 3.8.18 The Preferred Bidder letter will be approved by the Department of Health for issue with the approval. This letter will refer to the ABC as documentation of the conditions of appointment.

Due Diligence Advisors

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- The due diligence advisors will be novated to the Preferred Bidder following approval of the ABC to enable preparation for the Funding Competition.
- 3.8.20 Due Diligence Reports to be prepared by the sponsors lawyers on behalf of equity during the "minded to appoint "period.

3.9 Preferred Bidder to Financial Close

- 3.9.1 Following the appointment of the Preferred Bidder the Trust may 'clarify' aspects of the Preferred Bidder's bid or confirm commitments, provided that there are no material changes to any aspect of the Final Tender; in particular that there are no changes that impact on price, commercial position and risk and provided that this does not have the potential to distort the competition or risk causing discrimination.
- 3.9.2 The Preferred Bidder should therefore recognise that the scope to make any changes to its bid subsequent to both submission of its Final Bid and Preferred Bidder appointment will be extremely limited.
- 3.9.3 The Trust expects that the remaining non price sensitive 1:50 plans and other design data will be completed during this period.

Planning

- 3.9.4 The planning process will continue to be taken forward with Sandwell Metropolitan Borough Council at this stage. Consultation with planners will have taken place during CD Stage 4 and the Full Planning application will be submitted as soon as the minded to appoint Preferred Bidder is known.
- 3.9.5 The Preferred Bidder will take responsibility for amendments with cost implications arising from changes due to planning requirements which are identified at this stage.
- 3.9.6 Full Planning Approval and expiry of the judicial review period will be completed prior to Financial Close.

Funding Competitions

- 3.9.7 The Preferred Bidder will run an Equity Funding Competition and a Senior Debt Funding Competition as outlined in Section 4 below. The Trust will confirm the selection of the winning Funder(s).
- 3.9.8 Due diligence advisor appointments will then be novated to the selected senior debt funder(s).
- 3.9.9 The Funder(s) will then prepare for financial close completing the work required to implement funding arrangements within agreed time and price thresholds.

Confirmatory Business Case

- 3.9.10 The Trust will work with the Private Finance Unit and Department of Health to ensure management of any potential problems impacting on the position achieved by the ABC.
- 3.9.11 A Confirmatory Business Case (CBC) will be agreed before Financial Close to confirm to the Department of Health and the Treasury that the parameters of the ABC have not been breached.
- 3.9.12 Formal submission of the CBC will be made after:
 - Expiry of the judicial review period following planning approval

Completion of the Funding competitions

Standstill Period: Alcatel

3.9.13 A standstill period of 10 working days will be allowed following the approval of the CBC and formal notification to the unsuccessful bidder of the date of the commencement and expiry of the that period. At this stage the unsuccessful Bidder(s) will be provided with detailed information on why they have been unsuccessful.

4 Approach to Funding Competitions

- 4.1.1 The Trust expects that the advisors to the providers of equity within the consortium will provide due diligence to potential third party equity funders and HMT / IUK.
- 4.1.2 Due diligence for senior debt providers is expected to be provided by independent third parties.
- 4.1.3 Historically, funders have commissioned due diligence for senior debt funders following the appointment of the Preferred Bidder. This has often resulted in the re-opening of commercial terms, something that is inconsistent with both the legal requirements of CD and the ABC process. In order to provide potential participants in a senior debt Funding Competition with an appropriate level of understanding of the Project and to limit any re-opening of commercial points, the Trust has adopted a strategy which requires the participation of shortlisted Bidders in the appointment of due diligence advisors.
- 4.1.4 This section outlines the approach to the Funding Competitions and the due diligence process that will take place at key stages before submission of the ABC. It will be a condition of the Funding Competitions that Funders agree to be bound by the Project Agreement approved in the ABC.
- 4.1.5 An expected timeline can be found at Appendix 9.

Senior Debt Funding Competition

- 4.1.6 The following approach will apply:
 - Bidder agreement to the funding protocol. Roles of participants and engagement in the appointment of due diligence advisors will form part of the Introductory Dialogue Session at CD Stage 1. The funding protocol is presented at Appendix 5.
 - Due diligence advisors (legal, technical and insurance) will be appointed by the Trust (acting in an administrative capacity only and as trustee of the due diligence advisor duty of care to the ultimate funder) in consultation with the Bidders during the first months of the CD process.
 Bidders involvement will include:
 - Contribution to list of firms and specific individuals within these firms invited to tender for due diligence services
 - Agreement to the scope of services and terms of appointment
 - Participation in the evaluation of tender responses, interviews and contract award.
 - Payment to the due diligence advisors will be made by Project Co following Financial Close
 - A First Stage Due Diligence report based upon the ITPD documentation will be commissioned prior to Interim Submissions so that the Trust can consider any issues raised that require inclusion in the Addendum to the ITPD issued to the two remaining Bidders at CD Stage 4.
 - At the Draft Final Bid stage, the Trust's advisors will liaise with the due diligence advisors to obtain a review of any key concerns that may impact on the perception of risk from the perspective of Funders. It is not intended that the due diligence advisors would be required to review the Draft Final Bids or carry out any detailed review.
 - A Stage Two due diligence report will be commissioned after the Trust has identified the best solution and is minded to appoint a Preferred Bidder. This report will inform the Funding Competition.
 - The due diligence advisor appointments will be novated to the Preferred Bidder after the Preferred Bidder has been appointed at ABC approval

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- The Preferred Bidder will run a Funding Competition for the senior debt element of the Project. This will be undertaken on an open book basis, and overseen by the Trust and the PFU.
- The Preferred Bidder will select and recommend the winning funder(s) with the most economically advantageous tender. The Trust will confirm the selection of the winning funder(s).
- The due diligence advisor appointments will be novated to the selected funder(s) and they will continue their work up to Financial Close.

Equity Funding Competition (EFC)

4.1.7 The following approach will apply:-

- Pre-qualification commitment: As part of pre-qualification, Bidders were asked to confirm that should they be appointed as Preferred Bidder they are willing to run and underwrite an Equity Funding Competition. This confirmation included a commitment that the PB will follow the guidance published by HM Treasury on PF2 equity;.
- Underwriting: The competition will be for a long term investor(s) to hold a significant minority stake in the equity of Project Co (alongside the Infrastructure UK Equity Unit "IUK EU"). The Preferred Bidder will be expected to meet the full risk capital requirement of Project Co in the event that IUK chooses not to invest and/or the Equity Funding Competition does not achieve the best VfM outcome. Bidders should expect that up to 25% of the risk capital in Project Co will be available for the Equity Funding Competition (with up to 20% being available to IUK EU).
- At the initial stage of bidding: Bidders will be invited to propose a list of candidates they are minded to approach to take part in the Equity Funding Competition. Bidders are not expected to engage with potential candidates in any depth at that stage. Through the Equity Funding Competition, the Government is looking to encourage direct investment by long-term infrastructure investors and the Preferred Bidder should thoroughly investigate such candidates.
- During dialogue: A discussion on the merits of potential candidates will take place as part of the
 dialogue process. Candidates will be reviewed on quantitative and qualitative measures. The
 Equity Funding Competition is mandatory but it is not part of the scoring of bids. Consequently,
 there is no relative additional benefit for a bid from the identity or the nature of the possible offer.
- The selection process: A one stage process will be run by the Preferred Bidder without a prior and separate pre-qualification stage. The selection of the winning candidate will be a decision for the Preferred Bidder based upon the outcome of its evaluation of the candidates. The Trust and IUK will work with the Preferred Bidder to ensure the length and cost of the process is commensurate with a VfM outcome. IUK EU believes that prospective third party investors will be willing to accept the Equity Due Diligence Arrangements as the basis for their investment appraisal but a separate information memorandum will be a requirement of running an Equity Funding Competition
- The Equity Funding Competition process will be analogous to the Senior Debt Funding Competition described above. The selection of the winning candidate for the Equity Funding Competition will be based upon the outcome of a well documented and thorough bid evaluation process. The Trust and IUK EU will require open-book sharing of the results of the review process, the evaluation criteria and selection of 3rd party equity bids as part of the Government's transparency policy.
- The Equity Funding Competition will be conducted in a manner reasonably to be expected by prospective equity investors having regard to the quantum of the investment and the risks assumed by equity investors. The Preferred Bidder will determine the Equity Funding Competition procedures which must be appropriate to assess the quantitative and qualitative merits of the candidates and compile their review in a readily accessible format for comparative analysis. These will be discussed with the Trust and IUK EU before the Equity Funding Competition is launched.

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Bidders Advisers: At financial close, advisers to the Project Co and the model auditor will be
required to give letters of reliance to the equity investors (including any third party equity investors
introduced following an equity funding competition).

Public Sector Equity

4.1.8 The following approach will apply:-

- The public sector (through the Infrastructure UK Equity Unit ("IUK EU")) will have the right but not an obligation to invest 20% of the equity required for the scheme through a combination of subdebt and equity (in the same proportion to other equity providers). The decision by the IUK EU on whether or not to invest equity in the scheme will be based on its analysis of the information provided in accordance with the paragraphs on Bid Submissions elsewhere in this document and the requirements below. Bidders should note that the IUK EU will expect any public sector equity to be invested on a like for like basis alongside all other equity in the scheme. Bidders should assume when defining how the equity and the subordinated debt requirement of Project Co will be met that the IUK EU chooses not to invest equity, and state whether their response would differ, other than in quantum, if the decision was different.
- Equity Bid Information: Bidders are required to provide the information set out in the table at Appendix 8 ("PF2 Equity Bid Information") to enable the IUK EU to undertake due diligence on a proposed equity investment prior to appointment of the Preferred Bidder. The PF2 Equity Bid Information is to be provided by Bidders and no work by external advisers should be needed.
- Equity Documents for Review: Bidders should review the equity documentation (Shareholders Agreement, Articles, Loan Note Instrument) included at Appendix 8 (PF2 Equity Bid Information) and will be expected to provide comments on these during stage 3 of the dialogue (most likely at Bootcamp 6). A table will be provided by the Trust within which bidders' comments should be set out. Bidders should also review the Heads of Terms for the Construction Contract and FM Contract which are included at Appendix 8 as part of the pubic equity documentation. It will be a requirement of any investment of public equity that the matters referenced in these documents have been adequately included. Bidders will also be expected to provide comments on these documents during stage 3 of the dialogue.
- Following appointment of the Preferred Bidder, and preparation and agreement of detailed project documentation, the IUK Equity Unit will require:
 - memorandum ("Due Diligence Memorandum") from the legal advisers to Project Co which
 confirms the accuracy of the bid information used by the IUK Equity Unit for its preliminary due
 diligence (or advises where this has changed) and addresses specific points in further detail in
 response to a questionnaire issued by the IUK Equity Unit at that time regarding risk allocation
 between Project Co and its supply chain and insurers.
 - A copy of the reports prepared by the technical adviser and the insurance adviser respectively to the participants of the debt funding competition in respect of the scheme.
 - A copy of all agreements (in their most current form).
 - The right to ask Project Co's advisers to clarify points arising from the Due Diligence Memorandum and the above reports.
 - The right to participate directly in the negotiation of all documentation the shareholders are required to sign noting that the IUK Equity Unit would work in conjunction with other prospective equity investors using the same advisers.
 - The financial model and certain sensitivity scenarios to the base case required by the IUK Equity Unit.
 - Assistance as reasonably requested by the IUK Equity Unit to assist in its evaluation of the proposed investment.

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• At financial close, advisers to Project Co and the model auditor to give letters of reliance to the equity investors (including any third party equity investors introduced following any equity funding competition) in a form reasonably required by the IUK Equity Unit.

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5 Evaluation Process

5.1 Introduction

- 5.1.1 This section sets out the process for evaluation of Bidders' proposals at the following stages:
 - Interim Bid Submissions from 3 Bidders
 - Draft Final Bids from 2 Bidders
 - Final Bids from 2 Bidders

5.2 Bid Deliverables

- The Bid Deliverables to be submitted for each stage of the Dialogue process are set out in *Appendix* This document is organised into 2 sections referring to CD evaluation stages 4 and 5. It presents requirements at each stage. The formats required and pro forma references are specified in the document.
- 5.2.2 The Bid Deliverables specified will be evaluated as part of the formal process at Stages 3 5.

5.3 Compliance Testing

- 5.3.1 Compliance tests will be applied to assess Interim Submissions, Draft Final Bids and Final Bids to ensure that:
 - All specified deliverables are included
 - Those deliverables specified as compliance e.g. a bid which demonstrates compliance with the set price targets.
 - All deliverables are in the required formats and the prescribed proformas have been used
 - Sufficient information at the required standard has been provided to enable a full evaluation
 - Compliance with instructions regarding Reference and Variant Bids has been followed (see Section 5.8)

5.4 Evaluation Approach

- 5.4.1 Interim Submissions, Draft Final Bids and Final Bids will be evaluated using the methodology outlined below.
- 5.4.2 The evaluation of Draft Final Bids will be one of the factors which determine whether the Trust is ready for Closure of Dialogue.
- 5.4.3 Only Bid Deliverables that have changed since Draft Final Bids will be evaluated at Final Bids. The scores will then be combined with the Draft Final Bid Scores of the remaining deliverables to complete the evaluation.

Scoring of Bids

- 5.4.4 Scoring of all bids will be undertaken by the Evaluation Teams.
- 5.4.5 All scores will be reviewed by the Evaluation Moderation Committee before an evaluation is completed.

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5.4.6 Each Bid Deliverable will be assessed for the extent to which the Trust's requirements have been met and any additional benefits offered using the scoring structure presented in Table 2 below apart from Cost which will be scored as described in section 5.6.

Table 2 Scoring of Bids

Score	General Definition	Criteria Based Definition
1	Unacceptable	Fails to meet requirements for almost all key criteria.
2	Very poor	Fails to meet requirements for many of the key criteria.
3	Poor	Fails to meet requirements for some key criteria.
4	Adequate	Meets requirements for all key criteria.
5	Good	Meets requirements / performs well for all key criteria and offers some additional benefits.
6	Excellent	Exceeds all project criteria and offers significant additional benefits.

- The evaluation criteria to be used in the assessment of Bid Deliverables are presented in the Bid Deliverable tables presented at *Appendix 3*.
- 5.4.8 The Trust intends to receive and evaluate Bids through BravoSolution. This will provide a robust audit trail for the Project.
- 5.4.9 Bids scoring 1 (unacceptable) will be assessed for impact by Core Project Team. Scores at this level for one or more Bid Deliverables may render a bid non-compliant.

5.5 Weighting

- 5.5.1 The Trust intends to award the contract for the Project to the Bidder submitting the most economically advantageous tender (MEAT), to be assessed through the application of the evaluation criteria, scoring and weightings set out below.
- 5.5.2 Each main criterion corresponds with a workstream and has been allocated an overall weighting shown in Table 3.

Table 3 Weighting by main criterion / workstream

Main Criterion / Workstream	Weighting CD Stage 3	Weighting CD Stage 4/5
Cost	10%	51%
Clinical and Operational Functionality	34%	18%
Estates and Technical	24%	13%
Legal, Commercial and Finance	14%	8%
Hard FM	9%	5%
Subjective Assessment of Design Vision	9%	5%
Total	100%	100%

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5.5.3 The weighting for each Bid Deliverable is set out in *Appendix 3*.

5.6 Price Compliance

- 5.6.1 The Trust intends to score Cost as a Bid Deliverable.
- The reference model to be evaluated will include an assumption that the SPV will provide 55% of equity (as outlined above) and with a capital contribution of £100m less Trust remediation costs (the value to be assumed will be provided once the Trust has an agreed specification and an estimated price for the works).
- 5.6.3 Bidders are set a price target of a first year target UP of less than £26.1m and a NPV of the UP over the operational period of less than £309.0m for their bid to be compliant.
- The Trust may adjust the targets for individual Bidders if the Bidder can clearly demonstrate that their solution will provide efficiencies in other Trust costs e.g. energy / nursing or if the Trust believes and can demonstrate that the Bidders solution will increase Trust revenue costs.
- 5.6.5 The Trust will at all stages apply a compliance test of price being less than target before evaluating the bids.
- 5.6.6 At CD Stage 3 the Trust will assess the forecast distance from target of the NPV of the UP over the Operational Term and all the other Bidder Deliverables related to affordability and may apply a confidence factor to the forecast distance from target before scoring.
- 5.6.7 At CD stage 4 the Trust will score the NPV of the UP over the Operational Term demonstrated in the Bidders financial model.
- 5.6.8 The Bidder with the greatest distance from target will score 100%.
- 5.6.9 Provided that the distance from target of the lowest bidder is greater than £1,000,000 the other Bidder(s) will be scored based on the proportion of their distance from target relative to the lowest Bidders distance from target.
- 5.6.10 If all Bidders are within £1m of target, all bidders will be scored as 100%.

5.7 Value for Money Assessment

5.7.1 Provided that the Bidder submits a bid which is compliant on price (and other compliance criteria are met) the Trust will evaluate all the Bid Deliverables as outlined in section 5 above. The evaluation will generate an overall weighted score for each Bidder.

5.8 Reference and Variant Bids

- 5.8.1 Bidders must submit a Reference Bid.
- The Trust will not consider Variant Bids at Final Bid stage that have not been explored with the Trust as part of the Dialogue phase of the process. If Variant Bids are to be proposed, Bidders are requested to discuss their intentions with, and seek approval of, the Trust at the earliest opportunity during the Dialogue. The Trust will then give directions and any proposed limitations in order to avoid abortive work on the part of the Bidders as well as the Trust evaluation team. The Trust will retain the right to determine whether or not it will accept a Variant Bid
- 5.8.3 If Bidders wish to submit any Variant Bid, they should be aware that they will not be considered unless the Reference Bid has been submitted, as set out in the Bid Deliverables.

- The deliverables are for the Reference Bid, and a clear statement of departures must accompany any Variant Bid. The basis of departure must be supported by the same level of detail as required for the reference Bid Deliverables. Depending on the nature of the Variant Bid this may also include a requirement for information not specified in the building and engineering deliverables.
- 5.8.5 As a minimum each Variant Bid shall contain:
 - The Bidder's proposed pricing for the Variant Bid and proposed Unitary Payment
 - The items specified for a Variant Bid only to the extent they differ from the Reference Bid, save for the financial submission where the information required must be submitted for a Reference Bid and any Variant Bid
 - Assumptions, clearly specifying where the proposals differ from the Reference Bid
 - A clear specification of such change to the terms of the Reference Bid and the effect (including pricing effect) of such variation from the Reference Bid
 - Details of any amendments to be made to the Project Agreement
- 5.8.6 In each case, all such changes and/or amendments having been discussed and agreed with the Trust in advance of closure of the Dialogue.

6 Project Management and Administration

6.1 Communication

- All communication with the Project Office will be made through BravoSolution to ensure that an effective audit trail is maintained. No direct communication with other Trust staff, outside of scheduled meetings, should be attempted, as they are not authorised to respond outside the formal channels. The Project Office will acknowledge each message within 2 working days and will respond by return or will indicate the timescale for a full response.
- 6.1.2 Bidders should note that issues raised and/or responses given which are generic will be communicated to all Bidders, in accordance with equal treatment principles.
- 6.1.3 Communication requiring a phone call will be managed through the Project Office on this number: 0121 507 5566.

6.2 Requests for Information

- 6.2.1 The process for requests for information will be as follows:
 - Requests for information will be sent via Bravo on the Trust Request for Information (RFI) form (as issued by the Project Office).
 - The Project Office will acknowledge receipt of RFIs via Bravo within 1 working day.
 - The RFI will be assessed in the Project Office and forwarded on to the relevant Project Team member to prepare the response.
 - A response will be made within 5 working days of the RFI, unless this is not possible, in which case the Project Office will inform the Bidder when the response will be available.
 - If the request has been sent in as 'Commercial in Confidence', the Project Manager / Commercial Manager will review the request and decide if this is appropriate. If, in the view of the Project Manager / Commercial Manager the request is not Commercial in Confidence, the request may be returned to the Bidder, stating that the Trust does not consider the request to be confidential to that Bidder and should they wish to proceed with the request, the Bidder must agree to its disclosure. If the Project Manager / Commercial Manager agree that the request is Commercial in Confidence, the Project Office will prepare the response, which will then only be sent to the originator of the request.
 - The Trust will issue confidential responses via Bravo to the Bidder's secure response folder on Bravo.
 - A database of all non-commercially confidential RFIs will be maintained by the Project Office.
 This will be available to all bidders on Bravo.
- 6.2.2 In the event of any difficulties using this system, contact should be made with the Project Office by phone on 0121 507 5566.

6.3 Data Room

- 6.3.1 An electronic data room has been established on BravoSolution. This facility contains information that Bidders may require during the procurement phase of the Project.
- 6.3.2 New documents, updates or data requested will be uploaded to the data room and will be available to all Bidders. E-mail alerts will let Bidders know when new information is available.
- 6.3.3 A list of the data room contents is presented in *Appendix 6*.

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6.4 Submission of Bid Deliverables

Electronic Submission

- A response form on BravoSolution has been created for Bidders to return electronic versions of the Bid Deliverables in a secure environment. All Bid Deliverables must be submitted electronically as well as in hard copy.
- 6.4.2 All Bid submissions will be delivered via the BravoSolution secure portal before 12.00 midday local time on the relevant Bid submission date, as set out in Table 4.

Hard Copy Submission

- 6.4.3 Bidders should note that these instructions may change if the Trust amends its Standing Financial Instructions to allow electronic receipt of tenders. Bidders will be informed accordingly.
- One hard copy, delivered before 12.00 midday on the submission date, as set out in Table 4 below, will be required to complete each Bid.
- 6.4.5 The packaging of the documents must not include any mark or identifier of the Bidder. It should be clearly labelled with the following:

MIDLAND METROPOLITAN HOSPITAL PROJECT PROCUREMENT DOCUMENTS TENDER DO NOT OPEN

NOT TO BE OPENED BY PROJECT OFFICE BEFORE [DATE TO BE INSERTED]

The submission should be delivered to:

Simon Grainger-Lloyd
Trust Secretary
Sandwell and West Birmingham Hospitals NHS Trust
Trust Headquarters
1st floor - Health & Wellbeing Centre
Sandwell General Hospital
Lyndon
West Bromwich
B71 4HJ

6.4.6 Receipt of the hard copy will be recorded in the Chief Executive's office as a record of the formal submission. This delivery should therefore be made in good time. It is the sole responsibility of each Bidder to ensure that Bid submissions are received at the Trust by the closing date and time. Any Bidder failing to meet the closing date and time may be eliminated from the CD process.

Table 4 Submission Dates

Stage	Submission Type	Electronic / Paper	Submission Deadline
CD Stage 3	Interim Submissions	Electronic and hard copy	12 th December 2014
CD Stage 4	Draft Final Bids	Electronic and hard copy	9 th April 2015
CD Stage 5	Final Bids	Electronic and hard copy	7 th August 2015

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- 6.4.7 The Trust reserves the right to alter the bid submission dates.
- 6.4.8 Items that have not been explicitly requested as Bid Deliverables will not be considered by the Trust and must not form any part of the bid.
- 6.4.9 Bidders may issue appendices where these provide valuable background information in support of a specific Bid Deliverable, in which case they will be considered in the evaluation. Appendices must not contain any clarification, justifications or caveats relating to the Bid.

Format of Responses

- 6.4.10 All submissions made by Bidders must be written in English and be signed by an authorised representative of each relevant company or organisation.
- 6.4.11 The responses to the Bid Deliverables must:
 - Be detailed, yet succinct and focused
 - Follow the format and numbering convention specified in the Bid Deliverables and should be cross-referenced accordingly
 - Use the correct proformas if specified in the Bid Deliverables- proforma references are included in the bid deliverable tables and the pro formas themselves can be accessed on Bravo
 - Include a list of contents and should reference supporting appendices where indicated
- 6.4.12 Appendices must be cross referenced to the appropriate section of the Bid submission and will follow the same formatting conventions outlined above.

Return of Certificates

- 6.4.13 The Trust requires Bidders to make certain undertakings if they wish to remain in the competition. These undertakings include signing the following certificates, which must be completed and submitted with each bid submission. Copies of the certificates are provided in *Appendix 7*:
 - Certificate of Non-Canvassing.
 - Certificate of Non-Collusive Tendering.
 - Confidentiality of undertakings.
 - PQQ Validation Certificate.

List of Appendices 7

Appendix no.	Appendix Name
1	Project Plan
2	Timetable for Bidder Meetings
3	Bid Deliverables
4	Draft tender documents for procurement of due diligence advisors
5	Funding Protocol
6	Structure of Data Room
7	Certificates
8	PF2 Equity Bid Information
9	Funding Competition Timeline

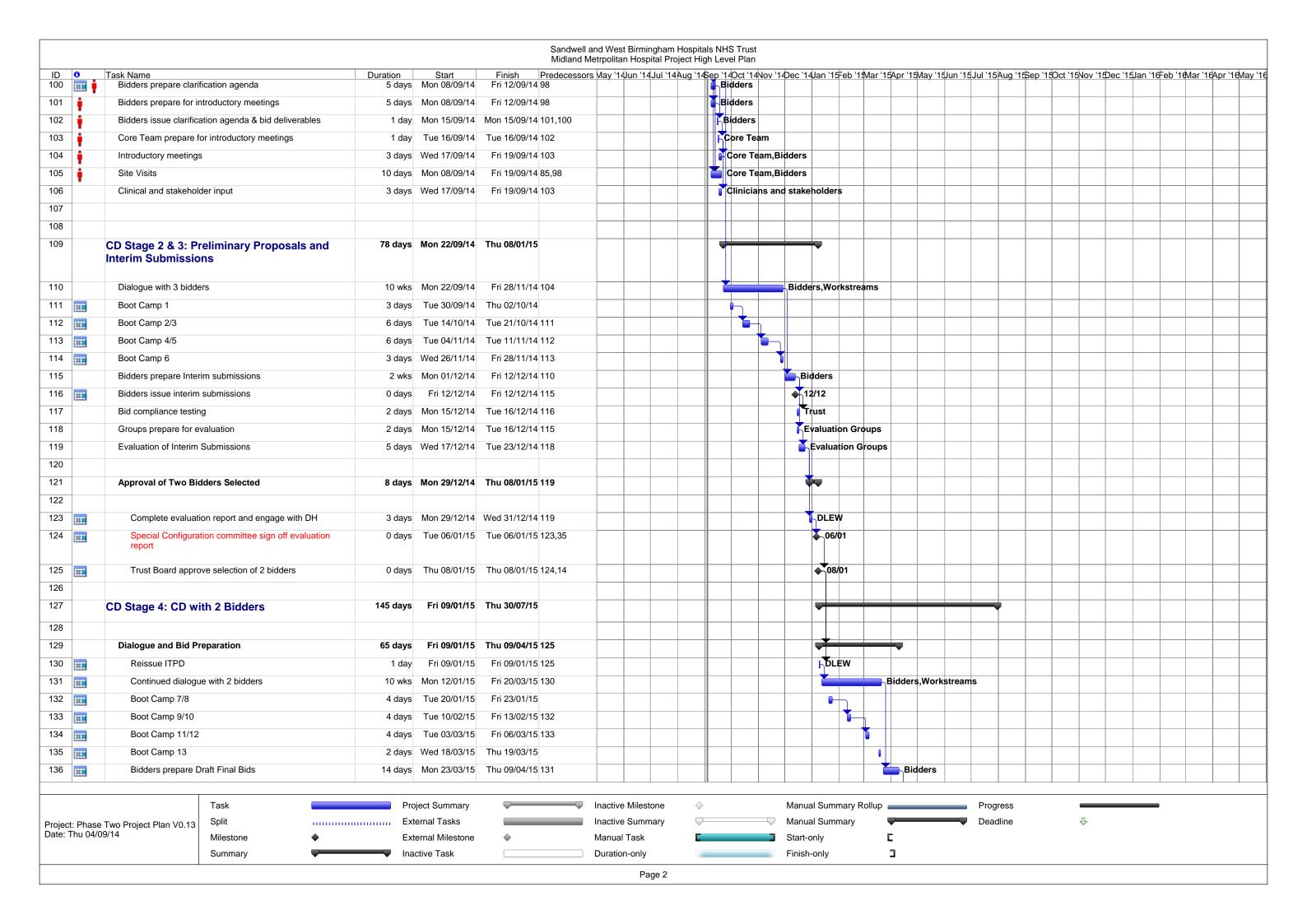


Midland Metropolitan Hospital Project

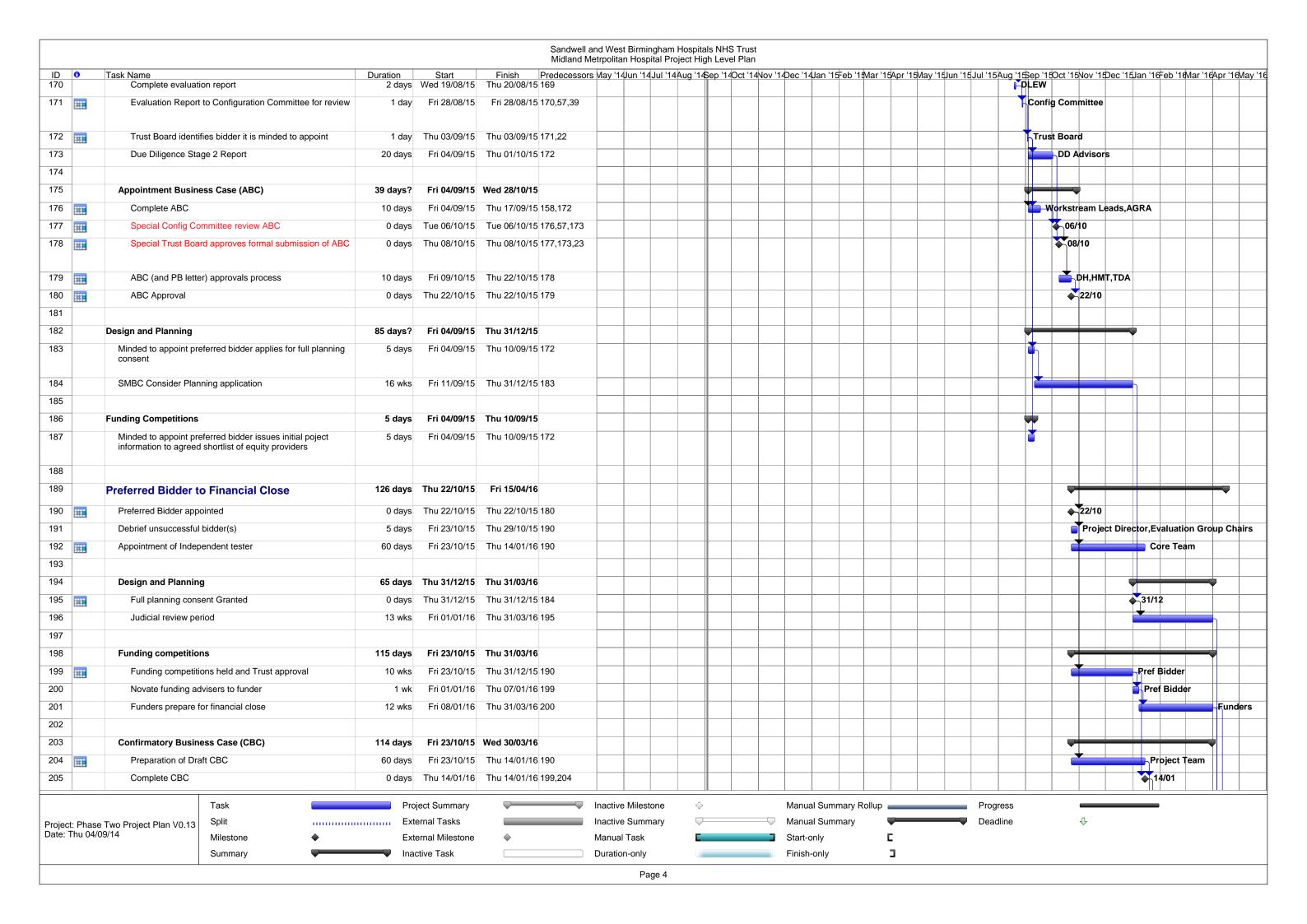
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Appendix 1 – Project Plan

Sandwell and West Birmingham Hospitals NHS Trust Midland Metrpolitan Hospital Project High Level Plan Predecessors May '14Jun '14Jun' 14Jun' 14Sep '14Sep '14Oct '14Nov '14Dec '14Jan '15Feb '14Mar '15Apr '15May '15Jun '15Jun' 15Jun' 15Sep '15Oct '15Nov '15Dec '15Jan '16Feb '16Mar '16Apr '16May '16Feb ID 0 Task Name Start Finish Duration Thu 03/03/16 **Approval Bodies** 692 days Tue 09/07/13 2 540 days Thu 06/02/14 Thu 03/03/16 **Trust Board** \Diamond \Diamond \Diamond 29 **Configuration Board Committee** 470 days Fri 28/02/14 Fri 18/12/15 \odot \Diamond \Diamond \Diamond \Diamond \Diamond \Diamond \Diamond \Diamond 42 625 days Tue 09/07/13 Tue 01/12/15 **MMH Reconfiguration CLE Committee** \Diamond \Diamond \Diamond 67 44 days Mon 14/07/14 Thu 11/09/14 Prequalification OJEU 68 25 days Mon 14/07/14 Fri 15/08/14 69 -Issue OJEU Notice 0 days Mon 14/07/14 Mon 14/07/14 **♦ 14/07** DLEW 70 Final arrangements and run Open Day 5 days Mon 14/07/14 Fri 18/07/14 69 71 **III** Issue PQQ and respond to RFCs 24 days Mon 14/07/14 Thu 14/08/14 69 DLEW 14/08 0 days Thu 14/08/14 Thu 14/08/14 71 72 Close PQQ Issue 73 Submission of PQQ 1 day Fri 15/08/14 Fri 15/08/14 69,71 Bidders ----74 75 Select 3 bidders 19 days Mon 18/08/14 Thu 11/09/14 Deloitte 76 1 day Mon 18/08/14 Mon 18/08/14 73 Financial hurdle test and compliance D_EW 77 Issue PQQ to evaluation team 1 day Tue 19/08/14 Tue 19/08/14 76 DI.EW 78 Request bidder references 1 day Mon 18/08/14 Mon 18/08/14 73 Deloitte 79 Credit checks, review bidder status 6 days Tue 19/08/14 Tue 26/08/14 76 80 FQQ evaluation team Evaluation team review PQQ documents 3 days Wed 20/08/14 Fri 22/08/14 77 1 day Tue 26/08/14 Tue 26/08/14 80 PQQ evaluation team 81 Complete evaluation 82 QA and consistency checks 1 day Wed 27/08/14 Wed 27/08/14 81 GSEA DLEW 83 Complete Evaluation Report 2 days Thu 28/08/14 Fri 29/08/14 82 **√03/09** 84 Special Config Committee review PQQ Evaluation Report 0 days Wed 03/09/14 Wed 03/09/14 83,33 ----04/09 0 days Thu 04/09/14 Thu 04/09/14 84,10 85 Trust Board approves 3 bidders ----GSEA 86 -Fri 05/09/14 Thu 11/09/14 85 Feedback to unsuccessful bidders 5 days 87 88 81 days Mon 08/09/14 Mon 29/12/14 Procure due diligence advisors 89 Bidders review Due Diligence tender documents 5 days Mon 08/09/14 Fri 12/09/14 98 Bidders DLEW 90 **** DD Tender documents agreed at introductory meetings 3 days Mon 15/09/14 Wed 17/09/14 89 DLEW 91 Prepare DD tender documents for issue 5 days Mon 22/09/14 Fri 26/09/14 104,90 DLEW 92 1 day Mon 29/09/14 Mon 29/09/14 91 Issue DD tender documents 35 days Tue 30/09/14 Mon 17/11/14 92 DLEW,GSEA,PFU 93 Competition for Due Diligence Advisor provision 17/11 94 Appoint Due Diligence Advisors 0 days Mon 17/11/14 Mon 17/11/14 93 95 Stage 1 due diligence report (ITPD documents) 30 days Tue 18/11/14 Mon 29/12/14 94 **DD Advisors** 96 97 11 days Fri 05/09/14 Fri 19/09/14 **CD Stage 1: ITPD Clarification** DLEW Issue ITPD 98 1 day Fri 05/09/14 Fri 05/09/14 85 **** 5 days Mon 08/09/14 DLEW 99 Induction activities Fri 12/09/14 98 Task **Project Summary** Inactive Milestone Manual Summary Rollup _____ Progress T External Tasks Manual Summary Deadline Split **Inactive Summary** Project: Phase Two Project Plan V0.13 Date: Thu 04/09/14 Milestone External Milestone Manual Task Start-only 3 Summary Inactive Task **Duration-only** Finish-only Page 1



					Midland M	Metrpolitan Hospital Pro	Hospitals NHS Trust oject High Level Plan				
ID	0	Task Name	Duration	Start			<u> </u>	v '14Dec '14Jan '15Feb '15Mar '	15Apr	Aug '15Sep '15Oct '15Nov '15Dec '15Jan '16Feb '16Mar '1	6Apr '16
37		Bidders issue Draft Final Bids	0 days		Thu 09/04/15 136				09/04		
38											
39		Evaluation of Draft Final Bids	30 days	Fri 10/04/15	Thu 21/05/15 137				+		
40		Due diligence advisors review of key concerns at draft	20 days	Fri 10/04/15	Thu 07/05/15 137				DD Advisors,Tru	st Advisors	+
		bids	,								
41		Bid compliance testing	3 days	Fri 10/04/15	Tue 14/04/15 137				Core Team		+
42		Groups prepare for evaluation of Draft Final Bids	5 days		Thu 16/04/15 137				Evaluation teams		++
		Evaluation of Draft Final Bids	15 days		Thu 07/05/15 142				Evaluation teams		
			•								
44		Clarification / fine tuning / preparation for Closure of Dialogue	10 days	FII 08/05/15	Thu 21/05/15 143,140				Bid Managem	ent Group	
15											
46		Preparing for Conclusion of Dialogue	19 days	Fri 08/05/15	Thu 04/06/15						
47		Gateway 3a Review	3 days	Fri 08/05/15	Tue 12/05/15 143				GSEA,Project Te	eam,Gateway Team	+
		Complete draft ABC for Conclusion of Dialogue	5 days	Fri 08/05/15	Thu 14/05/15 143				Workstream Le	ads,AGRA	+
		Special Config Committee signs off ABC at Conclusion of	0 days	Tue 02/06/15	Tue 02/06/15 35,148				02/06		+
		Dialogue			,						
50		CCG Presentations to seek endorsement for ABC	1 day	Fri 15/05/15	Fri 15/05/15 148				¥ G\$EA		
51		Trust Board approval submission of Conclusion of Dialogue ABC	0 days	Thu 04/06/15	Thu 04/06/15 150,19				04/06		
3		Approval of ABC for Conclusion of Dialogue	41 days	Thu 04/06/15	Thu 30/07/15						
54		DH and TDA review draft ABC for Conclusion of Dialogue	30 days	Fri 05/06/15	Thu 16/07/15 151,144				DI	I,Core Team	
					,						
55		Monitor review ABC for Conclusion of Dialogue	30 days	Thu 04/06/15 V	Ved 15/07/15 151,144				Me	onitor	
		(indicative risk rating)			,,,,,,						
56		DH formal referral to HMT for approval	1 day	Fri 17/07/15	Fri 17/07/15 155,154				D		
.7 57		HMT approval process partially in parallel to DH	30 days		Thu 30/07/15 154SS+10 d	2)				HMT	
			•			ay				30/07	
58		Approval for Closure of Dialogue	0 days		Thu 30/07/15 157,155						
		Closure of Dialogue letter issued	0 days	Thu 30/07/15	Thu 30/07/15 158					30/07	
60											
51		Complete ITFB	25 days	Fri 08/05/15	Thu 11/06/15 143				DLEW		
52											
63		CD Stage 5: Final Bids	64 days?	Fri 31/07/15 V	Ved 28/10/15					 	
64		Selection of Preferred Bidder Minded to Appoint	45 days	Fri 31/07/15	Thu 01/10/15						
65		Issue Invitation To Submit Final Bids (ITFB)	0 days	Fri 31/07/15	Fri 31/07/15 161,159					31/07	
66		Final Bid documents prepared	1 wk	Fri 31/07/15	Thu 06/08/15 165					Bidders	
67		Bidders issue Final Bid documents	1 day	Fri 07/08/15	Fri 07/08/15 166					Bidders	
8		Groups prepare for evaluation	1 day	Mon 10/08/15	Mon 10/08/15 167					Core Team	+
69		Evaluation Groups	6 days	Tue 11/08/15	Tue 18/08/15 168					Evaluation Groups	+
		Task		ect Summary		Inactive Milestone	\Diamond	Manual Summary Rollup	•		
ject	: Phase	Two Project Plan V0.13 Split		ernal Tasks		Inactive Summary		Manual Summary	Dead	line 🕀	
ıe: I	hu 04/09	IVIIIestorie •		ernal Milestone	♦	Manual Task		Start-only	С		
		Summary	■ Inad	ctive Task		Duration-only		Finish-only	3		



	Sandwell and West Birmingham Hospitals NHS Trust Midland Metrpolitan Hospital Project High Level Plan																	
ID	0	Task Name	Duration	Start	Finish	Predecessors Ma 205,41	y '14Jun '14Jul	'14Aug '14Sep '	14Oct '14Nov '14	Dec '14Jan '15 e	b '15Mar '15Apr	'15May '15Jun '	15Jul '15Aug '	15Sep '150	Oct '15Nov '	'15Dec '15Ja	ın '16-eb '16Mar '	16Apr '16May '1
206		Config Committee review CBC	1 day	Fri 15/01/16	Fri 15/01/16	205,41											Project Team	
207		Gateway Review 3B	3 days	Fri 15/01/16	Tue 19/01/16	5 204											Gateway, Wo	rkstream Lea
208		Trust Board approve CBC	0 days	Thu 03/03/16	Thu 03/03/16	206,207,28											03	/03
209		CBC approval process	20 days	Thu 03/03/16	Wed 30/03/16	206,208												DH,HMT
210		CBC approval	0 days	Wed 30/03/16	Wed 30/03/16	209												30/03
211																		
212		Financial Close	11 days	Fri 01/04/16	Fri 15/04/10	3												***
213		10 day standstill (Alcotel)	10 days	Fri 01/04/16	Thu 14/04/16	196,210,201												
214		Financial close	1 day	Fri 15/04/16	Fri 15/04/16	213,201												15/04
215																		
216		Construction	118 wks	Mon 18/04/16	Fri 20/07/18	3 214												
217		Commissioning	12 wks	Mon 23/07/18	Fri 12/10/18	3 216												
218		Hospital Fully Open	1 day	Mon 15/10/18	Mon 15/10/18	3 217												

Task Progress Project Summary Manual Summary Rollup External Tasks Deadline $\hat{\mathbf{T}}$ Split Inactive Summary Manual Summary Project: Phase Two Project Plan V0.13 Date: Thu 04/09/14 Milestone External Milestone Manual Task Start-only Duration-only Summary Inactive Task Finish-only Page 5



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Appendix 2 – Timetable for Bidder Meetings

MMH DESIGN DIALOGUE TIMETABLE WEEK DATE DAY BIDDER 9.00am - 8.30am - 10.00am 9.00am Whole Hospital Layouts and DCP review bidder B BC2/3 review bidder B BC4/5 review bidder B BC1 Site Access Bid 10.00am - 12.30pm O floor initial (includes i edical day case unit) All CD participants All CD participants Bidder Bidder B BC4/5 C returns returns r Trust Team review the Day BC2/3 returns Bidder B BC2/3 returns 12.30pm -1.30pm 1.30pm -4.00pm .00pm - 7.00pm 4.30pm - 4.00pm - 5.00pm 4.30pm Trust CLE group review whole hospital layouts Trust Team review the day 9.00am - 8.30am -10.00am 9.00am review bidder B BC2/3 review bidder A BC4/5 review bidder B BC4/5 review bidder C BC2/3 10.00am - 12.30pm Architecture
M&E
Capital Costs
FM
Architecture
M&E
Capital Costs
FM BC2/3 Bidder A BC2/3 returns Bidder Bidder A BC4/5 B BC4/5 returns returns 12.30pm -1.30pm dder C2/3

Trust and Bidder Review and Feedback and close

MMH DESI WEEK DATE DAY	9 10 33-Nov 04-Nov 05-Nov 06-Nov 07-Nov 10-Nov 11-Nov 12-Nov 13-Nov 14-Nov 4 T W T F M T W T F		11 19-Nov 20-N W T		12 24-Nov 25-Nov 26-Nov 27-Nov 28-N M T W T F	1: ov w/c 01/12/14		16-Dec	15 17-Dec 18-De	ec 19-Dec	22-Dec	23-Dec 24-Dec	16 17 25-Dec w/c 29/12/14	
BIDDER	BC4 BC5 BC4 BC5 BC4 BC5 A A B B B C C				BC6 BC6 BC6 A B C				i i					
8.30am 9.00am	Plan for the Day				Plan for the Day									
9.00am - 10.00am	Whole Whole Whole Hospital Hospital Hospital Layout & Bid Mgt Layout & Bid Mgt DCP Meeting DCP Meeting				Whole Hospital Layout a DCP and initial thoughts	on	11:30am							
9.0	DCP Meeting DCP Meeting DCP Meeting		A BC6	r c BC6	remaining department	5	00am - 1							
٤	acilities #			iew bidder C	scilities r final	rfinal	Bidder A 9:	Evaluat						
-12.30p	Trust Fac ruary) initial		review bidder	review	Trust Fac premeet ED Floor	Ed Floor	DQI Bic	ation for						
10.00am	M M M M M M M M M M M M M M M M M M M				rd Floor		14:00pm	Prepar		u e	Evaluat			
	Facilities (inc M Facilities (inc M Facilities (inc M Facilities (inc M Facilities (inc M ED floor review				Trust ED premeet Generic Ward Floor final Generic Ward Floor final	al	s Ė		g	tion Sess	Group : - 13:00	l1:00am	ť	
Ė. c	\$	Bidder A	Bidder B Bidde	rC	Dants Tru	fin im subm	terim submissio Bidder B 11:30a		Evaluatio	al Evaluat	cal Evalua		ion Repo	t Board
12.30pm - 1.30pm	Lunch Lunch	BC6 returns	Bidder B Bidde BC6 BC6 returns return		All CD participants	are inter	epare Inter	Lunch	Clinical	and Leg	d Technic		Evaluat	Trust
	nic Ward				ric Wards nc final	final	មិ Lunch 14:00pm	±	esign Vision Group eparation for	Financial	Estates an			
-4.00pm	remeet remeet rewiew review review review review review review rewiew re				Trust Generic W. premeet Facilities (inc Mortuary) final Facilities (inc Mortuary) final	Mortuary) final	- 14:30pm	ation ir	Evaluation 2:00pm -		ш ш			
1.30pm	t protestres Tru- ward Floor ward Floor Revis s Floor Revis s Floor Revis				heatres Tr et pu es Floor Fe m M es Floor Fe		Ε	ants eval	4:00pm					
	reneet seneric ward Fl heatres Floor I heatres Floor I heatres Floor I heatres Floor I					Final	- 17:00pm	e Particip						
4.00pm - 4.30pm	Trust Team review the day				Trust Team review the d		14:30pm	l Dialogu						
4.30pm - 4 5.00pm 4	not realized the day				Trust and Bidder Review		Bidder C	Clinica						
ε	Trust and Bidder Review and Feedback and Close				Feedback and Close		Ö							
n - 7.00pı														
5.00p														
T&3 HMM - g g														
8.30am · 9.00am	Plan for the Day				Plan for the Day									
9.00am - 10.00am	Whole Hospital Layout & Bid Mgt DCP Meeting DCP Meeting DCP Meeting				Whole Hospital Layout a DCP and initial thoughts remaining department	on								
			A BC6	S BC6	essions as per essions as per essions as per									
٤			review bidder A BC6 review bidder B BC6	review bidder C BC6										
-12.30pm			review	review	Wash up: schedule Wash up: Schedule	schedu								
10.00am					schedule	schedule								
					s as per	ns as per	iissions							
	Costs Costs				up session	ip session	rim subm							
	Architecture M&E Legal FM Architecture M&E Legal Gaptal Costs FM Architecture M&E Legal Gaptal Costs FM				Wash up ses	Wash u	Prepare Inter							
12.30pm - 1.30pm		Bidder A BC6	Bidder B BC6 BC6 returns	rC		Pre	Pre							
12	Lunch	returns	returns return	15	Lunch									
					sessions as per sessions as per									
1-4.00pm	Soning sioning				Wash up se schedule schedule schedule schedule	hedule								
1.30pm	IM&T Fugurer & Commissi Financial Deliverables Payment Mechanism Equipmet & Commissi IM&T Financial Deliverables Payment Mechanism Financial Deliverables Payment Mechanism				sions W	ule sc				tion Sroup				
	Mean Recomment & Confidencial Deliver Payment Macha Financial Deliver Payment Macha				Wash up session as per schedule Wash up session as per schedule	as per schedule				Regeneration Evaluation Group 14:00 - 15:00				
md(Eq. IMM8 Finz Fanz Fanz Fanz Fanz Fanz Fanz Fanz Fa				Was was by	as as				Eva 1				
4.30pm 4.00pm - 5.00pm 4.30pm	Trust Team review the day				Trust Team review the d									
4.30	Trust and Bidder Review and Feedback and Close				Feedback and Close									

MMH DES WEEK DATE DAY 23 24 25 25 26-Feb 27-Feb 02-Mar 03-Mar 05-Mar 06-Mar 05-Mar 06-Mar 05-Mar 06-Mar 05-Mar 06-Mar 08-Mar 08-M BIDDER Pre Meet Acute Assessment 9.00am -10.00am Bidder E Bo 9/10 returns Bidder E BC 11/12 returns All CD participants Bidder D BC 9/10 returns All CD participants Bidder D BC 11/12 returns Bidder E BC 7/8 returns 12.30pm -1.30pm 7/8 returns Pre meet Mater Pre meet De Brief L Trust Team Review the day Trust Team Review the day rust Team Review the day Trust and Bidder Review and rust and Bidder Review and Feedback and Feedback and Close pre meet acute asst Whole Hospital Layout & DCP Whole Hospital Layout & DCP Whole Hospital Layout & DCP review bidder E BC11/12 Architecture
M&E
Legal
Capital Costs
FM
Architecture
M&E
Legal
Capital Costs
FM Bidder E B(9/10 returns Bidder D BC 11/12 returns Bidder E BC 11/12 returns Bidder D BC 9/10 returns All CD articipants Bidder D BC 7/8 returns Bidder E BC 7/8 returns Trust and Bidder Review and Feedback and Close rust and Bidder Review and Feedback and rust and Bidder Review and Feedback and Close

MMH DESI	27	1		28			29	30	31			32			33	34					35
	w/c 09/03/15		17-Mar T	18-Mar W	T	20-Mar F	w/c 23/03/15			13-Apr M	14-Apr T		16-Apr T	17-Apr F	w/c 20/04/15	27-Apr M		29-Apr W	30-Apr	01-May F	w/c 04/05/15
BIDDER				BC13 D	BC13 E																
8.30am - 9.00am																					
9.00am - 10.00am																					
9.01														12:30					Evaluation Moderation		
														- 00:60					Group 09:30 - 11:00		
2.30pm														idder D							
10.00am - 12.30pm														DQ! Session Bidder D 09:00 - 12:30							
10.0				greed	greed									DOI S	Clinical		ion	c			
				Any Remaining Issues - to be agreed	Any Remaining Issues - to be agreed		Prepare Draft Final Bids	Prepare Draft Final Bids	Prepare Draft Final Bids	дау					n n	ation	Estates & Technical Evaluation	Finance & Legal Evaluation			p
12.30pm - 1.30pm				Issues	senss		Draft Fi	Draft Fi	Draft Fi	Easter Monday				Lunch	on Work valuatio	Clinical Evaluation	echnical	Legal E			Trust Board
12.30 1.30p				maining	maining		Prepare	Prepare	Prepare	East					Evaluatio	Clinic	ites & Ti	nance &			Ė
				Any Re	Any Re		_	_	-						Bidder Evaluation Workshops - Clinical Evaluation		Esta	Ē			
1.30pm -4.00pm														17:00							
-30pm														13:30 -							
17														DQJ Session Bidder E 13:30 - 17:00							
- E E														Session							
4.30														ρα							
4.30pm - 4.00pm - 5.00pm 4.30pm																					
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				to be ag	to be ag		al Bids	al Bids	al Bids												
				Issues -	Issues -		Oraft Fin	Oraft Fin	Oraft Fin												
				Any Remaining Issues - to be agreed	Any Remaining Issues - to be agreed		Prepare Draft Final Bids	Prepare Draft Final Bids	Prepare Draft Final Bids												
12.30pm - 1.30pm				Any Rei	Any Rei		σ.	Δ.	т.												
12.																					
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Appendix 3 – Bid Deliverables

The Midla	nd Metropolitan	Hospitals Project	CD Stage 3			CD Stage 4		
Rid Delive	rables Summary		Section	Sub Work stream	Work stream	Section	Sub Work stream	Work stream
Design Vis			Section	I	9.00%		Jucani	5.00%
	d Technical				3.0076			3.007
1	u recillicai	Capital Costs	3.60%			1.95%		
2		Schedule of Accomodation	2.40%			1.30%		
3		Architecture	4.80%			2.60%		
4		Town Planning	1.20%			0.65%		
5		ů .	4.80%			2.60%		
6		Engineering						
7		Equipment	2.40%			1.30%		
		IM&T	2.40%			1.30%		
8		Design Construction Project Management	2.40%		24.000/	1.30%		12.000
a					24.00%			13.00%
Clinical		0 1 11 1 1 0 0 11 15				2.000/		
1		Co-locations/adjacencies & Patient Flows	5.78%			3.06%		
2		Impact on workforce	4.08%			2.16%		
3		Soft FM & Goods Flows	4.08%			2.16%		
4		Education & Training	2.04%			1.08%		
5		Privacy, Dignity & Safeguarding	3.06%			1.62%		
6		Future Proofing	3.06%			1.62%		
7		Infection Control	3.06%			1.62%		
8		Health Care Planning	2.38%			1.26%		
9		Moving and Handling/ergonomics	2.38%			1.26%		
10		Business Continuity	2.38%			1.26%		
11		Outline Commissioning Plan	1.70%			0.90%		
					34.00%			18.00%
Commerci	al							
	Legal			5.00%			3.00%	
	Finance							
1		Approach to Funding	2%			1%		
2		Payment Mechanism	3%			2%		
3		Financial Assumptions	Affordability			Affordability		
4		Funding Competition	Compliance			Compliance		
5		Unitary Payment Phasing	Affordability			Affordability		
6		Income Generation	Affordability			Affordability		
7		Tax and Accounting				Affordability		
				5.00%			3.00%	
	FM							
1		Approach to Management of Services	1.80%			1.00%		
2		Approach to Management of Staff	1.80%			1.00%		
3		Method Statements and Service Provision	4.50%			2.50%		
4		Facilities Management Service Costs	0.90%			0.50%		
				9.00%			5.00%	
	Project Manager	ment		2.00%			1.00%	
	Regeneration			2.00%	1		1.00%	
	0				23.00%			13.009
Total Quali	ity				90.00%			49.00%
Price	•				10.00%			51.00%
Total					100.00%			100.00%

Competitive Dialogue (CD) Design Vision Bid Deliverables

Bidder outputs for all stages to conform to the following formats: Text in Microsoft Word.

Spreadsheets in Microsoft Excel.

Programmes in Microsoft Project Version 2010.

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
		CD S	Stage 3: Interim Submission	ns
DV3.1	Response to Design Vision Value 1: 'Inspirational, attractive and imaginative' Bidders are asked to respond to this statement: 'A modern, iconic building that creates a sense of pride and looks to the future as a leader in healthcare design. Form and function are complementary and design adds value throughout the building'.	Illustrated narrative presented in PDF format.		Are there clear ideas behind the design of the building? Does the building communicate its function as a high reputation acute hospital?
	Illustrated narrative demonstrating approach taken to achieving the Design Vision Value: 'Inspirational, attractive and imaginative'			Does the building generate a positive image?
	Up to 4 sides of A4 narrative with images			Is there potential for entry to design awards?
				Is the building likely to influence future healthcare designs?
				Is the design iconic in impact?
				Will the new building create a focal point for the local area?
				Does the building have impact at night as well as in daylight?
				Is the building interesting to look at and move around in?
				Are external colours and textures appropriate and attractive?
				Do the external materials and detailing appear to be of high quality?
				Is the interior of the building attractive in appearance?
				Will the main entrance be easy to find and does it draw visitors towards it?
				Are the entrances obvious and logically positioned in relation to likely points of arrival on site?
				The building is clearly understandable
				Does the design use artwork / colour / graphics to support wayfinding?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV3.2	Response to Design Vision Value 2: 'Welcoming'	Illustrated narrative presented in PDF format.		Will the main entrance be easy to find and does it draw visitors towards it?
	Bidders are asked to respond to this statement: 'The building provides welcoming spaces, a homely feel and human scale. Art is integral to the design, promotes wellbeing and supports wayfinding. Receptions and waiting areas are easy to find and wayfinding is clear and intuitive.'	r Dr. Killiat.		Are the entrances obvious and logically positioned in relation to likely points of arrival on site?
	Illustrated narrative demonstrating approach taken to achieving the Design Vision Value: 'Welcoming'			The building is clearly understandable
	Up to 4 sides of A4 narrative with images			Does the design use artwork / colour / graphics to support wayfinding?
				Is human scale achieved to ensure that users feel welcome as they enter and move around the building?
				Are spaces designed with good balance between height and width?
				Does ambient lighting contribute to creating a homely feel?
				Is artwork integrated into the design of the building?
				Are children's areas designed with fun and diversion considered?
				Do corridors look as if movement around the building will be easy and pleasant avoiding blandness, crowding or claustrophobia?
				Will catering areas provide pleasant café style environments to facilitate conversation and leisure?
				Are outside spaces designed with areas for sitting and walking?
				Are outside spaces designed with effective planting at various levels to soften the hard environment?
				Are outside spaces designed with variation and good use of materials to create interest?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV3.3	Response to Design Vision Value 3: 'Reassuring'	Illustrated narrative presented in PDF format.		Will the building create a positive first impression as a non-threatening place to be?
	Bidders are asked to respond to this statement: 'The environment feels calm and professional. High quality design and materials create expectation of high quality health services. Users of the building will feel safe and confident in the care they will receive.'			Does the building convey a professional image for the Trust?
	Illustrated narrative demonstrating approach taken to achieving the Design Vision Value: 'Reassuring'			Does the building support the Trust customer care promises?
	Up to 4 sides of A4 narrative with images			Does the design create a caring image for the Trust?
				The building projects a caring and reassuring atmosphere?
				The building appropriately expresses the values of the NHS
				Will the building facilitate customer care and welcoming services?
				Will the design make patients and staff feel safe by avoiding a sense of isolation and perceived lack of security?
				Outdoor spaces are provided with appropriate and safe lighting indicating paths, ramps and steps
				Will outside spaces be well lit at night?
				Will outside spaces feel safe?
				Will car parks feel safe?
				Is there a line of sight from points of access to reception desks in each area?
				Is the layout clear and simple?
				Do layouts help patients know what they need to do when they move around the building?
				Do reception areas give patients confidence that they have been checked in properly and will not miss their appointment?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV3.4		Illustrated narrative presented in		Does the design maximise use of windows to bring in natural light?
		PDF format.		There are need discussional and and of the body of the second
	Bidders are asked to respond to this statement: 'The building will convey a sense of space and light and will provide			There are good views inside and out of the building
	outside views. The design of the building will maximise use of			Are external views maximised from public areas?
	natural light. Provision of lighting will promote the 'light and			
	airy' impact without glare and will be easy to control.'			
	Illustrated narrative demonstrating approach taken to			Are external views are achieved from all beds?
	achieving the Design Vision Value: Light and airy'			
	11. (. 4 .: 1			to the control of the
	Up to 4 sides of A4 narrative with images			Is interest designed into external views where possible?
				Can patients and staff access landscaped outdoor space?
				Does the design draw the outside views in?
				2000 and dodigit draw the odtolde views in.
				Will external planting and artwork enhance the views from inside the building?
				Does the design contribute to a sense of light and space?
				De calcur and materials contribute to a conse of light and appear?
				Do colour and materials contribute to a sense of light and space?
				Does the lighting support a light and airy feel without glare?
DV3.5	Response to Design Vision Value 5: <i>'Clean without being</i>	Illustrated narrative presented in	0.90%	Does the design facilitate a clean look which minimises clutter?
		PDF format.		·
				Does the design promote tidiness?
	Bidders are asked to respond to this statement: 'The building will facilitate cleaning in a way that is obvious to patients and			Do the surfaces look easy to clean?
	staff, so that it looks clean and tidy. This will be achieved			bo the surfaces look easy to clean:
	without presenting a harsh clinical feel. Pleasant colours,			
	finishes, shapes and designs will make users feel			
	comfortable in the environment and will support wellbeing.'			
	Illustrated narrative demonstrating approach taken to			Does the design look as though it would promote easy cleaning?
	achieving the Design Vision Value: 'Clean without being clinical'			
	Up to 4 sides of A4 narrative with images			Is the interior design sympathetic and welcoming?
				Do furnishings create a friendly, comfortable feel?
				Are internal colours and textures used to create interesting and attractive contrasts?
				Does the interior design solution present a non-clinical finish?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV3.6	Response to Design Vision Value 6: 'Sympathetic to the environment' Bidders are asked to respond to this statement: 'The building will be a catalyst for regeneration of the local area. It will be an asset to the local community both in its outward appearance and in the provision of facilities for local people. Sustainability is fundamentally integral to the design.'	Illustrated narrative presented in PDF format.	0.90%	Will the building create architectural impact without overwhelming the area? Does the height, volume and skyline of the building relate well to the surrounding environment?
	Illustrated narrative demonstrating approach taken to achieving the Design Vision Value: 'Sympathetic to the environment'			Will design themes be transferable to local development design as it moves forward?
	Up to 4 sides of A4 narrative with images			Does the building contribute positively to its locality?
				The building is sensitive to neighbours and passers-by
				Does the hard and soft landscaping around the building contribute positively to the locality?
				Are civic pride themes addressed in the design, wayfinding strategy and artwork?
				Can design adjacent to the canal create opportunities for regeneration?
				Do engineering solutions for sustainability enhance the visual design?
				Does the scheme facilitate use of facilities by local residents?
				Does the landscape design improve a sense of local wellbeing?
				Does the site encourage local residents to walk on the site?

Deliverables	3	Weighting	Key issues to be considered in Evaluation
are asked to respond to this statement: 'The building et the needs of all users whatever their level of	Format Illustrated narrative presented in PDF format.		Key issues to be considered in Evaluation Does the design support delivery of the MMH Access Policy? There is good access from available public transport including any on site roads.
al ability and mode of transport. Independence will be ed in accessing and moving around the building.' ed narrative demonstrating approach taken to ag the Design Vision Value: 'Fully Accessible'			Is access to the hospital facilitated for people with physical, sensory, learning or mental health impairments?
sides of A4 narrative with images			Has an equality impact assessment been undertaken? Is access in inclement weather facilitated?
			Are outdoor spaces provided with appropriate and safe lighting indicating paths, ramps and steps? Are pedestrian routes obvious, pleasant and suitable for wheelchair users and people with other disabilities/impaired sight?
			Is there good access from available public transport including any on-site roads? Does the building promote independence?
			Does the hospital feel safe and secure? Will car parks feel safe and secure?
			Will lifts be easy to find? Will stairs be easy to access to encourage exercise where appropriate? Will lifts be easy to access for all users?
			Are colour schemes designed to avoid difficulties for partially sighted users?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV3.8		Illustrated narrative presented in		Does the design support delivery of the Privacy and Dignity Policy?
	and Dignity'	PDF format.		How effectively does the design promote freedom from intrusion in areas personal / sensitive to
	Bidders are asked to respond to this statement: 'The building			individuals?
	design will support privacy and dignity throughout the patient			
	pathway.'			
	Illustrated narrative demonstrating approach taken to			
	achieving the Design Vision Value: 'Supports Privacy and			
	Dignity'			
	Up to 4 sides of A4 narrative with images			Would the design make patients feel worthy of respect?
				Have age, ethnicity, gender, social, cultural, psychological and physical needs been considered?
				Has the modesty of patients been considered to avoid embarrassment?
				Does the design support patient involvement in decision making?
				Does the design support gender segregation?
				Will the design avoid crowding in corridors, waiting areas, doorways and receptions?
				Does the design support dignified use of toilet facilities?
				Are beds arranged for maximal privacy in four bedded bays?
				Are arrangements for privacy in bedrooms effective whilst maintaining good levels of patient
				observation?
				Does design and orientation of en suite bathrooms support privacy?
				Are lines of sight into bedrooms across courtyards minimised?
				Will patients feel that they can talk without being overheard when required?
				Has the need to support patients and their loved ones following the giving of bad news been
				considered?
	,	Sketches/ images and 3D 'snapshot'	0.90%	Does the layout allow for natural daylight to all the occupied staff areas?
	* * * * * * * * * * * * * * * * * * *	visualisations, mood boards with supporting text in PDF format.		Are there a sufficient number of 'break out' areas around the building for staff to use on a
		1,1110		personal or 1:1 level?
				Is there an indication of adequte personal storage areas which are secure and close to the
				working environment?
				Are there external views from all occupied staff spaces?
				Do the suggestion of internal materials suggest good acoustics?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV3.10	Outline Art Strategy	Narrative containing illustrative images / photos / sketches.	0.90%	How do bidders propose to engage with staff and the local community in the development of integrated artwork?
	Narrative report outlining approach to:	Presented in PDF format.		Will the artistic expression integrated into the design deliver the Design Vision and Vision for art
	Developing artistic expression in the fabric of the building			in the hospital?
	Hanging / presenting artwork in the building			
	Engagement with Trust			
	Key artistic concepts to be taken forward to next stage			Does the integrated artwork present (and / or facilitate display of) a range of the media proposed
	Integration between artistic expression and wayfinding			in the Art Strategy (paintings, drawings, photographs, textiles, crafts, sculpture, water, plants, sound and music, drama, mime, dance, writing, poetry, light, reflection, moving image, moving 3D art)?
	Encouraging on-going development of the Art Programme			
	Bidders should refer to the Art Strategy in completing this deliverable.			
				Have a selection of the Trust's art themes / messages, outlined in the Art Strategy, been included in the integrated artwork (heritage and civic pride, celebration of health and medicine, healthy lifestyles, local creativity and engagement, the power of storytelling, bringing the outside in)?
				How effectively has artwork and colour been used to support wayfinding?
				How is unity of artistic expression promoted across public areas?
				Are the themed murals proposed effective in delivering the vision for art in the hospital
				Do children's wards contain murals, bright colours and areas to support participation in art activities?
				Would the artwork proposed for the children's areas reduce anxiety and create interest / fun? Does artwork include safe opportunities to engage physically e.g. touching, climbing and walking through?
				Has keynote artwork been designed into key public area(s) and do these pieces deliver the Design Vision and Vision for art in the hospital?
				Does the design facilitate display of artwork, including approach to hanging / positioning and lighting?
				Is there at least one area designated for changing / permanent displays of artwork? Are proposals for display mounting systems included?
				Has provision been made for exhibition / performance space in public areas? Does the design facilitate small group performance art?
				Has cleaning of artwork been considered in the design?
				Does the artwork proposed for the public realm support the Design Vision and Art Vision?
				Have opportunities for artistic expression been utilised in the external design including the hard landscaping and outdoor furniture?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV3.11	Presentation to DQI Event. The Trust will organise an event for the Design Vision Group, clinical dialogue participants and trust senior staff. Bidders will make a general presentation about their design and will specifically address the folowing points: 1:500 / Diagrammatic stacking plan Generic Ward Cluster layout Approach to Privacy and Dignity Approach to accessibility Approach to expansion , contraction, change in use and introduction of new technology Feedback from the event will inform evaluation.	Presentation	Not to be scored but feedback will inform the evaluation A DQI evaluation will be conducted and Bidders will receive feedback following conclusion of evaluation	
Total			9.00%	

CD Stage 4: Draft Bid Deliverables				
Achievement of the Design Vision Value 1: 'Inspirational, attractive and imaginative'	Narrative and images presented in PDF format.	0.50%	Are there clear ideas behind the design of the building?	
Bidders are asked to respond to this statement: 'A modern, iconic building that creates a sense of pride and looks to the			Does the building communicate its function as a high reputation acute hospital?	
future as a leader in healthcare design. Form and function are complementary and design adds value throughout the building.'			Does the building generate a positive image?	
Narrative describing how the Design Vision Value 1: 'Inspirational, attractive and imaginative' has been achieved in the design proposals.			Is there potential for entry to design awards?	
This will take the form of a report giving clear, objective evidence of the achievement of the Design Vision Value. Examples will be provided using images, sketches and simple diagrams.				
Maximum of 6 sides of A4.			Is the building likely to influence future healthcare designs?	
			Is the design iconic in impact?	
			Will the new building create a focal point for the local area?	
			Does the building have impact at night as well as in daylight?	
			Does the research / education / administration facility convey the Trust's status as an academic centre and a successful teaching hospital?	
			Is the building interesting to look at and move around in?	
			Are external colours and textures appropriate and attractive?	
			Do the external materials and detailing appear to be of high quality?	

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
	Deliverables	Tormat	Weighting	Is the interior of the building attractive in appearance?
				Will the main entrance be easy to find and does it draw visitors towards it?
				Are the entrances obvious and logically positioned in relation to likely points of arrival on site?
				The building is clearly understandable
				Does the design use artwork / colour / graphics to support wayfinding?
DV4.2		Narrative and images presented in PDF format.	0.50%	Will the main entrance be easy to find and does it draw visitors towards it?
	Bidders are asked to respond to this statement: 'The building provides welcoming spaces, a homely feel and human scale.			Are the entrances obvious and logically positioned in relation to likely points of arrival on site?
	Art is integral to the design, promotes wellbeing and supports wayfinding. Receptions and waiting areas are easy to find and wayfinding is clear and intuitive.'			The building is clearly understandable
	Narrative describing how the Design Vision Value 2: 'Welcoming' has been achieved in the design proposals.			Does the design use artwork / colour / graphics to support wayfinding?
	This will take the form of a report giving clear, objective evidence of the achievement of the Design Vision Value. Examples will be provided using images, sketches and simple diagrams.			Is human scale achieved to ensure that users feel welcome as they enter and move around the building?
	Maximum of 6 sides of A4.			Are spaces designed with good balance between height and width?
				Does ambient lighting contribute to creating a homely feel?
				Is artwork integrated into the design of the building?
				Are children's areas designed with fun and diversion considered?
				Do corridors look as if movement around the building will be easy and pleasant avoiding blandness, crowding or claustrophobia?
				Will catering areas provide pleasant café style environments to facilitate conversation and leisure?
				Are outside spaces designed with areas for sitting and walking?
				Are outside spaces designed with effective planting at various levels to soften the hard environment?
				Are outside spaces designed with variation and good use of materials to create interest?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV4.3	Achievement of the Design Vision Value 3: 'Reassuring'	Illustrated narrative presented in PDF format.		Will the building create a positive first impression as a non-threatening place to be?
	Bidders are asked to respond to this statement: 'The environment feels calm and professional. High quality design and materials create expectation of high quality health services. Users of the building will feel safe and confident in the care they will receive.'	FDF IOIIIIat.		Does the building convey a professional image for the Trust?
	Narrative describing how the Design Vision Value 3: 'Reassuring' has been achieved in the design proposals.			Does the building support the Trust customer care promises?
	This will take the form of a report giving clear, objective evidence of the achievement of the Design Vision Value.			Does the design create a caring image for the Trust?
	Examples will be provided using images, sketches and simple diagrams.			The building projects a caring and reassuring atmosphere?
	Maximum of 6 sides of A4.			The building appropriately expresses the values of the NHS
				The building appropriately expresses the values of the NHO
				Will the building facilitate customer care and welcoming services?
				Will the design make patients and staff feel safe by avoiding a sense of isolation and perceived lack of security?
				Outdoor spaces are provided with appropriate and safe lighting indicating paths, ramps and steps
				Will outside spaces be well lit at night?
				Will outside spaces feel safe?
				Will car parks feel safe?
				Is there a line of sight from points of access to reception desks in each area?
				Is the layout clear and simple?
				Do layouts help patients know what they need to do when they move around the building?
				Do reception areas give patients confidence that they have been checked in properly and will not miss their appointment?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV3.4		Narrative and images presented in	0.50%	Does the design maximise use of windows to bring in natural light?
	airy' Bidders are asked to respond to this statement: 'The building	PDF format.		There are good views inside and out of the building
	will convey a sense of space and light and will provide			And the state of t
	outside views. The design of the building will maximise use of natural light. Provision of lighting will promote the 'light and			Are external views maximised from public areas?
	airy' impact without glare and will be easy to control.'			
	Narrative describing how the Design Vision Value 4: 'Light			Are external views are achieved from all beds?
	and airy' has been achieved in the design proposals.			Are external views are achieved from all beds?
	This will take the form of a report giving clear, objective			Is interest designed into external views where possible?
	evidence of the achievement of the Design Vision Value. Examples will be provided using images, sketches and simple			
	diagrams.			
	Maximum of 6 sides of A4.			Can patients and staff access landscaped outdoor space?
				Does the design draw the outside views in?
				Will external planting and artwork enhance the views from inside the building?
				Does the design contribute to a sense of light and space?
				Do colour and materials contribute to a sense of light and space?
				Does the lighting support a light and airy feel without glare?
DV4.5	Achievement of the Design Vision Value 5: 'Clean without		0.50%	Does the design facilitate a clean look which minimises clutter?
	being clinical'	PDF format.		Does the design promote tidiness?
	Bidders are asked to respond to this statement: 'The building			Do the surfaces look easy to clean?
	will facilitate cleaning in a way that is obvious to patients and staff, so that it looks clean and tidy. This will be achieved			Do the surfaces look easy to clean:
	without presenting a harsh clinical feel. Pleasant colours, finishes, shapes and designs will make users feel			
	comfortable in the environment and will support wellbeing.'			
	Narrative describing how the Design Vision Value 5: 'Clean without being clinical' has been achieved in the design			Does the design look as though it would promote easy cleaning?
	proposals.			
	This will take the form of a report giving clear, objective			Is the interior design sympathetic and welcoming?
	evidence of the achievement of the Design Vision Value.			is the interior design sympathetic and welcoming:
	Examples will be provided using images, sketches and simple diagrams.			
	Maximum of 6 sides of A4.			Do furnishings create a friendly, comfortable feel?
	Maximum of a sidea of Att.			Are internal colours and textures used to create interesting and attractive contrasts?
				Does the interior design solution present a non-clinical finish?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV4.6		Narrative and images presented in	0.50%	Will the building create architectural impact without overwhelming the area?
	to the environment' Bidders are asked to respond to this statement: 'The building	PDF format.		Does the height, volume and skyline of the building relate well to the surrounding environment?
	will be a catalyst for regeneration of the local area. It will be			boos the height, volume and skyline of the ballating relate well to the samounding environment.
	an asset to the local community both in its outward appearance and in the provision of facilities for local people.			Will design themes be transferable to local development design as it moves forward?
	Sustainability is fundamentally integral to the design.'			Does the building contribute positively to its locality?
	Narrative describing how the Design Vision Value 6:			
	'Sympathetic to the environment' has been achieved in the			
	design proposals.			
	This will take the form of a report giving clear, objective			The building is sensitive to neighbours and passers-by
	evidence of the achievement of the Design Vision Value. Examples will be provided using images, sketches and simple			
	diagrams.			
	Maximum of 6 sides of A4.			Does the hard and soft landscaping around the building contribute positively to the locality?
				Are civic pride themes addressed in the design, wayfinding strategy and artwork?
				Can design adjacent to the canal create opportunities for regeneration?
				Do engineering solutions for sustainability enhance the visual design?
				Does the scheme facilitate use of facilities by local residents?
				Does the landscape design improve a sense of local wellbeing?
				Does the site encourage local residents to walk on the site?
DV4.7	<u> </u>	Narrative and images presented in	0.50%	Does the design support delivery of the MMH Access Policy?
	Accessible' Bidders are asked to respond to this statement: 'The building	PDF format.		There is good access from available public transport including any on site roads.
	will meet the needs of all users whatever their level of			5 G
	physical ability and mode of transport. Independence will be promoted in accessing and moving around the building.'			
	g area are a same are			
	Narrative describing how the Design Vision Value 7: 'Fully			Is access to the hospital facilitated for people with physical, sensory, learning or mental health
	Accessible' has been achieved in the design proposals.			impairments?
	This will take the form of a report giving clear, objective			Has an equality impact assessment been undertaken?
	evidence of the achievement of the Design Vision Value. Examples will be provided using images, sketches and simple			
	diagrams.			
	Maximum of 6 sides of A4.			Is access in inclement weather facilitated?
	The state of the s			Are outdoor spaces provided with appropriate and safe lighting indicating paths, ramps and
				steps?

Deliverables	Format	Weighting	Key issues to be considered in Evaluation
			Are pedestrian routes obvious, pleasant and suitable for wheelchair users and people with other disabilities/impaired sight?
			Is there good access from available public transport including any on-site roads?
			Does the building promote independence?
			Does the hospital feel safe and secure?
			Will car parks feel safe and secure?
			Will lifts be easy to find?
			Will stairs be easy to access to encourage exercise where appropriate?
			Will lifts be easy to access for all users?
			Are colour schemes designed to avoid difficulties for partially sighted users?
	Narrative and images presented in PDF format.	0.50%	Does the design support delivery of the Privacy and Dignity Policy?
Bidders are asked to respond to this statement: 'The building design will support privacy and dignity throughout the patient pathway.'			How effectively does the design promote freedom from intrusion in areas personal / sensitive to individuals?
Narrative describing how the Design Vision Value 8: 'Supports Privacy and Dignity' has been achieved in the design proposals.			Would the design make patients feel worthy of respect?
This will take the form of a report giving clear, objective evidence of the achievement of the Design Vision Value. Examples will be provided using images, sketches and simple diagrams.			Have age, ethnicity, gender, social, cultural, psychological and physical needs been considered?
Maximum of 6 sides of A4.			Has the modesty of patients been considered to avoid embarrassment?
			Does the design support patient involvement in decision making?
			Does the design support gender segregation?
			Will the design avoid crowding in corridors, waiting areas, doorways and receptions?

			1 Vision blu Deliverables	
	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
				Does the design support dignified use of toilet facilities? Are beds arranged for maximal privacy in four bedded bays? Are arrangements for privacy in bedrooms effective whilst maintaining good levels of patient observation? Does design and orientation of en suite bathrooms support privacy? Are lines of sight into bedrooms across courtyards minimised? Will patients feel that they can talk without being overheard when required? Has the need to support patients and their loved ones following the giving of bad news been considered?
DV 4.9	Response to Design Vision: Value 9 'A Good Place to Work'	A 3D 'walkthough' from the main concourse to a staff area/space. Narrative to support and explain the materials, lighting, personal controls and any other technology within the space. Lighting study in a selected 'staff' room to demonstrate how both the natural and artificial lighting levels influence the space throughout the day.		Are the break out spaces sufficiently discreet to allow staff privacy from the public/patients during breaks, etc? Do the staff areas reflect a non clinical environment to provide staff with a break away from the main clinical spaces of the rest of the building? What level of personal control will staff have over the environment of their space ie: lighting, heating, ventilation, etc? Does the building reflect smart innovation and ideas around areas such as storage, technology and the environment? Does the choice of internal materials and finishes convey a non clinical feel in order that staff see a clear separation between their clinical working environment and the spaces they can relax in?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV4.10	Artistic Expression	Narrative and supporting materials presented in PDF format.	0.50%	How do bidders propose to engage with staff and the local community in the development of
	Narrative detailing how the design responds to the requirements outlined in the Art Strategy including the following:	presented in FDF format.		integrated artwork?
	Artistic expression integrated into the design of the building			Will the artistic expression integrated into the design deliver the Design Vision and Vision for art in the hospital?
	Provision for hanging / presenting artwork in the building			
	Approach to engagement with Art Steering Group			Does the integrated artwork present (and / or facilitate display of) a range of the media proposed in the Art Strategy (paintings, drawings, photographs, textiles, crafts, sculpture, water, plants,
	Integration between artistic expression and way finding			sound and music, drama, mime, dance, writing, poetry, light, reflection, moving image, moving 3D art)?
	Encouraging on-going development of the Art Programme			
	This should include reference to all forms of artistic expression referred to in the strategy. It should be supported by sketches, photos, diagrams as			Have a selection of the Trust's art themes / messages, outlined in the Art Strategy, been included in the integrated artwork (heritage and civic pride, celebration of health and medicine, healthy lifestyles, local creativity and engagement, the power of storytelling, bringing the outside in)?
	required.			m);
	Maximum of 12 sides of A4.			
				How effectively has artwork and colour been used to support wayfinding?
				How is unity of artistic expression promoted across public areas?
				Are the themed murals proposed effective in delivering the vision for art in the hospital
				Do children's wards contain murals, bright colours and areas to support participation in art activities?
				Would the artwork proposed for the children's areas reduce anxiety and create interest / fun? Does artwork include safe opportunities to engage physically e.g. touching, climbing and walking through?
				Has keynote artwork been designed into key public area(s) and do these pieces deliver the Design Vision and Vision for art in the hospital?
				Does the design facilitate display of artwork, including approach to hanging / positioning and lighting?
				Is there at least one area designated for changing / permanent displays of artwork? Are proposals for display mounting systems included?
				Has provision been made for exhibition / performance space in public areas? Does the design facilitate small group performance art?
				Has cleaning of artwork been considered in the design?
				Does the artwork proposed for the public realm support the Design Vision and Art Vision?
				Have opportunities for artistic expression been utilised in the external design including the hard landscaping and outdoor furniture?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
DV4.11	Three dimensional model Bidders will prepare a three dimensional model in hard and electronic format. The model(s) will be used with engagement groups and individuals as a visual aid to understanding the scheme.	Three dimensional model	Not scored	
DV4.12	Presentation to DQI Event. The Trust will organise one or more events for the Design Vision Group, local community and staff. Bidders will make a general presentation about their design and will specifically address the folowing points: 1:500 / Diagrammatic stacking plan Generic Ward Cluster layout Approach to Privacy and Dignity Approach to accessibility Approach to expansion , contraction, change in use and introduction of new technology Feedback from the event will inform evaluation. A DQI evaluation will be conducted and the outcome will inform evaluation.	the general public.	Not scored but feedback and DQI will inform the evaluation	
Total			5.00%	

Competitive Dialogue (CD) Clinical

Bidder outputs for all stages to conform to the following formats: Text in Microsoft Word.

Spreadsheets in Microsoft Excel.
Programmes in Microsoft Project Version 2010.

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
CL 3.0	1: 200 Floor Layouts required for CD stage 3	PDF/ DWG		
	Departments on facilities half floor template including mortuary,			
	main entrance, mobile docking station etc plus atrium			
	Departments on generic ward half floor template for MSK wards			
	i.e. 3 wards, neighbourhood hub, therapies area, clinical admin			
	zone			
	Departments on ED half floor template including, ED, Security,			
	Imaging, Endoscopy, Medical Cay Case Unit, SCAT (if shown			
	separately), neighbourhood hub			
	 Department on Operating Theatres half floor template including, Operating Theatres, Critical Care, Neighbourhood hub 			
	Operating Theatres, Critical Care, Neighbourhood hub			
CL3.01	1: 50 room layouts for CD stage 3	PDF /DWG		
	Facilities half floor			
	Decontamination suite Deticate food and an area.			
	Patients food service room Pastaurant server and seating			
	Restaurant server and seatingMortuary (all rooms)			
	Reception and support offices			
	Treespiter and support smoot			
	ED half floor			
	Majors room			
	Resus bay			
	• Endoscopy room			
	Endoscopy Admission recovery with ensuite Consult/Exam Room			
	• Consult/Exam Room			
	Theatre half floor			
	Twin theatre suite			
	Critical care single room with isolation lobby and ensuite			
	Critical care multi bed bay			
	General ward half floors - MSK			
	4 bedded bay with ensuite			
	Twin single room with ensuite and isolation lobby			
	Clean Utility			
	• Dirty Utility			

The Midland Metropolitan Hospital Project Clinical Bid Deliverables

Deliverables	Format	Weighting	Key issues to be considered in Evaluation
Procedure room Staff Change Regeneration Kitchen			

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation				
		00.00						
	Section 3.1: Co-locations / Adjacencies / Patient Flows	CD Stage 3: Formal Bidders	interim Submis	ssions				
CL3.1.1	Response to clinical model Bidders are to provide a narrative report in response to the clinical model and how this can be achieved in the design of the hospital. It should also include any possible/recommended innovations and improvements to the clinical service model and any possible constraints.	Narrative report including diagrams as required (maximum of 6 pages)	0.68%	Has the bidder appreciated and interpreted the Trust's clinical service model and health planning strategy? Do the clinical and supporting department adjacencies support the models of care?				
CL3.1.2	Interdepartmental Adjacencies	Whole Hospital Layouts at 1:500	1.70%	Have the specified adjacencies been achieved?				
0201112	Bidders are to provide drawings and supporting narrative to illustrate how the specified adjacencies have been achieved.	Diagrammatic stacking plan.		Have the adjacencies specified but not achieved in the PSC/ADR been achieved?				
	For the whole hospital this should include: Locations of clinical departments including adjacencies (vertical and horizontal) between clinical departments and between clinical and non-clinical departments, supporting areas and circulation routes Possible/recommended innovations and improvements to the clinical service model from whole hospital layout Possible/recommended innovations and improvements to the FM operational policy/model from whole hospital layout Response to whole hospital clinical/operational policies e.g. Infection Control, Bariatric Care, Major Incident, Radiation, Medicines Management.Any specified adjacencies that haven't been met with reasons and suggested alternatives The report should provide a full commentary on the drawings and make specific reference to the issues above.	Supporting narrative report including diagrams as required (maximum of 20 pages).		Has the bidder identified any constraints to implementing the clinical service model at whole hospital level and what are the implications?				
CL3.1.3	Patient / Visitor Flows Bidders are to provide drawings and supporting narrative to illustrate how the patient and visitor flows have been achieved. For the whole hospital and for specified departments (i.e. those where 1:200 layouts are being developed see CL3.0) this should include: Description of patient flows Description of visitor flows For the whole hospital a matrix of journey times between entrance and clinical departments, and departments, and between different departments For specified departments a matrix of journey times between entrance and the department, between different rooms within the department, between the department and those departments it has a key adjacency with.	Marked up whole hospital plans at 1:500. Diagrammatic stacking plan Specified 1: 200 layouts for CD Stage 3 (see CL3.0) Supporting narrative report including diagrams as required (maximum of 20 pages).	1.70%	Do the patient journey routes through the hospital and within departments make clinical and operational sense e.g. as direct as possible, minimal duplication of journeys, minimal journey times, facilitate privacy and dignity etc? Do the adjacencies meet the specified journey times? What are the journey times for key flows including emergency admissions, critical care patients, elective surgical admissions, deceased patients from wards to the mortuary etc?				

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
	Approach to privacy and dignity e.g. separation of flows Possible/recommended innovations and improvements to patient or visitor flows from whole hospital layout or departmental layout Any specified journey times that can't be met with reasons and suggested alternatives			How does the layout allow the specified separation of flows including dedicated access points and lifts? i.e. goods, staff, visitors, ambulatory patients, patients in nightwear or hospital gowns, deceased patients
CL3.1.4	Intradepartmental Adjacencies Bidders are to provide drawings and supporting narrative to illustrate how the specified adjacencies have been achieved.	Specified 1: 200 layouts for CD Stage 3 (see CL3.0).	1.70%	Have the specified adjacencies within the department been achieved?
	For specified clinical departments (see CL3.0) this should include: Name, size and function of each room within department Locations and adjacencies of rooms within department	Supporting narrative report including diagrams as required (maximum of 10 pages).		How does the layout of patient accommodation facilitate the zoning of patients into clinical groups which can respond to nursing practice, case mix, infection control, gender groupings etc?
	Description of patient, staff, visitor and goods flows.			How do the adjacencies and layouts faciltate a multi disciplinary approach to patient care and flexibility between different staff groups?
	Possible/recommended innovations and improvements to the clinical service model from departmental layout. Possible/recommended innovations and improvements to the FM operational policy/model from departmental layout. Approach to privacy and dignity whilst maintaining clinical need for observation.	A Presentation of final draft layout (for interim submission) of the generic ward cluster to senior staff including Senior Clinicians, Executive Directors and Senior Managers. (One meeting - could be part of the meeting for the whole hospital layout).		Has the bidder indentified any constraints to implementing the clinical services model at department level and what are the implications?
	Approach at Departmental level to relevant whole hospital clinical/operational policies e.g. Infection Control, Bariatric Care, Major Incident, Radiation, Medicines Management. Immediate adjacencies to other departments/facilities.			
	Any specified adjacencies that haven't been met with reasons and suggested alternatives The report should provide a full commentary on the drawings and make specific reference to the issues above.			
			5.78%	

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
		Section 3.2: Impact		
CL3.2.1	Observation Bidders are to provide drawings and supporting narrative to illustrate patient observation For each clinical department and for selected patient care rooms for developments to 1:50 (see CL 3.01) this should include	Specified 1: 200 layouts for CD Stage 3 (see CL3.0). Specified patient care rooms for 1:50 layouts (see CL 3.01)	1.36%	Do the adjacencies, layouts and designs enable adequate patient observation whilst maintaining privacy and dignity and not requiring increased staffing numbers or ratios?
	For specified clinical departments(see CL3.0) this should include Observation range from staff bases into waiting areas, patient rooms, day rooms. Description of staff bases in clinical areas Nature of visual observation eg location and size of any observation panels in doors, windows. Detail of nurse call system Possible innovations and improvements to observation from whole hospital layout or departmental layout Any specified observation requirements that can't be met with reasons and suggested alternatives The report should provide a full commentary on the drawings and make specific reference to the issues above. It should also include any possible constraints.	Supporting narrative report including diagrams as required (maximum of 10 pages).		Are staff bases in clinical areas located and designed in a way to promote good patient observation, visibility to patients and visitors and support use for clinical administration by different groups of ward based and visiting clinical staff?
CL3.2.2	Staff Flows Bidders are to provide drawings and supporting narrative to illustrate the staff flows. For the whole hospital and for specified departments (ie those where 1:200 layouts are being developed CL3.0) this should include Description of staff flows For the whole hospital a matrix of staff journey times between car park and entrance, entrance and clinical departments For specified departments a matrix of journey times between entrance and the department, between different rooms within the department, between the department and staff facilities, between the department and hubs, between the department and those departments it has a key adjacency with. Possible/ recommended innovations and improvements to clinical staff flows from whole hospital layout or departmental layout Any specified journey times that can't be met with reasons and suggested alternatives The report should provide a full commentary on the drawings and make specific reference to estimated journey times	Supporting narrative report including diagrams as required (maximum of 10		Do the adjacencies meet the the specified journey times? What are the journey times for key flows including emergency teams, critical care outreach team, elective teams, clinical admin etc? Is the journey from the staff car park to depts. safe 24/7?

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
CL3.2.3	Multidisciplinary Approach to Care Bidders are to provide a commentary on how the design supports a multi disciplinary approach to patient care throughout the whole hospital and at departmental level. Where appropriate the commentary should be supported by drawings and/or layouts. The commentary should also include any possible/ recommended innovations and improvements to facilitate a multi disciplinary approach to care and any possible constraints	Narrative report including diagram and layouts as required (maximum of 6 pages)		Do the adjacencies and layouts facilitate a multi disciplinary approach to patient care and flexibility between different staff groups? Are resource bases in clinical areas located and designed in a way to promote use for clinical administration by different groups of department based and visiting clinical staff whilst restricting access to patients and visitors.
CL 3.2.4	Use of LEAN Principles/ Efficient use of Staff Time Bidders are to provide drawings and supporting narrative to illustrate how the layouts facilitate efficient use of staff time in line with LEAN principles For the whole hospital and for specified departments (ie those where 1:200 layouts are being developed CL3.0) and for selected rooms for development up to 1:50 (see CL3.01) this should include	Marked up whole hospital plans at 1:500 Diagrammatic stacking plan Specified 1:200 layouts for CD stage 3 (see CL3.0) Supporting narrative report including		Do the layouts and adjacencies facilitate working along LEAN principlkes? Eg short journey times, minimal repetition in journeys, generic and repeated design etc How does the design facilitate staff in delivering the service to a high standard in line with evidence practice and within the affordable workforce envelope?
	How adjacencies facilitate efficient staff flows to minimise duplication of journeys and journey time Location and adjacencies of clinical admin areas What design elements are proposed to facilitate LEAN working How the design supports the use of technology to support staff in the delivery of patient care and FM services Possible recommended innovations and improvements to facilitate greater use of LEAN principles. Any constraints to the use of LEAN principles and suggested alternatives	diagrams as required (maximum of 6 pages)		
	The report should provide a full commentary on the drawings and make specific reference to the use of LEAN principles			
CL 3.2.5	Staff facilities Bidders are to provide drawings and supportive narrative to illustrate provision	Marked up whole hospital plans at 1:500 Diagrammatic stacking plan	1.02%	Are there adequate staff facilities including changing areas, lockers, rest rooms, toilets, access to refreshments? Are the locations of staff facilities such that they promote efficient staff flows whilst allowing some seperation from immediate work area and patients? For example are changing areas and lockers in a location that minimises journey time at the beginning and end of shifts? Do staff have an option of having breaks in an area away from the immediate workplace and patients but in sufficiently close proximity to reduce travel time during the break?
	Description of how the design of staff facilities promotes staff well being Possible/ recommended innovations and improvements to staff facilities Any constraints to meeting the specified staff facilities and suggested alternatives	Specified 1:200 layouts for CD Stage 3 (see CL3.0) Supporting narrative reports including diagrams as required (maximum of 3 pages)	4.08%	Is the location of staff toilets seperate to patient areas but in close proximity to the immediate work area so as to minimise the time away from the work area? Are staff facilities available 24/7? Are staff facilities designed in a way that promotes staff well being and value and facilitates use by different staff groups?

		Format	Weighting	Key issues to be considered in Evaluation
		Section 3.3: Soft FM ar	nd Goods Flows	
CL3.3.1	Soft FM and Goods Flows		2.38%	
	Bidders are to provide drawings and supporting narrative to illustrate the soft FM and goods flows For the whole hospital and for specified departments (ie those where 1:200 layouts are being developed CL3.0) and for selected rooms for development	Marked up whole hospital plans at 1:500 Diagrammatic stacking plan		Are there clear dedicated routes for soft FM flows through the hospital and within departments and do these make operational sense? Are there clear dedicated routes for goods flows through the hospital and within departments and do these make operational sense?
ı	up to 1:50 (see 3.01) this should include description of soft FM flows ie goods, waste and staff including receipt and distribution locations and use of lifts	Specified 1:200 layouts for CD stage 3 (see CL3.0)		Are there clear dedicated routes for waste flows through the hospital and within departments and do these make operational sense?
I	area/s and departments and between different departments	Supporting narrative reports including diagrams as arequired (maximum of 20 pages)		Do the adjacencies meet the specified journey times?
	For specified departments a matrix of journey times between the defined goods entrances and the department, between the department and storage and disposal areas on hubs, between the departments and those departments it has a key adjacency with			What are the journey times for key goods, soft FM and waste flows and do these minimise journey times and also adopt LEAN principles?
:	Possible/ recommended innovations and improvements to ensure clear segregation of goods, waste and FM flows from the whole hopsital alyout or departmental layout			How does the layout allow the specified seperation of flows including dedicated access points and lifts? le goods, waste, soft FM services, staff, visitors, patients, deceased patients
	Any specified journey times that can't be met with reasons and suggested alternatives			
	The report should provide a full commentary on the drawings and make specific reference to estimated journey times			
CL3.3.2	Storage and segregation	Marked up whole hospital plans at	1.70%	
	Defined specifications, descriptions and drawings of all areas in the Receipts & Distribution department, including a clear demonstration of their key adjacencies with flow of goods from delivery yard to storage.	1:500. Specified 1: 200 layouts for CD Stage 3 (see CL3.0).		
i		Schedule of accommodation by department specifying storage.		
	suggested alternatives.	Supporting narrative report including diagrams as required (maximum of 20 pages).		
			4.08%	

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation			
	3.4 Education and Training						
CL 3.4.1	Education and Training Facilities Bidders are to provide drawings and supporting narrative to illustrate provision of education and training facilities.	Marked up whole hospital plans at 1:500.	2.04%	Is the specified education and training accommodation included in central facility; at hub level; in bespoke areas?			
	For the whole hospital and for specified departments (i.e. those where 1:200 layouts are being developed CL3.0) and for selected rooms for development up to 1:50 (see 3.01) this should include:	Diagrammatic stacking plan.					
	Description of education and training facilities including capacity	Specified 1: 200 layouts for CD Stage 3 (see CL3.0)		Are the locations of hub and bespoke education and training facilities such that they promote efficient staff flows whilst allowing some separation from direct clinical areas and patients and are there direct communication means between these facilities and the clinical areas they serve?			
	Locations of education and training facilities in relation to work areas including journey times	Supporting narrative report including diagrams as required (maximum of 10 pages).					
	Description of how the design of education and training facilities promotes staff learning including use of technology i.e. audio visual equipment linking with theatres and seminar rooms			Has innovative technology been used within area to provide staff learning opportunities?			
	Possible/recommended innovations and improvements to education and training facilities						
		3.5 Privacy, Digity and Safeg	2.04% uarding				
CL 3.5.1	Privacy and Dignity Bidders to provide narrative and supporting drawings to illustrate approach to privacy and dignity and how this meets the Trust's MMH Privacy, Dignity and Respect Policy, legal requirements and national guidance.	Text outlining/ summarising approach to privacy and dignity with any appropriate supporting drawings. Max 5 pages A4	1.36%	Does the design meet the requirements set out in the Trust's MMH Privacy, Dignity and Respect Policy? In particular			
	For the whole hospital and for specified departments (ie those where 1:200 layouts are being developed CL3.0) and for selected rooms for development up to 1:50 (see 3.01) this should include • Description of approach to gender separation with some practical examples for patients in all areas where patients are in a state of undress/nightwear • Description of approach, with some practical examples, to visual and audible privacy for patients in all areas whilst allowing staff observation			Is there separation of male and female patients in all areas where patients are in a state of undress/nightwear			
	 Possible/recommended innovations and improvements to privacy and dignity provision and in particular how to balance this with staff observation. Description of approach to making all areas appropriate for use by people with dementia Any specified privacy and dignity requirements that can't be met with reasons and suggested alternatives. 			Is there adequate visual and audible privacy for patients in all areas that is balanced with the need to maintain staff observation Is there adequate provision for patients with dementia in all areas where people with dementia are likely to attend?			

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
CL 3.5.2	Accessibility	Marked up whole hospital plans at 1:500 showing approach to accessibility & equality including evacuation routes.		Does the design meet the requirements set out in the MMH Access Policy? In particular
	Bidders to provide narrative and supporting drawings to illustrate approach to access & equality and how this meets the Trust's MMH Access Policy, legal requirements and national guidance.	Text outlining/ summarising approach to accessibility with any appropriate supporting drawings: max. 8 pages A4.		Does it take account of the Equality Act requirements for provision for people within the recognised Equality and Diversity strands?
	For the whole hospital and for specified departments (i.e. those where 1:200 layouts are being developed CL3.0) and for selected rooms for development up to 1:50 (see 3.01) this should include			Clear, easy to follow way finding
	Description of approach to access and equality with some practical examples			Does it take account of other legal requirements relating to access and facilities?
	Description of approach to way finding Description of approach to creating children friendly/appropriate areas across the hospital			Ability for people using motorised mobility aids (e.g. wheelchairs & mobility scooters) to safely self-navigate into and around the building (in line with the policy) Clear, safe, accessible to all evacuation routes in an emergency
	Description of evacuation routes in relation to accessibility			Is there adequate provision for patients that are children in all clinical areas where children are likely to attend in terms of privacy, dignity and safeguarding?
CL 3.5.3	Visitor Facilities	Marked up whole hospital plans at 1:500 showing visitor facilities. Specified 1: 200 layouts for CD Stage 3 (see CL3.0) showing visitor facilities.		Are there adequate facilities for visitors especially in inpatient areas:
	Bidders to provide narrative and supporting drawings to illustrate facilities for visitors.	Supporting narrative report describing visitor facilities (max. 4 pages A4).		Chairs & storage for these
				Near access to toilets
				Private areas for breaking bad news Overnight facilities and do these maintain privacy, dignity and security for visitors
			3.06%	
		3.6 Future Proofing		
CL 3.6.1	Opportunities and recommendations for innovations and improvements		0.68%	Have any opportunities been identified & if so
	Bidders are to provide narrative and where appropriate supporting drawings that identify opportunities for innovation and improvement (including from analysis of the clinical service model, clinical design brief (PP&DDs/operational policies) and Public Sector Comparator) at both whole hospital & departmental level.			What are these?
	The text needs to identify the benefits these innovations and improvements will deliver in terms of clinical care, patient experience and efficiency along with the likely costs and feasibility. Bidders are asked to recommend/prioritise the identified innovations and improvements along with their basis for prioritisation.			What benefit do they add?
				Which opportunities have been recommended & are:
				These achievable

The Midland Metropolitan Hospital Project Clinical Bid Deliverables

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
				Do they add benefit to clinical care, patient experience or workforce efficiency

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
				Have they got an additional cost & is this specified?
	Expansion and contraction Bidders are to provide narrative and supporting diagrams to show for the whole hospital and for specified departments (i.e. those where 1:200 layouts are being developed see CL3.0): • Approach to expansion and contraction of clinical areas. • Approach to expansion and contraction of non clinical areas.	Marked up floor plans at 1:500 showing expansion space and approach to contraction.	1.02%	Are there expansion plans? What are the time and cost implications of thes?
	Narrative to include:	Marked up 1: 200 layouts for specified depts. at CD Stage 3 (see CL3.0) showing expansion space and approach to contraction.		What additional capacity do these create?
	· Cost and time implications of expansion and contraction approach	Text outlining approach to expansion and contraction a/		What is the likely disruption to adjacent departments and the whole hospital?
	· Ease of delivery e.g. level of disruption to adjacent departments and/or whole hospital.	A Presentation of approach to expansion, contraction, change in use and introduction of new technology (for interim submission) as part of presentation to senior staff about hospital layout – see 3.1.2		Are the expansion opportunities for bespoke areas (ED, theatres, Imaging, critical care, neonates, delivery suite etc) adjacent to these areas?
				Are the expansion opportunities for bespoke areas (ED, theatres, Imaging, critical care, neonates, delivery suite etc) adjacent to these areas?
				Are there reduction plans?
				What alternative use can released space be used for?
CL 3.6.3	Change in use	Text outlining approach to change in use with any appropriate supporting drawings: max. 4 pages A4	0.68%	Can the functionality of areas be easily changed on a temporary basis?
	Bidders are to provide narrative and any appropriate supporting diagrams to show how the functionality of areas can be easily changed on a temporary or permanent basis to include at least			What are the time and cost implications of this?
	additional critical care beds			Can the functionality of areas be easily changed on a permanent basis?
	additional operating theatres & recovery beds			What are the time and cost implications of this?
	additional adult ward/bed capacity additional body storage			
	additional ED capacity including separate but collocated urgent care facility additional imaging capacity adult outpatient department			
	Narrative to include cost and time implications of change to functionality Ease of delivery, eg level of disruption to departments and/or whole hospital			

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
CL 3.6.4	Introduction of New Technology			
	Bidders are to provide narrative and any appropriate supporting diagrams to show how new technology can be introduced. To include at least:	Text outlining approach to introduction of new technology: max. 4 pages A4.		How can new technology be introduced if and when this becomes available (e.g. advancements in robotic and laproscopic surgery, new cleaning technologies etc)?
	use of robotics to move goods between FM areas and departments	Marked up floor plans at 1:500 to show potential use of technology including robotics to move goods		
	new cleaning and decontamination technology			What are the time and cost implications of this?
	advances in operating technology e.g. laproscopic or robotic surgery			
	new Imaging/diagnostic technology			
	Narrative to include:			
	cost and time implications of introducing new technology and adapting the building to support this ease of delivery e.g. level of disruption to departments and/or whole hospital.			
	ease of delivery e.g. level of disruption to departments and/or whole hospital.			
			3.06%	
		3.7 Infection Control		
CL3.7.1	Infection control Bidders to provide narrative and supporting drawings to illustrate approach to infection control and how this meets the Trust's MMH Infection Control Policy, legal requirements and national guidance. To include:		1.70%	Does the design meet the requirements set out in the Trust's Infection Control Policy and the specific infection control requirements for individual departments?
	Possible/recommended innovations and improvements in relation to infection control	Marked up 1: 200 layouts for specified depts. at CD Stage 3 (see CL3.0) showing separation of clean and dirty flows, hand hygiene provision, storage.		Including: hand hygiene decontamination deep cleaning with no/minimal disruption to clinical services
	Any specified infection control requirements that can't be met with reasons and suggested alternatives.			separation of clean and dirty flows within departments storage arrangements

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
CL3.7.2	Isolation		0.68%	
	Diddon to movide a monetime	Och odulo of Associated		
	Bidders to provide a narrative:	Schedule of Accommodation		Does the number and % of single rooms meet the design brief for the whole hospitals
	confirming the number of single rooms per inpatient ward/dept.	Text describing isolation facilities		
		including the number of single rooms,		
		number, location and clustering of isolation facilities: max. 4 pages A4.		Is there the specified number of isolation rooms?
	describing number of leastion and displaying of inclution facilities. (to also be	Markad up 1, 200 layouts for apolitical		Are the inclution reams in the englified leasting?
	describing number of, location and clustering of isolation facilities (to also be summarised in a matrix).	depts. at CD Stage 3 (see CXL3.0)		Are the isolation rooms in the specified locations?
		showing isolation rooms.		
	possible/recommended innovations and improvements in relation to isolation			In the specified depts. for 1:200 design are the isolation rooms clustered in line with the
	facilities			design brief requirement?
	any specified isolation requirements that can't be met with reasons and			
	suggested alternatives.			
CL3.7.3	Infectious outbreaks		0.68%	
OL3.7.3	Bidders to provide narrative and supporting drawings to illustrate how inpatient	Marked up 1: 200 layouts for specified	0.0070	Ability to manage infection outbreaks with minimal disruption to clinical services e.g. via to o
	depts. specified for 1:200 drawings can have areas designated for cohort	depts. at CD Stage 3 (see CL3.0) and		horting patients & ability to decontaminate areas.
	nursing in the event of an infectious outbreak	for inpatient areas showing how areas within the department can be		
		designated for co-hort nursing.		
		Supporting narrative (max. of 4 pages A4)		
		,	0.000/	
			3.06%	
		3.8 Health Care Plannin	g	
CL 3.8.1	Schedule of Accommodation		1.36%	
	Bidders to provide a schedule of accommodation by department for the facility			Do the proposed gross floor areas, departmental floor areas, room areas and allowances
	and to highlight any areas of deviation from the Trust's Brief along with reasons for deviation.	Spreadsheet		compare favourably with the schedule of accommodation issued?
	ioi deviation.			
CL3.8.2	Functional Content		1.02%	
	Bidders to provide functional content with as drawn areas per department	1:500 Drawings & Schedule of		Do the drawn areas reconcile with the schedule of accommodation issued?
	shown against the Trust's brief and to highlight any areas of deviation from the Trust's Brief along with reasons for deviation.			
	Trust's brief along with reasons for deviation.			
				How do the drawn areas compare to the drawn areas in the Trust's ADR?
			2.38%	
			2.00 /0	

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
		3.9 Moving and Handling / Erg	onomics	
CL3.9.1	Ergonomics Bidders to provide a narrative and supporting appropriate diagrams to illustrate the approach to ergonomics. To include: possible/recommended innovations and improvements in relation to ergonomics	Text describing approach to ergonomics: max. 6 pages A4.	1.36%	Does the design meet the requirements set out in the Trust's Ergonomics Policy?
		Marked up 1: 200 layouts for specified depts. at CD Stage 3 (see CL3.0) showing approach to ergonomics.		Does the design provide layouts that are ergonomically sound? Including appropriate use hoists; space around beds; turning circles; desk heights, space for movement of bariatric patients etc.
	For specified departments (i.e. those where 1:200 layouts are being developed see CL3.0) bidders to show on departmental layout and in supporting narrative approach to ergonomics including ability to use hoists, space around beds, turning circles, bariatric provision and space for movement of bariatric patients, location of reception desks etc.			
CL3.9.2	Bariatric provision		1.02%	
	Bidders to provide:			
	A schedule of accommodation for the whole facility by department describing location and quantity of bariatric provision in line with Trust's design brief criteria	Text describing approach to bariatric provision: max. 6 pages A4.		Does the design meet the requirements for bariatric provision set out in the MMH Bariatric Policy? Including:
	For specified departments (i.e. those where 1:200 layouts are being developed see CL3.0) bidders to show on departmental and room layout location and quantity of bariatric facilities along with entrance and exit routes to the facility including space for movement of bariatric patients.	Schedule of Accommodation spreadsheet describing location and quantity of bariatric provision		specified weight thresholds for all areas number and location of bariatric rooms
	A narrative and supporting appropriate diagrams to illustrate the approach to bariatric provision. To include:	Marked up whole hospital plans at 1:500 showing location and quantity of bariatric provision and bariatric flows through the facility.		
	and visitors	Marked up 1: 200 layouts for specified depts. at CD Stage 3 (see CL3.0) showing bariatric provision.		
	possible/recommended innovations and improvements in relation to bariatric provision any specified bariatric provision requirements that can't be met with reasons and suggested alternatives.	J 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
			2.38%	

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
		3.10 Business Continui	<u> </u>	
CL3.10.1	Continuity Plan		1.70%	
	Bidders to provide a contingency/business continuity plan to describe the proposed contingencies within the building design/construction that will ensure resilience and business continuity for the whole hospital and specified departments (i.e. those where 1:200 layouts are being developed). This needs to include as a minimum the following scenarios:	supporting drawings: max. 6 pages		Can temporary increase in capacity and change in use for designated areas be implement quickly?
	surge in emergency activity			
	infection control outbreaks			Can infection outbreaks be managed in a localised way that allows the majority of the rest the hospital to function as normal?
	routine maintenance			Can required annual maintenance of the facility/fixed equipment be undertaken without disruption to clinical and operational services?
	failure of utilities essential to clinical service delivery			
				Are there clear resilience and continuity plans for key utilities (heat, light, electricity, medic gases, water) that are essential for safe clinical service delivery and do these plans allow clinical services to continue to function with minimal disruption in the event of a utility failu
CL 3.10.2	Major incident plan		0.68%	
	Bidders to provide a statement showing in outline how the proposed building design would enable the Trust to respond to a major incident and implement its Major Incident Plan.	Marked up whole hospital plans at 1:500.		Can the Trust's Major Incident Plan be implemented? i.e. location of control rooms, alternative use of designated areas, lock down of areas and site, separation of flows?
		Text outlining approach to building use in a Major Incident with any appropriate supporting drawings: max. 4 pages A4.		Are there clear evacuation routes that are clinically appropriate and feasible?
			2.38%	
			,	
		3.11.1 Outline Commissionii	ng Plan	
CL 3.11.1	Commissioning statement Bidders are to provide a Commissioning Statement including	A4 sized document, maximum of 6 sides.	1.70%	
	Initial response to Trust's Outline Commissioning Plan			Can the bidder meet the Trust's Outline Commissioning Plan and are any constraints or improvements identified?
	Initial response to Trust's requirement for Beneficial Access			Can/does the bidder agree to provide beneficial access?
	Bidder's approach to commissioning and process for working with Trust to develop final commissioning plan including bidder lead and team			How well developed is the bidder's plan for developing the next stage of the commissioni plan?
	Identification of any constraints, suggestions for improvement and related costs.			
			4.700/	
			1.70%	

The Midland Metropolitan Hospital Project Clinical Bid Deliverables

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
TotalCL				
		CD Stage 4: Design De	eliverables Part 2	
		5 5		
		Competitive I	Dialogue	
CL 4.0	1:200 layouts required at CD stage 4 Departments on Acute Assessment half floor template including AAU, generic ward, SAU, neighbourhood hub, therapies area and clinical admin zones Departments on the Maternity half floor including Delivery Suite, Neonatal Unit, Antenatal Clinic, neighbourhood hub, multi-faith centre, clinical admin zone Departments of the women's wards half floor including maternity wards, antenatal day assessment unit, women's surgical ward, emergency gynae assessment unit, neighbourhood hub, clinical admin zone Departments on the Paediatric half floor including Children's Unit, Paediatric Outpatient Department, Specialist Outpatients Departments on the Cardiac half floor including Cardiology Diagnostics, Respiratory Physiology, Neurophysiology, Cardiac Catheter Laboratory Suite, Cardiology Ward, Stroke Unit, Therapies, neighbourhood hub, clinical admin zone Departments on the plant half floor including plant rooms, EBME, education, relatives overnight, research zone, neighbourhood hub, clinical admin zone Remaining ward half floors, clinical admin zones and neighbourhood hubs including surgical wards, respiratory ward, haematology ward, other medical wards Any significant changes to layouts described in CL3.0			

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
CL 4.01	1:50 room layouts required at CD stage 4			
	ED half floor			
	Main Imaging General xray room			
	• CT			
	• MRI			
	Ultrasound			
	Adult Assessment floor			
	Multi bed/trolley bay			
	Two bi plane Cath labs with shared control room			
	Therapy hub adjacent to stroke ward			
	Paediatric floor			
	Paediatric assessment unit			
	Audiometry/evoked response rooms with adjoining observation room			
	Reception wait and childs play			
	Delivery suite half floor			
	Delivery room with pool and ensuite			
	Neonatal six cot nursery			
	Transitional room and ensuite Multifaith			
	- Muthath			
	Maternity ward floor			
	• ADAU			
	EGAU Overnight stay			
	Other ward half floors			
	Pharmacy Dispensing room with robot.			
	The fellow	in a substitute of the point of		
	The follow	ring outputs are requested from the Bidde	ers to assist evalua	ation of design solutions:
	Section 4.1: Co-locations / Adjacencies / Patient Flows			
CL4.1.1	Response to clinical model	Narrative report including diagrams as	0.36%	Has the bidder appreciated and interpreted the Trust's clinical service model and health
		required (maximum of 6 pages)		planning strategy?
	Bidders are to provide a narrative report in response to the clinical model and how this can be achieved in the design of the hospital.			
	now the dan be defined at the design of the nespital.			
	It should also include any possible/recommended innovations and			Do the clinical and supporting department adjacencies support the models of care?
	improvements to the clinical service model and any possible constraints.			
CL4.1.2	Interdepartmental Adjacencies	Whole Hospital plans at 1:500.	0.90%	Have the specified adjacencies been achieved?
	Diddore are to provide drawings and oursesting pareting to illustrate how the	Diagrammatic stacking when		Hove the adjacencies energified but not achieved in the DCC/ADD have achieved?
	Bidders are to provide drawings and supporting narrative to illustrate how the specified adjacencies have been achieved.	Diagrammatic stacking plan.		Have the adjacencies specified but not achieved in the PSC/ADR been achieved?

Competitive Dialogue (CD) Estates & Technical

Bidder outputs for all stages to conform to the following formats: Text in Microsoft Word. Spreadsheets in Microsoft Excel. Programmes in Microsoft Project Version 2010.

	Deliverables	Format CD Stage 3:	Desilon Déliver	ables Part 1 Key issues to be considered in Evaluation			
		Formal Bidders Submiss					
	Constal Coate						
			Capital Costs on 3.1: Capital C	Costs			
		- Control	or o	20313			
ET2 4 4	Elemental cost plan: Gross Floor Area to match	Formal report using the cost pro forms C1	1.44%	How sufficient Is the cost plan in terms of extent, completeness and format to enable the evaluation			
ET3.1.1	that of the submitted 1:500 and 1:200 drawings.	Formal report using the cost pro-forma C1.	1.44%	to be completed			
				How well does the elemental breakdown of the Cost plan match benchmarking data to demonstrate costs are allocated to all elements in a transparent way and demonstrate value for money			
				How well does the cost plan compare in same format as the OB forms and does it give comparable ratio of elemental costs as contained in the OB forms and are costs consistent with the design.			
				How well does the gross floor area contained in the Cost plan reconcile with 1:500 and 1:200 drawings issued as part of CD Stage 3			
				Are allowances for inflation realistic and appropriate?			
ET3.1.2	Risk register: A costed risk register showing risks probabilities, impact, risk owner and proposed		0.36%	How sufficient is the risk register in terms of extent, completeness and format to enable the			
E13.1.2	mitigation measures. The risk register shall provide a demonstrable link to the Contingency contained		0.36%	evaluation to be completed How effective are the risk mitigation strategies and do they demonstrate links to the contingency?			
				How well are risks expressed in the register in a transparent way which shows robust links with the			
				contingency			
				How well does the risk register propose realistic mitigation measures How well does the risk register show consistency with the Project Agreement			
ET3.1.3	Lifecycle Cost Model: in elemental format (with	Formal report and spreadsheet using the pro	1.44%	How sufficient Is the lifecycle cost model in terms of extent, completeness and format to enable the			
	capex values linked to the Elemental Cost Plan) showing the replacement cycles and proportions replaced for each year of the Concession Period. To	forma lifecycle cost model.		evaluation to be completed			
	be produced in both Discounted and Non- Discounted format, with and without smoothing.						
	Outputs shall provide a demonstrable link to the						
	overall financial model including indexation.						
				How well does the lifecycle cost model comply with the lifecycle requirements of Schedule 8			
			0.000/	How well does the lifecycle cost model compare to industry norms and benchmark data			
ET3.1.4	Statement of exclusions and assumptions: Al	Formal report a	0.36%	How well dogs dhexitasions and format to enable the evaluation to be completed			
_ : •	exclusions and assumptions shall be clearly stated						
	Any items or issue not specifically stipulated as exclusions or assumptions at this stage will be						
	deemed to have been included in the bidders proposals and costs.			To what extent are the evaluaions and assumptions contained in the risk register.			
	proposais and costs.			To what extent are the exclusions and assumptions contained in the risk register			

				To what extent are mitigation measures proposed for each exclusion and assumption
			3.60%	To what extent are mitigation measures proposed for each exclusion and assumption
		Section 3.2: Se		rommodation
ET3.2.1	Schedule of accommodation for facility.		2.40%	How well does the proposed gross floor areas, departmental floor areas, room areas and allowances including plant, circulation and communication space compare with the schedule of accommodation issued as part of Schedule 8 part 3
			0.400/	
		Coolie	2.40%	
ET3.3.1	Drawings showing the following;	Develop drawn format , clearly showing each floor	n 3.3: Archited	cture
E13.3.1	Conceptual departmental arrangements; Site arrangements with access and egress to the building;	plan at 1:500 as part of a 3D massing model	1.20%	How well do the drawings form the basis of a single data base shared with the full design team
	Main public transport hubs and connections; Pedestrian, cycle and vehicle routes; FM Central Delivery location and unloading bays/areas; Transport routes including patient, visitor, staff and goods routes; FM Service areas	Site master plan indicating main traffic flows at 1:500 and location plan at 1:1250 and 1:2500.		How well does the positioning of the building on the site maximise the opportunities and strengths of the site in terms of the bid deliverables for this criterion e.g. shape vs natural daylight
	Circulatory routes to include approach to wayfinding and integrated arts strategy; Expansion/Contraction strategy;	Technical report including diagrams as required (maximum 10 sided A3) Sample asessment of expected BREEAM scores		To what extent does the internal departmental configuration maximise the opportunities and strengths of the design in terms of minimising risk to building users and compliance with statutory standards
	Response to Secure by Design Brief and Trust Security requirements Design response to Disaster Planning from an overall site wide perspective Finishes concept to Waiting Areas and Main Entrance;			How well do the departmental adjacencies and locations allow the Trust Security requirements to be implemented e.g. to operate lockdown and control access How well can visitors find their way onto and around the site without the need for direction signs How well can visitors find their way within the building without the need for direction signs To what extent do persons using public transport have to walk to access the building and cross traffic routes To what extent does the design support Disaster mitigation How well do the proposed finishes for the specified areas create an environment which comply with the Trust requirements in terms of maintenance, cleaning, ambience and wear and tear? How well does the design allow for expansion and contraction in terms of ease of construction and effect on the continued operation of the normal operation of the hospital
ET3.3.2	Impact:	Illustrations showing block plan and 3D massing	0.72%	How well does the building sit in its surroundings

	To understand the impact of the building on it's	model with shadows clearly visible and the wider		How well does the building take advantage of natural sunlight within its orientation to maximising
		surrounding area at scale 1:1250.		How well does the building take advantage of natural sunlight within its orientation to maximising internal environmental conditions
				How well do the proposed external finishes meet the requirements of maintenance, self cleaning, ambience and wear and tear?
ET3.3.3	1: 200 floor plans of specific floor areas detailed at CL3.0	1:200 plans to indicate room name, room size and general arrangement. These plans must indicate corridor widths.		How well do the drawings form the basis of a single data base shared with the full design team How well do the departmental layouts allow the Trust Security requirements to be implemented
		Finishes Boards. (Brochure samples only)		How well do the departmental layouts compare with the staff, goods and visitor flows issued as part of the PPDDs
	Bidders are required to provide sample finishes boards for the internal finishes			How well do the department layouts support repeatable design, off site manufacture and construction programme constraints
				To what extent do the proposed finishes compare to the Trust's requirements and to what extent are they easy to clean and support decontamination procedures
				How easily can the building be cleaned and kept clean
				Are isolation rooms fully compliant with HBN 04-01 Supplement 1 Appendix 1 sheet 2 by having integral en-suites and isolation lobbies with interlocked doors
				To what extent can 100% single rooms be delivered in the future within the building footprint in terms of overall bed numbers and cost
ET3.3.4	Sustainability strategy:	plan in sketch format.	0.48%	
		Supporting narrative report including diagrams as required (maximum 6 sides A3)		How well does the building design integrate with proposals for renewable energy technology
	This needs to focus on responsible resourcing of materials; use of non-hazardous and materials with a relatively low embodied energy. Careful			To what extent are recycled, low hazard and low carbon footprint materials specified in the construction of the building
	consideration shall be paid to building orientation Bidders are required to provide their approach to the control and management of hazardous waste and provide outline proposals for land remediation.	Technical report including diagrams as required (maximum 6 sides A4)		The extent to which Bidders can contain and manage hazardous waste, specific to the site
		Sample assessment of expected BREEAM scores		

Fire strategy: Bidders will need to demonstrate adequate structural and other relevant fire precautions and access and facilities for the Fire and Rescue Service This should include: separation of patient from non-patient areas stuctural fire precautions to prevent fire spread and facilitate progressive horizontal escape an analysis of issues to be resolved, given proposed master plan and strategy to date.	1:500 marked up plans of the whole hospital. Site master plan indicating site fire strategy at 1:1250 and 1:2500 Technical report including diagrams as required (maximum 10 sides A3)	0.48%	How well does the design allow for progressive horizontal evacuation and reduce the need for vertical evacuation How well does the positioning of the building on the site maximise the opportunities and strengths for emergency fire access and control of fires and emergencies by the Fire Service To what extent is the fire strategy based on risk assessments that are approved in principle by Local Authority Building Control/Fire Service
Prepare an outline landscaping strategy. This needs to highlight the green planted spaces and the hard landscaped areas indicating links between inside and outside. This should illustrate how secure by design is considered as part of the landscaping and how spaces are considered in terms of public and private spaces. In addition consideration must be shown for the Sandwell Metropolitan Borough Council masterplan Sample finishes for hard landscape and public realm	(maximum 6 sides A3)		How well does the proposal fit with the Sandwell Metropolital Borough Council masterplan How well does proposal respond to secure by design and meet the Trust Security requirements both in daytime and at night How well does the proposal enhance the design of the building How well does the proposal fit with the vehicle and pedestrian access across the site and compliance with statutory standards How well does the proposal meet the Trust Landscaping requirements How easily can the external site be cleaned and kept clean
all schedule 14 (service level specifications) services Concept of how the Building Information Model (BIM) will be taken forward and used throughout the duration of the operational concession period	Technical report including diagrams as required (maximum 6 sides A3) Schedule of Accommodation Spreadsheet. Technical report including diagrams as required (maximum 6 sides A4. Confirmation that the intelectual rights of any BIM information will be become the property of the Trust throughout the concession period will be a minimum requirement for this deliverable		How well does the location of Hard FM accommodation support the building and grounds maintenance without affecting hospital services How well does the Hard FM accommodation compare with the schedule of accommodation issued as part of Schedule 8 part 3 How well do the proposals meet the requirement of BIM 2 and to what extent can they be enhanced to BIM 3 level

The extent to which the design is accepted by Sandwell Metropolital Borough Council Town Planning without caveats
6
To what extent has the bidder provided evidence to demonstrate that availability and capacity of all necessary utilities have been considered and included any necessary documentation to support the proposals?
To what extent has the bidder provided detailed steps and what will be undertaken to ensure the proposals achieve compliance against BREEAM ENE01. Supporting documentation should be provided as necessary with speciific reference to Building Fabric, M&E services and any systems intended to contribute to this criterion.
To what extent has the bidder demonstrated consideration of Schedule 8 Part 3 and identify any assumptions at this stage for detailed analysis at Stage 4.
To what extent does the Bidder detail principal plant locations and distribution strategy including expansion space provision with documentation to support the overall strategy in terms of energy benefit, access and maintenance, future flexibility and whole life cost.

				Demonstrate what consideration should be given to the overall positioning of the building on the site and maximise the opportunities of the scheme as a whole. To what extent has the bidder provided evidence that the commissioning process and ongoing operational maintenance has been considered in the above and provide justification through examples on previous relevant projects.
ET3	Energy strategy and -calculations to include: Initial statement of compliance with the project brief for energy consumption and carbon emission targets; Confirmation of improvements incorporated within the external envelope to reduce operational energy consumption from heating and cooling systems;	Compliance Statement and descriptive reports in A4 format maximum 10 pages.	1.44%	To what extent has the bidder detailed how the proposal will specifically address carbon and energy targets. Energy and Carbon Targets included. Supporting details and initial calculations should be submitted to validate any assumptions.
	Overview of restrictions on the Trust's operation of the hospital imposed by compliance with the Bidders' proposed energy model;	Calculations in Excel format.		To what extent has the bidder provided details on how the external envelope shall contribute to the overall energy target and improvement over Part L2A compliance. Has the Bidder made reference to Schedule 8 Parts 3 and 7.
	supporting the statement of compliance, summarised in Giga-Joules per 100 cubic metres of	Calculations in Excel format. Supporting descriptive documents in A4, maximum 20 pages including details of average year used (degree days for heating and cooling).		To what extent has the bidder demonstrated details and any assumptions and restrictions that would be imposed as a consequence of the overall energy strategy i.e.percentage of fuels or technologies used and any restrictions on the operation of the hospital.
	· ·	Thermal model in IES format. Supporting descriptive documents in A4, maximum 20 pages including details of model year used.		To what extent has the bidder detailed and provided supporting assumptions, incorporated and submitted all energy calculations annotated in full. Has the Bidder considered dynamic energy modelling for Building Regulations compliance and overheating only. Specific reference should be made to temperature within wards and relative to each bed space and what steps have been undertaken to aid environmental comfort whilst ensuring energy demand is regulated. Reference should be made to future proofing the design against development of technologies,
				medical and operational policies as well as climate change.
ET3	Renewable energy technology proposals to include: Description of the proposed renewable energy technologies offered together with an assessment of annualised consumption of each fuel type used;	A3 sized report to include drawings. Max 20 pages.	0.48%	All proposed systems shall be detailed in terms of their operation and contribution to the buildings energy consumption. Any assumptions should be clearly defined.

ET3.5.6 Districts Di		Details of each fuel source shall be provided including consideration of long term availability	Examples of renewable technology and applications applied on recent schemes by bidder		Consideration should be given to the future flexibility and adaptability of any proposals and the whole life cost (including CO ₂ reductions).
To what extent has the bodder provided details of the fluel types and their source and any impact on resilience, guaranteed supply future fluoribility and the potential for creation of revenue scheme of the proposals. Is there a reliance on Coverment release or incertives that may be repeated on resilience on Coverment release or incertives that may be repeated on and exclusion of complete technologies. ET3.5.4 Resilience strategy for each system to include: Cuantification of resilience incorporated for each engineering system. Coporturily to inclusive reliance incorporated for each engineering system. Coporturily to inclusive reliance in the future for each engineering system. Coporturily to inclusive reliance in the future for each engineering system. Coporturily to inclusive reliance in the future for each engineering system. Coporturily to inclusive reliance in the future for each engineering system. Coporturily to inclusive reliance in the future for each engineering system. Coporturily to inclusive reliance in the future for each engineering system. Coporturily to inclusive reliance in the future for each engineering system. Coporturily to inclusive reliance in the future for each engineering system. As sized report to include drawings. Max 5 pages. Coporturily to inclusive reliance in the future for each engineering specification, to cater for a loss of anythil utilities. As sized report to include drawings. Max 5 pages. Coporturily to inclusive reliance in the engineering specification, to cater for a loss of anythil utilities. As sized report to include drawings. Max 5 pages. Coporturily to inclusive reliance in the development of the design. Coporturily to inclusive reliance in the development of the design including or size attending to the proposals defined in how these relate to the proposals of t					
ET3.5.4 Resilience strategy for each system to include: Output incompanies to the proposal is there are alreaded on Commenter teachers or incombres that may be repeated. To what existen has the bidder demonstrated, via evidence based decision making processes, the selection of innovative and sustainable systems, including the rationale for selection and enclusion of competitive technologies. To what existen has the bidder demonstrated the role of passive technologies and how the building as a whole has been developed to maximise of passive technology. Compliance statement with Schedule 8 part 3. Output in the future for each engineering system; Opportunity to increase resilience interprocesses that for each engineering system. As sized report to include drawings. Max 5 pages. Description of proposed utility services strategy including off-site and site commendor resilience processes and to what existent has the bidder demonstrated what provisions have been included to address non availability of utility supplies and provide specific details on how these relate to the operation of the hospital. Details of any call off agreements or back up plans included. ET3.5.6 Description of the maintenance processes that have A3 sized report to include drawings. Max 5 pages. Obscription of the maintenance processes that have A3 sized report to include drawings. Max 5 pages. Obscription of the maintenance processes that have A3 sized report to include drawings. Max 5 pages. Obscription of the maintenance processes that have A3 sized report to include drawings. Max 5 pages. Obscription of the maintenance processes that have A3 sized report to include drawings. Max 5 pages. To what extent has the bidder demonstrated what provides not not what extent does the letter cover the technical and financial aspects of the proposals. Beliefers should make deference to american engineering and identity any restrictions imposed on the operation of the building drawings and maintenance and finance regimes and identity any rest					
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ET3.5.4 Resilience strategy for each system to include: Quantification of resilience incorporated for each engineering system; Opportunity to increase resilience in the future for each engineering system. At size report, maximum of 5 pages. ET3.5.5 Utilities: Description of proposed utility services strategy including off-site and site connection resiliance (single or dual supplies) including on-site standby provisions as detailed in the engineering system specification, to cater for a loss of anylall utilities ET3.5.6 Description of the maintenance processes that have been considered in the development of the design. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. Description of proposed utility services strategy including off-site and site connection resiliance (single or dual supplies) including on-site standby provisions as detailed in the engineering specification, to cater for a loss of anylall utilities ET3.5.6 Description of the maintenance processes that have been considered in the development of the design. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings and the development of the proposals. Bidders should make reference to envisaged maintenance regimes and identify any restrictions imposed on the operation of the building Reference should be made to CDM Regulations and mitigation of risk					selection of innovative and sustainable systems, including the rationale for selection and exclusion of
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ET3.5.5 Utilities: Description of proposed utility services strategy including off-site and site connection resiliance (single or dual supplies) including on-site standby provisions as detailed in the engineering specification, to cater for a loss of any/all utilities ET3.5.6 Description of proposed utility services strategy including off-site and site connection resiliance (single or dual supplies) including on-site standby provisions as detailed in the engineering specification, to cater for a loss of any/all utilities ET3.5.6 Description of the maintenance processes that have been considered in the development of the design. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A3 sized report to include drawings. Max 5 pages. A4 sized report to include drawings. Max 5 pages. A4 sized report to include drawings. Max 5 pages. A5 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A6 sized report to include drawings. Max 5 pages. A7 to what extent has the bidder demonstrated what provides pacific details on		·			
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ET3.5.6 Description of the maintenance processes that have been considered in the development of the design. Description of the maintenance processes that have been considered in the development of the design. To what extent has the bidder demonstrated that access for maintenance and future expansion has been considered in the development of the proposals. Bidders should make reference to envisaged maintenance regimes and identify any restrictions imposed on the operation of the building Reference should be made to CDM Regulations and mitigation of risk	ET3.5.5	Description of proposed utility services strategy including off-site and site connection resiliance (single or dual supplies) including on-site standby provisions as detailed in the engineering	A3 sized report to include drawings. Max 5 pages.	0.48%	availability of utility supplies and provide specific details on how these relate to the operation of the
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4.80%	ET3.5.6		A3 sized report to include drawings. Max 5 pages.	0.48%	been considered in the development of the proposals. Bidders should make reference to envisaged maintenance regimes and identify any restrictions imposed on the operation of the building
9.0V/0				4 80%	
Section 3.6: Equipment		Section 3.6: Equipment		4.OU 70	

ET3.6.1	Equipping Strategy – Response to the Trust's strategic approach to equipment as detailed in the Equipment Responsibilities Matrix (ERM) contained in schedule 13 of the project agreement: Acceptance of ERM principles; Confirmation of equipment categorisation; Details of exclusions or proposed changes in responsibilities contained within the ERM. Proposals for accommodating Beneficial Access for the Trust and its suppliers	Indicative construction and commissioning	0.60%	To what extent does the response meet the Trust equipment requirements How well have the bidders responded to the requirement of "beneficial access"? Demonstrated by an outline construction timetable which incorporates Trust's beneficial access requirements
ET3.6.2	Outline method statement on the bidders' approach to developing and managing a holistic project equipment database which is integrated with architectural drawings and room datasheets at all stages (i.e. down to 1:50). Include how the Trust's ADB project model will be incorporated into the bidder's design and how coding integrity will be maintained. Response to include: Details of proposed database or equivalent system; Component coding system to be used;	sides A4) BIM integration proposals including worked examples and process diagrams as required (maximum 5 sides A4)	0.36%	How well does the Bidder's process address project data management with the emphasis being on coding standardisation (key strategy to ensure competitive bids are tuly comparable) and incorporating A, B & C sheet changes The extent to which Bidders accept the Trust issuing codes to ensure design control regarding components and schedules
	Change tracking of components and quantities; Data linkage to drawings; Data management process. Proposed methodology to integrate the equipment database into a BIM asset management model throughout the design, construction and operational phase of the project			The extent to which Bidders are adopting a robust ADB code procedure which allows Project Co to develop fixtures and fittings without undue interference To what extent does can the equipment database be integrated into a BIM asset management model
ET3.6.3	Describe how the Bidder will manage integration of Trust equipment into the design including initial loading into drawings and ongoing changes due to design development Response to include: Process diagram; Sample deliverables from similar projects;		0.36%	How well do the Bidders demonstrate the equipping plan for Trust supplied items and supply process How well do the Bidders demonstrate the management overview and understanding of the Trust supply timetable

	Project Management with emphasis on risk mitigation.			
ET3.6.4	Method statement on the specification, selection and procurement of Project Co provided equipment as defined in the ERM. Particular emphasis on the proposed process demonstrating transparency, clinical choice and value for money. To include example selection and scoring criteria for equipment. Response to include: Specification development & refinement; Consultation process with Users; Accessories selection; Procurement scoring encompassing clinical and financial criteria; Final supplier selection.	process diagram and sample specifications.		How well can the Bidder's supply chain achieve the bid deliverables of this criterion by working in partnership with the Trust To include evaluation of adequacy of bidders equipment investment plan for equipment The extent to which Bidders can offer additional value by integration with the Trust's supply chain to deliver overall cost reductions Level of agreement to combined commission group and Project Co joining the Trust's equipment committee To what extent have Bidders provided evidence of previous schemes where they have worked in partnership with the Trust
ET3.6.5	information to be delivered by the Trust with regard to Trust provided equipment to be integrated into	Report (maximum 5 sides A4) including timeline diagram based on the draft programme contained in Schedule 12 and sample specification templates for each stage.	0.36%	How well does the Bidder's programme and information requirements comply with the Trust Brief
ET3.6.6	Approach to the integration of Trust equipment requirements and changes as a result of design development into the ADB model and corresponding contractual documents and drawings including C Sheets.	A4 size report, maximum of 5 sides.	0.36%	How well can the Bidder's project team achieve the bid deliverables of this criterion by working in partnership with the Trust

	Response to address: Bidder role in user group design sessions; Scope of architectural support for user Group design iterations concerning equipment; Length of Architectural engagement during the design construction phase to support design iterations concerning equipment.			How will Bidders address future proofing and room design flexibility regarding equipment integration into the design by providing examples of future proofing and room design flexibility
ET3.7.1	Information regarding relevant technical proposals Bidders are asked to provide outline proposals for the installation of the equipment and hardware relating to the Core Technical Requirement outlined in the IM&T specification presented in Schedule 8	A schematic design in CAD native and PDF format		How well will the approach address: Resilience; Performance of core network;
	part 3, Appendix B, in particular: Design principles; Installation of Networking cabling and interconnects;			Security of logical networks; Redundancy in cabling design;
	Installation of networking hardware; Installation of Wireless Network solutions; Flexibility of the network design to meet current and future requirements within the Trust's Functional Brief.	1:1250 design including outdoor areas and car parks		Network cabinet layout/design approach; Wireless resilience; Wireless performance;
	The approach to resilience, performance, future proofing and security must be demonstrated. Bidders will also include an outline of approach to support and maintenance of networks as specified Schedule 14.	1:500 design 1:200 for the departments selected at this stage(CL3.0)		Wireless security; Future proofing/expansion capacity; Support and maintenance; Handover; Testing.
ET3.7.2	Compliance with the Requirements Specified	2 sides A4 narrative	0.96%	To what extent does the statement demonstrates compliance with the requirements specified.

	Section 3.8: Design, Construction & Operatio	nal Project Management		
			2.40%	
	Bidders are required to provide an outline of the network requirements of Project Co systems such as BMS, Access Control, and Security etc. and illustrate how these services will be delivered using a single integrated network.			
ET3.7.4	Project Co use of the Network	< 2 pages A4 narrative	0.24%	To what extent will the Building Management System support the delivery of the Brief in terms of the Trust's operational management requirements
	Bidders are required to provide details of the responsibilities relating to the installation, support and operation of the network that they expect to remain with the Trust split into two sections covering before and after Practical Completion.			
ET3.7.3	Trust Retained Obligations	2 sides A4 narrative	0.48%	To what extent will the design limit risks and therefore does not impact on contingencies
	Short statement of acceptance or more detailed response for any areas where there is none compliant or variant proposals			
	Acceptance of the Trust's approach to completion testing.			
	Trust's converged network to support building management systems;			
	Acceptance of the proposal for bidders to use the			
	Resilience; Equivalence;			
	Capacity for growth;			
	WiFi Coverage and performance;			
	Trust and NHS Security Requirements;			
	Maintenance service response times;			To what extent are the Impact of any caveats to Bidder's ability to meet the requirements
	Network Performance;			
	LAN Technical requirements and protocols;			
	This should include:			
	Specification.			objectives.
	Bidders are required to state their acceptance of the requirements contained within the IM&T			To what extent is compliance not agreed or there is a variance to the Trusts requirement the impact of this on the Trusts ability to operate the network and/or its ability to meet its IM&T and clinical

ET3.8.1	Describe the proposed approach to project management of the delivery of design, construction and operation, to include pre-construction H&S, CDM, Construction and quality management systems, design, commissioning, integrated of the independent tester and handover Bidders should provide their proposed			To what extent have the Bidder's supply chain worked together as a team to deliver an integrated design How well do the proposals demonstrate the effectiveness of the supply chain in delivering an integrated quality management system.
	arrangements for partnering with the Trust through the design, construction and operational phases of the project.			integrated quality management system How well do the proposals demonstrate successful project management in a partnering environment
ET3.8.2	Development programme showing key milestones and stages from financial close through to building completion and handover.	Microsoft Project Programme.	1.20%	How well does the response demonstrate compliance with the Project Agreement and all key milestones identified in the Project Schedules
			2.40%	
Total E&T			24.00%	
		Con The following outputs are requested from	npetitive Dialog	
	Section 4.1: Capital Costs			
ET4.1.1	Elemental cost plan. Gross Floor Area to match that of the submitted 1:200 and 1:50 drawings. Separate sub-element analyses for M&E services, External Works and Professional Fees. To be supported by elemental analysis sheets show the principal quantities and rates comprising the elemental and sub-elemental values.	pro-forma C1-5.		How sufficient are the cost plan and elemental analysis sheets in terms of extent, completeness and format to enable the evaluation to be completed How well does the elemental breakdown of the Cost plan match benchmarking data to demonstrate costs are allocated to all elements in a transparent way and demonstrate value for money How well does the cost plan compare in the same format as the OB forms and does it give a comparable ratio of elemental costs as contained in the OB forms and are cost consistent with the design How well does the gross floor area contained in the Cost plan reconcile with 1:500 and 1:200 drawings(CL4.0) issued as part of CD Stage 4
				Are allowances for inflation realistic and appropriate

			-	
ET4.1.2	Risk register: A costed risk register showing risks, probabilities, impact, risk owner and proposed mitigation measures. The risk register shall provide a demonstrable link to the contingency contained within the elemental cost plan.			How sufficient is the risk register in terms of extent, completeness and format to enable the evaluation to be completed
	The risk register should take account of the design, construction, commissioning, handover and operational phases of the project.			How effective are the risk mitigation strategies and do they demonstrate a link with the contingency
				How well are risks expressed in the register in a transparent way which shows robust links with the Project Programme
				How well does the risk register propose realistic mitigation measures
				How well does the risk register show consistency with the Project Agreement
ET4.1.3	Cash flow forecast related to design and construction programmes. To be presented in financial years (with half-yearly figures shown).	Formal report using spreadsheet	0.10%	How sufficient Is the cash flow forecast in terms of extent, completeness and format to enable the evaluation to be completed
				How well does the forecast compare with industry norms and benchmarking data
ET4.1.4	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	Standard NHS FBC Forms 1-4 WITH On-Costs linked to Cost Plan.	0.10%	How well do the FB forms correlate with to OB Forms
ET4.1.5	Lifecycle Cost Model: in elemental format (with capex items, quantities and rates linked to the Elemental Cost Plan) showing the replacement cycles and proportions replaced for each year of the Concession Period. For M & E services, this shall be in sub-elemental format to match the capex Cost Plan and shall include itemised plant and equipment. To be produced in both Discounted and Non-Discounted format, with and without smoothing. Outputs shall provide a demonstrable link to the overall financial model.		0.59%	How sufficient Is the lifecycle cost model in terms of extent, completeness and format to enable the evaluation to be completed
				How well does the lifecycle cost model comply with the lifecycle requirements of Schedule 8
				How well does the lifecycle cost model limit the impact on the overall unitary charge
				How well does the lifecycle cost model link to the overall financial model

					-
ET		Lifecycle Cost Report: To demonstrate how		0.20%	To what extent have the Bidders demonstrated design solutions that optimize whole life costs
		assessments of optimising Whole Life Cost (i.e.			
		achieving optimum value in terms of capex, lifecycle			
		cost and FM costs) have been reflected into the			
		, and the second			
		design proposals.			
FT	4.1.7	Statement of cost exclusions and assumptions: All	Formal report	0.10%	How sufficient is the exclusions and assumptions register in terms of extent, completeness and
		exclusions and assumptions shall be clearly stated.	i cimal report	0.1070	format to enable the evaluation to be completed
		Any items not specifically stipulated as exclusions or			format to chable the evaluation to be completed
		assumptions at this stage will be deemed to have			
		been included in the bidders' proposals and costs.			
					To what extent are the exclusions and assumptions contained in the risk register
					To what extent are mitigation measures proposed for each exclusion and assumption
				1.95%	
		Section 4.2: Schedule of Accommodation			
		Control in Control of Accommodation			
	101	Cohodulo of cooperadellar for the feetile (all	Covered heat Cohedula of Assessment the	4 200/	Henry well do the group floor group do not be a first floor and a second at the second
EI		Schedule of accommodation for the facility (all	Spreadsheet Schedule of Accommodation	1.30%	How well do the gross floor areas, departmental floor areas, room areas and allowances including
		areas)	Update the Schedule of Accommodation issued as		plant, circulation and coomunication space compare with the schedule of accommodation issued as
			part of Schedule 8 Part 3 with the as drawn 1:500		part of Schedule 8 part 3
			and 1:200 drawings to show a direct comparison		
			the state of the s		
			identifying variances		
			identifying variances		
			identifying variances		
			identifying variances	1.30%	
		Section 4.3: Architecture	identifying variances	1.30%	
ET	⁻ 4.3.1	Section 4.3: Architecture 1:500 masterplan showing the following:		1.30% 0.10%	How sufficient are the drawings in terms of extent, completeness and format to enable the evaluation
ET			Drawn format clearly showing each floor plan at	0.10%	· · · · · · · · · · · · · · · · · · ·
ET	4.3.1	1:500 masterplan showing the following:	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating	0.10%	to be completed
ET	4.3.1		Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location	0.10%	· · · · · · · · · · · · · · · · · · ·
ET	T4.3.1	1:500 masterplan showing the following: Conceptual departmental arrangements	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location plan at 1:1250/ 2500.	0.10%	to be completed Do the drawings form the basis of a single data base shared with the full design team
ET	T4.3.1	1:500 masterplan showing the following: Conceptual departmental arrangements Site arrangements with access and egress to the	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location plan at 1:1250/ 2500.	0.10%	to be completed Do the drawings form the basis of a single data base shared with the full design team How well does the external configuration of the building on the site maximise the opportunities and
ET	T4.3.1	1:500 masterplan showing the following: Conceptual departmental arrangements	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location plan at 1:1250/ 2500.	0.10%	to be completed Do the drawings form the basis of a single data base shared with the full design team
ET	4.3.1	1:500 masterplan showing the following: Conceptual departmental arrangements Site arrangements with access and egress to the building;	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location plan at 1:1250/ 2500. Assessment of expected BREEAM scores	0.10%	to be completed Do the drawings form the basis of a single data base shared with the full design team How well does the external configuration of the building on the site maximise the opportunities and
ET	4.3.1	1:500 masterplan showing the following: Conceptual departmental arrangements Site arrangements with access and egress to the	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location plan at 1:1250/ 2500. Assessment of expected BREEAM scores Report including diagrams/drawings as required	0.10%	to be completed Do the drawings form the basis of a single data base shared with the full design team How well does the external configuration of the building on the site maximise the opportunities and
ET	4.3.1	1:500 masterplan showing the following: Conceptual departmental arrangements Site arrangements with access and egress to the building; Main public transport hubs and connections;	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location plan at 1:1250/ 2500. Assessment of expected BREEAM scores Report including diagrams/drawings as required (maximum 30 sides A3)	0.10%	to be completed Do the drawings form the basis of a single data base shared with the full design team How well does the external configuration of the building on the site maximise the opportunities and
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ET	4.3.1	1:500 masterplan showing the following: Conceptual departmental arrangements Site arrangements with access and egress to the building; Main public transport hubs and connections; Pedestrian, cycle and vehicle routes including cycle storage; Integration with Schedule 106 works and the local	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location plan at 1:1250/ 2500. Assessment of expected BREEAM scores Report including diagrams/drawings as required (maximum 30 sides A3)	0.10%	to be completed Do the drawings form the basis of a single data base shared with the full design team How well does the external configuration of the building on the site maximise the opportunities and
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ET	4.3.1	1:500 masterplan showing the following: Conceptual departmental arrangements Site arrangements with access and egress to the building; Main public transport hubs and connections; Pedestrian, cycle and vehicle routes including cycle storage; Integration with Schedule 106 works and the local roads network FM Central Delivery Yard and unloading bays/areas	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location plan at 1:1250/ 2500. Assessment of expected BREEAM scores Report including diagrams/drawings as required (maximum 30 sides A3)	0.10%	to be completed Do the drawings form the basis of a single data base shared with the full design team How well does the external configuration of the building on the site maximise the opportunities and strengths of the site in terms of the bid deliverables for this criterion To what extent does the internal departmental configuration maximise the opportunities and
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ET	4.3.1	1:500 masterplan showing the following: Conceptual departmental arrangements Site arrangements with access and egress to the building; Main public transport hubs and connections; Pedestrian, cycle and vehicle routes including cycle storage; Integration with Schedule 106 works and the local roads network FM Central Delivery Yard and unloading bays/areas Transport routes including patient, visitors, staff and goods;	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location plan at 1:1250/ 2500. Assessment of expected BREEAM scores Report including diagrams/drawings as required (maximum 30 sides A3)	0.10%	to be completed Do the drawings form the basis of a single data base shared with the full design team How well does the external configuration of the building on the site maximise the opportunities and strengths of the site in terms of the bid deliverables for this criterion To what extent does the internal departmental configuration maximise the opportunities and strengths of the design in terms of the bid deliverables for this criterion minimising risk to building users and compliance with Statutory standards How well do the departmental adjacencies and locations allow the Trust Security Policy and Security
ET	4.3.1	1:500 masterplan showing the following: Conceptual departmental arrangements Site arrangements with access and egress to the building; Main public transport hubs and connections; Pedestrian, cycle and vehicle routes including cycle storage; Integration with Schedule 106 works and the local roads network FM Central Delivery Yard and unloading bays/areas Transport routes including patient, visitors, staff and goods;	Drawn format clearly showing each floor plan at 1:500 as part of a 3D model; Site plan indicating main traffic flows at 1:500 and broader location plan at 1:1250/ 2500. Assessment of expected BREEAM scores Report including diagrams/drawings as required (maximum 30 sides A3)	0.10%	to be completed Do the drawings form the basis of a single data base shared with the full design team How well does the external configuration of the building on the site maximise the opportunities and strengths of the site in terms of the bid deliverables for this criterion To what extent does the internal departmental configuration maximise the opportunities and strengths of the design in terms of the bid deliverables for this criterion minimising risk to building users and compliance with Statutory standards

				To what extent do persons using public transport have to walk to access the building and cross traffic routes and how easy is it to walk onto and arouind the site
ET4.3.2	1:200 departmental layouts (CL4.0)	1:200 plans to indicate room name, room size and	0.26%	
	Room adjacencies;	general arrangement. These plans must state corridor widths.		To what extent can Automated Guided Vehicle systems be employed as a future goods distribution proposal
	Circulation layouts;			
	Corridor widths;			
	Door widths;			
	Communication routes; Entrances;			How well do the internal room layouts and sizes compare favourably with the generic rooms
	Egresses;			contained in the Trust Brief
	Window positions.			How well are the room configurations coordinated with the structural frame of the building
	For comparison, all room sizes are to be measured to the internal face of the wall. Overall department sizes to the inside face of the external wall.			riow well are the room comigurations coordinated with the structural frame of the building
	Control of infection and decontamination proposals.	Written report including sketches and specifications (maximum 30 sides A3)		How well does the design comply with the Trust Brief in terms of technical solutions to address healthcare acquired infection to include hand washing specifications, room layouts, the layout of clean and dirty utility rooms and the proposals for isolation rooms etc
ET4.3.3	1:50 room layout plans (CL4.01)	1:50 Plans and Elevations extracted from the Building Information Model	0.08%	
	Bidders should illustrate the adaptability of their design solutions to meet a change in functionality.			
	Bidders should illustrate how their bids deviate from the Functional Brief and SoA.			
				How well do the 1:50 drawings comply with the requirements of Schedule 8 part 3, the Functional Brief and the PPDDs
ET4.3.4	Room Data Sheets for all rooms	Room data sheets in ADB format extracted from the Building Information Model	0.13%	
	Room data sheets should have a specific room identity number which correlates to the layout plans			How well do the room data sheets comply with the Trust's requirements of Schedules to the Project Agreement
	The state of the s			
ET4.3.5	Reflected ceiling plans for key departments indicating ceiling types, setting out and ceiling heights. The reflected ceiling plans need to cover the following departments:		0.13%	How well are ceiling finishes coordinated across the departments including bulkheads

	Emergency Department;			
	Ward Cluster;			
	Integrated Critical Care;			
	Maternity Delivery Suite;			
	Neo-Natal Unit;			
	Operating Theatres;			
	In addition to the ceiling type and height, these plans need to show lighting proposals, CCTV locations, smoke detection sensors, hoists and all other ceiling mounted/fixed elements.			
	Elevations and sections; including courtyard elevations and Atria.	1:100 and 1:200 drawings	0.26%	How well do the proposals demonstrate that the design has been developed to a level where it can be built without further development
	Bidders are to provide 1:200 Sections and Elevations to clearly demonstrate the build up and form of the scheme. These are to clearly identify structural and finished storey heights, height of overall buildings and plant spaces on roof areas.			How well do the proposals enhance the natural lighting of lower floors
	The elevations must cover all elevations around the outside of the building and also the internal courtyards. Where applicable, the sections must be contextualised with any surrounding buildings and any site topography.			How well will the elevation weather over time and have materials that have been selected that are appropriate
	Elevations must demonstrate the finishes and colours.			How well is the maintenance strategy coordinated with access and materials section
	All sections and elevations are to indicate structural grids.			
	Bidders should provide structural layouts and sections through the building.			
ET4.3.7		written report with illustrations, including	0.08%	How well can visitors find their way within the building without the need for direction signs
		commentary design development to reflect strategy 1:200 drawings		How well do the proposed finishes for the specified areas create an environment which complies with the Trust Brief How well does the interior design coordinate with the way finding proposals and coordinate with the engineering proposals in terms of ergonomic positioning of alarm panels etc.
	These must cover the following:			
	Floor finishes;	Finishes board including sample components		
	Wall finishes;			
	Integrated arts;			

	Door types & ironmongery;		
	Wall protection; Lighting proposals; CCTV locations; Door entry locations. In addition to the finishes drawings, bidders are to provide a strategic written & illustrated document describing how they intend to define the way finding throughout the building both internally and externally. This strategy needs to set out the proposed key Trust interfaces and methodology for including stakeholder groups.		
ET4.3.8	Prepare a detailed landscaping solution. This needs to highlight the green planted spaces and the hard landscaped areas indicating links between inside and outside including the use of courtyards. This should illustrate how secure by design is considered as part of the landscaping and how spaces are to be accessed and used by patients, staff and visitors. The external and internal landscaped areas are to be considered in terms of public and private spaces. Bidders are to provide a detailed breakdown of proposed finishes, planting and street furniture. Designs must reflect how they will encourage environmental diversity and promote the ethos of sustainability within the scheme as a whole.	Written report including proposed planting and street furniture to be providedincluding illustrations. (maximum 30 sides A3)	How well does the proposal fit with the Sandwell Metropolital Borough Council master plan How well does proposal respond to secure by design How well does the proposal enhance the design of the building How well does the proposal fit with the Trust Brief for vehicle and pedestrian access across the site To what extent are the proposals low maintenance How sustainable are the proposals To what extent do bidders provide a range of planting and trees of with a variety of types and maturity e.g 5, 10 and 15 years.
ET4.3.9	Typical construction details: Bidders are to provide detailed sections through the building at key interfaces. These should be at a scale of 1:20 to demonstrate proposed construction methodology and materials. These need to clearly define wall build ups and levels from floor to floor. The number of sections required will vary from bidder to bidder. However it is envisaged that the number will need to cover all major façade interfaces and build ups and is likely to be circa 30 sections. Bidders are to provide details of structural connections.		How well do the proposals demonstrates that the design has been developed to a level where it can be built without further development How well do the proposals support adaptable and flexible design How well do the proposals support off site manufacture and construction programme constraints How well do the proposals coordinate with the proposed sustainability strategy

ET4.3.10	Adaptability of space and expansion strategy:	Drawings at 1:1250; 1:500 and 1:200.	0.13%	How well will the design allow expansion without affecting hospital services
	Bidders are to show how their proposals can be expanded to provide additional hospital accommodation. These will need to be demonstrated at a high level in block format and demonstrate the impacts to the	Indicative cost plan		How well do the proposals demonstrate compliance with the requirements of the Trust-Brief
	overall site, traffic flows and main entrances/deliveries. In addition to the high level bidders will have to focus on specific areas at 1:200. The bidders will be expected to demonstrate the expansion of an additional ward cluster with neighbourhood hub,1 operating theatre, maternity facilities, a generic outpatients pod and imaging facilities together with indicative costs.			How well would the proposals allow the hospital to continue to function for the period of any works
	Fire and Evacuation strategy A fully coordinated fire safety stategy	Written report with drawings (maximum 30 sides A3)	0.13%	How well are the proposals coordinated into a fire engineered solution
	In addition bidders will need to demonstrate full fire compartmentation & sub-compartmentation including statutory escape signage, hazard rooms and door hold open devices/strategy.	internal areas		To what extent has the fire strategy been accepted by the Local Authority Building Control/Fire Service
	Written documentation to explain any fire strategy and engineered solutions is required to compliment the drawings.			How well does the design support progressive horizontal evacuation and allow continued care without the need for vertical evacuation
	the drawings.			To what extent are fire lifts (if installed) available for use by general traffic
				How well does the design allow the Trust to develop procedures for the management of a fire alarm activation
	Acoustic strategy Bidders are required to provide a written acoustic strategy to demonstrate the compliance of the Brief including the damping of structural vibration from plant and equipment	required (max 20 sides A4).	0.13%	How well do the proposals comply with the requirements of the Trust Brief
	This information must be supplemented by proposed wall build ups 1:20 drawings and marked up 1:200 wall type/performance drawings.			
ET4.3.13	Schedule of Finishes Schedule of components;	Written report including drawings and schedules of finishes (maximum 30 sides A3) Finishes boards including samples	0.26%	How well do the finishes comply with the requirements of the Trust Brief
	Schedule of fixtures;	3.3.3g 3.3p 100		

1	Matrix of finishes protection;			
	Sample finishes boards for internal finishes;			
	Sample finishes boards for external envelope and roof;			
	Sample finishes boards for hard landscaping and public realm;			How well do the finishes minimise maintenance
	Matrix of corridor and circulation minimum dimensions.			How suitable are the finishes for persons with disabilities
		A4 written report to include illustration of meetings/engagements and short report to cover any issues raised and solutions to closure.	0.13%	The extent to which the proposals are accepted by the Statutory Bodies without caveats
	Sustainability strategy Bidders are to provide a written document to enhance the drawn information to explain their approach to sustainability and the incorporated design strategy. This will compliment information provided in the Engineering bid deliverables.	Expected air permeability rate Expected BREEAM score		How well do the proposals meet the requirements of BREEAM How well does the building orientation reduce and quantify the energy usage of the building in terms of solar gain in summer and thermal gain in winter To what extent are recycled, low hazard and low carbon footprint materials specified in the construction of the building The extent to which risk assessments and method statements associated with land remediation are specific to the site The extent to which Bidders can contain and manage hazardous waste specific to the site
		Expected BREEAM score	0.16%	How deliverable are the proposals in terms of geotechnical evidence and what evidence is provided to support the bid proposals How detailed is the environmental impact statement to identify risks and mitigation proposals

	Ecological enhancements;			
	Ecological enhancements,			
	The effects/impact on the neighbouring waterways;			
	The effects/impact on the heighbouring waterways,			
	Control and management of harvardous wester			
	Control and management of hazardous waste;			
	Land remediation.			
ET4.3.17	FM Design Principles:	Written report (maximum 5 sides A4)	0.16%	To what extent do departments provide services in zones or rooms to allow areas of the department
		,		to be shut without affecting the whole department
	Demonstrate how design will accommodate the			
	requirements of FM services specifications			To what extent will the design reduce disruption of hard FM maintenance
	contained within Schedule 14 (service level			
	specification);			To what extent is the design compatible with BIM asset management in the operational phase of the
				project
	Evidence that service providers are inputting into	SoA Spreadsheet of FM areas		How easily cleaned is the building
	the design solutions now and going forward in			
	respect of the FM service provision;			
	Provide a schedule of accommodation for all			How well do the proposals demonstrate that all service providers, including the Trust's soft FM have
	schedule 14 (service level specifications) services.			inputted to the solution
				To what extent does the Proposed schedule of accommodation compare with the schedule of
				accommodation contained in Schedule 8 part 3
			2.60%	
	Section 4.4: Town Planning		2.60%	
	Section 4.4: Town Planning		2.60%	
ET4.4.1	Section 4.4: Town Planning Evidence of planning support	Provision of support letter or written report from	2.60% 0.65%	The extent to which the proposals are accepted by SMBC Town Planning without caveats
ET4.4.1	Evidence of planning support	local planning authority confirming 'in principle'		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions	local planning authority confirming 'in principle' support for the scheme.		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed	local planning authority confirming 'in principle' support for the scheme.		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed development level on the scheme offering 'in	local planning authority confirming 'in principle' support for the scheme.		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed	local planning authority confirming 'in principle' support for the scheme.		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed development level on the scheme offering 'in principal' support of their proposals.	local planning authority confirming 'in principle' support for the scheme.		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed development level on the scheme offering 'in principal' support of their proposals. The presented evidence must provide firm and	local planning authority confirming 'in principle' support for the scheme.		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed development level on the scheme offering 'in principal' support of their proposals. The presented evidence must provide firm and unambiguous proof of dialogue and design	local planning authority confirming 'in principle' support for the scheme.		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed development level on the scheme offering 'in principal' support of their proposals. The presented evidence must provide firm and unambiguous proof of dialogue and design information so as to provide realistic expectation of	local planning authority confirming 'in principle' support for the scheme.		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed development level on the scheme offering 'in principal' support of their proposals. The presented evidence must provide firm and unambiguous proof of dialogue and design information so as to provide realistic expectation of a successful planning application after the selection	local planning authority confirming 'in principle' support for the scheme.		
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ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed development level on the scheme offering 'in principal' support of their proposals. The presented evidence must provide firm and unambiguous proof of dialogue and design information so as to provide realistic expectation of a successful planning application after the selection of a preferred bidder.	local planning authority confirming 'in principle' support for the scheme. Confirmation of timescales for full planning and		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed development level on the scheme offering 'in principal' support of their proposals. The presented evidence must provide firm and unambiguous proof of dialogue and design information so as to provide realistic expectation of a successful planning application after the selection of a preferred bidder.	local planning authority confirming 'in principle' support for the scheme. Confirmation of timescales for full planning and judicial review in line with TCPA.		
ET4.4.1	Evidence of planning support Bidders are to provide confirmation of discussions with the local authority to a more detailed development level on the scheme offering 'in principal' support of their proposals. The presented evidence must provide firm and unambiguous proof of dialogue and design information so as to provide realistic expectation of a successful planning application after the selection of a preferred bidder. Bidders must illustrate their response to	local planning authority confirming 'in principle' support for the scheme. Confirmation of timescales for full planning and judicial review in line with TCPA.		

	2) Landscaping proposals and illustrations of proposed boundary and canal side treatments. These should include: Canal elevations; Grove Street; Grove Lane; London Street; 3) Renewable energy technology proposals: Statement of compliance with Planning Authority requirements and acceptance of the technology on the site for the proposed renewable energy technologies. 4) Draft town planning submission: To include Design and Access statements, plans, site plans, elevations and 3D visualisations of sufficient quality so as to ganer the support of the local planning authority. In addition various written documentation including environmental impact assessments, travel documentation and any ecological reports will have to be established in draft ahead of a submission in accordance with the requirements of the local authority complete with illustration of the local authority comfort with the submission.			
	Section 4 E. Engineering		0.65%	
ET4.5.1		Written report including schedule drawings and calculations. (maximum 50 sides A3)		To what extent has the bidder expanded on the evidence provided previously to show development of the proposals and substantiation to support compliance. To what extent has the bidder proven compliance with Schedule 8 Part 3 and demonstrate the steps taken to ensure occupant comfort levels are achieved. All supporting calculations shall be made available and annotated as necessary. How well do the proposals allow patients to control temperatures within their own bed space

	Evidence of consultation with the Environment Agency regarding emissions from the facility and integration of renewable energy technologies if the technology relies on use of certain natural resources;			
	Description detailing opportunities in delivering and future maintenance of the engineering installations in an efficient and safe manner without effecting business operation; Detail the approach to standardisation of the design and system selection			
	Submit a strategy detailing water conservation techniques as part of the design solution			
ET4.5.2	Services infrastructure plans of the site at 1:1000 and 1:500 scale show: All new and existing services whether owned by Statutory Authorities or installed as domestic site supplies; Proposals for diversion of services and effect on existing facilities both pre and post construction.	plan in A3 format detailing and phased work.	0.10%	How well do the Bidder's proposals allow the Trust to maintain its operational requirements as specified in the PPDDs
				How well have the proposals been planned including site specific risk assessments and method statements
ET4.5.3	Utilities supplies report including: Confirmation of required capacity, maximum demand, availability and necessary infrastructure	Written eport including drawings and calculations. (maximum 50 sides A3)	0.05%	How well do the calculations for the anticipated supply and demand comply with the requirements of Schedule 8 part 3
	improvements for Statutory Authority supplies; Description of disconnection works associated with redundant supplies.			
ET4.5.4	improvements for Statutory Authority supplies; Description of disconnection works associated with		0.10%	How well do the proposals demonstrate compliance with the requirements of Schedule 8 parts 3
ET4.5.4 ET4.5.5	improvements for Statutory Authority supplies; Description of disconnection works associated with redundant supplies. 1:200 and 1:50 scale plans providing sufficient detai of the service risers, ducts and service routes to explain the distribution of the engineering services. These layouts shall also detail how space for spare	A1 sized layouts.	0.10%	How well do the proposals demonstrate compliance with the requirements of Schedule 8 parts 3 How well are the M&E services and associated service ducts and risers integrated with the overall building design How well are each of the M&E services coordinated

	Lighting layouts with supporting calculations for each room and a schedule of proposed luminaries; Co-ordinated reflected ceiling plans showing all M&E systems terminal devices, ceiling grid and type, ceiling height, access panels, fixed clinical equipment including supports penetrating the ceiling; Key notes on continuation of services outside of the department where not shown on 1:200 scale plans noted in section D3.4.4, i.e. routes and termination provisions for MRI helium quench pipes and fume cupboard ducts etc.		Ease of maintenance access and services routing to avoid access via clinicl spaces where possible.
ET4.5.6	Plant space layouts and sections at 1:100 scale indicating: Plant sizes and locations; Principle distribution routes; Maintenance access requirements for items of plant and distribution systems;	0.05%	To what extent does the M&E design and configuration demonstrate compliance with the requirements of these bid deliverables for this criterion
	Fire escape routes; Separation of permit to work areas;		How well M&E services segregated from the users of the hospital
	Operational noise target for each plant space and predicted noise level outside each plant space covering external environment and internal neighbouring spaces;		How well do the proposals demonstrate compliance with the requirements of Schedule 8 parts 3 and 7
	Allocation of air intake and exhaust louvers;		
	Prediction of lower and upper air temperatures for each plant space;		
	Provision of bunds for designated water storage areas and proposed protection against flooding in all plant spaces;		
	Access strategy for each space including transporting replacement and redundant plant and negotiating changes in floor levels.		

ET4.5.7	Schematics for all systems detailing plant, primary distribution systems and associated controls and alarms.		0.05%	How well do the proposals demonstrate compliance with the requirements of Schedule 8 parts 3 and 7
ET4.5.8		Written report including drawings and calculations. (maximum 50 sides A3)	0.18%	How well do the proposals demonstrate compliance with the requirements of Schedule 8 parts 3 and 7
ET4.5.9	Room Data Sheets to incorporate: Proposed environmental conditions to be maintained; Lighting systems emergency standby provision; Provision of medical and laboratory gases; Provision of patient and staff alarms; Advice on surface and domestic water maximum temperatures; Provision of specialist water supplies; Provision of transit systems; Provision of security systems; Provision of specialist ventilation systems; IEE Guidance Note 7 category; Allowances for servicing specialist clinical equipment; M&E systems fittings schedule to accompany the equipment schedule.	Information to be integrated with co-ordinated room data sheets .		To what extent are the room data sheets completed to enable the evaluation to be completed How well do the room data sheets comply with the requirements of Schedule 8 part 3, the Functional Brief and the PPDDs
ET4.5.10	1:200 scale plans; Schedule of proposed fittings; Supporting calculations; Rendered images. Building and energy management system proposals including provision for integration of other systems, access hierarchy (PFI provider and Trust) and head	A3 report including drawings and calculations. 20 pages max	0.10%	How well do the proposals demonstrates compliance with the requirements of Schedule 8 parts 3 How well are the proposals integrated with the landscaping strategy How well do the proposals demonstrates compliance with the requirements of Schedule 8 parts 3
ET4.5.12	·	Written report including drawings and calculation (maximum 20 sides A4)	0.05%	How well do the proposals support the BREEAM assessment

ET4.5.13	BREEAM Healthcare pre-assessment incorporating	Written report including drawings and	0.18%	How well do the proposals support the BREEAM assessment
	works already undertaken by the Trust and defining			
	activities imposed on the Trust as assumed within			
ET4.5.14	the pre-assessment. Energy strategy and model to include:	Compliance Statement and descriptive reports in	0.18%	How sufficient are the proposals in terms of extent, completeness and format to enable the
E14.5.14	Energy strategy and model to include.	A4 format maximum 15 sides.	0.10%	evaluation to be completed
	Final statement of compliance with the project brief			7.3
	for energy consumption and carbon emission			How well do the proposals demonstrates compliance with the requirements of Schedule 8 parts 3
	targets;			and 7
	Confirmation of improvements incorporated within			
	the external envelope to reduce operational energy			
	consumption from heating and cooling systems;			
	Description of features incorporated which promote			How well do the Bidder's proposals allow the Trust to maintain its operational requirements as
	the use of passive systems, i.e. building form			specified in the PPDDs
	optimises use of daylight and provides self-shading			
	thereby limiting solar heat gain;			
	Description of proposals incorporated for minimising			How well do the proposals allow patients to control temperatures within their own bed space
	energy consumption within the building engineering systems;			
	ayatema,			
	Overview of restrictions on the Trusts operation of			To what extent are the proposals are affordable within the constraints of the OB forms
	the hospital imposed by compliance with the			
	Bidders proposed energy model;			
	Detailed annual energy consumption analysis	Energy Consumption Calculations in Excel format.		How well do the proposals demonstrate compliance with Schedule 8 parts 3 and 7
	calculations, supporting the statement of compliance, summarised in Giga-joules per 100	Supporting Thermal Model in IES format (not used for Energy Target Calculations). Supporting		
	cubic metres of the buildings heated volume and the			
	actual plant suppliers' details. Calculations to be	including details of average year used (degree		
		days for heating and cooling).		
	formulas available to view, accompanied by a descriptive guide to the calculations. The energy			
	consumption analysis shall be supported by a			
	dynamic thermal modelling assessment using IES			
	software with the model provided for review,			
	supported where necessary by a written report			
	featuring assumptions made, systems incorporated and commentary on the results.			
ET4.5.15	Renewable energy technology strategy to include:	Written report including drawings and calculations	0.10%	The extent to which each sustainable technology reduces the annual fuel consumption
	Description of the proposed renewable constru	(maximum 20 sides A3)		
	Description of the proposed renewable energy technologies offered together with an assessment			
	of annualised consumption of each fuel type used;			

	Confirmation of source of each fuel type used including potential suppliers and their location;			How well do the proposals deliver carbon savings when the whole equation from source to end product
	Statement of compliance with Planning Authority requirements and acceptance of the technology on the site for the proposed renewable energy technologies. Future Fuel Flexibility Strategy to allow incoperation of other energy sources.			How well are the proposals accepted by the SMBC Planning Department
	Systems resilience strategies to include: Confirmation of resilience incorporated for each engineering system;	Written report including drawings and calculations (maximum 20 sides A3)		How well do the proposals demonstrate compliance with the requirements of schedule 8 part 3 on a system by system basis
	Zoning of systems to minimise disruption due to systems failure;			How resilient are the energy supplies
	Opportunity to add resilience in the future for each engineering system;			How well will the Bidders design team support the Trust in ensuring the design meets the requirements of Schedule 13
	Method of incorporating systems to support major medical equipment selected toward the end of the construction process;			
	System capacity allowances for major medical equipment.			
	Security systems strategy to include: 1:200 scale layout drawings indicating security strategy; Description of security system provisions.	Written report including drawings and calculations (maximum 20 sides A3)	0.05%	How well do the proposals demonstrate compliance with the requirements of schedule 8 part 3, the Functional Brief and the PPDDs
	e e e e e e e e e e e e e e e e e e e	1:200 layout		
	Commissioning statement including: Description of commissioning activities including commissioning management role;	Written report including drawings and calculations (maximum 20 sides A3)	0.03%	To what extent have the Bidder's supply chain developed an integrated commissioning programme
	Overview of seasonal commissioning requirements.			To what extent does the design minimise the need for ongoing seasonal commissioning

ET4.5.1	Plant access, maintenance and replacement strategy including: Overview of plant locations and principle horizontal	Written report including drawings and calculations (maximum 20 sides A3)	0.05%	How well does the design allow for plant replacements without affecting hospital services
	and vertical service routes; 1:200 plans indicating any craneage requirements with allocated landing platforms;			
	Detailed description of any necessary specialist plant movement operations including use of lifting beams and methods of overcoming changes in floo levels along a determined plant removal route. Description of loss of clinical service due to maintenance operations, i.e. operatives needing to shut off active systems when accessing permit to work areas to repair faulty systems.	1:200 layout		
ET4.5.2	Decontamination and control of infection report where associated with the fabric and building environmental systems.	Written report including drawings and calculations (maximum 20 sides A3)	0.05%	How well does the installation satisfy the commissioning requirements set out in Schedule 12
ET4.5.2	Life cycle statement detailing estimates for major items of plant and key distribution system components.	Written report including drawings and calculations (maximum 50 sides A3)	0.05%	To what extent does the lifecycle statement reconcile to the CAPEX values
				How well do the proposals demonstrate compliance with the requirements of Schedule 8 part 3
ET4.5.2	Passenger and goods lift usage traffic assessment and confirmation of proposed lift types and manufacturers.	Written report including drawings and calculations (maximum 50 sides A3)	0.18%	How well do the proposals demonstrate compliance with the requirements of Schedule 8 part 3
	Escalator proposals complete with types, quantity and manufacturer.			
ET4.5.2	An aesthetic statement detailing the lighting to be provided both internally and externally.	A3 report including drawings and calculations. 50 pages max	0.03%	How well do the proposals demonstrate compliance with the requirements of Schedule 8 part 3
				How well are the proposals integrated with the landscaping proposals
				How well are the proposals integrated with the internal design and finishes

ET4.5.24	Number and location of IT Communications rooms and any other ICT equipment that has space limitations.	A1 sized layout.	0.03%	How well do the proposals demonstrate compliance with the requirements of Schedule 8 part 3
			2.60%	
	Section 4.6: Equipment			
ET4.6.1		Updated Equipment responsibility Matrix integrated as part of the BIM asset management model	0.36%	How well do the proposals demonstrate coordinated supply chain working How well do the proposals demonstrate compliance with the requirements of Schedules 12, 13 and the Trust's requirements
ET4.6.2	Method statement describing how the Bidder proposes to manage iterative changes to the ADB database during the process of design development.	A4 size report maximum of 5 sides including process diagram.	0.13%	How well can the Bidder's supply chain achieve the bid deliverables of this criterion by working in partnership with the Trust
	Response to include: Room data sheet iteration; Tracking of changes in component type, group/category and quantity following these through to consequential changes to the ERM; Integration of changes into the design process; Data management and control.			How well do the Bidder's management proposals comply with the Trust's requirements
ET4.6.3	Bidders' proposal for providing CAD drawings and ADB C Sheets @ 1:50 scale for the purposes of equipment supplier loading. In particular: Architectural support in providing loaded C Sheet drawing sections to provide suppliers for loading; Architectural support in providing cleaned C Sheet drawings to provide suppliers for loading; Fixing heights of equipment; Integration of suppliers loaded drawings back into main drawings. Process to avoid services/duct clashes with major fixed equipment installation.	A4 size document, maximum of 5 sides.	0.13%	How well do the proposals achieve the bid deliverables of this criterion

ET4.6.4	construction programme to maximise flexibility regarding Trust provided fixed equipment. In the context of procurement and supplier selection response to include: Proposed milestone programme for generic construction related specifications for Trust provided fixed equipment; Proposed milestone programme for generic construction related specifications for Bidder provided fixed equipment; Proposed milestone programme for specific construction related specifications for Trust provided fixed equipment; Proposed milestone programme for specific		0.13%	How well can the Bidder's supply chain achieve the bid deliverables of this criterion by working in partnership with the Trust How well do the proposals demonstrate compliance with the requirements of Schedules 12, 13 and the Trust's requirements
	construction related specifications for Bidder provided fixed equipment.			
ET4.6.5	Approach to identifying and managing accessories/options associated with bidder provided major equipment. Response to address: Method to provide flexibility regarding accessory selection; Bidder role in delivering holistic room design to support functionality.		0.13%	How well do the Bidder's management proposals comply with the Trust's requirements
	the maintenance of major equipment provided by them (i.e. Pendants, Operating Lights etc) as identified in the ERM. Response to address: Maintenance mix rationale; Maximising equipment availability; Education and Training of support staff; Partnership with suppliers; DoH/MHRA hazard notices and device alerts; Manufacturer corrective notices.			How well do the proposals demonstrate compliance with the requirements of Schedule 14
ET4.6.7	Describe how the bidder will work with the Trust to minimise variations associated with the installation of Trust provided equipment as part of the equipment replacement programme throughout the operational phase of the project Response to address:	A4 size document, maximum of 5 sides.	0.13%	How well do the proposals demonstrate cost control and value for money

	Alterations to fixed furniture to accommodate			
	equipment;			
	Alterations to services such as power and data			
	location and type;			
	Late additional equipment fixing pre and post			
	handover.			
ET4.6.8	Statement of bidder proposals for minimising	A4 sized document, maximum of 5 sides.	0.13%	How well can the Bidder's supply chain and project team achieve the bid deliverables of this criterion
	instances of early installation of Trust maintained			by working in partnership with the Trust
	and lifecycled equipment with regard to equipment			
	maintenance and warranty periods prior to Practical			
	Completion.			
	Response to include:			
	Programme to demonstrate method;			
	Examples from other projects.			
			1.30%	
	Section 4.7: IM&T	T	•	
ET4.7.1	Schematic Design		0.26%	How well does the design achieve:
		commentary		
	Schematic design in response to the IM&T			Deciliones appreach Decima principles
	specification in presented in Schedule 8, Part 3,			Resilience approach – Design principles;
	Appendix B. showing diagrammatic representation			
	of network logical topology for:			Conformance with technical network standards and Cood Industry Drastics for design.
	Design principles;			Conformance with technical network standards and Good Industry Practice for design;
	Locations of hub rooms;			Performance of core network;
	Cable runs between IT hub rooms and core network			
	rooms;			On any through the street and the street
	Cable runs between core network rooms to external			Security of logical networks;
	services; Core hubs and switches;			Redundancy in cabling design;
	Distribution and access layer switches.			Reduited its capiling design,
	· · · · · · · · · · · · · · · · · · ·			Wireless resilience:
	The configuration of VLANs, IP addressing schemes and Quality of Service (QoS) will be			Wireless resilience;
	presented.			Wireless performance;
	The approach to resilience, performance,			Wireless security;
	redundancy, future proofing and security must be			Thiologo county,
	demonstrated.			Future proofing/expansion capacity;
	35.110.110.110.110.110.110.110.110.110.11			Logical network design (VLAN/IP addressing QoS).
ET4.7.2	Technical Layout		0.13%	How well does the design achieve:
	Tachnical lavant of the IT high consequent	native and PDF format		Location/quitability/gagggaibility of quitab / bub recess
	Technical layout of the IT hub rooms and core			Location/suitability/accessibility of switch / hub rooms;
	network rooms. To include cabinet provision and			
	configuration of patch panels.			
	This will include:			
	1:500 drawings;			Network cabinet layout design facilitates easy to manage/tidy cabling.
	1.000 didwings,			Trother Sabiliet layout design labilitates easy to managerilay cabiling.
	1:50 for hub rooms and core network rooms;			
	Cabinet designs and room elevations;	Room data sheets		How flexible are the locations and layout to achieve future proofing
	<u> </u>			,
	Room data sheets for the hub rooms and core			
	network rooms.			
	notive in recine.			

FT 4 T 0	7 5	Manager and the same debacks and	la aggi	
ET4.7.3	Project Co Infrastructure Installation Proposals	accreditation documents as required in PDF	0.26%	How well does the design achieve:
	Detailed narrative to show how Project Co will meet	·		Proposed equipment – reputable supplier / enterprise grade;
	the Trust infrastructure installation requirements			
	detailing:			Installation weatherdalogy, intogration with leaveny networks
	Proposed manufacturers of cabling and equipment;			Installation methodology – integration with legacy network;
	Accreditations from the manufacturers of the			Approach to go live / roll back of link to legacy;
	proposed equipment;			
	Proposed Installation approach;			The required number (or equivalent) of cat 6a outlets provide;
	Proposed testing and handover approach;			
	Volumes of ports (active and passive), volumes of			Network meets requirements for active network connectivity and spare capacity.
	switches and hubs, volumes of wireless network heads.			
	This will demonstrate compliance with the Trust			
	network requirements as set-out in the IM&T			
	Specification in Schedule 8, Part 3, Appendix B			
ET4.7.4	Project Co Infrastructure Support Proposals	Narrative in PDF format	0.20%	How well are the following delivered:
	Project Co proposals to meet the Trust			Achievement of Trust response time and service level requirements;
	infrastructure support requirements detailing: Support principles;			Guaranteeing response times and availability;
	Proposed service levels and hours of service;			Escalation of faults and issues;
	Availability of staff and spares near to the hospital;			Integration of IM&T services with the Trust's IM&T service desk;
	Approxitations from the aupplions of the proposed			Proposed availability and response times of service staff;
	Accreditations from the suppliers of the proposed equipment.			Proposed availability and response times of service start,
	Proposals will demonstrate compliance with the			Proposed availability and response time of spare parts service;
	Trust network support requirements as set out in			
	Schedule 14,			Approach to bug-fixes and software upgrades;
				Approach to cabling refresh.
ET4.7.5	Detailed Network Design		0.13%	How well does the detailed design achieve:
	Detailed network design shown on the architectural / technical drawings.			Resilience approach – Diverse routing, and N+1 duplication of active equipment;
	tooninga arawingo.			
	This will need to address all aspects of the IM&T			
	Specification. The proposals will be presented in the form of:			Conformance with technical network standards and Good Industry Practice for design;
	The proposals will be presented in the form of.			Comornance with technical network standards and Good industry Fractice for design,
	1:1250 design including outdoor areas and car			
	parks;			Desferons and configuration of consulting
	1:500 design;			Performance and configuration of core network;
	1:200 for all departments;			
	Supporting narrative commentary.			Physical and virtual security of the network;
	This will demonstrate compliance with the Trust			Wireless installation proposals and siting of the wireless transmitters;
	requirements as set-out in the IM&T Specification in Schedule 8, Part 3, Appendix B			
	, , , , , , , , , , , , , , , , , , ,			Wireless resilience;
				Wireless performance;
				Wireless security;
				Ease of operation of the design for the Trust; Approach to future proofing/expansion capacity;
				Logical network design (VLAN/IP addressing QoS).
				Logical network design (VLAN/IP addressing QoS).

Specialist Wireless Network Design		0.20%	How well does the design achieve:
A specialist design detailing the number of and	in one and i bi formato		Wireless coverage delivered in solution;
provide universal wireless coverage across the PFI			Wireless solution proposed is robust and scalable;
Associated wireless network coverage maps to	Supporting narrative as required.		Coverage provided allows for individual device failure with minimal loss of service;
show that coverage will be adequate to deliver connectivity outlined in the IM&T specification.			
Outlines of assumptions used in design and mapping activities.			Assumptions used appropriate;
Logical wireless network design showing how virtual wireless networks provided to deliver secure			Ability to "fill in" black spots identified in proposal;
			Logical wireless design scalable and secure.
Trust / Project Co Responsibilities Bidders are required to provide full and specific details of the responsibilities relating to the installation, support and operation of the network that they expect to remain with the Trust split into two sections covering before and after Practical Completion.	Narrative in PDF format	0.13%	How well do the proposals address: Are the split of responsibilities between the Trust and Project Co practical and pragmatic;
			Have undue or unnecessary responsibilities been placed on the Trust; Have responsibilities been placed on the Trust that it will have difficulties in achieving; Are the Trust responsibilities clearly defined; Do any of the responsibilities increase Trust costs; Are the timetables for any Trust deliverables during installation (such as patching schedules) realistic; Are the penalties/impact of the Trust failing to meet a responsibility appropriate and proportionate.
		4.200/	
Section 4.8: Design and Construction Project	t Management	1.30%	
Present a detailed design programme for post- financial close. The programme must show the periods allowed for completion 1:50 plans, and must be supported by narrative describing any assumptions upon which the programme is	Microsoft Project Programme plus A4 report	0.39%	How well have the Bidder's supply chain worked together as a team to deliver an integrated programme that fits with the realistic approvals process
the construction phase of the project, detailing in		0.33%	How well does the response demonstrate compliance with the Project Agreement and all key milestones identified in the Project Schedules How well do the proposals demonstrate successful project management in a partnering environment How well do the proposals support BIM
	A specialist design detailing the number of and location of Wireless Access Points required to provide universal wireless coverage across the PFI site. Associated wireless network coverage maps to show that coverage will be adequate to deliver connectivity outlined in the IM&T specification. Outlines of assumptions used in design and mapping activities. Logical wireless network design showing how virtual wireless networks provided to deliver secure segmented wireless services Trust / Project Co Responsibilities Bidders are required to provide full and specific details of the responsibilities relating to the installation, support and operation of the network that they expect to remain with the Trust split into two sections covering before and after Practical Completion. Section 4.8: Design and Construction Project Completion. Section 4.8: Design and Construction Project Present a detailed design programme for post-financial close. The programme must show the periods allowed for completion 1:50 plans, and must be supported by narrative describing any assumptions upon which the programme is dependent plus the proposed process for delivering clinical sign-off. Describe the project management proposals during the construction phase of the project, detailing in particular how it is proposed to partner effectively with the Trust. Evidence of successful implementation of the proposed arrangements, for each stage, on previous projects should be	A specialist design detailing the number of and location of Wireless Access Points required to provide universal wireless coverage across the PFI site. Associated wireless network coverage maps to show that coverage will be adequate to deliver connectivity outlined in the IM&T specification. Outlines of assumptions used in design and mapping activities. Logical wireless network design showing how virtual wireless networks provided to deliver seegmented wireless services Trust / Project Co Responsibilities Bidders are required to provide full and specific details of the responsibilities relating to the installation, support and operation of the network that they expect to remain with the Trust split into two sections covering before and after Practical Completion. Section 4.8: Design and Construction Project Management Present a detailed design programme for post-financial close. The programme must show the periods allowed for completion 1:50 plans, and must be supported by narrative describing any assumptions upon which the programme is dependent plus the proposed process for delivering clinical sign-off. Describe the project management proposals during the construction phase of the project, detailing in particular how it is proposed to partner effectively with the Trust. Evidence of successful implementation of the proposed arrangements, for each stage, on previous projects should be	A specialist design detailing the number of and location of Wireless Access Points required to provide universal wireless coverage across the PFI site. Associated wireless network coverage maps to show that coverage will be adequate to deliver connectivity outlined in the IM&T specification. Outlines of assumptions used in design and mapping activities. Logical wireless network design showing how virtual wireless networks provided to deliver segmented wireless services Trust / Project Co Responsibilities Bidders are required to provide full and specific details of the responsibilities relating to the installation, support and operation of the network that they expect to remain with the Trust split into two sections covering before and after Practical Completion. Section 4.8: Design and Construction Project Management Present a detailed design programme for post-financial close. The programme must show the periods allowed for completion 1:50 plans, and must be supported by narrative describing any assumptions upon which the programme is dependent plus the proposed process for delivering clinical sign-off: Describe the project management proposals during the construction phase of the project, detailing in particular how it is proposed to partner effectively with the Trust. Evidence of successful implementation of the proposed arrangements, for leach stage, on previous projects should be

ET4.8.3	Describe the proposed quality management arrangements during each of the construction and operation phases of the project, including organisational charts and design and construction quality plans.	Written report (maximum 3 sides A4)	0.20%	How well do the proposals demonstrate the effectiveness of the supply chain in delivering an integrated quality management system
ET4.8.4	Define construction methodologies and programmes including arrangements for and timing of site remediation, pre-completion commissioning and post-completion commissioning.	Written report (maximum 3 sides A4)	0.10%	How well does the response demonstrate compliance with the requirements of Schedules 9 and 12
ET4.8.5	Provide details of construction health and safety plans, plus proposals to comply with CDM regulations when the Planning Supervisor duty is transferred at Financial Close.	Written report (maximum 3 sides A4)	0.10%	How well do the proposals comply with the CDM regulations
ET4.8.6	Provide details of specific proposals for sourcing materials and components sustainably. This should include evidence of how the bidder intends to ensure this is achieved in practice, giving examples of likely materials and components. Names of specific suppliers to be used should be provided, together with a level (percentage of total materials and component cost) to which the bidder will commit to procuring sustainably, to support BREEAM Healthcare		0.10%	To what extent do the proposals contribute to the BREEAM assessment
ET4.8.7	Provide proposals for how the Trust will be supported in its need to access agreed areas within the hospital in advance of final completion in order to minimise the time required to open clinical services there. Identify specific risks associated with this process and state how you will manage/mitigate them (including any specific actions required of the Trust).		0.08%	Extent to which the proposals can demonstrate successful project management in a partnering environment
			1.30%	
Total E&T			13.00%	

Competitive Dialogue (CD) Finance Deliverables

Bidder outputs for all stages to conform to the following formats: Text in Microsoft Word. Spreadsheets in Microsoft Excel. Programmes in Microsoft Project Version 2010.

	Deliverables	Format	Weighting	Evaluation Criteria
			nterim Submissions	
	FO 4 Appropriate to Francisco	Financi	al Deliverables	
F3.1.1	F3.1 Approach to Funding The term sheet that Bidders should use in the financial model will be A4 Te	ovt		Not Scored
F3.1.1	provided two weeks prior to submission. Bidders should provide their view on the deliverability of the Trust issued term sheet in the current funding market, the anticipated ability of potential funders to meet these terms and obtain credit committee approval, describe any associated risks. Bidders, where necessary using advice from its advisors, are to confirm that the content of their bid submission and their acceptance of Trust positions are within current market norms and are positions upon which they have signed contracts and obtained funding in the past.	exi		Not scored
F3.1.2	Provide an outline of the anticipated risk capital structure together with A4 Te any other potential structures considered and the benefits they would provide Provide a letter of support from Sponsors demonstrating commitment to provide the investment required by the anticipated risk capital structure Bidders should include confirmation that their proposals would be viable with / without EIB involvement. Any cost associated with the inclusion of EIB funding should be separately identified in the bid submission in case this funding source is not available.	ext		Completeness. Deliverability of funding proposals in the market Deliverability and acceptability to the NHS
Total			2%	
i otai	F3.2 Payment Mechanism			
F3.2.1	Bidders should review and include comments on Schedule 18 (Payment Mechanism) including calibration and tolerances. No changes will be accepted to the Standard Form document. Any suggested changes to Trust specific elements will require a full explanation for the request and details of the savings this change will make to the cost inputs. Specifically, Bidders should comment on their acceptance of: Functional Area and Unit Weightings Room allocations within Functional Units Weights applied to Functional Units Ratchet Appendix addressing Accessibility Condition Energy Bedding in and no wipe clean of SFP on provider replacement Service Failure Point thresholds (as set out in Clauses 29 and 44 of the Project Agreement).	ext	3%	Compliance with Trust proposals. Acceptability of changes
Total			3%	

	Deliverables	Format	Weighting	Evaluation Criteria
	F3.3 Financial Assumptions			
F3.3.1	Highlight any potential issues or advantages of the Bidder's design and	A4 text		Included in affordability assessment – not scored.
. 6.6	commercial solution which they consider will impact upon the overall			, , , , , , , , , , , , , , , , , , , ,
	affordability envelope of the Project including (for example) lower soft FM			
	costs, reduced enabling works expenditure, lower energy costs,			
	alternative lifecycle v initial capital outlay judgements or other impacts on			
	Trust costs.			
F3.3.2	Submit a full financial model based on the term sheets and the	Excel Model (see 4.3.2)		Included in affordability assessment – not scored.
	assumptions to be issued by the Trust.			· ·
	Bidders should assume a public sector capital contribution amounting to			
	£100m less the cost of the Trust's remediation work, which is currently			
	included within the capital cost assumptions. The receipt of this should			
	be assumed in accordance with clauses 35.11 -35.13 (capital payments)			
	of the Project Agreement.			
	Bidders should assume in the financial model that the planned equity			
	return for all parties is the same. Bidders should assume they will			
	provide 55% of the equity when pricing the planned equity return. The			
	model should allow for 3 equity providers with possibly differing return			
	requirements. Actual returns will be incorporated post the equity funding			
	competition.			
	Bidders should confirm how their equity return would reduce (if			
	appropriate) should the equity funding competition conclude that there			
	would not be external equity providers.			
	Bidders should submit a base financial model with partial indexation			
	based on a natural hedge position.			
	Bidders should indicate the proposed proportion of the Unitary Payment			
	to be indexed at consumer price index (RPI), assumed to be 2.5%.			
	Bidders should provide a sheet in the financial model linking total costs			
	in the model allocated into indexed and non-indexed elements to justify			
	the proportion indexed.			
	As a means of assessing the level of indexation, bidders should ensure	A4 text		
	that the running the model with RPI at 4% and at 1% does not breach the			
	minimum ASDCR limit of 1.05 in any period. Please provide the			
	outcome of the following sensitivities:			
	RPI at 0%			
	• RPI at 5%.			
	The Trust requires that you provide the effect on the DSCR minimum			
	and average and all periods in which the outcome breaches a minimum			
	of 1.05.			
	Bidders should be able to populate a bank and bond (public or private			
	placement) solution as required. At this stage, bidders should assume a			
	bank financed solution for the financial model.			
	There is no requirement to submit a hard copy of the financial model.			
	The financial model should incorporate as a minimum:	Excel Model		
	·	LACEI WOULEI		
	Funding plan;			
	Projected profit and loss account;			
	Projected balance sheet;			
	Projected cashflow statement;			
	Lifecycle and other reserve accounts as required;			
	Cash waterfall;			
	Taxation schedule;			
	Depreciation schedule; and			
	Cover ratios and IRR calculations.			

	Deliverables	Format	Weighting	Evaluation Criteria
	Construction start should be assumed as Financial Close. Key dates such as completion of phases, commissioning and final repayment of finance should be clearly identified with the proportion of UP payable at each phase identified. Outputs of the model should include as a minimum: Nominal and real IRR, both pre and post tax for the: Project; and Risk capital (both blended and individually for all forms of risk capital) The debt cover ratios as on term sheet; Timing and phasing of risk capital injections and treatment in return calculations; NPV of real Unitary Payments assuming 100% performance and an NPV base date as dictated in schedule 18 as the Base Date and using a real discount rate of 3.5% and inflation of 2.5%; A breakdown of all bid, development and SPV running costs as set out in the Proforma; The average loan life of each debt instrument The model should clearly specify the required Unitary Payment at the base date and in the first financial year. Bidders must confirm that their proposed Unitary Charge has been calculated on the basis of guaranteed performance and not expected or aspirational performance. The price base date set out in Schedule 18 as the Base Date should be assumed for the Unitary Payment and all facilities management,	Excel Model		
F3.3.4	· · · · · · · · · · · · · · · · · · ·	Excel model		Included in affordability assessment – not scored.
F3.3.5	The bidder must run the sensitivities described in the Proforma (F7) and confirm requirements detailed therein are met. Bidders should provide the output summary sheet for the sensitivity analyses as contained in Proforma F7. Sponsors' financial advisors shall confirm that there are no other sensitivities they would have expected to perform to satisfy a funder (e.g. that they have been required to run recently) nor do they anticipate any further sensitivities to be required by participants in the equity funding competition. Bidders should include a confirmation that the financial model submitted in accordance with F3.3.2 has factored in the impacts of running these sensitivities and that the financial model can meet or exceed the stress tests or breakeven thresholds requirements in the term sheet	A4 Text		Included in affordability assessment – not scored.

	Deliverables	Format	Weighting	Evaluation Criteria
F3.3.6	Bidders should provide a statement confirming acceptance that in the event of more than 6 months delay to financial close, the Preferred Bidder's PFI financial model will be re-run to establish the appropriate payments taking into account the agreed adjustments(see below). If such an adjustment and re-run is appropriate then it shall be based upon the latest available publication of the BCIS public sector and RPI indices at the date of the re-run which shall be deemed to be final for the purpose of this exercise alone. The appointment of a Preferred Bidder shall be dependent, among other things, on a written agreement that all prices must remain fixed up to 6 months beyond the anticipated financial close date. In the event that actual financial close occurs 6 months after the anticipated financial close date and this has not been caused or contributed to by the Preferred Bidder, then the deliverable will be adjusted as follows: Construction: BCIS building cost index - The estimated capital costs included in the Preferred Bidder's PFI financial model will be adjusted by application of the movement in the published BCIS indices between the expected date of financial close in the Final Bid on which the Bidder was selected and the actual date of financial close but only insofar as the delay to financial close has a material impact on the anticipated timing of incurrence of the capital costs. Hard FM costs: RPI – Hard FM costs included in the Selected Bidder's PFI financial model will be adjusted by application of the movement in the published RPI between the expected date of financial close in the Final Bid on which the Bidder was selected and the actual date of financial close but only if the delay to financial close has a material impact on the anticipated timing of incurrence of the Hard FM Costs Such adjustment will only begin from the date occurring 6 months after the end of the planned month of financial close and shall represent the sole and exhaustive remedy for a delay to financial close and that the		Weighting	Evaluation Criteria Compliance
	Preferred Bidder's Bid shall otherwise remain valid in all other material respects.		Affected shifts	
	F3.4 Funding Competition		Affordability	
F3.4.1		A4 Text		Compliance
F3.4.2	The SPV and its financial and legal advisors should confirm acceptance of the Roles of Participants as set out in Volume 4 of this ITPD.	A4 Text		Compliance
F3.4.3	The SPV and its legal advisors should confirm acceptance of the approach, timetable and responsibilities with respect to the equity funding competitiong and the potential involvement of IUK EU as set out in Volume 4 of this ITPD. Bidders shall submit Appendix 8 as requested.	A4 Text		Compliance
	IF2 F. Unitery Doymont Dhooing		Compliance	
	F3.5 Unitary Payment Phasing			

	Deliverables	Format	Weighting	Evaluation Criteria
F3.5.1	The Trust's PSC assumes a single phase handover and the Trust considers it is extremely unlikely that any benefits provided by a multiphase solution would outweigh the disadvantages of maintaining three hospitals for any significant period. If Bidders wish to adopt an alternative approach they should justify the timing and amount of such phasing with reference to the actual costs incurred for each phase in a manner that can be easily reconciled to the financial model.	A4 text and inclusion in the financial model		Included in affordability assessment – not scored.
			Affordability	
	F3.6 Income Generation			
F3.6.1	Bidders should note the restrictions on income generation opportunities advised in ITPD3 Proposals for the generation of any other third party income, should show likely turnover, profit sharing arrangements and a guaranteed level of income for the proposals. Reference should be made to the service provider, their experience and previous proven solutions. Bidders should demonstrate the deliverability of their proposals and that they are stand alone with no impact on the overall programme to Financial Close or where there is an impact, this should be highlighted. Bidders are required to confirm that all costs in delivering the proposals have been accounted for in the financial model and set out the amount of net income reducing the unitary payment which they are prepared to underwrite and the term for which this applies. Only proposals with this degree of certainty should be in the base case.	model		Included in affordability assessment – not scored.
			Affordability	
Total			5%	

	Deliverables	Format	Weighting	Evaluation Criteria
		_	l: Draft Final Bids al Deliverables	
	F4.1 Approach to Funding			
F4.1.1	The term sheet that Bidders should use in the financial model will be provided two weeks prior to submission in the format contained in Proforma F1. Bidders should provide their view on the deliverability of the Trust issued term sheet in the current funding market, the anticipated ability of potential funders to meet these terms and obtain credit committee approval, describe any associated risks. Bidders, where necessary using advice from its advisors, are to confirm that the content of their bid submission and their acceptance of Trust positions are within current market norms and are positions upon which they have signed contracts and obtained funding in the past.			Not Scored
F4.1.2	Provide a comprehensive outline of the proposed risk capital (i.e. al finance ranking below senior debt) structure for the Project and ar explanation of why it is considered suitable. Responses should include a risk capital term sheet covering all proposed forms of risk capital and at a minimum should contain: Real and / or nominal return requirements (blended and per tranche, as applicable); Any minimum and / or maximum investment requirements; Any covenants on the debt; Letters of support from Sponsors; Identity of the guarantor for any deferred risk capital subscription; Dividend and voting rights attached to each subscription. Confirmation of willingness to obtain letters of credit (or other acceptable forms of credit support), if required by funders or rating agencies. The level of support proposed by the Bidder for this Project must, based on the Bidder's prior experience, be at a level sufficient to satisfy funder requirements and investment grade rating (BBB or BBB+).		1%	Completeness. Deliverability of funding proposals in the market Deliverability and acceptability to the NHS
F4.1.3	If only a bank model is requested, then the written submission should detail the cost associated with achieving BBB and separately to achieve BBB+. If a bond model is requested then the costs of achieving BBB should be in the model and an additional cost to achieve BBB+ should be detailed in the submission). Bidders should confirm that they are willing to fund a 12% equity ratio, confirm the limit on how much equity they would support (beyond the 12%) and confirm that any alteration to the equity amount for a bond financing solution would use the same approach & rates as in the base case bond model. If the bidder would seek a lower return based on a higher equity stake then the bidder should confirm the blended equity return requirement and the basis (e.g. post tax nominal).	A4 Text		Included in affordability assessment – not scored.

Deliverables	Format	Weighting	Evaluation Criteria
Bidders should quantify, separately and in detail, the likely costs associated with placing a bond (for example difference in documentation costs from a bank loan if any, costs of obtaining a credit rating (unless agreed to be obtained in advance) and the on-going cost of maintaining a credit rating). No additional costs payable to the bidder or its advisors etc. will be considered if not identified herein.			
Bidders are required to confirm that should key ratios be altered by a bond financing then they will optimise the financial model to meet these requirements in a similar manner to the base case model and state the relevant bond financing requirements used for the optimisation of the financial model. Bidders should confirm the cost, and acceptance, of the following requirements and should include their view on the deliverability of these requirements in the current funding market and any associated risks. In particular, bidders should confirm that in their experience the following would obtain a BBB- rating/private placement requirements. Bidders are asked to detail any amendments which may be required, and the associated costs, along with willingness to meet these requirements should the Trust wish to achieve a BBB rating.			
Construction period Parent company guarantee(s) of subcontracting entities Liability cap of 50% of construction contract price. Confirmation & cost of moving to 60% if required Liquidated damages (subject to technical advice) based on the unitary charge for the period until the Project Agreement longstop date but also to include additional costs of construction, for example, finance costs accruing and technical advisor's costs. Performance bond of 10% of construction cost. Confirmation & cost of moving to 15% if required Retention bond of 3% from the construction contractor			
Operating period Parent company guarantees of operating subcontractor entities (where applicable) Liability caps annually 100% of annual payment and, in the case of termination, 200% of annual payment from the Trust Liability cap of 40% of the facilities management subcontractor contract price Confirmation of the Sponsors' acceptance that any additional bonding required post submission of final bids shall be for the consortium's			
A bond model may be required at the next stage and will include a requirement for sensitivities to be undertaken			

	Deliverables	Format	Weighting	Evaluation Criteria
	Bidders are required to confirm that should key ratios be altered by a bond financing then they will optimise the financial model to meet these requirements in a similar manner to the base case model and state the relevant bond financing requirements used for the optimisation of the financial model. Bidders should confirm the cost, and acceptance, of the following requirements and should include their view on the deliverability of these requirements in the current funding market and any associated risks. In particular, bidders should confirm that in their experience the following would obtain a BBB- rating/private placement requirements. Bidders are asked to detail any amendments which may be required, and the associated costs, along with willingness to meet these requirements should the Trust wish to achieve a BBB rating. Construction period Parent company guarantee(s) of subcontracting entities Liability cap of 50% of construction contract price. Confirmation & cost of moving to 60% if required Liquidated damages (subject to technical advice) based on the unitary charge for the period until the Project Agreement longstop date but also to include additional costs of construction, for example, finance costs accruing and technical advisor's costs.	Format	Weighting	Evaluation Criteria
	Performance bond of 10% of construction cost. Confirmation & cost of moving to 15% if required Retention bond of 3% from the construction contractor			
F4.1.4	EIB Should EIB express interest in this scheme, the bidder should submit a separate model (or a scenario in the base model) which allows for EIB funding. Again, terms will be issued to the bidders two weeks before submission.	Excel model		
F4.1.5	Sub-contracts: Set out the following for each funding route proposed by the Bidder, including detailed sub-contract heads of terms for key subcontracts (inter alia construction and FM). These heads of terms should include at least the following: Identity of parent company guarantor(s) and letters of support; Detailed long stop requirements; Indexation; Proposed liability caps, termination caps, surety bonds and other contractor support that Bidders believe will be acceptable to potential funders (inc. rating agencies); and Any third party support (i.e. credit support) that Bidders believe will be required by rating agencies / funders). To the extent the key subcontracts escalate at values other than RPI, Bidders shall clearly identify such escalations and provide a rationale.	A4 Text		
F4.1.6				

	Deliverables	Format	Weighting	Evaluation Criteria
	How the proposed level relates to the current financial strength of the bidder entity guaranteeing the Construction contract; Describe the scenario(s) you have run to support the quantification, with reference to key assumptions / specific variables such as delay in replacing the contractor, increased construction costs as a result of the replacement, any deferred risk capital injections are brought forward to the date of the insolvency, delay in draw of bond and any other variables you consider relevant to fully support the proposed level of surety bonding; Provide the results and details of any further scenarios you believe are required to fully support the proposed level of surety bonding; and Confirmation of the Sponsors' acceptance that any additional bonding required post submission of final bids shall be for the consortiums account alone.			
	Hedging Strategy: The information regarding interest rates and hedging strategy should specify: The manner in which the Bidder will address the risk of future movements in interest rates, including a full description of its hedging strategy, details of any financial instruments which will be used to provide protection against interest rate movements, and the estimated cost of such protection. Bidders should also explain how this will minimise the costs to the Trust; Acceptance of the principle of benchmarking hedging instruments at or prior to Financial Close. Bidders should note that the Trust, given that it is taking the underlying interest rate risk, reserves the right to compare, and if necessary, compete hedging instruments at or prior to Financial Close. Bidders must confirm that they will provide the Trust with sufficient information to allow the Trust to benchmark these hedging instruments at or prior to Financial Close.			
Total			1%	
	F4.2 Payment Mechanism	J. C. Cook A.A.	201	Compliance with Tweet proposels
	Bidders should review and include comments on Schedule 18 (Payment Mechanism) including calibration and tolerances. No changes will be accepted to the Standard Form document. Any suggested changes to Trust specific elements will require a full explanation for the request and details of the savings this change will make to the cost inputs. Bidders are expected to address: practicality; value for money impact; and ability to obtain funding. Specifically, Bidders should comment on their acceptance of: Functional Area and Unit Weightings Room allocations within Functional Units Weighting applied to Functional Units Ratchet Appendix addressing Accessibility Condition Service Failure Point thresholds (as set out in Clauses 29 and 44 of the Project Agreement). Bidders should confirm their acceptance on the Payment Mechanism in its entirety and without amendment save for those issues expressly set out in the Agreed List.			Compliance with Trust proposals. Acceptability of changes

	Deliverables	Format	Weighting	Evaluation Criteria
	F4.3 Financial Assumptions			
F4.3.1	F4.3 Financial Assumptions Highlight any potential issues or advantages of the Bidder's design and commercial solution which they consider will impact upon the overall affordability envelope of the Project including (for example) lower soft FM costs reduced enabling works expenditure, lower energy costs, alternative lifecycle v initial capital outlay judgements or other impact on Trust costs. Bidders should include detailed assumptions and calculations of the projected savings in their written submission. Submit a full financial model based on the term sheets and the assumptions to be issued by the Trust. Bidders should assume a public sector capital contribution amounting to £100m less the cost of the Trust's remediation work, which is currently included within the capital cost assumptions. The receipt of this should be assumed in accordance with clauses 35.11 -35.13 (capital payments) of the Project Agreement.	A4 text and MS Excel to highlight calculations Excel	Weighting	Included in affordability assessment – not scored. Included in affordability assessment – not scored.
	Bidders should assume in the financial model that the planned equity return for all parties is the same. Bidders should assume they will provide 55% of the equity when pricing the planned equity return. The model should allow for 3 equity providers with possibly differing return requirements. Actual returns will be incorporated post the equity funding competition. Bidders should confirm how their equity return would reduce (if appropriate) should the equity funding competition conclude that there would not be external equity providers. Bidders should submit a base financial model with partial indexation based on a natural hedge position. As a means of assessing the level of indexation, bidders should ensure that the running the model with RPI at 4% and at 1% does not breach the minimum ASDCR limit of 1.05 in any period. Please provide the outcome of the following sensitivities:			
	RPI at 5%. The Trust requires that you provide the effect on the DSCR minimum and average and all periods in which the outcome breaches a minimum of 1.05. The Trust will issue details of the proposed funding route on an agreed date prior to submission. Bidders should be able to populate a bank and bond (public and private) solution as required. Bidders should indicate the proposed proportion of the Unitary Payment to be indexed at RPI and justify this with reference to the underlying Project costs. There is no requirement to submit a hard copy of the financial model.	the password must be disclosed); Contain no protected macros or hidden sheets; and All functions, formulae and linkages should be operational.		

	Deliverables	Format	Weighting	Evaluation Criteria
	Construction start should be assumed as Financial Close. Key dates such as completions of phases, commissioning and final repayment of finance should be clearly identified with the proportion of UP payable at each phase identified Outputs of the model should include as a minimum: Nominal and real IRR, both pre and post tax for the: Project; and Risk capital (both blended and individually for all forms of risk capital) The debt cover ratios set out in Proforma F1; Timing and phasing of risk capital injections and treatment in return calculations; NPV of real Unitary Payments assuming 100% performance and an NPV base date as set out in Schedule 18 as the Base Date and a discount rate of 3.5% and RPI assumption of 2.5%; A breakdown of all bid, development and SPV running costs as set out in Proforma F2; The average loan life of each debt instrument; and The impact on the Unitary Charge of the interest rate buffer (50bps). The model should clearly specify the required Unitary Payment at the base date and in the first financial year. Bidders must confirm that their proposed Unitary Charge has been calculated on the basis of guaranteed performance and not expected or aspirational performance. The price base date set out in Schedule 18 detailed as the Base Date should be assumed for the Unitary Payment and all facilities management, lifecycle, insurance and SPV costs.			
F4.3.3	Bidders must provide a full data book and user guide to the financial model. Such user guide shall include, at a minimum, the following: The key values input into the financial model including total capital cost, equipment cost, FM, lifecycle and SPV costs and cross-references between these inputs and the related source in the bid text; Working capital requirements; An explanation of how the optimisation has been undertaken and the key constraints applicable; A brief summary of the purpose and operation of all macros; A breakdown of development costs; and Confirmation that the cover ratio definitions correspond to those at Proforma F1	A4 Text		Included in affordability assessment – not scored.

	Deliverables	Format	Weighting	Evaluation Criteria
F4.3.4	exceed thresholds set out in the terms sheet	A4 Text A4 Text		Included in affordability assessment – not scored.
F4.3.5	Bidders must complete the Financial Proformas provided	Excel model		Included in affordability assessment – not scored.

	Deliverables	Format	Weighting	Evaluation Criteria
F4.3.6		A4 Text	Weighting	Included in affordability assessment – not scored.
	Preferred Bidder's Bid shall otherwise remain valid in all other material respects			
			Affordability	

	Deliverables	Format	Weighting	Evaluation Criteria
	F4.4 Funding Competition		,	
	The SPV and its financial and legal advisors should re-confirm acceptance of the Funding Competition Protocol set out in Volume 4 of this ITPD. This protocol may have been updated by the Trust since the Interim deliverable stage.			Compliance
	The SPV and its financial and legal advisors should re-confirm acceptance of the Roles of Participants as set out in Volume 4 of this ITPD.	A4 Text		Compliance
F4.4.3	The SPV and its legal advisors should re-confirm acceptance of the approach, timetable and responsibilities with respect to the equity funding competitiong and the potential involvement of IUK EU as set out in Volume 4 of this ITPD. Bidders shall submit Appendix 8 as requested.	A4 Text		Compliance
			Compliance	
	F4.5 Unitary Payment Phasing			
F4.5.1	The Trust's PSC assumes a single phase handover and the Trust considers it is extremely unlikely that any benefits provided by a multiphase solution would outweigh the disadvantages of maintaining three hospitals for any significant period. If Bidders wish to adopt an alternative approach they should justify the timing and amount of such phasing with reference to the actual costs incurred for each phase in a manner that can be easily reconciled to the financial model.	A4 Text and inclusion in the financial model		Included in affordability assessment – not scored.
			Affordability	
	F4.6 Income Generation			
	Bidders should note the restrictions on income generation opportunities advised in ITPD3 Proposals for the generation of any other third party income, should show likely turnover, profit sharing arrangements and a guaranteed level of income for the proposals. Reference should be made to the service provider, their experience and previous proven solutions. Bidders should demonstrate the deliverability of their proposals and that they are stand alone with no impact on the overall programme to Financial Close or where there is an impact, this should be highlighted. Bidders are required to confirm that all costs in delivering the proposals have been accounted for in the financial model and set out the amount of net income reducing the unitary payment which they are prepared to underwrite and the term for which this applies. Only proposals with this degree of certainty should be in the base case.	A4 Text and inclusion in the financial model		Included in affordability assessment – not scored.
Total			Affordability	

	Deliverables	Format	Weighting	Evaluation Criteria
	4.7 Tax and Accounting			
F4.7.1 Pr	rovide a detailed description of the tax and accounting assumptions	A4 Text		Not Scored
ur the Fi Bi tin be Th	confirm that the tax and accounting treatment within the model is inderwritten by the Bidder and that any changes to assumptions (with ne exception of changes in the rate of Corporation Tax made up to inancial Close) will not increase the Unitary Payment to the Trust. idders should assume the Corporation Tax rate/(s) as enacted at the me. Changes in the rate of Corporation Tax up to Financial Close will e a Trust risk similar to interest rate risk. The financial model must be in accordance with IFRS. Trovide a statement from the Consortium's Financial Advisors or external	A4 Text		Not Scored Not Scored
tre wi pr Cle	uditors and tax advisors that in their opinion the proposed accounting eatment is in line with IFRS and that the tax treatment is in accordance with current tax legislation. The response should also include the rogramme for obtaining, if deemed appropriate, any relevant prelearance from HM Revenue & Customs prior to Financial Close.			
fin er (F ac thi let	idders are expected to have an independent (A Stage 1 i.e. preliminary) nancial model audit report. Bidders are also required to confirm that all rrors and issues discovered in the model post submission of Stage 2 Final) bids (i.e. as a result of the final model audit) are solely for the occur of the consortium. The extent of the model audit undertaken at his stage is therefore left to the bidders' discretion. The model audit etter should have a duty of care to the Trust, the equity provider via competition and the IUK EU.	A4 Text		Not Scored
			Affordability	
Total			3%	

	Deliverables	Format	Weighting	Evaluation Criteria	
Ref No.	Final Tender Information	Format	Weighting	Evaluation Criteria	
	Final Tender				
	Updated submissions to be as for Stage 4 but supplemented with clarifications and fine-tuning				
			Heading		

Competitive Dialogue (CD) FM Bidder Deliverables

Bidder outputs for all stages to conform to the following formats: Text in Microsoft Word.

Spreadsheets in Microsoft Excel.

Programmes in Microsoft Project Version 2010.

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
		CD Stage 3: Forma	Il Bidders Submission – FM Delivera	bles
	The following outputs are sought from the bidders to assist evaluation	on:		
			Facilities Management	
			Approach to Management of Service ant please supply details by service.	es
FM3.1.1	For each contractor involved in the provision of FM services provide a description of the companies vision , values , ethics , culture and management style	A4 sized report. Max 2 pages per contractor.	0.23%	Clear vision and robust ethical statement
FM3.1.2	Identify any interface relationships with the soft FM services and describe how these are to be managed	A4 sized report. Max 2 pages per service.	0.23%	Demonstrates clear understanding of issues and has robust management plan in place
FM3.1.3	Indicative management structure for each service to be provided: Include lines of communication and interfaces both internally and between Project Co and the Trust	A4 sized report. Max 2 pages per service.	0.09%	Clear and comprehensive structure
FM3.1.4	Outline description of performance risk management arrangements.	A4 sized report. Max 5 pages.	0.18%	Clear and concise strategy with sufficient detail to demonstrate understanding of the brief
FM3.1.5	Outline description of quality management arrangements for the services.	A4 sized report. Max 5 pages.	0.18%	Clear and concise strategy with sufficient detail to demonstrate understanding of the brief
FM3.1.6	Outline description of environmental management arrangements;	A4 sized report. Max 5 pages.	0.18%	Clear and concise strategy with sufficient detail to demonstrate understanding of the brief
FM3.1.7	Confirmation of acceptance of performance parameters and their relationship to payment mechanism stating any constraints or limitations Project Co may wish to apply	A4 sized report. Max 2 pages per service.	0.23%	Compliance and acceptable constraints
FM3.1.8	Description of approach to statutory and mandatory compliance , including NHS requirements and Trust policies (e.g. CQC registration ,Health & Safety; Standards for Better Health);	A4 sized report. Max 2 pages.	0.23%	Clear and concise description demonstrating knowledge of requirements
FM3.1.9	Provide outline proposals of how Bidders will manage change on this Project, with illustrative examples of Bidder's experience of managing change during transitional periods on relevant large nhs projects. Submissions should include examples of difficulties which may be encountered on the Project and examples of previously applied solutions particularly in respect of service continuity.		0.09%	Clear and concise strategy and examples provided should be relevant to this project.
FM3.1.10	Outline proposal of the proposed monitoring system, demonstrating the mechanics through which monitoring results will drive the performance and payment mechanism, and indicating representative frequencies and volume of monitoring. This should include how performance failures are identified and reported and how compliance with all statutory and mandatory obligations will be addressed, including the provision of activity data. Worked examples of monitoring and reporting systems that are likely to be used for the services provided.		0.18%	Robust monitoring proposals accompanied by worked examples applicable to this project.

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
			1.80%	
			oproach to Management of Staff ant please supply details by service	
FM3.2.1	Indicative workforce structure for each service to be provided including: Numbers, grades and disciplines of staff that will be providing each of the FM Services Hours of operation for each of the FM Services indicating period covered by on call service	A4 sized report. Max 10 pages.	0.72%	Completeness and appropriateness of structure and operational arrangements for each service. Structures correlate to complete staffing proformas.
FM3.2.2	Outline proposals for HR strategy and mobilisation plan for staff employment including recruitment and retention, incentivisation, pay structures, staff development, equality & diversity and training posts/social exclusion.	, , , ,	0.36%	Clear and concise strategy with sufficient detail to demonstrate understanding of the brief
FM3.2.3	Outline proposals for pension provision for new recruits and transferred staff.	A4 sized report. Max 2 pages.	0.18%	Clear and concise strategy with sufficient detail to demonstrate understanding of the brief
FM3.2.4	Outline description of staff, management and contractor selection, training and development arrangements;	A4 sized report. Max 5 pages.	0.36%	Clear and concise strategy with sufficient detail to demonstrate understanding of the brief
FM3.2.5	Description of approach to consulting with staff and their representatives (particularly trades unions);	A4 sized report. Max 2 pages.	0.18%	Clear and concise strategy with sufficient detail to demonstrate understanding of the brief
			2%	
			d Statements and Service Provision	
FM3.3.1	General Services: Provide an overview of the service you will provide which clearly demonstrates the relationship to the performance parameters included in schedule 14 services.	A4 report. Max 5 pages	0.90%	Covers scope, demonstrates understanding of brief and links to performance parameters

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
FM3.3.2	Estates: Provide an overview of the service you will provide which clearly demonstrates the relationship to the performance parameters included in schedule 14 services.	A4 report. Max 5 pages	0.90%	Covers scope, demonstrates understanding of brief and links to performance parameters
FM3.3.3	Grounds: Provide an overview of the service you will provide which clearly demonstrates the relationship to the performance parameters included in schedule 14 services.	A4 report. Max 5 pages	0.34%	Covers scope, demonstrates understanding of brief and links to performance parameters
FM3.3.4	Utilities: Provide an overview of the service you will provide which clearly demonstrates the relationship to the performance parameters included in schedule 14 services.	A4 report. Max 5 pages	0.68%	Covers scope, demonstrates understanding of brief and links to performance parameters
FM3.3.5	Pest Control: Provide an overview of the service you will provide which clearly demonstrates the relationship to the performance parameters included in schedule 14 services.	A4 report. Max 5 pages	0.34%	Covers scope, demonstrates understanding of brief and links to performance parameters
FM3.3.6	Helpdesk: Provide an overview of the service you will provide which clearly demonstrates the relationship to the performance parameters included in schedule 14 services. Confirm continuous Trust access to the information as described in ITPD2	A4 report. Max 5 pages		Covers scope, demonstrates understanding of brief and links to performance parameters Access to helpdesk information accepted
FM3.3.7	IM&T: Provide an overview of the service you will provide which clearly demonstrates the relationship to the performance parameters included in schedule 14 services.	A4 report. Max 5 pages	0.68%	Covers scope, demonstrates understanding of brief and links to performance parameters
			5%	
		Section FM3.4	: Facilities Management Service Costs	
FM3.4.1	Complete the service pro forma that identifies the pay and non pay cost elements for each of the schedule 14 (service level specification) services.	Spreadsheet Proforma reference FM 1		Correlates to work force plans, figures easily identifiable in financial model, comprehensive analysis of cost types.
FM3.4.2	Please supply a list of clarifications and assumptions relied on for producing the outline costs.	A4 text	0.45%	Comprehensive list.
			1%	
TOTAL EN			9.00%	
TOTAL FM	· · · · · · · · · · · · · · · · · · ·		3.00 /0	-

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation		
	CD Stage 4: FM Deliverables Competitive Dialogue The following outputs are requested from the Bidders to assist evaluation: Section FM 4.1: Approach to Management of Services Where relevant please supply details by service.					
FM4.1.1	For each contractor involved in the provision of FM services A4 sized report. Max 2 pages per contractor. provide a description of the companies vision , values , ethics, culture and management style. Describe the supply chain methodology and how subcontractors are approved.			Clear vision and robust ethical statement. Demonstrates commitment to good governance.		
FM4.1.2	Identify any interface relationships with the soft FM services and describe how these are to be managed Provide FM operational policy statements	A4 sized report. Max 2 pages per service.	0.13%	Demonstrates clear understanding of issues and has robust management plan in place		
FM4.1.3	Provide a detailed management structure for each service to be provided: Include lines of communication and interfaces both internally and between Project Co and the Trust Provide detailed proposals for establishing and maintaining a 24 hour, 7 day single point of contact in respect of service requests, service provision and the monitoring of service standards. Identify the system for making and managing complaints		0.05%	Clear and comprehensive structure		
FM4.1.4	Detailed description of performance risk management arrangements including: Identification of risk pricing principles associated with achieving performance targets Provision of detailed risk management mitigation procedures.		0.08%	Clear and concise strategy with clear links to schedule 18		
FM4.1.5	Detailed description of quality management arrangements as follows: Details of how compliance with response and rectification times is achieved and recorded Details of how compliance is to be achieved with the performance standards for the relevant services Details of systems to demonstrate quality standards achieved in compliance with guidance and legislation for specific services Details of how sub-contractors are to be monitored to ensure contractual standards are met.		0.08%	Clear and concise arrangements which demonstrate a commitment to quality management		

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
FM4.1.6	Detailed description of environmental management arrangements including: Environmental Policy (include Waste Management) Environmental Strategy	A4 sized report. Max 2 pages plus appendices	0.08%	Clear and concise arrangements
	Mandatory Compliance Provide a statement demonstrating an understanding of legislation and mandatory requirements relevant to each service (including CQC registration requirements, Health and Safety and Trust policies) Provide a statement of compliance in respect of all Trust, mandatory and legislative requirements. Indicate the effect on service delivery and provide practical evidence of how each service provider will comply. Identify on a service basis how changes to mandatory and legislative requirements, will be initially identified and then implemented Provide details of proposed approach to the management and control of all mandatory compliance issues.			Comprehensive and clear document demonstrating an understanding of the requirements and sound systems to ensure compliance Clear evidence of a proposed partnership approach in respect of all registration and statutory compliance issues
FM4.1.9	Change Management Provide detailed proposals of how Bidders will manage change during the transition to the new hospital.	A4 sized report. Max 2 pages.	0.05%	Clear and concise strategy which demonstrates links to schedule 12 commissioning plans.
	Monitoring System Provide a clear and detailed explanation of the proposed monitoring system, demonstrating the mechanics through which monitoring results will drive the performance and payment mechanism, and indicating representative frequencies and volume of monitoring. This should include how performance failures are identified and reported and how compliance with all statutory and mandatory obligations will be addressed, including the provision of activity data. Give details of proposed IT systems and applications. Scheme specific worked examples of monitoring and reporting systems for each service to demonstrate the integrity of the system.		0.08%	Clear and concise proposal demonstrating adequate systems for identifying failures. Relevant worked examples.
	Governance and Risk Provide detailed proposals, including timescales, for the achievement of formal registration/accreditation of the quality systems, to ISO or equivalent levels, that will be adopted for providing the services. Provide details of approach to supporting the Trust in its obligation to manage risk		0.13%	Adequate proposals Clear and concise document demonstrating understanding of Trusts risk management policies and interaction with Project Cos Risk Management policies
FM4.1.12	Give details of proposed emergency procedures and contingency planning to cover all services contained in Schedule 14, service	A4 sized report. Max 10 pages.	0.08%	Clear and concise strategy
			1.00%	

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
			oach to Management of Staff se supply details by service	
FM4.2.1	Workforce structure for each service to be provided including: Numbers and grades of staff that will be providing each of the FM Services Roles and responsibilities of workforce Hours of operation for each of the FM Services including remuneration bands Details of sub-contracted services and how these will be managed. Provide comprehensive job descriptions and person specifications for all positions for this scheme including Details of cross matching of skills with transferring staff.	A4 sized report. Max 10 pages plus appendices	0.23%	Completeness and appropriateness of structure and operational arrangements for each service Correlation of structures to staffing proformas
FM4.2.2	Identification of skills shortages within the transferring staff. HR strategy for employment within the overall context of the Project timetable including recruitment and retention, incentivisation, pay structures, staff development, equality & diversity and training posts /social exclusion.		0.12%	Clear and concise strategy linked to project timetable.
FM4.2.3	Detailed proposals for pension provision for new recruits and transferred staff including a written undertaking in relation to the pension benefits to be provided.		0.06%	Clear and concise strategy and compliance with Trust requirements and relevant legislation
FM4.2.4	Detailed proposals for the Bidder's training and development strategy for managers, staff and contractors. Show how the strategy results in continuous service improvement. Include proposals for access required to trust staff prior to transfer to Project Co. Include a detailed plan of when access is required and for how long.	appendices	0.12%	Clear and concise strategy demonstrating a commitment to continuous service improvement Acceptable proposal for access
FM4.2.5	Full details of procedures for consulting with staff and their representatives (particularly trades unions) in relation to this project.	A4 sized report. Max 2 pages.	0.06%	Clear and concise strategy
FM4.2.6	Details of pay strategies and terms of employment covering Transferred staff New starters Include approach to principles of good employment practice	A4 text . Max 2 pages plus appendices	0.12%	Comprehensive description of all aspects of pay and employment strategy.
FM4.2.7	Detailed proposals of the human resources support which will be made available. Personal profiles of relevant staff should be included.	A4 text. Max 2 pages plus appendices	0.06%	Clear and concise strategy
FM4.2.8	Confirmation of acceptance of all the Trust's HR policies and procedures relevant to service delivery, particularly those relating to the screening of staff (including the requirement to commission CRB or other checks on staff operating in sensitive areas) and their proposals in respect of health screening and the immunisation of staff at risk.		0.23%	Compliance with trusts requirements
			1.00%	

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
		FM4.3 : Method Staten	nents and Service Provision	
FM4.3.1	General Services:	Statement/ Text confirming scope of services	0.50%	
		to be provided – A4 Maximum 20 sides.	0.50%	Service provision complies with brief
	Provide a detailed description of how each performance parameter will be achieved, demonstrating clear linkages and cross referencing to proposed Method Statements.			Correlation with schedule 14 performance parameters
FM4.3.2	Schedule 14 (service level specifications), relating to the Estates	Statement/ Text confirming scope of services to be provided – A4 Maximum 20 sides.	0.50%	Service provision complies with brief
	service Provide a detailed description of how each performance parameter will be achieved, demonstrating clear linkages and cross referencing to proposed Method Statements.			Correlation with schedule 14 performance parameters
	Provide Detailed maintenance methodology (and indicative planned maintenance programme) describing the inspection and maintenance regimes in terms of planned, reactive, statutory and cyclical maintenance and continuing energy efficiency;			
	Confirmation of numbers of Authorised Persons, Competent Persons and Suitably Qualified Persons to undertake maintenance tasks at times required;			
	Confirm Project Co's approach to minimise hospital disruption whilst undertaking maintenance; From inception to conclusion provide a sample methodology for the categorisation, classification (routine, urgent, emergency) and make order and routification including remedial time scales of the			
	make safe and rectification including remedial time scales of the following typical reactive maintenance requests:			
	Replacing a corridor emergency light; High temperatures and lack of ventilation in Theatres; Low oxygen pressure alarm in a high dependency area. Blocked WC			
	Lift failure Water ingress Damaged fire door			
	Details of management and implementation of planning, design and project management services and minor works; Provide details of the Asset Management system to be used highlighting the key features.			
FM4.3.3	Grounds: Provide a detailed method statements that have clear referencing to Schedule 14 (service level specifications), relating to the Grounds service.	Statement/ Text confirming scope of services to be provided – A4 Maximum 5 sides.	0.19%	Service provision complies with brief
	Provide a detailed description of how each performance parameter will be achieved, demonstrating clear linkages and cross referencing to proposed Method Statements. Provide			Correlation with schedule 14 performance parameters
	Details of emergency call-out procedures that will be in place to address such occurrences as fallen trees, snow or ice clearance, burst pipes etc;			

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
	Details of proposed methodology for dealing with gritting and snow clearance within the hospital site.			
FM4.3.4	Utilities: Provide detailed method statements that have clear referencing to Schedule 14 (service level specifications), relating to the Utilities service. Provide a detailed description of how each performance parameter will be achieved, demonstrating clear linkages and cross referencing to proposed Method Statements. Provide Description of proposed maintenance methodology describing the testing, cleaning and maintenance regimes including an initial programmed maintenance plan; Detail all arrangements for activity and housekeeping supporting the Trust to reduce energy usage.			Service provision complies with brief Correlation with schedule 14 performance parameters
FM4.3.5	Pest Control: Provide detailed method statements that have clear referencing to Schedule 14 (service level specifications), relating to the Pest Control service. Provide a detailed description of how each performance parameter will be achieved, demonstrating clear linkages and cross referencing to proposed Method Statements. Provide Detailed programme describing the inspections and treatment regimes to deliver a planned pest control service; Details of how emergency call out service will be delivered for the ad-hoc discovery of pests.		0.19%	Service provision complies with brief Correlation with schedule 14 performance parameters
FM4.3.6	Helpdesk: Provide detailed method statements that have clear referencing to Schedule 14 (service level specifications), relating to the Helpdesk service. Provide a detailed description of how each performance parameter will be achieved, demonstrating clear linkages and cross referencing to proposed Method Statements. Provide Full details of the intended Helpdesk facility including its infrastructure, location and staffing structure; Demonstrate the operational processes the Helpdesk will undertake and its capability as a management tool		0.38%	Service provision complies with brief Correlation with schedule 14 performance parameters
FM4.3.7	IM&T: Provide detailed method statements that have clear referencing to Schedule 14 (service level specifications), relating to the IM&T service. Provide a detailed description of how each performance parameter will be achieved, demonstrating clear linkages and cross referencing to proposed Method Statements.	to be provided – A4 Maximum 5 sides.	0.38% 2.50%	Service provision complies with brief Correlation with schedule 14 performance parameters

	Deliverables	Format	Weighting	Key issues to be considered in Evaluation
			s Management Service Costs	,
FM4.4.1	Detailed costs for each FM service making comparisons against benchmark costs, using Bidder experience from other similar NHS PFI schemes. Complete the service proforma that identifies the pay and non pay cost elements for each of the Schedule 14 (service level	Maximum 5 sides.		Fully completed proforma with comprehensive analysis of costs across headings. Ties back to work force plans and figures are easily identifiable within the financial model
	specification) services. In conjunction with the Financial Submission, clear statements of where the Bidder perceives added value is demonstrated in respect of service delivery.			
	Provide an accompanying list of assumptions relied on for producing the final price for FM services			
FM4.4.2	Bidders should set out any changes to the Schedule of Rates submitted at the end of Stage 3 to include the rationale for such changes.	Spreadsheet MS Excel.	0.25%	
			0.50%	
TOTAL FM			5.00%	

overall fm

Ref No.	Final Tender Information	Format	Weighting	Evaluation Criteria			
	Final Tender						
	Updated submissions to be as for Stage 4 but supplemented with clarifications and fine-tuning						
			Heading				

Competitive Dialogue (CD) Legal and Commercial Bidder Deliverables

Bidder outputs for all stages to conform to the following formats: Text in Microsoft Word.

Spreadsheets in Microsoft Excel.

Programmes in Microsoft Project Version 2010.

	Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
	CD Stage 3: Interim Deliverables	allowing outputs are sought from	Formal Bidder om the bidders to assist evaluation:	s Submission - Legal & Commercial Deliverables
L3.1	Acceptance of the Draft Project Agreement Confirmation from Bidders on behalf of all members of the Consortium (in the form set out in Appendix 3 of Volume 3) that the Draft Project Agreement and Schedules ("Draft Project Agreement") issued in Volume 3 of the ITPD is accepted in its entirety, subject to a written list of comments submitted in accordance with commentary below. Departures from the NHS Standard Form are exceptional unless a project specific or clear value for money justification applies. All such matters require approval from the Department of Health's Private Finance Unit.		4%	
	Commentary The Trust will undertake detailed discussions with Bidders about the final form of the Draft Project Agreement including those amendments which would be required to make it reflect each Bidder's solution and all elements of their bid.			Provision of requested information in respect of the Agreed List and proposed drafting amendments
	At the discretion of the Trust, a list of outstanding project specific issues to be resolved between the parties may be developed and agreed with Bidders (the "Agreed List") during these meetings and subsequently confirmed in their Bid. Bidders (on behalf of all members of the bidding consortium) should provide in their ITPD Submission a detailed written list of:			The number and nature of issues remaining to be resolved. Satisfactory completion of acceptance of Project Agreement.
	comments, stating all elements of the bid where the Bidder considers a departure from the Draft Project Agreement is required, together with a justification for this proposed drafting amendments to the Draft Project Agreement, to reflect the matters set out on the Agreed List.			
	Each proposed drafting amendment must be accompanied by a separate commentary which: provides strong project specific reasoning to support the proposed amendment; and			

	Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
	confirms what effect (if any) each proposed amendment will have in varying the Bidder's price.			
	The Trust expects the commentary to be wholly consistent with the discussion held with Bidders.			
L3.2	Consortium Arrangements: Bidders are required to set out the outline structure of their consortium and proposals for how it will be managed to deliver the requirements of the Project,		1%	Comprehensive, clearly understood roles and responsibilities, accords to PQQ or acceptable amends notified to Trust.
	Bidders are required to provide examples from their other health PFI projects where similar arrangements are in place in support of their proposed structure for this Project.			Proposed structure facilitates delivery of the Project, backed by relevant examples.
	Bidders are required to provide the following:			
	Details of principal sub-contractors and their relationship with Project Co.			Clear and complete details/confirmation of sub-contractors and relationship
	Details of the shareholders and proposed shareholdings in Project Co.			Clear and complete details/confirmation of shareholders/shareholdings
	Details of the various classes of capital (including the rights and obligations of each class) in Project Co.			Clear and complete details/confirmation of classes and class rights/obligations
	A diagram depicting the relationships of the various parties including Project Co showing the key contractual relationships together with explanatory notes.			Clear and complete diagram/confirmation of relationships plus notes
	Details of whether Project Co will be owned directly and wholly by the shareholders or by a holding company that is wholly owned by the shareholders.			Clear and complete details/confirmation of ownership
	Details of the security arrangements (e.g. Parent Company Guarantees and Construction Bonds) in place for Project Co.			Clear and complete details/confirmation of security arrangements re Project Co.
	A copy of the proposed Memorandum and Articles of Association for Project Co (if available).			Provision of suitable constitution for Project Co
	A copy of the Shareholders' Agreement (or at least a summary outlining the essential terms to be included in the Shareholders' Agreement).			Clear and complete copy/confirmation of Shareholders' Agreement
	Identification of any party who Bidders anticipate may acquire an interest in Project Co at some future date.			Clear identification of potential investor/acquirer of interest in Project Co or confirmation that none anticipated
L3.3	N/A			

The Midland Metropolitan Hospital Project Legal Bid Deliverables

		Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
L		Validation Certificate A Validation Certificate (in the form set out in Appendix 3 to Volume 3)		Compliance	Not scored, but where notified changes do not meet PQQ
	5	signed by each Bidder, confirming that the status of the bidding consortium			requirements the Bid will become ineligible to continue in the
	C	or its members have not changed since submission of the PQQ.			procurement
		n the event that there have been changes Bidders are required to			
	C	complete the relevant sections of the PQQ.			

	Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
L3.5	Certificate of Non-Canvassing A Certificate of Non-Canvassing (in the form set out in Appendix 3 to Volume 3 signed by each Bidder.		Compliance	Not scored, but where the certificate provided does not provide evidence of satisfactory compliance with the Trust's requirements, the Bidder may be eliminated
L3.6	Certificate of Non-Collusion A Certificate of Non-Collusion (in the form set out in Appendix 3 to Volume 3) signed on behalf of each member of the Bidder's Consortium.		Compliance	Not scored, but where the certificate provided does not provide evidence of satisfactory compliance with the Trust's requirements, the Bidder may be eliminated
L3.7	Confidentiality Undertaking A Confidentiality Undertaking (in the form set out in Appendix 3 to Volume 3) signed on behalf of each member of the Bidder's Consortium.		Compliance	Not scored, but where the certificate provided does not provide evidence of satisfactory compliance with the Trust's requirements, the Bidder may be eliminated
Total			5%	

	Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
			Final Deliverables	
	Forma	ıı bıdaers Submission – L	egal & Commercial Deliverables	
	The following o	outputs are sought from the Bi	dders to assist evaluation of design s	olutions:
L4.1	Acceptance of the Draft Project Agreement		2.50%	
	Bidders should confirm in respect of all elements of their bid submission (including the technical submission) and on behalf of all members of the Consortium:			Confirmation of requirements as set out in Volume 2
	that they accept the Draft Project Agreement in its entirety and without amendment; or			Agreed list in line with Bidder meetings – no surprises.
	that they accept the Draft Project Agreement in its entirety and without amendment save for those issues expressly set out in the Agreed List.			Provision of requested information in respect of the Agreed List and proposed drafting amendments
	Bidders should be aware that the Agreed List at this stage of the procurement must be minimal with only minor non-price sensitive issues left to be closed down			Satisfactory completion of acceptance of Project Agreement.
	Certificate of Acceptance of the Draft Project Agreement			
	The certificate in the form set out in Appendix 3 of Volume 3 and signed by each member of the Bidder's consortium confirming:			
	that they have no comments on the Draft Project Agreement and that the same is acceptable to them and their legal and technical advisors; OR all of their comments and concerns (including any comments or concerns of their respective legal or technical advisors) have now been reflected in the Draft Project Agreement or the Agreed List;			
	that their bid has been priced on the basis of the Draft Project Agreement and does not reflect any other comments, reservations, qualifications or amendments (including those on the Agreed List);			
	that any savings directly associated with any proposed project specific amendments set out in the Agreed List have been identified in such list together with a detailed explanation regarding how each such proposed amendment will realise such costs savings, the basis of calculation and any and all caveats relating to the calculated cost savings and the basis of calculation;			

	Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
	that, subject only to the Agreed List, they accept fully the allocation of risks between the parties set out in the Draft Project Agreement; and			
	that they have the ability to proceed to successful contractual/Financial Close in accordance with the timetable issued.			
L4.2	Consortium Arrangements:		0.50%	
	Bidders are required to set out the detailed structure of their consortium and management proposals for the Project, Bidders are required to provide the following:			
	Confirmation that the details of principal sub-contractors and the relationship with Project Co remain as detailed in the Interim Submission.			Clear and complete details/confirmation of sub-contractors and relationship
	Confirmation that the details of the shareholders and the shareholdings in Project Co remain as detailed in the Interim Submission.			Clear and complete details/confirmation of shareholders/shareholdings
	Confirmation that the details of various classes of capital (including the rights and obligations of each class) in Project Co remain as detailed in the Interim Submission.			Clear and complete details/confirmation of classes and class rights/obligations
	Confirmation that the diagram depicting the relationship of the various parties and the accompanying explanatory notes as submitted in the Interim Submission remains correct.			Clear and complete diagram/confirmation of relationships plus notes
	Confirmation that the statement in the Interim Submission as to whether Project Co will be owned directly and wholly by the shareholders or by a holding company that is wholly owned by the shareholders remains correct.			Clear and complete details/confirmation of ownership
	Evidence of and confirmation that the security arrangements (e.g. Parent Company Guarantees and Construction Bonds) remain in place for Project Co as detailed in the Interim Submission.			Clear and complete details/confirmation of security arrangements re Project Co.
	A copy of the proposed Memorandum and Articles of Association for Project Co if not provided in the Interim Submission or confirmation that the proposed Memorandum and Articles of Association for Project Co			Provision of suitable constitution for Project Co

	Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
	provided in the interim Submission remain unchanged.			
	Confirmation that: The Shareholders' Agreement (or the summary outlining the essential terms to be included in the Shareholders' Agreement) provided in the			Clear and complete copy/confirmation of Shareholders' Agreement
	Interim Submission remains unchanged or to the extent that the same has changed, details of such changes; and it is not anticipated that any material changes will be made to the same			
	between the submission of this deliverable and Financial Close. Identification of any party who Bidders anticipate may acquire an interest in Project Co at some future date.			Clear identification of potential investor/acquirer of interest in Project Co or confirmation that none anticipated
L4.3	Detailed sub-contract heads of terms for each funding route required by the		Compliance	Assessment of the bankability and deliverability/ acceptability in the
L4.3	Trust. These heads of terms should include at least the following:		Compilance	market
	Identity of parent company guarantor(s) and letters of support;			
	Long stop requirements; Proposed liability caps, termination caps, surety bonds, liquidated damages and other contractor support that Bidders believe will be required by and acceptable to funders / rating agencies; and			
	Any third party support (i.e. credit support) that Bidders believe will be required by funders /rating agencies/ monolines.			
	The description of the guarantees should identify the means by which the Trust will be protected against a financial or other failure of the Project.			
	The total sub-contractor support packages must be capable of achieving an investment grade rating and satisfying the requirements of a monoline (where wrapped options are required) and the full cost of such support must be reflected in the financial model.			
	Details of sub-contracts			

	Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
	Drafts of the sub-contract documentation agreed with the proposed design and build contractor, service provider(s) and key sub-contractors, including service failure point thresholds.			
L4.4	Validation Certificate A Validation Certificate (in the form set out in Appendix 3 to Volume 3) signed by each Bidder, confirming that the status of the bidding consortium or its members have not changed since submission of the Interim Deliverables.		Compliance	Not scored, but where notified changes do not meet PQQ requirements the Bid will become ineligible to continue in the procurement
	In the event that there have been changes Bidders are required to complete the relevant sections of the PQQ.			
L4.5	Certificate of Non-Canvassing A Certificate of Non-Canvassing (in the form set out in Appendix 3 to Volume 3) signed by each Bidder.		Compliance	Not scored, but where the certificate provided does not provide evidence of satisfactory compliance with the Trust's requirements, the Bidder may be eliminated
L4.6	Certificate of Non-Collusion A Certificate of Non-Collusion (in the form set out in Appendix 3 to Volume 3) signed on behalf of each member of the Bidder's Consortium.		Compliance	Not scored, but where the certificate provided does not provide evidence of satisfactory compliance with the Trust's requirements, the Bidder may be eliminated
L4.7	Confidentiality Undertaking A Confidentiality Undertaking (in the form set out in Appendix 3 to Volume 3) signed on behalf of each member of the Bidder's Consortium.		Compliance	Not scored, but where the certificate provided does not provide evidence of satisfactory compliance with the Trust's requirements, the Bidder may be eliminated
Total				3%

		Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
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Ref No.	Final Tender Information	Format	Weighting	Evaluation Criteria				
	Final Tender							
	Updated submissions to be as for Stage 4 but supplemented with clarifications and fine-tuning							
	Heading							
	Heading							

Competitive Dialogue (CD) Project Management Bid Deliverables

Bidder outputs for all stages to conform to the following formats: Text in Microsoft Word.

Spreadsheets in Microsoft Excel.
Programmes in Microsoft Project Version 2010.

	Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
			CD Stage 3: Interim Submissions	
			Project Management Deliverables	
PM3.1	Programme to Preferred Bidder Confirmation of draft programme and meeting timetable up to Preferred Bidder. This should include: Suggested amendments with reasons why required	< 2 pages A4	0.50%	
	Commentary on any risks identified Confirmation that the programme and approach is achievable			
PM3.2	Programme To Financial Close Statement of intent to achieve the Financial Close date post Preferred Bidder with brief outline to describe approach and estimated timescales.	< 4 pages A4	1%	
PM3.3	Approach to collaborative working Statement outlining approach to collaborative working with the Trust during the procurement stage to Financial Close. Includes the following: Short statement of aims Each aim illustrated by an example of successful joint working on another scheme	< 2 pages of A4	0.50%	
Total			2%	

		CD Stage 4: Draft Final Bids Project Management Deliverables						
	Project Management to Financial Close	<10 pages A4	0.20%	Coherent approach described				
PM4.1	Project Execution Plan or similar document outlining approach from Preferred Bidder to Financial Close. Should present:			Approach to continuity is robust				
	Overall approach			Roles and responsibilities are clear				
	Approach to continuity							
	Team members roles, qualifications and experience			Capability of team is appropriate				
	Role description, qualifications and experience of sub-contractors.			Capability of subcontractors is appropriate				
	Organisational charts							

	Deliverables	Format	Weighting	Key Issues to be considered in Evaluation
				Decision making routes are clear
	Programme to Financial Close	Gantt Chart in MS	0.20%	Target Financial Close date achieved
	Frogramme to Financial Close	Project	0.20 /6	raiget Financial Close date achieved
PM4.2	Detailed programme to financial close ensuring alignment with Trust			Realistic timescales
	milestones.			
	Order of activities, milestones, critical path, responsibilities and			Programme clearly described
	dependencies should be made clear			Trust responsibilities made clear
				Tradit Topportolishindo Triado Giodi
PM4.3	Risk Management		0.20%	Demonstrates that risks are well understood
	Outline of any risks that could impact on achievement of Financial Close	commentary if required.		Mitigation statements show solution focus
	milestones, showing mitigation of any risks identified.			·
PM4.4	Handover following Financial Close	< 6 pages A4	0.20%	Coherent approach described
	, and the second			·
	Strategy for handover following Financial Close. To include:			Approach to continuity is robust
	Overall approach			Roles and responsibilities are clear
	Annuals to particult.			
	Approach to continuity			
	Team members roles, qualifications and experience			Decision making routes are clear
	Role description of sub-contractors.			
	Organisational charts			
DM4.5	Assessed to called credition used in		0.00%	Chause commitment to collaborative unding
PM4.5	Approach to collaborative working		0.20%	Shows commitment to collaborative working
	Statement outlining approach to collaborative working with the Trust from			Demonstrates coherent approach
	Preferred Bidder to Financial Close and during the construction phase.			
	Includes the following:			Examples show delivery focus
	Statement of aims			
	Each aim illustrated by an example of successful joint working on another			
	scheme			
Total			1.00%	
. J.u.				

	Deliverables	Format	Weighting	Key Issues to be considered in Evaluation		
Ref No.	Final Tender Information	Format	Weighting	Evaluation Criteria		
	Final Tender					
	Updated submissions to be as for Stage 4 but supplemented with clarifications and fine-tuning					
	Heading					
·						

Competitive Dialogue (CD) Regeneration Bidder Deliverables

Bidder outputs for all stages to conform to the following formats:

Text in Microsoft Word.

Spreadsheets in Microsoft Excel.

Programmes in Microsoft Project Version 2010.

	Deliverables	Format	Weighting	Key issues to be considered in evaluation
		CD Stage 3: Bid De		
	For	rmal Bidders Submission -	Regeneration I	Deliverables
		ollowing outputs are sought from		
R3.1	Bidders should produce a strategy explaining how they will maximise the regeneration benefits of the Project to the population of Sandwell and west Birmingham. The strategy should include: How the Bidder proposes to provide transparent, open and fair access to supply chain opportunities when sourcing materials, components and indirect labour. How Bidders propose to utilise the Project to maximise employment, skills and training opportunities for deprived sectors throughout their supply chain. This should include expected training provision and apprenticeships.		1%	Use of the opportunities described by the Trust in ITPD3, provided in partnership with local councils are not mandatory but will provide a benchmark against which the strategies will be evaluated.
R3.2	Bidders to propose the format of a monthly report to be provided to the Trust during the construction period detailing performance against the strategy. Bidders should signify their willingness to provide the report proposed and to participate in regular discussions with the Trust and representatives from the local councils on the report, the targets set and achievement against those targets.	A4 text / excel spreadsheet	0.50%	The report should include benchmark targets for access to skills, training and employment opportunities.
R3.3	Bidders to propose the format of a quarterly report to be provided to the Trust during the operational period detailing performance against the strategy. Bidders should signify their willingness to provide the report proposed and to participate in regular discussions with the Trust and representatives from the local councils on the report the targets set and achievement against those targets	A4 text /excel spreadsheet	0.50%	The report should include benchmark targets for access to skills, training and employment opportunities.
Total			2.00%	

ĺ	CD Stage 4: Bid Deliverables Part 2
ı	Competitive Dialogue
ı	The following outputs are requested from the Bidders to assist evaluation:

	Deliverables	Format	Weighting	Key issues to be considered in evaluation
R4.1	Bidders should produce a strategy explaining how they will maximise the	A4 toxt Maximum 20 pages	0.509/	Use of the opportunities described by the Trust in ITPD3, provided in partnership with
K4.1	regeneration benefits of the project to the population of Sandwell and west Birmingham.		0.50%	local councils are not mandatory but will provide a benchmark against which the strategies will be evaluated.
	The strategy should include :			
	How the Bidder proposes to maximise responsible purchasing. Provide details of specific proposals for sourcing materials and components responsibly. This should include evidence of how the Bidder intends to ensure this is achieved in practice, giving examples of likely materials and components. Names and details of specific suppliers to be used should be provided, together with a level (percentage of total materials and component cost) which the Bidder expects to procure responsibly.			
	How the Bidder proposes to provide transparent, open and fair access to supply chain opportunities when sourcing materials, components and indirect labour.			
	How Bidders propose to utilise the project to maximise training, skills and employment opportunities for deprived sectors of the population. Proposals should be given for Relevant Organisations and throughout their supply chains. This should include expected skills and training provision and apprenticeships.			
R4.2	Bidders to propose the format of a monthly report to be provided to the Trust during the construction period detailing performance against the strategy.	A4 text/ excel spreadsheet		The report should include benchmark targets for responsibly sourced materials and services and access to employment, skills and training.
	Bidders should signify their willingness to provide the report proposed and to participate in regular discussions with the Trust and representatives from the local councils on the report the targets set and achievement against those targets.			
R4.3	Bidders to propose the format of a quarterly report to be provided to the Trust during the operational period detailing performance against the strategy. Bidders should signify their willingness to provide this report and to participate in regular discussions with the Trust and representatives from the local councils on the report the targets set and achievement against those targets.	A4 text/ excel spreadsheet	0.25%	The report should include benchmark targets for responsibly sourced materials and services and access to skills, employment and training.
Total			1.00%	

Deliverables	Format	Weighting	Key issues to be considered in evaluation

Ref No.	Final Tender Information	Format	Weighting	Evaluation Criteria			
	Final Tender						
	Updated submissions to be as for Stage 4 but supplemented with clarifications and fine-tuning						
	Heading						



ITPD Volume 4

Appendix 5 – Funding Protocol

MMH ITPD 4 Appendix 5

Senior Debt Funding Competition Principles

Objectives

- 1. The primary objective of the funding competition is to encourage competitive proposals for a senior debt funding solution which:
 - a. is firm, unqualified and deliverable;
 - b. does not undermine the Appointment Business Case ("ABC") approval criteria;
 - c. enables the required amount of senior debt (including equity bridge and reserve facilities in the case of a bank debt solution) to be raised;
 - d. reduces the NPV cost of the Service Payments paid by the Trust (compared to that in the Reference Model as defined below); and
 - e. does not prevent reaching Financial Close by the proposed date i.e. [to be added]; and
 - f. does not require any renegotiation of the relevant Project Agreement and Schedules or other draft Project Documents / heads of terms, or any alteration of the risk allocation as agreed between the Trust and Preferred Bidder.

Process

- 2. Delivery of senior funding is the responsibility of the Preferred Bidder; including *inter alia*:
 - a. management of the senior debt funding competition process and of the funders Due Diligence advisers¹ to be agreed in the Funding Competition Methodology;
 - b. production of all materials required, and funding all costs incurred, in the funding competition process; and
 - c. meeting the timescales set out in the Preferred Bidder letter.
- 3. The Funding Competition will be run by the Preferred Bidder subject to advance approval from the Trust and their financial advisers in respect of key issues including *inter alia*:
 - a. timing of the competition;
 - b. developing the list of funders to be approached;
 - c. the documentation and level of detail issued to prospective funders;
 - d. evaluation criteria and selection of funders; and

¹ This will include facilitating access to the advisers for the potential funders during the competition

- e. final selection of bank vs. other (e.g. public bond) structure. Any difference in sponsor or other costs arising from the final selection of funding route should be clearly expressed in the Final Bid and will not be amended following selection of Preferred Bidder.
- 4. Consent of the PFU will be required at each stage including inter alia:
 - a. the contents of the information memorandum;
 - b. any reduction in the list of funders; and
 - c. final selection of the preferred funder.
- 5. Offers solicited from prospective senior debt funders must at a minimum:
 - a. be deliverable final submissions from funders must have credit committee approval providing an unambiguous commitment to fund;
 - b. be sufficient (in total across each proposed funding structure) to cover the full required senior debt sum;
 - c. accept the ABC approval, Project Agreement, associated Schedules and all other Project Documents / heads of terms in full i.e. accept the risk allocation as set out in the Final Bid prospective funders are therefore required to raise all detailed issues during the funding competition. Amendments to these documents or which affect approvals will score against the funder and may exclude the funder from participation;
 - d. facilitate the project to reach financial close by the proposed date; and
 - e. reflect the detailed funder's due diligence undertaken and accept novation of the funder's advisors.
- 6. Any proposed amendments to the agreed positions that may be suggested in the funder due diligence reports will have been reviewed and dismissed by the Trust and the Preferred Bidder by the time of the funding competition and funders should bid on the basis of the documentation as provided.
- 7. The Trust will not entertain changes to the Project Agreement or other Project Documents as a result of the funding competition or any other process prior to financial close (e.g. subsequent development of finance documentation). To the extent that any such change has a negative impact on the project it will be an equity risk rather than a risk for the Trust. The Trust therefore expects the bidder to develop the information memorandum to a sufficient level of detail (e.g. including proposed step-downs to subcontractors and funders) to achieve this aim. The same principle applies for all inputs into the financial model with the exception of those set out below in section 14 below.
- 8. Prospective funders should set out their proposals for interest rate and inflation hedging as part of the funding competition. Prospective funders should propose credit margins as part of the funding competition. The Preferred Bidder and prospective funders will be required to accept the principles of:

- a. public sector benchmarking of derivatives pricing at financial close; and
- b. competing any GICs at financial close in the case of a bond solution.
- 9. The Preferred Bidder will model all funding competition responses agreed with the Trust to be so modelled as set out in the Funding Competition Methodology. The Preferred Bidder will prepare a summary report demonstrating the impact of each funding proposal on the initial Service Payment and NPV of Service Payments vs. those in the Reference Model as well as a tabular summary of pricing and key terms & conditions for each proposal (e.g. funders in columns and key funding terms in rows).
- 10. The competition will be re-run at the Preferred Bidder's cost if an insufficient number of compliant tenders are received (in the opinion of the Trust).

Model

- 11. A financial model containing generic funding terms will be provided to prospective funders ("Reference Model") by the Preferred Bidder. Funders are expected to improve on these terms but the dynamics of the model are unlikely to move to such an extent that the fundamental risk profile is materially changed. The model will be updated to reflect the terms of the selected funder in due course. If prospective funders feel that a revised model reflecting an alternative funding structure is necessary for them to perform their assessment of the project then they should outline their rationale to enable the Preferred Bidder and Trust to consider the request.
- 12. The Reference Model must allow terms for both public and EIB bank and capital markets / bond financing to be incorporated and all the appropriate sensitivities run in accordance with market practice.
- 13. The real pre-shareholder tax / post-SPV tax blended equity IRR included in the Reference Model pertaining to the Final Bid will not increase regardless of any change in rates or terms resulting from the Funding Competition.

Macroeconomic Changes & Trust Risks

- 14. Changes in macro-economic assumptions are wholly for the Trust's account as they are market rates on which the Trust has agreed to take the risk. The assumptions for each of the following have been described in the ITPD and will be issued prior to bid submission:
 - a. LIBOR/swap rate (excluding credit spread) and or reference gilt term
 - b. GIC rates;
 - c. Bond margin;
 - d. The risk allocation associated with a change to the Financial close date

15. The Preferred Bidder will run the competition in a manner that seeks to minimise the impact of any adverse market conditions.

Other Changes

- 16. Benefits arising from the funding competition and any improvements up to and including financial close will be wholly for the account of the Trust including, *inter alia*, the following:
 - a. improvements in bank terms such as fees, costs, margins, gearing, coverage ratios and increase in loan tenor;
 - b. reductions in required senior debt sensitivity thresholds such as rating agency cash breakeven requirements.
 - c. reductions in bond underwriting fees and associated costs; and
 - d. improvements in monoline terms such as fees, reserve account / facility requirements and surety bond / contractor support requirements.
- 17. Benefits from any incorporation of EIB finance are wholly for the account of the Trust.

Involvement of the Trust

18. All correspondence with senior funders in competition will be recorded in writing and available to all procuring parties (i.e. the Trust, the preferred bidder, DH, HMT and advisers).

- 19. The Trust and its advisers retain the right to attend all significant meetings² held with potential funders. 48 hours notice of such meetings must therefore be given to the Trust (at a minimum) including a detailed agenda for such meetings.
- 20. Regular summaries of significant communications pertaining to the competition and the position of any negotiations to be provided in advance of each meeting.
- 21. The competition will be run on a transparent, open book basis including access by the Trust to all financial modelling produced to assess submissions. This will include the Preferred Bidder's agreement to run any additional scenarios / sensitivities reasonably requested by the Trust and its advisers. The list of sensitivities as far as possible will be agreed in advance of the competition.
- 22. The financial decision with respect to the involvement of the EIB sits with the Trust who will consult with the Preferred Bidder accordingly. A paper outlining the PFU's key principles in respect of EIB involvement will be released separately.

² For the purpose of this protocol meetings are taken to include significant / all parties conference calls

Preferred Bidder Funding Competition – Protocol regarding roles of participants

Golden rule: to mirror the position as if funders were in place. Process is designed to benefit all participants by addressing risks at the appropriate stage.

Bidders are responsible for developing 'bankable' proposals and managing a transparent competition. Sponsors (bidders) are best placed to manage Funding Competition (FC). It is a *Preferred Bidder* Funding Competition. The table below summarises the roles of the key parties through the various stages:

Stage	Bidder	Trust	Trust Advisers	Funder Advisers	Funders	PFU
Pre Stage 1A	 Agree scopes of Due Diligence (DD) adviser appointments Agree DD advisers' identities and be part of the appointment process Accept the Funding Competition Protocol Ensure their financial adviser has the requisite skills to execute a transparent funding competition 	Include FC Protocol in ITPD Manage the appointment of the DD advisers in an administrative (trustee) capacity Execute the DD adviser appointments	 Comment on the FC Protocol Comment on scope of DD advisers Comment on proposed shortlist of DD advisers Share draft DD scopes with a funder 		Soft market sounding for DD adviser appointment	 Oversee Referrals and disputes Available to all parties Ensure Compliance with DH policy Key interest in bankability for the submissions and approval processes
Stage 1A – Project Requirements		Review Stage 1 report	 Review Stage 1 report Advise on the need (if any) to modify aspects of the project following any clarification with DD advisers 	Prepare Stage 1 report in accordance with scope of requirements Some liaison with Trust advisers for clarification		
Stage 1B and Flyover	 Submit Draft Bid sufficiently detailed to inform bankability Astutely take any concerns on board to 	 Review Draft Bids against evaluation criteria, which includes bankability Feed back critical 	 Review Draft Bids against evaluation criteria, which includes bankability Raise any issues 	Involvement limited to inform Trust advisers queries, without needing to see bid details –		

Stage	Bidder	Trust	Trust Advisers	Funder Advisers	Funders	PFU
	promote value of Bid, enhance bankability	problems to Bidders or modify project/extend CD process	and consider if any merit a discussion at a "flyover" level with DD advisers	sounding board role		
Stage 2 – Project Proposal	 Review Stage 2 report At Minded to Appoint stage, develop detailed Funding Competition Methodology³ based on FC Protocol, with its financial adviser taking the lead 	 Review Stage 2 report Agree FC Methodology including detailed evaluation criteria 	 Review Stage 2 Report and advise on potential bankability issues Liaise with DD advisers to clarify any key concerns they raise Assist Trust with 	 Prepare Stage 2 report in accordance with the scope of requirements Liaise with Trust advisers to clarify any risks highlighted 		
Stage 3A ⁴ – Funding Competition (FC)	FC commences after PB appointment (i.e. Appointment Business Case has been approved) and detailed planning application has been submitted; Accept novation of	Oversight as necessary to scrutinise compliance with agreed process and agree PB's proposals without causing delay to the process.	agreeing FC Methodology • Advice in support of Trust's role	 DD advisers' appointments to be novated to PB, as a condition of PB appointment Participate in surgeries Novate to client 	Funders to have access to DD advisers in surgeries but in a managed way (controlled by PB and its financial adviser)	
	the DD appointments (prior to FC) Responsible for delivering compliant competition Liaise with DD advisers to mitigate any highlighted security or other material risks to	 Funder information pack to be seen by Trust to verify no material issues before circulation to Funders in competition Trust to review and comment on the draft evaluation 				

³ Funding Competition Methodology to describe, among other things, information to be provided to funders, number of funders and financing instruments involved, club/underwriting/bookbuilding basis, how pricing and terms will be set/conformed, how adequacy of competition will be ensured, evaluation methodology between funding routes and funders, and at what point bank credit committee approval will be obtained. The FCM will also address the details contained in the Funding Competition Protocol. The preferred bidder will share a summary of funders' submissions and actual submissions if required by the Trust.

⁴ Preferred Bidder selected by this Stage

Stage	Bidder	Trust	Trust Advisers	Funder Advisers	Funders	PFU
	enhance the attractiveness of the Information Memorandum	report				
	With its financial and legal advisers, prepare IM which will be basis of FC and share with the Trust for comment					
	 Liaise with DD advisers to accommodate funder issues if bankability/funding terms problematic 					
	 Prepare and share with the Trust the draft evaluation report for comment, with supporting information (as agreed in the FCM) 					
	 Novate DD adviser appointments to funder 					
	 Conclude funder selection and agree funding documents 					
Stage 3B – Financial Close	Normal progression to FC	 Normal progression to FC Appoint specialist adviser for benchmarking swaps 	 Normal progression to FC Involvement of specialist adviser to Trust at FC to benchmark swaps 	Normal progression to FC	 Normal progression to FC Accept novation of DD adviser mandates from PB 	
Stage 4 – Post Financial Close		Assist in PPE of FC	As per terms of appointment	Prepare bible of documentation etc		



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Appendix 6 – Structure of Data Room

Appendix 6 – Structure of Data Room

- Current Relevant Policies
- Estates & Technical Information
 - Fire
 - Site Information
- Future Whole Hospital Policies
- Land Ownership Report
- National Guidance
- Outline Business Case
- Survey Results
- Trust Information
- Trust Strategy



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Appendix 7 – Certificates

APPENDIX 7: DECLARATION

This Declaration should be completed, signed and returned with the Bidders' Response and signed by a Partner, Director or authorised representative i.e. in their name on behalf of the Bidder.

Name of Bidder:

Having examined carefully the terms of this ITPD, and all other documents made available to us, and having satisfied ourselves as to all other relevant matters, we enclose our Response and confirm that it comprises all the documents required to be submitted in accordance with the ITPD.

Acceptance of Conditions

We confirm that we have read and understood all the documentation issued by or on behalf of the Trust including, for the avoidance of doubt, all disclaimers.

We confirm that all engagement with the Trust remains "subject to contract" and that the identification by the Trust of us as the most advantageous tenderer will not constitute a binding agreement or contract between us until a formal written agreement or agreements has or have been executed.

We confirm that by providing our Response, we have satisfied ourselves as to the accuracy and completeness of the information we require in order to do so including that information contained in this PQQ and any other documents provided by the Trust.

Confidentiality

We confirm that we have not breached or knowingly permitted to have breached any confidentiality requirements stipulated by the Trust in connection with the procurement process.

Canvassing

We confirm that we have not:

- offered any inducement, fee or reward to any member or officer of the Trust and/or any contracting authority or any person acting as an advisor to the Trust and/or any contracting authority in connection with the procurement process; or
- done anything which would constitute a breach of the Bribery Act 2010; or
- canvassed or otherwise contacted any officer of the Trust prior to contract completion about any aspect of the ITT in a manner not permitted by this ITT (including, without limitation, contact for the purposes of discussing the possible transfer to the employment of the Bidder of such officer),

and we acknowledge that we may be disqualified (without prejudice to any other civil remedies available to the Trust and without any prejudice to any criminal liability which such conduct by a Bidder may attract) in the event that it transpires that we were or are in breach of this confirmation.

Non-Collusion

We confirm that we have not:

(a) entered into any agreement with any other person with the aim of preventing Responses being made or as to the fixing or adjusting of the amount of any Bid or the conditions on which any Bid is made; or

- (b) entered into any agreement or arrangement with any other Bidder that any such Bidder shall refrain from submitting a Response or as to any amounts in our Response to be submitted; or
- (c) informed any other person, other than the Trust, of the amount or the approximate amount of the Bid, except where the disclosure, in confidence, of the amount of the Bid was necessary to obtain quotations necessary for the preparation of the Bid for insurance, for performance bonds and/or contract guarantee bonds or for professional advice required for the preparation of the Bid; or
- (d) caused or induced any person to enter such agreement as is mentioned in this section or to inform the Bidder of the amount or approximate amount of any rival Response; or
- (e) offered or agreed to pay or give or have paid or given any sum of money, inducement or valuable consideration directly or indirectly to any person for doing or having done or causing or having caused to be done in relation to any other tender or proposed tender any act or omission,

and we acknowledge that we may be disqualified (without prejudice to any other civil remedies available to the Trust and without any prejudice to any criminal liability which such conduct by a Bidder may attract) in the event that it transpires that we were or are in breach of this confirmation.

Signed ¹ :	
Name (capital letters):	
For and on behalf of:	
insert name of Bidder)	
Position:	
Date:	

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¹ To be signed by each Bidder (and, where the Bidder is a Consortium, by each consortia member)



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Appendix 9 – Funding Competition Timeline

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

MIDLAND METROPOLITAN HOSPITAL PROJECT

THIRD PARTY EQUITY FUNDING PROCESS / TIMELINE

STEP	EQUITY FUNDING PROCESS ACTIVITY	PROJECT PHASE / DATES	DESCRIPTION OF DEBT FUNDING PROCESS ALONGSIDE EQUITY
1.	Bidders confirm willingness to: Allocate up to 25% of equity in their SPV through an Equity Funding Competition(EFC) Run an EFC process should they subsequently become Preferred Bidder Produce an evaluation methodology and selection procedure for agreement with IUK Equity Commit to provide all the equity in the SPV (and have their bid evaluated on that basis) should the EFC fail to achieve a VfM outcome for the Authority and/or IUK equity choose not to invest	At PQQ	
2.	At two bidder stage, each Bidder proposes a long-list of potential candidates to take part in the EFC. List to be vetted and agreed with IUK Equity	During Competitive Dialogue with two Bidders Phase	Mirrors equity process
3.	"Minded to appoint Preferred Bidder" discusses investment with potential candidates and produces a short-list to receive Mini Information Memorandum (MIM)	At "minded to appoint" PB stage (3 September 2015 – 10 September)	
4.	"Minded to appoint Preferred Bidder" to send letters and MIM to short-listed EFC candidates setting out investment opportunity and process from there to financial close ("FC").	At "minded to appoint" PB stage (3 September 2015 – 10 September)	Mirrors equity process
5.	PB to liaise with shadow funder's technical advisors, sponsor's lawyers and due diligence advisors to make available to short listed candidates the full suite of due diligence already carried out in each discipline.	At "minded to appoint" PB stage (3 September 2015 – 17 September 2015)	Mirrors equity process
6.	PB to identify what further DD needs EFC candidates have (if any). The costs of any additional DD to be incorporated into the funder's solution.	At "minded to appoint" PB stage (3 September 2015 – 17 September 2015)	Mirrors equity process
7.	Any additional DD to be carried out and information packages provided to the potential equity funders.	At "minded to appoint" PB stage (17 September – 22 October 2015)	Mirrors equity process
8.	HMT confirm their investment decision as to whether IUK Equity Unit will take public equity stake (of 20%) or not.	At PB stage (PB appointed 22 October 2015)	Mirrors equity process

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9.	Final DD reports and all project documentation to be provided to the listed equity funders for review	At PB stage (22 October 2015 – 29 October 2015)	Mirrors equity process
10.	EFC candidates review documentation and prepare proposals	After PB stage (from 22 October 2015 – mid / end Nov 2015)	Mirrors equity process
11.	PB reviews equity proposals and selects a preferred equity provider using the agreed evaluation methodology overseen by the Authority and IUK equity.	After PB stage (by 31 December 2015)	Initial down selection of debt funders followed by a second stage selection process
12.	Confirmation from sponsors' lawyers and shadow funder technical advisors that Duty of Care letters will be delivered to the selected equity funder prior to FC.	Pre FC (January 2016)	Shadow funder's lawyers and technical advisors novated to the selected debt funder.
13.	Equity provider prepares for FC	Up to FC (up to 15 April 2016)	Mirrors equity process

What else will be happening during this period?

Other activities which will be progressing in parallel to the funding competitions are:-

- Full planning consent being granted
- Judicial review period in relation to that
- Confirmatory Business Case
- Gateway Review 3B
- Appointment of Independent Tester

Timetable / Key Programme drivers

Preferred Bidder is appointed on 22 October 2015 and Financial Close is scheduled for 15 April 2016.