



PHILIPPINE GENERAL HOSPITAL
The National University Hospital
University of the Philippines Manila
DEPARTMENT OF PAY PATIENT SERVICES
Taft Avenue, Manila
Tel. Nos. 5548400 loc. 3587/3588



PHIC Accredited Health Care Provider
ISO 9001:2008 Certified



CPC10005305

TERMS OF REFERENCE

I. PROJECT TITLE

FACILITIES MANAGEMENT SERVICES INCLUDING THE REPAIR AND MAINTENANCE SERVICES OF BIOMEDICAL AND NON-BIOMEDICAL EQUIPMENT OF THE DEPARTMENT OF PAY PATIENT SERVICES

II. CONTRACT PRICE

Twenty Five Million Pesos (PhP25,000,000.00) inclusive of VAT

Contract Price includes labor cost, use of facilities, tools and equipment, supplies including wastage, transportation to PGH, administrative, supervision and overhead expenses, profit and incidental expenses for the provision of the required services.

III. PROJECT DESCRIPTION

PGH is in need of a Third Party Service Provider (TPSP) who shall cover the management service, repair and maintenance of all biomedical and non-biomedical equipment and facilities of PGH that are connected and linked to paid services.

IV. CONTRACT DURATION

One year commencing from sixty (60) days upon the receipt of notice to proceed by the winning bidder.

V. SCOPE OF WORK

1. Management of all biomedical & non-biomedical devices & equipment and facilities management;
2. Management of preventive master control and technical assistance with renewal, including existing and all new delivered items;
3. Repair of all biomedical & non-biomedical equipment and facilities:
 - 3.1. On minor repair: Free Services and consumables (parts)
4. Staffing for above mentioned services

5. Operation and monitoring of services through a Computerized Maintenance Management System (CMMS)
6. Coordination with the current service agreement/contract holders in the repair and maintenance of current and new delivered equipment and facility. The PGH may add new equipment, facilities, and other entities through acquisition, lease, full management contract or shared service contract.

VI. DETAILED SCOPE OF WORK

1. ***Biomedical Management Services*** (including Biomedical and Diagnostic Imaging Equipment):
 - 1.1. Inventory management
 - 1.2. Management of biomedical equipment warranty.
 - 1.3. Management and administration of service contracts with the Original Equipment Manufacturer (OEM)/Supplier:
 - 1.3.1. Record keeping
 - 1.3.2. Review and recommendation
 - 1.3.3. Monitoring of expiration of contracts
 - 1.3.4. Facilitation of contract renewal
 - 1.4. Management and tracking of all maintenance requirements and services:
 - 1.4.1. Spare parts
 - 1.4.2. Consumables
 - 1.4.3. Accessories
 - 1.5. Provision of on-site program services:
 - 1.5.1. Operational management
 - 1.5.2. devices and equipment repair
 - 1.5.3. risk based corrective and preventive maintenance
 - 1.5.4. equipment calibration
 - 1.5.5. parts expense and incidental damage
 - 1.5.6. Acceptance testing, inspection, management of the installation of new equipment and end-users application training
 - 1.5.7. De-installation and decommissioning of End of Useful Life
 - 1.6. Planned Maintenance (PM) to be performed at the frequency recommended by the OEM.
 - 1.7. The Department-End user, Supplier and the TPSP must jointly approve any deviation from OEM/Supplier Specification including the performance of PM less frequently than OEM/Supplier recommendation/requirement
 - 1.8. Strategic Equipment Replacement Planning
 - 1.9. Equipment utilization analysis

- 1.10. Management reporting to the appropriate committees such as Safety Committee or Infection control.
 - 1.11. Monitoring and reporting: activity, SLAs, KPIs.
 - 1.12. Biomedical equipment budgeting and CAPEX planning.
 - 1.13. Management assistance in complying with local authorities, manufacturer hazard alerts, product recalls and mandated update.
 - 1.14. Coordination with the end-user on equipment procurement evaluation and selection.
 - 1.15. For diagnostic imaging devices/equipment: Glassware shall be included and shall be defined as X-ray tubes, image intensifiers, camera pick-up tubes, computed radiology detectors, crystals on nuclear medicine cameras, CRT tubes on monitors and all laser tubes.
 - 1.16. All software operated equipment shall be reviewed twice per year with the supplier and the end user to insure that all performance upgrades (existing features), security, and software "debug" patches are implemented and the systems are maintained at current supplier recommendation.
2. **Facilities Management Services** (include non-biomedical equipment and assets such as, but not limited to, air-conditioning units, elevators, mechanical, electrical, plumbing, fire equipment, painting, and carpentry):
- 2.1. Inventory management
 - 2.2. Management of non-biomedical equipment warranty
 - 2.3. Management and administration of service contracts with the Original Equipment Manufacturer (OEM)/Supplier
 - 2.3.1. Record keeping
 - 2.3.2. Review and recommendation
 - 2.3.3. Monitoring of expiration of contracts
 - 2.3.4. Facilitation of contract renewal
 - 2.4. Management and tracking of all maintenance requirements and services
 - 2.4.1. Spare parts
 - 2.4.2. Consumables
 - 2.4.3. Accessories
 - 2.5. Provision of on-site program services:
 - 2.5.1. Operational management
 - 2.5.2. Devices and equipment repair
 - 2.5.3. Risk based corrective and preventive maintenance
 - 2.5.4. Parts expense and incidental damage
 - 2.5.5. Acceptance testing, inspection, management of the installation of new equipment and end-users application training
 - 2.5.6. De-installation and decommissioning of End of Useful Life
 - 2.5.7. Maintenance and repair of all facilities of the Department including rooms and hallways covering plumbing, carpentry, painting, mechanical, and electrical.
 - 2.6. Planned Maintenance (PM) to be performed at the frequency recommended by the OEM.
 - 2.7. The Department-End user, Supplier and the TPSP must jointly approve any deviation from OEM/Supplier Specification including the performance of PM less frequently than OEM/Supplier recommendation/requirement.

- 2.8. Strategic Equipment Replacement Planning.
- 2.9. Equipment utilization analysis.
- 2.10. Monitoring and reporting: activity, SLAs, KPIs.
- 2.11. Non-biomedical equipment budgeting and CAPEX planning.
- 2.12. Management assistance in complying with local authorities, manufacturer hazard alerts, product recalls and mandated update.
- 2.13. Coordination with the end-user on equipment procurement evaluation and selection.
- 2.14. All software operated equipment shall be reviewed twice per year with the supplier and the end user to insure that all performance upgrades (existing features), security, and software "debug" patches are implemented and the systems are maintained at current supplier recommendation.

3. **Repairs**

The UP-PGH shall authorize the TPSP to conduct repair/rehabilitation, provided, however, that all necessary documents such as the Field Service Report (FSR), Quotation/Repair Proposal, Pre-repair Inspection Report, and Waste Disposal submitted by the TPSP shall have been verified, checked and inspected by the appropriate PGH unit.

The repairs shall be covered by the following:

- 3.1. Minor repair:
 - 3.1.1. Free Services on minor repairs if done by the biomed engineers and employees covered by the TPSP and spare parts and supplies not exceeding Php30,000.00 per month or Php360,000.00 per annum and consumable parts for immediate repair/restoration of works.
 - 3.1.2. Labors and materials which shall be needed for minor repair, which the TPSP certified not available will be subject to usual procurement process.
- 3.2. Required response times on devices/equipment/facilities service requests should be within 30 minutes by phone and 2 hours on-site.
- 3.3. Parts for down devices/equipment will be expedited with "fastest available" designation at no additional cost to PGH; and received on-site within thirty-six (36) hours from the time a need for part(s) is identified, unless otherwise a longer amount of time is needed for which a written justification from the TPSP should be provided.
- 3.4. Biomedical Technologies and Facilities Management Department.
- 3.5. The TPSP shall provide tools, equipment and other technical consumable for TPSP employees to perform all services.
- 3.6. Qualified Staffing: The TPSP shall provide skilled manpower to facilitate the above project.
 - 3.6.1. Biomedical Technologies Management Staff:

Staff	No.
Account Manager	1
Clinical Engineer	1
Admin. Officer	1
BMET III CM	1
BMET II CM	1
BMET I CM	1
BMET III PM/ Manager	1
BMET I PM	1
Imaging Tech III	1
Total	9

3.6.2. Facilities Management Staff:

Staff	No.
Senior Engineer	1
Admin. Officer	1
Master Electrician / Substation and Genset Operator	2
AC Technician	4
Junior Technician	4
Plumber	1
Carpenter/Painter	2
Help desk Officer	2
Supplies controller / Spare Parts & Tools Attendant	1
IT Officer	2
Total	20

3.7. Daily Operation:

3.7.1. The TPSP will assume sole responsibility for the daily operations and associated costs to provide a fully operational Biomedical, Non-biomedical, and Facilities Management Department to include:

3.7.1.1. On-site Management;

3.7.1.2. On-site biomedical, non-biomedical, and facilities Technicians

3.7.1.3. All required equipment

3.8. On-site hours of operation: 24 hours, Monday through Sunday; services provided during on-site hours will not result in additional charges for labor.

3.9. Has staff to respond to after office hour calls for repair of biomedical, imaging, non-biomedical equipment identified as critical to the continuum of care

3.10. The TPSP shall ensure that all staff will be accounted for everyday. A report/attendance shall be submitted to PGH, in case manpower does not meet the above, it will be deducted to the monthly billing due to the TPSP.

4. *Regulatory, Documentation, And Reportorial Requirements*

4.1. General Regulatory Requirements

- 4.1.1. The TPSP shall ensure that equipment programs and covered equipment performance comply with all regulatory agencies' requirements, including but not limited to: the Joint Commission on Accreditation of Healthcare Organizations (JCAHO); the Department of Health requirements, the PhilHealth Requirements, the AJA requirements. The TPSP shall be available and present for all Agency inspections to immediately provide information and/or documentation pertaining to the equipment as requested.
- 4.1.2. Uptime Guarantee of 96% for Diagnostic Imaging is expected. Penalties for not meeting expected uptime guarantee will be negotiated as part of the final agreement.
- 4.1.3. The TPSP will manage equipment recall program to include but not limited to alert monitoring, notification, take appropriate action, and maintain documentation required to meet regulatory requirements.
- 4.1.4. The TPSP is responsible for the management of all equipment operation and service manuals and is required to leave said manuals on site upon request and upon contract termination.
- 4.1.5. The TPSP will maintain an accurate equipment inventory and advising the end user proactively of any equipment removed from facility.
- 4.1.6. The TPSP will have a well-defined missing equipment process.
- 4.1.7. The TPSP must have an established process that clearly demonstrates how equipment abuse is defined; identified, reported and the education program used to decrease expenses in the area of physical abuse.

4.2. Performance Requirements

- 4.2.1. The TPSP will be required to disclose the names of third parties and/or subcontractors utilized by the TPSP to meet the requirements of the contract.
- 4.2.2. Service level agreements outlining all performance requirements and financial penalties associated with the TPSP will be reported and non-performance will be negotiated as part of the contract.

4.3. Documentation Requirements

- 4.3.1. The TPSP will ensure that all maintenance, repairs, and associated expenses are properly documented with copies of the documentation maintained by the TPSP; provided to the user department on request; and maintained in the PGH's equipment inventory database.
- 4.3.2. The TPSP will provide in a timely manner reports on key quality, cost and performance indicators. The TPSP's reports at a minimum will include:

- 4.3.2.1. Equipment uptime by individual item.

4.3.2.2. Costs by department and cost center number.

4.3.2.3. The number of planned and corrective maintenance issues completed on time and number of items scheduled for completion during the monitoring period.

- 4.4. The TPSP will provide service, PM and repair expense history information upon request from any facility participating in the contract for reasons that may include annual operating and capital budget processes. Service history information will be provided as a written report broken down by hospital cost center and include recommendations for equipment replacement.
- 4.5. Factors influencing the TPSP recommendation for replacement and included in its reports may include, but will not be limited to, equipment age, frequency of repair, non-availability of parts, lack of supplier support, and safety considerations, which will be listed in report provided by the TPSP.
- 4.6. The TPSP will provide a complete "asset management program" that will track all diagnostic imaging equipment within the PGH's facilities. This program will include a complete and comprehensive inventory of all equipment in use. The inventory will include, at a minimum: equipment description; Supplier; model, serial number; original purchase reference including acquisition date (manufacturing date if the equipment is used when purchased); warranty information; and location (physical and financial, by customer's cost center number).
- 4.7. The TPSP will provide a management information system designed and structured to meet the PGH's specific documentation and reporting requirements.
- 4.8. *Ad-hoc* reporting requests from PGH to TPSP must be met within 24 hours from the time of reporting request.
- 4.9. The management information system will monitor all activities for each piece of equipment including, but not limited to, warranty information, planned maintenance, corrective maintenance, additions, and deletions to equipment inventories, equipment uptime, service performance, service call response times, and repair costs.
- 4.10. All asset management information and software to read and interpret such is property of the PGH and will be provided to the PGH at any time during the agreement upon request or at contract termination. Backup data including all asset management information will be provided to the PGH quarterly.
- 4.11. The TPSP may be required to participate in hospital committees that discuss issues related to equipment services. Participation in committees may include preparing and providing reporting, documentation or follow-up actions from meetings as needed.

- 4.12. The TPSP will be required to provide services that require the use of manufacturer's proprietary service tools, software, or hardware.
- 4.13. The TPSP services will include troubleshooting and adjustments necessary to ensure proper PGH network interfaces.

5. *Point of Contact*

The TPSP will liaise with only two offices and will receive Job orders only from the:

1. Office of the Deputy Director for Administration- Represented by Dr. Ma. Teresa U. Benedicto; and
2. Office of the Department of Pay-Patients Services- Represented by Dr. Leo D.P. Cubillan.

All communications and requests are to be directed to the above named individuals. The above named individuals may designate a point person in charge of all requests and other communications regarding the TPSP.

VII. TERM OF PAYMENT

1. The TPSP shall bill the service rendered in the previous month.
2. All payment for the service rendered shall be made in local currency (*Philippine Pesos - PhP*).

VIII. ADDITIONAL TERMS AND CONDITIONS

1. Comply with the security, safety, UPM-PGH house rules, and plans for maintaining continued job site cleanup.
2. Investigation and submission of report/s to UPM-PGH for any accident or untoward incident that may occur at the site for the duration of the project.
3. Assume all responsibility for injuries to persons and damages to UPM-PGH and other property caused by the execution of the works and shall be liable for any claims against UPM-PGH on account of such injury and/or damage.
4. Provide necessary protection to all property of UPM-PGH from theft due to the performance of work

IX. OTHER REQUIREMENTS

Notarized certifications stating that the prospective bidder is in the business in the Philippines and other countries for at least ten (10) years.


1. Notarized certification that the company has managed Biomedical Engineering Services in hospitals with local, regional and global presence.¹

¹ Hospitals globally shall be classified as those hospitals in other countries

2. Notarized certification that the company has managed at least 500,000 equipment items.
3. Notarized certification that the company has specialization in providing biomedical and facilities management for at least two (2) years in the Philippines.
4. Provide list of the Key Personnel to be involved in the project including Curriculum Vitae stating their Qualification, Training Certification, and Technical Training.

Thank you very much.

Very truly yours,



LEO DP CUBILLAN, MD, M.PH

Chair, Department of Pay Patient Services