

## TENDER INSTRUCTIONS

FOR A DBM CONTRACTOR FOR THE NEW SINT MAARTEN HOSPITAL PROJECT



Date: May 11, 2016



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## 1 Introduction

### 1.1 Objective

The tender procedure for the construction of new General Hospital in St. Maarten (hereafter the 'Project' or 'New Hospital') is described in this Tendering Instruction.

This Tender Instruction is only send to the five (5) candidates (hereafter the Candidates) that were selected by the SZV based on the pre-selection procedure (version April 12, 2016) that was closed on Monday May 2, 2016. The five (5) Candidates are invited to participate in this final phase of the DBM Tender.

The objective of this Tender Instruction is to explain the background of the Project, the scope of the Project, the tender procedures, the structure of the various documents of the Tender Instruction, the relation between the individual documents and the awarding process.

The Candidate is responsible for verifying the receipt of the complete Tender Instruction. The Candidate must contact the Project Manager (as indicated in section 5) if you did not receive the complete Tender Instructions.

Terms in this Tender Instructions with capital letters are defined in the FIDIC Gold Book or if not in these Tender instructions.

### 1.2 **Disclaimer**

The information contained in this Tender Instruction is of general nature and for information purposes only. These Tender Instruction may not include all information that is necessary to consider all the circumstances of the DBM Tender.

The information in this Tender Instruction reflects prevailing conditions and SZV views as of the date of submission of these Tender Instruction, all of which are accordingly subject to change.

By participating in this Tender process and in submitting your bid, indicates acceptance by the Candidate of the terms and stipulations of this Tender Instruction.



# 2 General description of the Project

## 2.1 Background

In order to strengthen the healthcare sector on the Island of St. Maarten a Tripartite has been established consisting of (i) the Ministry of Public Health, Social Development and labour ('VSA'), (ii) The Implementing Body Social and Healthcare Insurances SZV ('USZV or SZV') and (iii) the St. Maarten Medical Center ('SMMC). The Tripartite is focusing on achieving affordable and sustainable quality healthcare based on the concept of 'care close to home'.

One of the conclusions of the Tripartite is that the existing hospital on St. Maarten is not up to par for the new development plans and the decision has been taken to build a new National General Hospital (the Project or the New Hospital).

## 2.2 Scope of the Project

The scope of this Project is to develop and construct a New Hospital at the same location as the existing hospital including sufficient parking space and the demolition of the existing building. Furthermore the contractor has to deliver and install all medical equipment, furniture and all the related IT equipment/network (medical). Furthermore, the contractor is invited to maintain the New Hospital for a period of 10 years plus two optional extensions of 5 year each. The contractor is also requested to arrange the financing of the New Hospital.

In short, the scope of the contract is design, build, finance and maintain a new and fully operational General Hospital based on a turnkey contract.

This means that the contractor will be responsible to design and build the New Hospital in accordance with the specifications described in the functional-, technical-, medical equipment requirements as part of the Employer's requirements. Furthermore the contractor will be responsible for the maintenance of the New Hospital including the medical equipment, inventory and IT for a period of 10 years as explained in the maintenance requirements. The contractor is responsible to manage his own processes to design build and maintain a new hospital. The DBM contract will be based on the Fidic Gold Contract.

The exact scope of the medical equipment and inventory is described in the demarcation list as explained in the technical and medical equipment requirements (reference is made to the appendices)



### Additional wing

SZV is considering to develop an additional wing (shell and core only) which might become an expansion of beds and additional facilities (for instance elderly care, rehabilitation) and or medical tourism. The Candidate is requested to include this additional wing as part of the DBM Tender for the New Hospital. However, at this moment in time, SZV has not yet finalized the possible use of this additional wing. Therefore, Candidates are requested to include only the shell and core in the Tender. The requirements for this additional wing will be available at the first round of questions according to the planning in this Tender Instructions.

In order to be flexible in its decision making, SZV requests Candidates to provide a separate contract sum for this additional wing (shell and core) for the design, the construction (build) and maintenance. SZV reserves explicitly the right to exclude the additional wing from the DBM Contract or to decide to only continue with the Design of this additional wing.

### Dialysis department

SZV has decided to develop a separate building for the dialysis centre at the indicated location on the map below. Therefor dialysis is not included in the New Hospital. The separate dialysis centre (the building and the (medical) equipment) will not be part of this DBM contract.





#### Green field

During the preparation of this Project, an evaluation of an alternative location for the construction of the New Hospital has been executed. Based on this evaluation, including an extensive risk evaluation, there are certain pro's and contra's for the Green field option versus the option to build on the same location. As some of those risks are beyond the control of SZV and time is an important factor for this Project, it has been decided by SZV to proceed with the construction of the New Hospital on the existing location. However, there is still a small chance that some of those risks for the Greenfield could be mitigated before signing the DBM contract.

Therefore, SZV reserves the right to request the winning Candidate, before singing the DBM contract, to adjust his contract sum based on the Green field option, if such Green field becomes available. If this request will materialize, the winning candidate will be entitled to a reasonable compensation to adjust the DBM Tender, as to be agreed up front between the SZV and the winning candidate.

### 2.3 Project organization

### 2.3.1 Contracting Party

SZV or a 100% owned subsidiary (special purpose vehicle to facilitate the financing) is the contracting party for the Contractor. SZV will become the owner of the New Hospital and the medical equipment and will lease the New Hospital to SMMC based on a long term lease agreement.

### 2.3.2 Project Organization

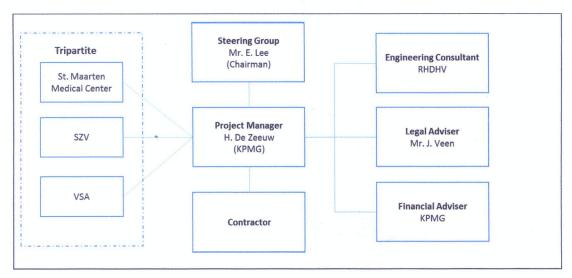
The Project will be managed by a Project team. The Project Team consists, amongst others, of various representatives of the Tripartite (SZV, SMMC, and VSA), a financial advisor (KPMG), a legal advisor and the engineering consultant.

The project manager (hereafter the Project Manager) of the Project team is Henk de Zeeuw of KPMG Corporate Finance, St. Maarten (hereafter KPMG). Royal HaskoningDHV (hereafter RHDHV) is the responsible engineering consultant. KPMG and RHDHV will act as the Employer's Representative during the design and construction phase of the Project as explained in the General and Particular Conditions of the Fidic Gold Contract.



The Project team reports on a periodic basis to a Steering Group consisting of the Minister of Public Health, Social Development and Labor (chairman) Mr. E. Lee, the (interim) Director of the SZV, Mr. G. A. Carty and the Director of the SMMC, Mr. K. Klarenbeek.

The following figure explains the relation of the different parties of the Project Team.



Sint Maarten Medical Center

SMMC is an autonomous, non-governmental, non-profit organization that is responsible for providing secondary care to the residents and visitors of St. Maarten, Saba, St. Eustatius and other surrounding islands. SMMC operates the only general hospital on the Dutch side of St. Maarten. The current hospital was built in 1991 and has approximately 66 beds and employs approximately 230 personnel of which 18 specialists.

Currently, SMMC is unable to fulfil the total demand on St. Maarten of the required basis secondary health care. Care that cannot be provided by SMMC is provided by other care providers (overseas medical treatment).

#### SZV

SZV is an independent administrative body (in Dutch: Zelfstandig Bestuurs Orgaan) tasked with the execution of social and health insurance laws on St. Maarten. Amongst others SZV is responsible for the executing of the national ordinances pertaining the healthcare in St. Maarten: ZV/OV (the national health care ordinance, FZOG (registration and execution of health insurance for (retired) civil servants) and AVBZ and the state pension fund (AOV). The majority of the operational expenses of SMMC relates to services groups that are administrated by SZV.



As SZV is managing the funds for the health care and the state pension, it has a strong balance sheet which is partly invested in long term projects and financial instruments.

VSA

The Minister of Public Health, Social Development and Labor (VSA) has the responsibility to ensure the framework for sufficient, affordable and effective healthcare, including hospital care, for the population of St. Maarten and its visitors. Furthermore VSA is responsible for the Inspection and compliance to medical and quality standards.

## 2.4 Starting points for the Project

### 2.4.1 Vision of the hospital

The realization of The New hospital is focused on meeting individual and community health needs through accessible and affordable means, achieving quality standards throughout the region.

There are three pillars that remain of great value to our institution: Safety, Health and Satisfaction.

The New Hospital will be built upon these pillars together with our community; our patients, their family and health care strategic partners, knowing that the New Hospital can achieve more in unison.

The New Hospital will work with a compassionate, qualified and competent staff personally invested in our community and our mission to use a holistic view and multidisciplinary approach with the people entrusted in our care.

Care close to home will be a continuous process of improving quality standards and proving general specialized care based on the care demand for our patient population, visitors and neighbouring islands. Care close to home also speaks for the focus on family centred care.

The New Hospital will be recognized by quality standards, affordability, accessibility, consistency and above all, satisfied patients, employees and partners in a safe and healthy environment.



### 2.4.2 General starting Points

The New Hospital will act as the only General Hospital for St. Maarten, Saba and St. Eustatius and the surrounding islands of approximately 60.000 inhabitants plus the many tourists that visit the island. The hospital care to be provided by SMMC is based on 4 main objectives:

- I. Efficient and Affordable: Hospital care should be efficient and affordable both now and in the future;
- II. Quantity and Quality: Quantity and quality of hospital care should be based on the anticipated demand for care of the residents and visitors of St. Maarten and be in accordance with applicable and agreed upon quality standards;
- III. Accessibility: Hospital care should be physically and financially accessible for all St. Maarten residents and its visitors;
- IV. Close partnership exists between SMMC and other care providers (amongst others French St. Martin our northern half of the island, other islands of the former Dutch Caribbean, medical institutions in the Netherlands, Columbia etc.). This is not only an important factor in determining what services SMMC will provide in St. Maarten, it also requires modern and up to date IT and medical equipment for safe (protected) exchange of patient information, shared diagnosis etc.

Following the above mentioned objectives and characteristics, the following starting points for the following general ambitions have been defined for the Employer's Requirements:

- Flexibility and functionality of the building: the New Hospital should be easy adaptable to anticipate
  on future developments.
- Caribbean culture: St. Maarten is part of the Kingdom of the Netherland but due to the proximity and the large number of tourist (stay-over and cruise), it has large influences from the USA. The New Hospital building should therefore have an international and no-nonsense exposure but should at the same time fit in the local environment and Caribbean culture. Part of that culture is that people live most of the time outdoors. A healthy environment is associated with being outside in fresh air. Having the ability for patients to go in the garden is therefore desirable. The interior of the New Hospital should as well reflect the colourful Caribbean Culture.
- Affordability: the increase of the cost of healthcare is a global issue. However, due to the small size economy the cost for healthcare per inhabitant is relatively high as there is only a small base.



The Tripartite is therefore implementing policies for 'managing' the cost of care which should be reflected as well in the construction (value for money) and the maintenance of the New Hospital.

- Medical Equipment: the supply, installation and maintenance is mandatory for the DBM Tender. In
  order to comply with the objectives of the SMMC, it is important that the New Hospital will be equipped
  with the latest proven technology that fits within the concept of a general hospital.
- Local involvement: to stimulate the local economy and local labour, it is mandatory to use as much as
  possible, local companies and suppliers for the construction and the maintenance of the New Hospital.
  It is appreciated to support the local labour with training on the job programs and or exchange programs.
  For SMMC is it important to incorporate as much as possible, the current maintenance organization of
  the SMMC into the future maintenance organization.
- Phased construction: as the construction of the New Hospital will be on the existing site, a phased
  construction and demolition process is required. During the construction the current hospital must
  remain fully operational. Nuisance (noise, dust, limitation accessibility) should be minimized during
  the construction.
- Local circumstances: St Maarten is situated in a hurricane and earthquake zone which might
  occasionally lead to substantial flooding. It is evident that the New Hospital should remain fully
  operational during such natural disasters. This should be reflected in the design and operations of the
  New Hospital and the availability (24/7 and 365 days a year) of clean water and electricity.
  - St. Maarten is a small island with a tropical marine climate with northeast trade winds and moderate temperatures between 30-35 Celsius. The location of the New Hospital is close to sea which means that sun and salt have a large impact on buildings and installations.

### 2.5 Structure of Documents

The information available for this Project is structured in three sets of information which are included to this Tender Instruction as appendices. The documents are divided over three sets, (i) the Fidic Gold Contract Documents; (ii) the Employers Requirements and (iii) the Information Reports.

The figure bellow reflects the structure of the available information for this Tender.



### Tender guide

#### Contract

- 1. Particular Conditions
- 2. Contract Data

#### **Employer's Requirements**

- 1. Functional Requirements
- 2. Technical Requirements
- 3. Medical Equipment Requirements
- 4. Maintenance Requirements
- 5. Process Requirements

#### **Information Reports**

See document list

#### Fidic Gold Contract

The DBM contract is based on the Fidic Gold Book first edition 2008. Please note that the Fidic contracts are protected by license for copyright. SZV is not allowed to distribute a copy of this contract. Candidates are expected to obtain a copy themselves.

Please note that in this Project the operations <u>will not</u> be transferred to the contractor. Only the maintenance component (building, medical equipment, furniture etc.) will be the responsibility of the contractor.

The required adjustments of the Fidic contract are detailed in the Particular Conditions of the contract. Furthermore, the Contract Data with the Forms of Tender and Agreement and Forms of Security and Guarantee are included in this Tender Instruction.

### Employer's Requirements

The Employer's Requirements contain the product specification divided in functional requirements, technical requirements, medical equipment requirements, the process requirements and the maintenance requirements.

#### Functional requirements

The functional specifications describe the functional and spatial requirements for the New Hospital. The space program is included in the functional specifications and shows the minimum requested floor area for each room. The required relation between the various departments is described as well. As indicated in section 2.2, there is no need for a dialysis centre as this function will be established in a separate building which does not form part of this DBM contract. The Phasing plan for the Project is included in the Functional Requirements.



### **Technical Requirements**

The technical specifications describe the general ambitions for the new building, the demolition and the technical requirements for the architecture, facilities, structure, building physics and acoustics, fire safety, mechanical installations, plumbing installations, medical gasses, electrical installations, communication systems, security systems and transportation systems.

Medical Equipment requirements

The specifications for medical equipment describe the requirements for the new medical equipment including the required maintenance and education.

**Process Requirements** 

The process requirements describe the specifications for the process after signing the contract to completion of the New Hospital and the full maintenance period. Starting point of the process is 'system oriented contract management'. The document explains the responsibility and obligations of the contractor. A consent and approval plan is included in the process requirements.

Maintenance Requirements

The maintenance requirements describe the specifications for the maintenance period including required permitted recovering times and the current maintenance organization of the hospital.

**Information Reports** 

The information reports consist of all available additional information that can be useful in this Project. Please take note that revises never have been processed in the drawings of the current hospital, therefore the drawings can be out of date.

### 2.6 Finance

The Candidate is requested to arrange the financing of the New Hospital. The financing will be arranged in a separate contract. Financial close has to take place simultaneously with the signing of the DBM contract. The finance must be structured on the basic principles of project financing. The Candidate must submit as part of its submission, a Financing Plan explaining the structure and the details of how to attract sufficient and appropriate financing for the Project for at least 80% of the contract sum excluding the additional wing. Candidates may assume that the remaining funds for the contract sum will be made available by SZV (as the Project Sponsor) at the signing of the DBM contract.



As SZV has different financing plans for the additional wing (reference is made to section 2.2 scope), Candidates are requested to exclude the additional wing from the finance proposal.

The SZV as the borrower may elect to utilize a new specials purpose vehicle, 100% owned by SZV. The facility should be in USD with a fixed interest rate. Interest during the construction needs to be capitalized. The term of the loan should be at least 10 years after the completion of the construction of the New Hospital. A longer term is preferred. The collateral package will include (i) a registered first mortgage lien on the New Hospital, (ii) assignment of the lease revenue from the SMMC (iii) continuing parent guarantee (SZV) (iv) the assignment of the insurance proceeds related to the New Hospital (v) a debt service reserve account of maximum 3 months of an interest-bearing escrow account which should remain in place for the term of the loan and (vi) a pledge on the Surety Bond of the Performance Security during the construction period.

For your reference, a summarized balance sheet, profit and loss statement and cash flow statement of the SZV for 2013 and 2014 has been included as appendix 6 to this Tender Instruction. There is no guarantee from the Government of St. Maarten available however by law, the Government of St. Maarten guarantees the solvency of the SZV funds.

Please note that SZV reserves the right *not to use* the Candidate's finance proposal if it turns out, solely to the discretion of SZV, that the Candidate's financing proposal is less attractive than SZV's current alternatives. In case SZV decides not to use the Candidate's financing proposal, SZV will prove to the Candidate that the required funds to execute this Project are available before signing of the DBM Contract.

One of the alternative financing options that SZV is exploring is to use Government funding for the financing of the New Hospital based on existing funding arrangements between Government of St. Maarten and the Dutch Kingdom. If such option is chosen than the Government might become a party to the DBM contract.

### 2.7 Timeline and milestones

For this Project time is of the essence since the existing hospital has several deficiencies, including quality issues and limited space for extension of its current services. As a consequence hereof, there is currently a high number of (expensive) overseas medical treatments (for instance to Colombia, Curacao, Netherlands etc.) When the New Hospital becomes operational the overseas medical treatment can be substantially reduced. SZV is therefore very motivated to start the Project on short notice and to finish the construction



within the agreed timeframe. The following (indicative) planning for the construction will be applicable and may be changed in the course of the tender process.

*	
Planning milestones	Timeline
Tender	May – August 2016
Submission application (final offer)	July 18 <sup>th</sup> 2016
Signing Contract	August 31st 2016
Start Design	Commencement Date
Completion	36 months after Commencement Date



## 3 Tender Procedure

# 3.1 Approach

This chapter describes the overall tender process including the planning, information exchange, evaluation criteria and the other conditions for this tender.

Awarding of the DBM contract will take place on the basis of the evaluation criteria as explained in section 3.3.

The winning Candidate of this evaluation process will be invited for further discussions and when applicable further negotiate the DBM Contract and the finance contract. If, SZV cannot conclude a final contract with the winning Candidate, SZV will invite the next highest ranking Candidate for further discussions of the DBM- and finance contract. This process can be repeated till a contract is signed.

#### 3.2 Time schedule

The following (indicative) planning for the tender process will be applicable and may be changed in the course of the tender process.

Item	Phase	Date
1	Start DBM tender and sending out Request for Proposal	11/05/2016
2	Site visit existing Hospital	May 18-May 20, 201
3	First round of Questions by Qualified DBM Tenderers	Before May 25, 201
4	Answers first round of Questions	01/06/2016
5	Second round of Questions by Qualified DBM Tenderers	Before 6/20/2016
6	Answers second round of Questions	27/06/2016
7	Submission of bid	18/07/2016
8	Award recommendation	15/08/2016
9	Objection period	Aug 15-Aug 22, 201
10	Preparing contract close	Aug 15- Aug 31, 201
11	Signing of the DBM contract (and if applicable the finance documentation)	30/08/2016

#### Site visits

Site visits will be scheduled over May 18 till May 20<sup>th</sup>, 2016. Each Candidate will be contacted to arrange an individual date and timeslot. The site visits will be organized by the Project Manager and representatives of the SMMC and will take maximum 4 hours.



### Questions

Candidates for the Tender process can issue their questions in writing (using the format in appendix 5) via email to the Project Manager (contact information in section 5) in two rounds. The first round of questions closes at May 24, 2016 at midnight. The answers will be sent anonymously to all parties not later than June 6, 2016. The second round of questions closes at June 20, 2016 at midnight. The answers will be sent anonymously to all parties not later than June 27, 2016.

#### Objection period

Every Candidate will receive its own scoring (reference is made to the section 4. Awarding process) for its submission including the overall ranking. Although SZV is of the opinion that that the Tender process is a transparent and professional process, a Candidate that is of the opinion that its score is demonstrably incorrect might file an Objection. This Objection should clearly motivate why the Candidate is of the opinion that his score is incorrect.

The Objection should be filed, before August 22, 2016 with the Chairman of the Steering Group, Minister E. Lee via email <a href="Emil.Lee@sintmaartengov.org">Emil.Lee@sintmaartengov.org</a> with a copy to the Project Manager.



# 4 Awarding process

This chapter describes the requested deliverables for your Tender Submission, the evaluation criteria and the awarding process. Section 4.1 describes the general awarding process, the specific awarding process is elaborated in section 4.2.

Section 4.2 explains the evaluation criteria in detail. For each evaluation criteria the maximum score, deliverable and specific awarding process is explained.

## 4.1 Awarding team

The evaluation of the provided information and the scoring will be done by the Project Team according to the approach as described in the next paragraph. The Project Team for the awarding will consist of five (5) members who will award the submission individually. The scoring for each evaluation criterion will be the average of the 5 individual scores.

The awarding will be done by the following members:

_	Representative of the Ministry of Public Health, Social Development and Labor	(1x)
-	Director of the SZV	(1x)
-	Director of the SMMC	(1x)
-	Project Manager KPMG	(1x)
_	Representative Royal HaskoningDHV	(1x)

As part of the awarding process, SZV will have to present the outcome of the evaluation process to the its Board of Supervisory Directors and the Council of Ministers of St. Maarten. Only thereafter, the winning Candidate will be informed.

# 4.2 Evaluation criteria, awarding process and deliverables

Awarding of the Cadidates will be done based on the combination of the Price, Quality of the proposal and the Financing proposal. The applications will be awarded based on the following evaluation criteria and maximum scoring:



Evaluation criteria	Maximum score
1. Price	70
1.1 Design and construction costs	(40)
1.2 Maintenance costs	(30)
2. Quality	100
2.1 Plan of Approach	20
2.1.1 Organization and local participation	(5)
2.1.2 User participation	(5)
2.1.3 Pricing and variations	(5)
2.1.4 Vision on maintenance	(5)
2.2 Design Solution	50
a. Urban integration: masterplan including parking solution, phasing and accessibility of the hospital.	(10)
b. Exposure, healing environment and efficiency of the building	(15)
c. Flows and logisitic inside the building.	(10)
d. Flexibility and future growth of the building.	(10)
e. Sustainability in terms of energy use.	(5)
2.3 Timing	10
2.4 Local Involvement	20
3. Financing	30
3.1 Financing Plan	(20)
3.2 Termsheet	(10)
Total Score	200

### **4.2.1** Price

Price is divided into two seperated evaluation criteria; the Price for the Design & Construction costs for the New Hospital and the Price for the Maintenance costs for the New Hospital. Both Prices must be submitted by the Candidate according to the price breakdown New Hospital in Appendix 2. Your Price shall be based on the requested Design, Build and Maintenance activities for the New Hospital excluding the additional wing as described in the complete set of Tender Information.



In addition to the Price for the Design & Construction costs for the New Hospital a specification of the price for Medical Equipment is requested for the assessment of the price for medical equipment.

The price breakdown Additional Wing for the Design & Construction costs and the price breakdown Additional Wing for the Maintenance costs must be submit as well, but will not be awarded. The price breakdown for the Additional Wing for both the Design & Construction costs and Maintenance costs is a simplified sheet. All costs for internal finishings, inventory, medical equipment etc. are not included.

#### **Deliverables**

- Price breakdown Design & Construction New Hospital (Appendix 2)
- Price breakdown Maintenance New Hospital (Appendix 2)
- Pricing of Medical Equipment (Appendix 3)
- Price breakdown Design & Construction Additional Wing (Appendix 4)
- Price breakdown Maintenance Additional Wing (Appendix 4)

In the price breakdown it is obligated to fill in all purple fields in the 'tab Design and Construction costs' and the 'tab Maintenance costs'. The sheets will automatically calculate the final price for the Design and Construction costs and the Maintenance costs. This final price of the Design & Construction costs for the New Hospital and Maintenance costs for the New Hospital will be used to award your application.

In the 'tab Design and Construction costs' thirteen different categories are defined. All categories are explained in the sheet. The following categories need further explanation:

<u>Medical equipment and installations</u>: a subdivision is made for equipment in category 1 and equipment in category 2. The categories correspond with the Medical Equipment list in Appendix 3.

Category 1: Medical equipment is defined by quantities and specification.

Category 2: Medical equipment is only defined by quantities.

For Medical equipment it is requested to make a price for all equipment in both categories. Therefor it is requested to fill in Appendix 3 as well and define the supplier, type of equipment and price of single equipment for all categorie 1 equipment. For category 2 equipment it is only requested to fill in a provisional sum.



The result of the price for all category 1 and category 2 equipment as described in Appendix 3 needs to be summerized in the price breakdown sheet in Appendix 2.

<u>Furniture and fittings</u>: all elements included in this category needs to budgetted based on a provisional sum. The provisional sum can be made based on the information provided in the Employer's Requirements.

### Awarding of the evaluation criteria Price

The awarding of the evaluation criteria Price will be done separatly for the Design & Construction price and the Maintenance price as applied in Appendix 2. Both prices will be awarded according to the following principle.

### 1.1 Design & Construction costs

The Candidate with the lowest price for Design & Construction costs, compliant to the described work in the Employer's Requirements, will receive the maximum score of 40 points.

All Candidate(s) with a price for Design & Construction costs, compliant to the described work in the Employer's Requirements, within a range of 20% above the lowest price, will receive a score based on the following formula:

Score = 
$$40 - \left( \left( \frac{Price\ Candidate - Lowest\ Price}{20\% * Lowest\ Price} \right) * 40 \right)$$

All Candidate(s) with a price for Design & Construction costs higher than 20% above the lowest price will receive a score of 0 points.

#### 1.2 Maintenance costs

The Candidate with the lowest price for Maintenance costs, compliant to the described work in the Employer's Requirements, will receive the maximum score of 30 points.

All Candidate(s) with a price for Maintenance costs, compliant to the described work in the Employer's Requirements, within a range of 20% above the lowest price, will receive a score based on the following formula:



$$Score = 30 - \left( \left( \frac{Price\ Candidate - Lowest\ Price}{20\% * Lowest\ Price} \right) *\ 30 \right)$$

All Candidate(s) with a price for Maintenance costs higher than 20% above the lowest price will receive a score of 0 points.

SZV receives the right to exclude a Candidate in case of an 'abnormal low bid'.

### 4.2.2 Quality

Quality is the second evaluation criteria and comprises the subcriteria Plan of Approach and Design Solution. The Candidate is challenged to present a conceptual design for the New Hospital and a Plan of Approach as elaborated in the following table.

#### **Deliverables**

The deliverables including maximum pages are described in the table below.

Evaluation criteria	Deliverables
2.1 Plan of Approach	
2.1.1 Organization	Max. 15 A4 pages (1 sided)
Describe the project approach and organization for the Design & Build phase and the Maintenance phase. Show at least the key roles in your project organization and appoint how you will communicate with the Employer and all stakeholders. Include	(2 51404)
resumes of your key team members.	
Describe specifically the added value for the Employer.  2.1.2 User participation	Max. 5 A4 pages (1 sided)
Describe how the medical staff and end-users will be involved during the design process regarding the medical equipment, inventory and the fit-out of rooms? Appoint the number of user consultations, planning and approach.	
Describe specifically how you add value for the Employer by consulating and involving the hospital organization during the design process.	
2.1.3 Pricing and variations	Max. 5 A4 pages (1 sided)
Describe how you will guarantee:  - that all medical equipment will be in according with the latest technology at the time of delivery?	



<ul> <li>the price of medical equipment and inventory as included in the provisional sum?</li> <li>competitive price levels for variations during both the design &amp; construct and maintenance phase? And what surcharges will be applicable?</li> </ul>	
Appoint specifically how the Employer receives a hospital with the lastest technology regarding medical equipment and how competitive pricing is established during the entire project.	3
2.1.4 Vision on maintenance	Max. 5 A4 pages
Describe your vision on maintenance and elaborate how you will involve the current maintenance organization of the hospital during your maintenance period?	(1 sided)
Appoint specifically your added value for the Employer regarding the local employement. Describe how you will train and educate the current hospital organization and what your approach will be.	
2.2 Design Solution	
Delvelop a design for the New Hospital which includes:  - Masterplan for the urban integration of the New Hospital in the existing environment. The masterplan includes at least a phasing plan, the flows, entrances of the terrain, logistic processes, parking solution (including number of parking places) and the flexibility of the building.	Drawings 1:500
- Floor plans: show flows, logistics, functional lay-out and space plan on departement level.	Drawings 1:200
<ul><li>Sections: show vertical relations and transportation.</li><li>Façade impressions.</li></ul>	
- 3D impressions: interior and exterior.	
<ul> <li>Explain your design concept and include at least:         <ul> <li>Architectural concept including materialization and building physics.</li> <li>Installation concept: schematic scheme's of installation concept and description of functionalities. Describe at least the fire safety, MEP installations, medical gases, communication systems, security systems and transportation systems (including materialization).</li> <li>Structural concept: explain starting points regarding wind loads, earthquake loads and hurricanes etc., describe the principles for the foundation and describe how the stability of the building will be guaranteed.</li> <li>Sustainability concept including an indication (calculation) of the energy use of the New Hospital.</li> </ul> </li> </ul>	The design can be presented in a report with a maximum of 100 pages A4 (1 sided) or 50 pages A3 (1 sided).
The design will be awarded on the following aspects:  a. Urban integration: masterplan including parking solution, phasing and accessibility of the hospital.	
b. Exposure, healing environment and efficiency of the building.	
<ul><li>c. Flows and logisitic inside the building.</li><li>d. Flexibility and future growth of the building.</li></ul>	
e. Sustainability in terms of energy use.	



	iocial & Health Insurances
2.3 Timing	
Candidates are challenged to accelarate the D&B period in a faster schedule than the 36 months (starting at the Commencement-Date until Commisioning Certificate) that are determined in the contract.	Schedule max. 1 page A2 (1-sided) + description
It will be off great benefit for the Employer if the New Hospital will be delivered sooner than the mentioned schedule of 36 months. The Employer is prepared to provide a bonus of USD 200,000 for each full month (30 days) that the Time for Completion of Design-Build will be reduced.	max. 2 pages A4 (1-sided)
The proposed new date for delivering the New Hospital will be a contractual agreement. If this new date for completion will not be made, the Delay damages as agreed in the Contract will be valid.	
Provide a time schedule of the complete design and construction process clearly showing the Time for Completion of Design-Build. The schedule must be accompanied by a description how the New Hospital will be delivered on time and what measures will be taken to accelarate the schedule.	
2.4 Local involvement	
To stimulate the local economy and local labor, it is mandatory to use as much as possible, local company's and suppliers for the construction and the maintenance of the New Hospital.	Max. 3 pages A4 (1-sided)
State the Contract Value (USD) that will be contracted to local parties related to the Contact Price (price breakdown appendix 2) for both D&B and Maintenance Period.	
Describe how you will make use of local companies and suppliers as much as possible during the design, construction and maintenance period. Appoint how you will guarantee the stated level of local participation.	
Local means a company and/or supplier that is located on the Dutch side of St. Maarten. The local company and/or supplier shall:  - Be registred in the Chamber of Commerce on the Dutch side of St. Maarten for more than 1 year at the moment of contracting the local sub-contractor or local supplier;  - Have fulfilled their obligations to pay social security contributions	
and taxes and is compliant with the law of the country of origin of the company;	n
ceased; - Not be subject to a suspension of payments or substantial legal claims;	
<ul> <li>Have not been subject to an irrevocable judgment whereby an act of omission in breach of the rules of professional have occurred.</li> </ul>	or



If the Candidate does not include any local involvement, the Employer has the right to exclude the Candidate from the Tender process.

It will be benificial if the Candidate appoints how to add value for the local economy. Describe the added value in labour and materials during the Design, Build and Maintenance period.

### Awarding of the evaluation criteria Quality

The awarding of the evaluation criteria Quality will be done according to the described approach per subcriteria inside the table above.

### 4.2.3 Finance

The last evaluation criteria is finance. For the finance the Candidate is expected to deliver a Financing plan according to the criteria as described in the table below.

#### **Deliverables**

The deliverables including maximum pages are described in the table below.

Evaluation criteria	Deliverable
3.1 Financing plan	
The finance must be structured on the basic principles of project financing. The Candidate must submit a Financing Plan explaining the structure and the details of how to attract sufficient and appropriate financing for the Project for at least 80% of the contract sum excluding the additional wing.  The financing plan will be awarded based on the best fit for the Employer in terms of the cash flow of the Project, the overall costs and terms and conditions. The overall cost will be calculated as a function between all the related expenses (interest, fees, insurances etc.) compared to the loan amount.	Financing plan of max 10 A4 (1 sided).
3.2 Term sheet	-
The Financing Plan has to be supported by an indicative term sheet from by a financial institution compliant to Moody's AAA rating or equivalent. The indicative term sheet should at least include the following information:  - Contract value  - Loan amount	Indicative Term sheet of max 2 A4 (1 sided).



- Lender
- Interest rate
- Term of the loan
- Repayment schedule
- All applicable fees and or premiums (please specify)
- Collateral
- Any other relevant information

Quality of the term sheet will be compared to the Project specifics and international benchmark information.

Awarding of the evaluation criteria Finance

The awarding of the evaluation criteria Finance will be done according to the described approach per subcriteria inside the table above.



## **5** General Conditions

This chapter describes the general conditions applicable for the Tender procedure. It is divided in three paragraphs for the grounds for exclusion and eligibility requirements, the conditions and disclaimers.

## 5.1 Ground for exclusion and eligibility requirements

SZV may exclude, at its own discretion, Candidates from participation of the Tender process if they:

- Are in state of bankruptcy or liquidation, their businesses have ceased;
- Are subject to a suspension of payments or substantial legal claims;
- Have been subject to an irrevocable judgment whereby an act or omission in breach of the rules of professional have occurred;
- Provide false and or incorrect information to SZV;
- Act in breach of the rules and regulations for the submission of the Pre-selection Documents as per Section 4 of this Request of Information.
- Have not fulfilled their obligations to pay social security contributions and taxes and is not compliant
  with the law of the country of origin of the company.

### 5.2 Conditions

The following rules and regulations will apply for this Request for Information.

Candidates are required to issue their submission (one original and 3 copies) in English and in hardcopy,
 clearly indicating "Submission New Hospital St. Maarten", no later than:

### July 18, 2016 at 14.00, St. Maarten time

at the office of:

Notary Boekhoudt:

**Professional Office Park** 

Osprey Drive 1, Unit 2-B, Point Blance

St. Maarten

Attention Notary Boekhoudt.



- Submissions received after this date and time will not be considered and will be returned to the sender.
   The Notary will be requested to make a notarized document indicating the time of receipt of each of the submissions, the number of copies received etc.
- There is no expressed or implied obligation for SZV to reimburse responding Candidates for any
  expenses incurred in preparing any documentation in response to this DBM Tender for the New
  Hospital.
- SZV explicitly inform all Candidates that it is strictly prohibited to contact any person other than the
  Project Manager pertaining to this Project. Lobbying is also explicitly prohibited under any
  circumstances and non-adherence to these requirements will automatically lead to disqualification of
  Candidates for the DBM Tender.
- Integrity is of great importance for SZV. Therefore the Candidates must include and confirm the following anti-bribery paragraph in their submission, which will become a part of the DBM Contract:

"[Company name] hereby undertakes that, at the date of issuing this proposal, itself, its directors, officers or employees have not offered, promised, given, authorized, solicited or accepted any undue pecuniary or other advantage of any kind (or implied that they will or might do any such thing at any time in the future) in any way connected with the DBM and finance proposal for SZV and that it has taken reasonable measures to prevent subcontractors, agents or any other third parties, subject to its control or determining influence, from doing so."

- Reviewing of the submissions will be done under the responsibility of the Project team based on the
  criteria as described in section 3.4. During the evaluation process SZV reserves the right, where it might
  serve in SZV's best interest, to request additional information or clarification from the Candidates.
- Submission indicates acceptance by the Candidates of the conditions contained in this Tender Instructions.
- The stipulations for European Procurement are not applicable for this Tender Proses. St. Maarten Law shall be applicable for the Tender process. The DBM Contract shall be governed by the laws of St. Maarten.
- All documentation received from the Candidates will become the property of SZV.
- Candidates shall treat all information provided as strictly confidential. The information shall only be used for this Tender.



- The Tripartite reserves its right to change the contacting party from SZV to the hospital SMMC for the Medical Equipment.
- For further information and or questions regarding this Request for Information, please contact <u>only</u> the Project Manager with the following contact information:

H.de Zeeuw

Tel: +1 (721) 5423672 or +1 (721) 5546451 (cell)

dezeeuw.henk@kpmg.com