

GREATER GLASGOW AND CLYDE NHS BOARD

NEW SOUTH GLASGOW HOSPITALS PROJECT

**THE APPOINTMENT OF A LEAD CONSULTANT FOR
A PUBLIC FINANCE PROCUREMENT ROUTE**

INFORMATION MEMORANDUM

MAY 2008

OJEU Ref : *2008-048508*



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1. Introduction

1.1 The Project

Greater Glasgow and Clyde NHS Board (the "Board") are looking to procure the construction of a new Adult Acute Hospital and a new Children's Hospital at the site of the existing Southern General Hospital in Glasgow. As part of this re-development the Board is also planning to construct a new Laboratory Block on campus. The Board are still reviewing whether or not to include the Laboratory Project as part of this commission. Organisations responding should at this stage include relevant experience related to Laboratory design and procurement in addition to Adult Acute and Children's Hospital facilities. A decision will be made in advance of the issue of the full invitation to tender for the Lead Consultant commission.

1.2 Current Position

The Board have received Outline Business Case (OBC) approval from the Scottish Government to proceed and develop detailed proposals prior to Full Business Case for a new Children's Hospital, a new Adult Acute Hospital and new Laboratory Facilities on the site at the Southern General Hospital. Approval has been given to £842m of public finance to fund the project and this sum includes works, equipment, fees, contingency and inflation to mid build circa 3rd qtr 2012. The budget for building works is circa £550m for the new Acute and Children's Hospitals.

Design and project work undertaken to prepare the OBC was based on the project being procured through the Private Finance Initiative, but this route proved to be unaffordable and so a public finance solution has been confirmed. The Board have therefore developed a full Public Sector Comparator (PSC) design for OBC purposes, including schedules of accommodation, project cost plan and design drawings at 1:500 (all areas) and 1:200 (10 selected departments). A full Technical Adviser team have been assisting the Board to develop the PSC design and capital cost plan, this work culminating in the preparation of the Design Solution Report in July 2007. The change of procurement route has resulted in the need to re-advertise the commission.

The Board have secured Outline Planning Consent for the project, conditional on a Section 75 agreement and a number of planning conditions. The Board are actively pursuing the conclusion of the Section 75 agreement and the final confirmation of planning consent. It is hoped to have this work completed prior to the appointment of the Lead Consultant.

1.3 Procurement Strategy

Since approval of the OBC the Board have considered a range of procurement options to deliver the project and are currently considering a Design and Build form, utilising a two stage tender process. In tandem with the first stage of the process to select and appoint a Lead Consultant, the Board will be sounding out the market in terms of the appetite to compete in a two stage process. It is likely the Board will complete the market sounding exercise before the issue of the full tender for the Lead Consultant and that the Board may be able to clearly articulate its requirements in respect of the Lead Consultant's role and the procurement route it intends to follow.

The Lead Consultant, once appointed will be required to advise the Board on structuring the selected tender process, and advising the Board on how to maximise competition whilst securing the maximum level of market interest.

1.4 Lead Consultant

NHS Greater Glasgow & Clyde (the Board) require the services of a Lead Consultant to review and develop the concept design (PFI Public sector comparator design) and thereafter co-ordinate and manage the design and build procurement process for the re-development of the Southern General Hospital campus to provide a single in-patient site for South Glasgow. The role is perhaps more conventionally known as 'Shadow Design Team', and the Lead Consultant will initially assist with finalising the briefing documentation, followed by the development of the Employer's Requirements and tender documentation followed by successive stages of procurement, Preferred Bidder, Planning Consent, agree final GMP, Contract Close, Construction Phase and Post Project Evaluation. This will also include assisting the Board's Project team to complete the Full Business Case prior to Contract Close.

The new build Adult Acute Hospital, Children's Hospital and Laboratory facility within the campus will be linked to the more modern buildings within the site. A number of the older existing buildings will also be retained as part of the redeveloped campus, and at present the Board anticipate any refurbishment works to these buildings will be undertaken by a separate design team and procurement process.

The Lead Consultant will be appointed by the Board under one appointment to fulfill the following roles from completion of Stage 1 (OBC/PSC design) through to a fully commissioned and operational building based on the stages and tasks listed later in this document: -

- Project Management
- Employer's Agent role (construction stage)/Contract Administration
- Architectural Design and Site masterplanning
- Healthcare Planning
- Civil and Structural Engineering
- Building Services Engineering & IT Infrastructure
- Cost Consultant/Quantity Surveying/Lifecycle costing
- CDM Co-ordinator
- Risk and Value Management advice
- Facilities Management advice (soft and hard FM)
- Procurement and Construction Management Advice
- Landscape Architect

Whilst the Lead Consultant may sub-contract some of the services to other professional bodies of the requisite experience, competence and resource, the Lead Consultant shall be **fully** responsible and liable to the Board for the services provided (or that should be provided) by such entities and for any designs produced by them. The Lead Consultant's professional indemnity insurance should therefore cover claims for all of the services to be provided under the appointment (e.g. including architectural, engineering, cost consultancy etc.).

All sub-consultants must (a) enter into appointment agreements with the Lead Consultant in equivalent terms to those that apply between the Lead Consultant and the Board and (b) enter into direct agreements with the Board including step-in rights.

Please also refer Section 4 of this Memorandum of Information for a more detailed scope of services.

The key stages are currently foreseen as: -

Stage 1	OBC - completed.
Stage 2a	Complete project brief, review and update site masterplan, review and update departmental relationship drawings, prepare Employer' Requirements, preparation of MOI, OJEU, PQQ and full tender documentation.
Stage 2b	Evaluation of 3 No. Stage 1 bids.
Stage 3a	Stage 2 Bid – Design development with short-listed team(s), full evaluation and review process and selection of preferred bidder.
Stage 3b	Detailed Planning Consent, agree GMP and Contract Close.
Stage 4	Implementation, Construction and Design Development. Full management, administration and technical due diligence of works phase by Shadow Design Team.
Stage 5	Completion and building commissioning, equipping and operational transfers.
Stage 6	Post Project Evaluation and Defects.

The Board will expect the appointed Lead Consultant to work with the established project network, including all appointed advisers; all project related documentation, designs and specification, budgets and programmes developed to date as part of Stage 1, subject to any changes agreed with the Project Director.

The Board have existing Consultancy agreements for the supply the following services;

Legal	Shepherd and Wedderburn LLP.
Financial	Ernst & Young.
Planning	Keppie Planning.
Transportation	JMP Consultants Ltd.
Environmental	Ironside Farrar.

1.5 **Return Date**

Parties interested in bidding for this appointment should complete the attached Pre-Qualification Questionnaire (the "PQQ") and return the same to the Board at the address detailed at 1.6 below, no later than midday on 5 June 2008 marked "For the attention of **Mr. John Hamilton, Head of Board Administration.**

1.6 **Address for return of completed PQQ Documentation**

Mr. John Hamilton
Head of Board Administration
Greater Glasgow and Clyde NHS Board
Dalian House
350 St Vincent Street
Glasgow G3 8YZ

1.7 **Points of Clarification**

Prospective respondees can raise points of clarification prior to the submission date for responses by contacting;

Peter Moir
Large Projects / PPP Projects Manager
Greater Glasgow and Clyde NHS Board
Project Offices
1 Jubilee Court
Hillington
Glasgow G52 4LB
Tel: 0141 892 6700
Email: peter.moir@ggc.scot.nhs.uk

2. Project Objectives

To complete Phase II of the Board's Acute Services Strategy through the re-development of the Southern General Hospital campus. This will involve the procurement of new buildings on site to include;

- New Adult Acute Hospital 1109 beds.
- New Children's Hospital 240 beds.

Both the above are planned to be built as an integrated facility.

The Board also intend to build a new Laboratory Facility at Southern General Hospital to support the implementation of the Board's Laboratory Services Strategy, by providing facilities for Haematology, Biochemistry and Mortuary. The Board have still to decide if the Laboratory Facility will be procured with the in-patient facilities noted above, or by a separate project.

3. Project Scope

3.1 Location:

Southern General Hospital,
1345 Govan Rd.
Glasgow G51 4TF

3.2 General Description:

The services are required to assist the Board to brief, design, manage and procure through a D&B construction route

Key elements of the project are (for information);

- Development of an integrated adult acute and children's hospital providing the full range of acute health services.
- Development of a laboratory facility including Mortuary and Post-Mortem Services, Biochemistry, Haematology and Blood Transfusion.
- Possible provision of non-clinical services such as Hard FM services to the new facilities by the contractor for a 3-5 year initial period.
- The supply and installation of Group 1 equipment and location and/or fitting of Group 2 equipment supplied by the Board.
- Information Management and Technology (IM&T) – Out with this project, the Board is procuring software and end-use hardware as part of a separate IM&T project.

The Board requires the provision of integrated facilities that are readily adaptable to changing clinical practice and makes the best use of new technologies. The functional content of the project is envisaged to include the following new build accommodation. Note there will be some flexibility around the content noted below as the scope of the scheme is further developed.

3.3 The New South Glasgow Hospital - Adult Acute

1109 in-patient beds and 12 bed medical day unit planned within the New South build.

In Patient Accommodation

435 surgical beds (gen. Surgery, orthopaedics, urology, vascular, ENT, renal); 571 medical beds. ITU/HDU/CCU – 77 beds total. Acute Stroke – 26 beds

Out Patient Accommodation

Full range of General outpatient clinics including, among others, diabetic unit, respiratory, haematology, urology etc.

Day Services

12 medical day bed area; 30 stationed dialysis unit

Treatment & Diagnostic Services

Accident & Emergency, 20 operating theatres, imaging, Endoscopy and rehabilitation.

Clinical Support Services

Pharmacy dispensary, medical physics, medical illustration. (laboratory services linked to hospital by underground route and pneumatic tube system, aseptic unit within the children's hospital.)

Non Clinical Support Services

Main entrance, medical records, administration, chaplaincy, social work, staff changing, switchboard, estates, facilities, security, catering, portering, domestic, management and energy centre.

3.4 New Children's Hospital – Acute

There are circa 240 beds planned within the new build. About 20% of the beds will be for day patents and the rest inpatients. The hospital will provide DGH services, tertiary and some national services.

Outpatient Accommodation

Full range of Children's outpatient clinics including audiology, general paediatrics, orthopaedics, ENT etc

Day Services

Circa 10 medical day beds; 4 dialysis stations and circa 25 day surgery beds.

Treatment & Diagnostic

Accident and Emergency, minor injuries, Imaging, 7 theatres, rehabilitation

Clinical Support Services

Aseptic unit, pharmacy, medical physics, medical illustration

Non Clinical Support Services

Facilities, ancillary services, administration, spiritual services, medical records, staff change, staff dining.

3.5 New Laboratory Building

This build will be one of two major Laboratory sites in Glasgow. The services planned to be delivered from the new Laboratory build at Southern General Hospital are as follows: Haematology, biochemistry, mortuary and post mortem services and blood transfusion.

3.6 Approximate GIFA - square metres.

As a guide to the extent of the build proposals, the current gross internal floor area for the new build proposals are noted below; these figures include allowances for departmental circulation and communications.

Adult Acute Hospital	100,624
Children's Hospital	33,007
Laboratory Facility	5,200
Total	138,831

The redevelopment of the campus and clinical services at the Southern General Hospital will most likely be undertaken through a multi phase programme of refurbishment, decant, demolition and new build over a works period of at least 4-5 years. The Board are currently initiating a programme of enabling work over the next 2 years to establish a un-encumbered site for the new hospital development. These works involve the relocation of hospital services, diversion of main hospital M&E services, demolition of redundant buildings and general site clearance and preparation works. These enabling works will be funded by Board capital. The Lead Consultant will be required to co-ordinate with design teams delivering these projects to ensure all works are sequenced to meet the desired start date on site of Summer 2010.

4 Scope of Service – Relevant Organisation

As specified at 1.4, the Lead Consultant will be appointed by the Board under one appointment to fulfil the following roles:-

- Project Management
- Employer's Agent role (construction stage)/contract administration
- Architectural Design and Site master planning
- Healthcare Planning
- Civil and Structural Engineering
- Building Services Engineering & IT Infrastructure
- Cost Consultant/Quantity Surveying/Lifecycle costing
- CDM Co-ordinator
- Risk and Value Management advice
- Facilities Management advice (soft and hard FM)
- Procurement and Construction Management Advice
- Landscape Architect

The lists below give a brief indicative summary of the each of the roles and responsibilities to be carried out by or on behalf of the Lead Consultant

PROJECT MANAGER

Key aspects of Project Manager's role:-

- Manage the work and output of the Technical Advisory team, and act as main point of contact reporting direct to the Board's Project Director or nominee.
- Represent Technical Advisory team at all key meetings (NHS, legal, contractor), or delegated by prior agreement with the Board's Project Director or nominee.
- Development and management of project plan, with regular review and update as required.
- Develop and manage risk register from start of Stage II to completion of works.
- Co-ordinate interface with operational hospital staff, and adjacent works projects as required.
- Resource management of Technical Advisory team to ensure proper delivery of service to the Board.
- In discussion with the Boards Project Director, develop lists of key activities, programme and actively manage each stage of project delivery, advising PD on corrective action as required.
- Prepare monthly progress reports on Technical Advisory team activity for the Project Director, to be circulated 5 working days in advance of TA monthly project team meetings.
- At the end of each stage, prepare a technical progress report for approval by the Project Director, with recommendations on actions to proceed, to include comment on timetable, costs, site, estates, facilities, build and construction, planning and design, risk and value management, compliance of contractor's proposals, technical evaluations, site infrastructure, town planning and progress with negotiations prior to contract sign.
- Manage team input through all stages of procurement process through to completion of project.
- Fully lead, manage and develop works contract change and cost control procedures for approval by the Project Director or his nominee.
- Meet regularly with Project Director to review progress, timetable, costs and design development.
- Lead the preparation and structuring of all key documents for the D&B process to provide a 'designed' published output e.g. it looks like a single document.
- Manage the technical review of bidder proposals during the procurement process for interim and final bids, also at Contract Close.
- Act as Employers Agent throughout the build phase, manage interface with D&B contractor, manage and administer contract and associated processes.
- Interface and work with the Board's existing consultant's and other associated organisations such as The Carbon Trust.
- Provide full shadow design team service throughout the duration of the works contract.

- Provide procurement and construction management advice on behalf of the Technical Advisory team.

HEALTHCARE ARCHITECT & SITE MASTERPLANNER

Key aspects of Architects role:-

- Take lead on all matters relative to architectural, building and site master planning, interior design, room layouts, fire engineering, escape and safety, fabric, components and their life-cycle, phasing and construction.
- Update Stage 1 PSC design through to FBC as required. Initially integrate Client changes to departmental layouts and adapt the 1:500 departmental relationship diagrams.
- Develop alternative options for 28 Bed Ward layouts (100% single rooms), layouts to reflect height of building, means of escape and fire compartmentation issues. This work will parallel the development of the brief and Employer's Requirements documentation.
- Review and adapt the current Development Control Plan to incorporate current proposals to retain additional existing buildings post completion of the new builds in 2014.
- Lead the preparation and submission to Glasgow City Council of a Site Masterplan document in conjunction with the Board's Town Planning Advisor.
- Actively participate in room layout development and sign off process.
- Assist with preparation of Employer's Requirements documentation, the bid process and evaluation at all stages. Note the Board intend developing a palette of standardised room layouts for as many repeat rooms as possible to reduce the workload at the early stage.
- Manage and lead the AEDET review and any related design led review processes as required at relevant stages.
- Participate and support the development of room data sheets for Employer's Requirements document. This is a team responsibility which will be led and managed by the Healthcare Planner.
- Develop a full Building specification and construction requirements for inclusion in the Employer Requirements/Tender document.
- Review bidders proposals at all stages for compliance with Employer's Requirements document, participate in the production of technical reports at the end of each stage, to include aspects on architectural, building construction, healthcare design, interior design, landscape and master planning.
- In conjunction with Project Director or his nominee, take team lead with any discussions with Architecture + Design Scotland.
- Review design proposals developed at Stage 1, allow for personalisation as and if required.
- Input to reports on bids at various stages of the D&B process and Contract Close stages of the project in respect of healthcare planning solutions, and as required for OBC and FBC submissions by the Board.
- Provide full shadow design team service throughout the duration of the works contract.
- In conjunction with Board, manage activities of Board appointed Clerks of Works during construction phase.
- Provide monthly reports on compliance of project with Employer's Requirements.

HEALTHCARE PLANNER

Key aspects of Healthcare Planners role:-

- Take lead on all matters relative to clinical design, clinical output specifications, operational policies, functional content (Schedules of Accommodation), within Technical Advisory team.
- Review the schedules of accommodation prepared as part of Stage 1 and comment as required. Assist Board to further develop key areas of their current design through briefing stage and through to completion of Employer's Requirements and updated Departmental Relationship drawings and Site Development Control Plan.
- Lead in development, preparation and review of room data sheets for Employer's Requirements/Tender documentation, to include 1 iteration with user groups. This will assist with the preparation of equipment lists for the Board's internal use. It is the intention to

provide RDS/ADB information for all key rooms on basis of standardising rooms to avoid prolonged exercise.

- Lead on behalf of the Technical Advisory team and assist the Project Managers for the Adult and Children's Hospitals with the development of Clinical Output Specs / Operational Policies for all departments within the new facilities, working closely with NHS staff to agree and sign off a standard reference document for the Employer's Requirements briefing process and documents.
- Actively participate in design development process between user groups and bidder design teams through the various stages of tender through to contract close.
- Lead in clinical and healthcare planning design reviews from bidders and evaluation meetings at each stage of the process.
- Input to reports on bids at various stages of the D&B process and Contract Close stages of the project in respect of healthcare planning solutions, and as required for OBC and FBC submissions by the Board.
- Review bidders proposals at all stages for compliance with Employer's Requirements, participate in the production of technical reports at the end of each stage, to include aspects on healthcare planning and design, good practice, compliance with National healthcare quality, infection control and design standards.
- Provide full shadow design team 'due diligence' service throughout the duration of the works contract.

CIVIL AND STRUCTURAL ENGINEER

Key aspects of civil and structural engineer's role:-

- Take lead on all matters relative to structure, site external works and roads, main drainage, connections to existing buildings and demolitions within Technical Advisory team.
- Assist with preparation of Employer's Requirements documentation, the bid process and evaluation at all stages.
- Develop PSC structural solution further, based on further SI work confirm cost plan requirements.
- Input to reports on bids at various stages of the D&B process and Contract Close stages of the project in respect of healthcare planning solutions, and as required for OBC and FBC submissions by the Board.
- Manage site investigation and remediation project to clear the site of debris, review for ground contaminants, and manage the undertaking of a full site investigation of ground conditions across the whole development site to provide a full report for inclusion in the Employer's Requirements documentation and further inform the Board's cost plan. Note cost of surveys will be paid by Board direct to contractor.
- Develop PSC structural solution further, based on further SI work confirm cost plan requirements.
- Review bidders proposals at all stages for compliance with Employers Requirements/tender documents, participate in the production of technical reports at the end of each stage, to include all project related aspects of civil and structural engineering, site infrastructure and drainage.
- Provide full shadow design team 'due diligence' service throughout the duration of the works contract, manage work of site based engineering staff employed separately by Board.

BUILDING SERVICES ENGINEER & IT INFRASTRUCTURE

Key aspects of Building Services Engineer's role:-

- Take lead on all matters relative to mechanical and electrical engineering services, energy and environmental matters, renewables, carbon neutral design, integration with existing hospital and other main utility services.

- Assist with the Design Development process and input to the ADB room data and room layout processes to focus on environmental conditions, air changes, room temperatures, humidity any specialist filtration, negative or positive pressure systems. Also review and advise on M&E equipment, including the location of M&E apparatus such as light and power switches, light fittings, air handling grillage, heating, powered medical equipment, telecoms and IT.
- Fully participate in the design development/briefing stage, assist the client to prepare an Employers Requirements document which fully reflects their design to reduce lifecycle / running costs by providing high specification equipment at outset.
- Provide advice and guidance on the integration of large scale Group II equipment such as specialist imaging, PACS, MRI, CT and any special shielding requirements. Ensure all relevant standards are met.
- Review bidders proposals at all stages for compliance with tender requirements, participate in the production of technical reports at the end of each stage, to include aspects on building services.
- Required to be based in the Board's Project Office at critical stages of project to be determined by the Board.
- Ensure environmental and sustainable design concepts and practices are incorporated into the Boards Employer's Requirements specification and are demonstrated by bidders in their responses through to contract close.
- Review bidders proposals at all stages for compliance with Employers Requirements/tender documents, participate in the production of technical reports at the end of each stage, to include all project related aspects of M&E engineering.
- Provide full shadow design team service throughout the duration of the works contract.
- Fully participate in the technical commissioning of the new facilities in conjunction with Board estates staff and the contractor.

COST CONSULTANT / QUANTITY SURVEYOR

Key aspects of Cost Consultants role:-

- Provide advice on building and life cycle costs throughout briefing and development of Employer's requirements through to completion of works, and update as required, assist with negotiations with contractors on cost and contract matters.
- Review Stage 1 DCAG cost plan provide comment to Project Director as required.
- Review contractors proposals at all stages and benchmark against PSC capital cost plan.
- Continually update Project Cost plan.
- Develop cost and change management processes in conjunction with the client, establish regular monitoring and reporting process throughout the life of the project.
- Review bidders programme for construction and any associated works at all stages.
- Provide detailed input on construction management aspects of bidders proposals at all stages.
- Review bidders proposals at all stages for compliance with Employer's Requirements, participate in the production of technical/cost reports at the end of each stage, to include aspects related to capital costs, lifecycle costs and general construction / build management and programme.
- Prepare and maintain costed risk register for regular review by Project Team.
- Assist the Project Manager in the development of a robust change control process.
- Completion of FBC documentation.
- Input to reports on bids at various stages of the D&B process and Contract Close stages of the project in respect of healthcare planning solutions, and as required for OBC and FBC submissions by the Board.
- Detailed financial negotiations on capex with bidders at end of each key stage, concluding with negotiation and agreement of GMP pre contract sign.
- Provide risk and value management advice on behalf of the Technical Advisory team. Provide full shadow design team cost management service throughout the duration of the works contract, including monthly valuations and cost control and reporting.
- In conjunction with Board's project staff engage and agree final account with contractor.

CDM CO-ORDINATOR

Key aspects of the CDM Co-ordinator's role:-

- Take lead on all matters relative the CDM Regulations and Health & Safety matters generally within Technical Advisory team.
- Point of contact with HSE for Technical Advisory team.
- Assist with the preparation of a robust PSC design including costs.
- Preparation of H&S pre tender plan.
- Manage all aspects of CDM in partnership with Board.
- Fully advise the Board on their duties and responsibilities in respect CDM Regulations.
- Ensure full H&S file and related submissions made at conclusion of contract works.
- Full site related service during contract works, providing monthly reports as part of team.

FACILITIES AND OPERATIONAL MANAGEMENT ADVICE

Key aspects of this role:-

- The Board require the Technical Advisory team to provide an individual to give detailed input on aspects relative to Hard FM and perhaps Soft FM services throughout the Employers Requirements stage, through to detailed negotiations with bidders. This will be in conjunction with the Board's Facilities Department.
- The adviser will also be actively involved in preparation of specifications, for inclusion in the Employer's Requirements which will incorporate lifecycle and running cost/maintenance issues. In other words the Board wish to incorporate within their specification aspects which will drive down future running and operational costs, for example integration of robotics, lifecycle of materials and building systems and modularisation of construction.
- Meetings between Board staff and bidders at all stages.
- Evaluation of bids at all stages.
- Evaluation of buildings and compliance with Employer's Requirements.
- Active participation in building commissioning phase.

LANDSCAPE ARCHITECT

Key aspects of Landscape Architects role:-

- Take lead on all matters relative to landscape architecture, external environment and external works.
- Prepare landscape specification and design for revised site masterplan to be developed as part of Stage 2a, assist Architect with development, and discussions with Glasgow City Council on Masterplan.
- Assist with adaptation of the current Development Control Plan to incorporate current proposals to retain additional existing buildings post completion of the new builds in 2014.
- Assist with preparation of Employer's Requirements documentation, the bid process and evaluation at all stages.
- Participate in the AEDET review and any related design led review processes as required at relevant stages.
- Develop a full landscape and external works (not roads) specification and construction requirements for inclusion in the Employer Requirements/Tender document.

- Review bidders proposals at all stages for compliance with Employer's Requirements document, participate in the production of technical reports at the end of each stage, to include aspects on architectural, building construction, healthcare design, interior design, landscape and master planning.
- In conjunction with Project Director or his nominee, participate in discussions with Architecture + Design Scotland.
- Review design proposals developed at all stages.
- Input to reports on bids at various stages of the D&B process and Contract Close stages of the project in respect of healthcare planning solutions, and as required for OBC and FBC submissions by the Board.
- Provide full shadow design team service throughout the duration of the works contract.
- Input monthly reports on compliance of project with Employer's Requirements on landscape and externals matters.

5. Timetable

Timetable

The timetable below demonstrates the anticipated milestones and process up until the appointment of the Technical Adviser.

In addition, provisional dates for at two stage D&B process have been included for information only at this stage.

Milestone/Process	Target Date
Publication of OJEU Notice	6 May 2008
Deadline for receipt of requests to participate/submission of responses to the Pre-Qualification Questionnaire (PQQ)	5 June 2008
Issue of Invitation to Tender (ITT) Documentation to selected Applicants	12 June 2008
Deadline for submission of response to ITT	22 July 2008
Evaluation of ITT Submissions	29 July 2008
Appointment of Technical Adviser	August 2008
Brief Development / Masterplan	August-November 2008
Employers Requirements - Stage 1	September- December 2008
OJEU Construction Teams	October – Dec 2008
Stage 1 Tender Period	January-May 2009
Stage 1 Evaluation	June 2009
Employers Requirements – Stage 2	February-June 2009
Stage 2 Tender Development	July 2009
Stage 2 Evaluation – Selection Preferred Bidder	April 2010
Detailed Planning Consent, GMP, FBC and Contract Close	July 2010
Phase 1 Complete – New Children's Hospital	1st qtr 2013
Phase 2 Complete – New Adult Acute Hospital	3rd qtr 2014
Commissioning	4-5 months
12 Months Defects Period – Acute Hospital	3 rd qtr 2015

6. Instructions to Applicants

The following instructions relate to the Pre-qualification Questionnaire that is attached to this Information Memorandum.

6.1 Introduction

The purpose of the Pre-qualification Questionnaire is to evaluate the Applicants expressing an interest in being appointed as the Lead Consultant for the Board's new South Glasgow Hospitals Project. The Pre-qualification Questionnaire should be read in conjunction with this Information Memorandum and these instructions.

This competition is regulated by the Public Contracts (Scotland) Regulations 2006, and will be held in accordance with the restricted procedure.

The Board intends to downselect a number of potential Applicants. The Board envisage that a maximum of 6 and a minimum of 5 will be invited to tender provided 5 Applicants meet the minimum requirements sets out below.

Shortlisting of Respondents

The down selection of Applicants to be invited to tender will be carried out by the Board in accordance with the following criteria: -

6.1.1 Minimum Standards

The Board shall evaluate each of the PQQ responses received and may exclude any Applicant: -

- that fails to meet the good standing criteria detailed in section 1 of the PQQ
- that does not have sufficient economic and financial standing to deliver the scope of services including Professional Indemnity insurance cover of at least £10,000,000.
- that does not have the minimum technical standards and/or professional abilities to deliver the scope of services

6.1.2 Evaluation Criteria

The PQQ responses will then be evaluated in accordance with the following criteria to allow the Board to further restrict the list of Applicants, to whom Invitations to Tender will be issued, to a minimum of 5 and a maximum of 6 Applicants.

- The skills and ability of the Lead Consultant and sub-consultant team.
- The available resource of the Lead Consultant and the sub-consultant team.
- Track record of achievement on similar large healthcare developments, with emphasis on complex site redevelopments and design quality.
- Standards of Quality Assurance.

6.2 Response Procedure

Applicants must answer all the questions detailed in the pre-qualification questionnaire. Failure to answer all of the questions or to provide all of the requested information may result in the submission being given no further consideration.

Applicants must submit their response to the pre-qualification questionnaire by midday on 5 June 2008. Applicants should note that the statutory timescales for responding to the OJEU Notice have been shortened by 7 days in accordance with Regulation 16(5) of the Public Contracts (Scotland) Regulations 2006 as the Board submitted the OJEU Notice electronically.

Your response should be made in the following format;

- 1 paper copy
- 1 composite (single) Adobe Acrobat pdf electronic copy on disc.

Your response should be submitted to:

Mr. John Hamilton
Head of Board Administration
Greater Glasgow and Clyde NHS Board
Dalian House
350 St Vincent Street
Glasgow G3 8YZ

6.3 Disclaimer

The Board will not be liable for any costs and expenses incurred by Applicants during the tendering process and the Board reserves the right not to proceed with the commission at any stage. The information contained within this Information Memorandum and the separate Pre-qualification Questionnaire has been prepared in good faith by the Board and its advisers for the guidance of the respondents. No warranty or representation is given as to the accuracy or completeness of any such information and the Board and its advisers shall not be under any liability for any error, misstatement or omission.

Nothing contained within this Information Memorandum or Pre-qualification Questionnaire shall constitute any contract or any form of undertaking or offer on the part of Board.

6.4 Right of Rejection

The Board reserves the right to reject any or all of the pre-qualification submissions or to otherwise terminate the procurement process.

