

24/04/26

District Health Society
Office of the Chief Medical and Health Officer District Rewa

TENDER DOCUMENT FOR

ANNUAL CONTRACT FOR HOUSEKEEPING SERVICES AT GOVT.
HOSPITALS OF MADHYA PRADESH

Tender No: _____ Dated

DURATION OF SALE OF TENDER DOCUMENT

BID SUBMISSION start date - 12 मई 2026 शाम 05 बजे

BID OPENING - 02 जून 2026 शाम 06 बजे

TENDER DOCUMENT FEE (Non-refundable) : Rs. 10000/-

Bid submission end date - 01 जून 2026 शाम 5 बजे तक

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24.4.26

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TENDER NOTICE FOR ANNUAL CONTRACT FOR HOUSEKEEPING SERVICES AT GOVT. HOSPITALS OF MADHYA PRADESH

Tender No: _____

Dated _____

- i) Sealed tenders are invited from the eligible tenderers to provide housekeeping services, as given in Scope of Work (Annexure-A), for 12 months as per terms & conditions of the tender document.

Name of Work	EMD	Last Date and Time for Receiving Tenders	Date of Tender opening
Housekeeping Services to be provided to the CH,CHC,PHC,SHC Health Facilities:	Rs. 500000.00 Rs Five Lac Only)	01 जून 2026 शाम 5 बजे तक	02 जून 2026 शाम 6 बजे

- ii) Tender Document Only Online Upload. The **EMD** Should be Submitted in Office Printed with Later Head.
- ii) Details of the Tender Document can be seen at website www.mptenders.gov.in The Tender document can also be downloaded from this website. **(Offline Tender will not be Accepted) Tender Form fees and EMD to be deposited online through MP Tender portal**
- iii) The Member Secretary, cum Chief Medical and Health Officer, Chief Medical and health Officer District Rewa reserves the right to accept or reject the tender without assigning any reason thereof.

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Section – I

General Instructions to Tenderers

1. Definitions and Abbreviations:

1.1 The following definitions and abbreviations, which have been used in these documents, shall have the meanings as indicated below:

1.2. Definitions:

- (i) "Health Facility (ies)" means the Public Health Facility of the Govt. of Madhya Pradesh where the housekeeping services are required to be performed as specified in the Contract.
- (ii) "Contract" means the written agreement entered into between the Tender Inviting Authority and the Contractor, together with all the documents mentioned therein and including all attachments, annexure etc. therein.
- (iii) "Contractor" or "Agency" means the successful tenderer selected for execution of contract for housekeeping services.
- (iv) "Day" means calendar day.
- (v) "Earnest Money Deposit" (EMD) means Bid Security/ monetary or financial guarantee to be furnished by a tenderer along with its tender.
- (vi) "Services" means the scope of work together with articles, material, consumables, instruments, machinery, equipment etc. which the contractor is required to deliver at the Health Facility (ies) under the contract.
- (vii) "Tender Inviting Authority" OR "Client" or "Tender Acceptance Authority" or "Contracting Authority" means the Member Secretary of District Health Society, under the aegis of Government of Madhya Pradesh in their respective jurisdictions.
- (viii) "Chairperson" is the District Collector cum chairperson of the District Health Society in respective jurisdiction.
- (ix) "Nodal Officer" is the designated officer of the Government Health Facility nominated by the Tender Inviting Authority who supervises the work performed by the Contractor.
- (x) "Performance Security" means monetary or financial guarantee to be furnished by the successful tenderer for due performance of the contract placed on it. Performance Security is also known as Security Deposit.
- (xi) "Tender" means Bids / Quotation / Tender received from a Firm / Tenderer / Bidder.
- (xii) "Tenderer" means Proprietorship / Partnership / Pvt. Limited / Limited company, Societies/ Trust registered in India

1.3 Abbreviations:

- (i) "BG" means Bank Guarantee
- (ii) "CST" means Central Sales Tax
- (iii) "DDP" means Delivery Duty Paid named place of destination (consignee site)
- (iv) "GCC" means General Conditions of Contract
- (v) "GIT" means General Instructions to Tenderers
- (vi) "NIT" means Notice Inviting Tenders.
- (vii) "TE Document" means Tender Enquiry Document
- (viii) "VAT" means Value Added Tax
- (ix) DoPH& FW means Department of Health & Family Welfare, Govt. of MP
- (x) BMW means Bio-Medical Waste
- (xi) TIA means Tender Inviting Authority
- (xii) MWA means Minimum Wages Act

2. **Scope of Services:** The bidder shall provide approximately 200 unskilled cleaning staff for various hospitals and offices within the district. The Scope of Services are given in **Annexure-A**.

3. **Clarifications:**

(a) Prospective tenderers may also send their queries, if any, at least 10 days prior to due date for submission of Tender. The Member Secretary, District Health Society, Rewa shall issue necessary clarifications and amendment, if any, to the tender documents. Such clarifications / amendments shall be uploaded on the website www.mptenders.gov.in.

4. **Eligibility Criteria**

- (a) The Tenderer should be a firm (Proprietorship or Partnership)/Company (Pvt. Limited or Public Limited), Societies/ Trust registered under applicable statutes in India.
- (b) The Tenderer must have achieved minimum annual turnover of Rs.2 Crores **during last three financial years and should be profit making. 2022-23, 2023-24 and 2024-25**
- (c) The Tenderer should be registered for Income tax, GST, EPF & ESIC
- (d) The Tenderer should be registered under Contract Labour (Regulation and Abolition) Act, 1970.
- (e) The Tenderer should not be blacklisted either by the Tender Inviting Authority or by any State Government or by Government of India.
- (f) The Tenderer should be enclosed firm/Institute/Proprietor or Partner Valid PBR.

5. **Qualification Criteria**

- (a) The Tenderer should have minimum three years' experience in doing similar nature of work and should have successfully completed the same. In support of this, tenderer should submit the copy of such work orders along with satisfactory completion certificates issued from at least three clients.
- (b) Out of above experience, the tenderer should have satisfactorily completed housekeeping job in any 200 bedded hospital due date of bid submission.
- (c) The Tenderer should have executed work of similar nature, from any Government hospital/Large Corporate Hospital/State government tourism hotels/India Tourism development hotels. The order value of such work should be equal to Rs. 1 Crores or more in of the last two years and should be supported by client satisfactory certificates issued from client (s) along with copy (ies) of work orders.
- (d) The Tenderer should have sufficient employees on its rolls specifically trained for housekeeping work. Full list of the employees, viz., name, age, employee code, designation, experience in the field of housekeeping, PF, ESIC deduction and details etc. should be attached with the Technical Bid. The Tenderer should submit proof of ESI and EPF deduction & deposit to relevant authorities during last three financial years.
- (e) It will be mandatory for the tenderer to submit bank solvency of Rs 3 crores. minimum
- (f) Attach the documents of depositing fee for providing outsourced human resources to Labour Welfare Board for Rs. 400 human resources in a financial year.
- (g) MSME/Startup companies will be given 50 percent relaxation in experience and turnover.
- (h) Photocopies of Income Tax Returns for the preceding financial years 2022-23, 2023-24, and 2024-25 must be submitted.

- (i) Photocopies of GSTR-9 Returns for the financial years 2022-23, 2023-24, and 2024-25 must be submitted.
- (j) It is mandatory to attach the bank deposit challans for EPF and ESIC contributions for the months of January, February, and March 2026.
- (k) Attach documents evidencing the deposit of fees to the Labour Welfare Board for providing outsourced human resources (covering 400 personnel) for one financial year.
- (l) It is mandatory for the Bidder to attach the Audited Balance Sheets for the financial years 2022-23, 2023-24, and 2024-25.
- (m) The Bidder must submit, along with the tender, a Net Worth Certificate issued by a Chartered Accountant (CA) for the firm/organization/Director/Proprietor/Partner for the financial year 2025-26.

7. Documents required in support of eligibility and Qualification:

The Tenderer should submit the following documents along with Technical Bid:

- (a) The copy of Firm/Company's Registration / Incorporation Certificate with relevant authority in India.
- (b) Statement of average annual turnover of last three years, in support of eligibility criteria mentioned above, from a registered practicing Chartered Accountant.
- (c) Audited Balance Sheet along with Profit & Loss Statement of last three financial years
- (d) Self-attested copy of Goods and Service tax registration certificate, Employee Provident Fund (EPF), ESIC and PAN card.
- (e) Self-attested copy of Registration certificate under Contract Labour (R & A) Act 1970.
- (f) Self-attested copies of work Orders and Client's Satisfactory Certificates in support of qualification criteria given in Para 6 above.
- (g) Declaration for not having been blacklisted in Rs 1000 non judicial Noterised stamp paper by any Tender Inviting Authority or by any State Government or by Government of India.
- (h) The tenderer should prepare all the documents enclosed with the tender as per the checklist mentioned above. Documents enclosed other than the checklist will not be accepted.

SN.	Document Name	Page no...to...	Remark

8. Sale of Tender Document:

- (a) The complete set of tender documents may be purchased within the prescribed time by interested Tenderers to the MP Tender Portal and upon payment of a non refundable fee of Rs.10000 (Rupees Ten Thousand only) online from MP Tender portal.
- (b) The Tender document can also be downloaded from the website www.mptenders.gov.in. In such case, the Tenderers must enclose cost of bid document mentioned above in form of Online along with its Technical Bid. Tenders found without tender fee shall be rejected.

9. Tender Validity:

- (a) The Tender will be valid for a period of 180 days after the due date of submission of Tenders. Within this period contract should be awarded to the winning bidder. A Tender valid for a shorter period shall be rejected by the Tender Inviting Authority as nonresponsive
- (b) In exceptional circumstances, prior to the expiration of the Tender validity, the Tender Inviting Authority may request the Tenderers to extend the Tender validity for further period as deemed fit. The request and the responses thereto shall be made in writing. A Tenderer may refuse the request without forfeiting its EMD. A Tenderer, agreeing to the request will not be required or permitted to modify its Tender.

10. Bid Price:

- (a) The tender prices shall be in Indian Rupee. The tender price shall be evaluated based on the combined value of Manpower Wages, cost of consumables and Service charges/Management fee quoted by the bidder. Tenderer has to provide all machineries, equipment, staff I-Cards, their uniforms etc. and manage cleaning materials (actual cost shall be reimbursed) from the quoted Service Charges/Management fee. The authority shall pay housekeeping staff wages, reimburse cost of consumed consumables and agreed Service Charges (& service tax, if applicable). No cost shall be paid/ reimbursed to the contractor other than specified above.
- (b) Tenderers should submit all the details of bid prices as per format given in Annexure-E.
- (c) The remuneration for housekeeping staff (skilled / semi-skilled / non-skilled) shall be paid as quoted by the selected bidder. Quoted rates should not be less than prevailing labour rates as notified by respective district collectorate in the state of Madhya Pradesh at the time of bid submission. The bids found quoting less than the said rates shall be rejected summarily.
- (d) At any point of time, during currency of contract, the remuneration paid to the housekeeping staff shall not be less than the statutory notified labour rates. If it becomes so due to revision in rates as notified by the District Collectorate, contractor shall inform the same to the authority and thereafter the contract amount shall be revised to the extent of increase in labour rates by the Contracting Authority. If any time during the currency of the contract, it is found that the contractor is paying less than the statutory labour rates to the housekeeping staff, its contract shall be terminated and appropriate action will be initiated against the contractor.
- (e) If it is found that rates of consumables quoted by the selected bidder are unbalanced, authority shall assess the reasonability of rates of those items which are quoted higher than market prices and shall reduce the rates accordingly.
- (f) Rates of consumables and Management Fee/Service Charges shall remain fixed during the contract period.

11. Preparation and Submission of Tender:

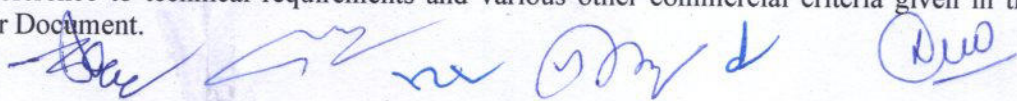
- (a) Tenders are to be submitted as per two bid system i.e.- Technical Bid and Financial Bid.
- (b) The Tender should be type written and every correction and interlineations in the bid should be attested with full signature by the tenderer, failing which the bid will be treated as ineligible. Corrections done with correction fluid should also be duly attested.
- (c) All documents/papers should be numbered, signed and sealed by the Tenderer on each page.
- (d) Technical Bid should contain all the documents required in Clause 5 & 6 above, EMD as per Para 10 above, rates of required cleaning materials (consumables) listed in table at Annexure-B and consent to provide required machineries, equipment, I-card, Uniform etc. to perform the job effectively. Technical Bid should also contain Tender Form as per Annexure- C, Declaration Form (Annexure- D), Manpower Details, Performance Statement, Details of Staff available with the Agency.
- (e) Financial Bid should only contain the Price Schedule duly filled as per format given in Annexure- E. Financial bid shall have wages of staff, total monthly cost of consumables and Management Fee/Service Charges.

12. Opening of Tenders:

- a) The Tenders shall be opened at the scheduled date, time and venue by the committee constituted by the Tender Inviting Authority.
- b) In the event, the date of opening as above is declared Govt. holiday, the tenders shall be opened at the same time on the next working day.

13. Evaluation of Tenders:

- (a) The committee constituted by the Tender Inviting Authority shall evaluate the Technical Bids with reference to technical requirements and various other commercial criteria given in the Tender Document.



- (b) The Technically qualified bids shall be further considered for opening and evaluation of financial bids.
- (c) The Tenderer quoting the combined lowest bid amount of Manpower Wages, total monthly cost of consumables and Service Charges/Management Fee (to be indicated in Indian Rs.) for the services defined in the Scope of Work shall be considered for award of contract.
- (d) In case of equal price bidding, winning bidder shall be selected through lottery.

14. Performance Security Deposit and Award of Contract:

- (a) On being informed about the acceptance of the Tender and before signing the agreement, the successful Tenderer shall deposit, within 15 days from the date of acceptance of tender, performance security amount, 15 Laks (fifteen Laks) are equal to 5% of contract value (of annual HR cost, consumables cost and Service Charges+ Service tax), in the form of DD/FD pledged to Tender Inviting Authority valid for 18 months from the date of signing of the agreement. If rates of consumables are found very low as compared to market rates, TIA reserves the right to ask performance security amount, equal to 20% of the contract value.
- (b) The successful Tenderer shall execute an agreement (As per format given in **Annexure-H**) on a non-judicial stamp paper of value of Rs.1000/- (stamp duty to be paid by the tenderer) within 12 days from the date of the intimation from Tender Inviting Authority informing that his tender has been accepted.
- (c) If the successful Tenderer fails to execute the agreement and / or to deposit the required security deposit within the specified time or withdraw his tender, after the intimation of acceptance of his tender has been sent to him or owing to any other reasons, he is unable to undertake the contract, his contract will be cancelled and the EMD deposited by him along with the tender shall stand forfeited by the Tender Inviting Authority.

15. Effectiveness and Duration of Contract

This Agreement shall become effective from the date of its signing by both parties. This Agreement shall remain valid for a period of 12 (twelve) months from the date of commencement of services. This Agreement may be extended—upon the recommendation of the Tender Committee and on the same terms and conditions—until such time as a new tender becomes effective.

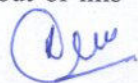
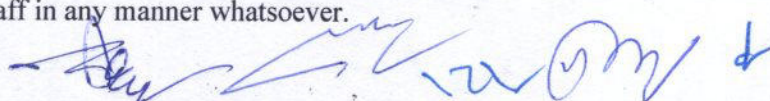
16. Commencement of Services

The Service Provider should commence the cleaning services within 30 days of signing of contract or any other date mutually agreed by both the parties.

Section-II

General Conditions of Contract

- 1) The persons deployed by the contractor should be properly trained, min. 8th pass, have requisite experience and having the skills for carrying out a wide variety of housekeeping work using appropriate materials and tools/ equipment.
- 2) The contractor should ensure the Health and Safety measures of the employees, deputed for the works at his end. The contracting authority may also conduct health checkup of the staff deployed at regular intervals at the contractor's cost if required.
- 3) The contractor will be responsible for supply / installation / refilling / maintenance of all such items / equipment / consumables used in wash rooms and other areas of the hospital for housekeeping purposes as given in Annexure – B.
- 4) The Contractor must employ adult labour only and they should be physically fit to work described under the contract. Employment of child labour will lead to automatic termination of the contract. The contractor shall engage only such workers, whose antecedents have been thoroughly verified, including character and police verification and other formalities. The contractor shall be fully responsible for the conduct of his staff and all liabilities (civil or criminal) arising out of misconduct of staff in any manner whatsoever.



- 5) The Contractor at all times should indemnify Contracting Authority against all claims, damages or compensation under the provisions of Payment of Wages Act, 1936; Minimum Wages Act, 1948; Employer's Liability Act 1938 the Workmen Compensation Act, 1923; Industrial Disputes Act, 1947; Maternity Benefit Act, 1961 or any modification thereof or any other law relating thereof and rules made hereunder from time to time. Contracting authority shall not owe any responsibility in this regard. Payment of minimum wages, notified by the government, shall be ensured all the time.
 - 6) The Contract shall initially be valid for a period of One Year and can be extended further for another 6 months on the same terms and conditions of the contract and at the same rates. The rates quoted by the bidder shall remain unchanged during the period of contract subject to GIT clause 11 (e).
 - 7) Contracting authority however, reserves the right to terminate the contract by serving three months' notice, in writing if the hospital administration is not satisfied about the services of the contractor. The contractor may also ask for foreclosure of contract by giving three months' notice to the Contracting Authority giving reasons thereof.
 - 8) In case of breach of any terms and conditions attached to the contract, the Performance Security Deposit of the contractor will be forfeited by the contracting authority forthwith besides annulment of the contract.
 - 9) The contractor has to provide standard liveries on his part to its housekeeping staff. The staff shall be in proper uniform of color navy blue provided by the contractor but approved by hospital administration with their identity properly displayed, samples of liveries will have to be submitted by the Contractor for the approval of the competent authority.
 - 10) Hospital administration will provide the space for setting up a control room for the contractor in the premises of the hospital from where the contractor and his own supervisory or office staff can control the housekeeping labour force working in the hospital. The contractor will arrange for all items needed for his staff viz., time keeping machine, computerized inventory of stores, computerized daily duty roster chart, etc. The housekeeping staff will first report to the control room and subsequently deployed for duty after having been checked for liveries, upkeep, issue of materials and equipment, etc.
 - 11) The hospital administration will provide space for a store room to the contractor in the premise of the hospital. The store keeper deployed by the contractor will store all their liveries, materials, equipment in the store room at his/her own risk & cost and maintain a computerized record of the stores which shall be opened to inspection by hospital administration staff during working hours.
 - 12) Once the housekeeping staff is allotted an area of work he or she will be under supervision of the sister I/C/Supervisor/Officer of that area i.e. wards/ OPD/Stores/ Offices etc. and in addition to the instructions issued by the contractor, they have to follow all instructions and orders given by the sister I/C/Supervisor/ Officer. All instruction given by sister I/C/Supervisor/Officer should be considered in the scope of work if it is for the benefit of the patients.
 - 13) The Contractor shall :
 - a. Ensure Animal (quadrupeds), honey bee, bats, bees, pigeon, flies free environment in the premises of Health Facility (ies).
 - b. Provide all items, equipment, machineries etc. and consumables to their housekeeping staff as per Annexure-B if in his scope or collect it for use from sister I/C/Supervisor/Officer if procured by the Hospital.
 - c. Ensure that their managers/supervisors are equipped with mobile phones.
 - d. Arrange for a garbage disposal vehicle/trolley, and other equipment required for segregation and disposal of waste in a professional manner to designated place as ear marked by district administration.
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- e. Provide Hospital Waste management services when applicable including all equipment, containers, trolleys etc.
- f. Plan; manage collection, mechanized screening / segregation of dry and wet garbage in the earmarked area and efficient transport and disposal of the garbage in the disposal area. The work should be carried out in an ecofriendly manner. The contractor will arrange for required resources, including manpower, machinery, disposables etc. which is used by the housekeeping staff. The contractor will also ensure that the garbage collection / disposal work does not adversely affect the surroundings or personnel deputed for the work. Protective gear including boots, gloves etc. shall be provided by the contractor to the housekeeping staff.

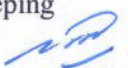
14) Scope of work and services:

- 1) Details of the scope of work are enclosed at Annexure -A
- 2) Details of Equipment to be used, Number of Manpower, liveries and consumables to be used at housekeeping job are given at Annexure -B.
- 3) The numbers given in Annexure -B are the Minimum but may change as per actual requirement. The contractor shall provide resources, to meet the contractual obligations.

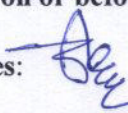
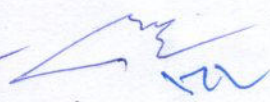


15) Variations

The hospital administration may order variations in the scope or quantum of work through a written variation order. The payment for the variation shall be worked out on the basis of contract rates for manpower and prorata for additional areas for equipment, toiletries etc.

16) Payment Procedure :

- a) Payment/ reimbursement of staff wages, consumables and payment of Service Charges/Management Fee of the subsequent month will be made within a period of 10 days after submission of the bill and all necessary documents in duplicate. Payment/ reimbursement of the bill will be based on computerized printouts in standardized proforma along with computer generated attendance sheet in respect of the persons deployed.
- b) While submitting the bill the services provider must file a certificate certifying the following:
 - i. Wages of workers were credited to their bank accounts on _____ (date)
 - ii. ESI Contribution relating to workers amounting to Rs. _____ was deposited on _____. (Copy of e-receipt enclosed)
 - iii. EPF Contribution relating to workers amounting to Rs. _____ was deposited on _____. (Copy of e-receipt enclosed)
 - iv. We are complying with all statutory Labour Laws including Minimum Wage Act of Central Govt.
- c) Contracting Authority may inter alia reimburse the wages to the deployed housekeeping staff and EPF/ESIC to the statutory authority directly through e-payment system. 

The agency shall be absolutely, completely and exclusively responsible for the payment of salary, for the housekeeping staff employed at the health facilities (under the contract) on or before 5th of each succeeding month. If contractor is not able to raise and submit bills to the authority in prescribed schedule time with all requisite documents and he/she doesn't receive payment from the authority, still the contractor shall be liable to make payment to the housekeeping staff on or before 5th of each month to guard the interest of housekeeping staff.

17. Liquidated damages:    

Whenever and wherever it is found that the cleanliness is not up to the mark it will be brought to the notice of the supervisory staff of the contractor by sister I/C of designated area or designated officials of the health facility and if no action is taken within Two hour, liquidated damages @ Rs.200/- per complaint shall be imposed. The decision of nodal officer of that health facility shall be final, in this regard.

18. Manpower

- a. Contractor shall give preference in selection of housekeeping staff who are already working in the health facility/ies (which are entrusted to the contractor) on contract, in case such staff agree to work on the terms & conditions laid down by the Contractor.
- b. Any misconduct/ misbehavior on the part of the manpower deployed by the Contractor will not be tolerated and such person will have to be replaced by the contractor at his own costs, risks and responsibilities immediately, with written intimation to the designated nodal officer.
Housekeeping staff payment reimbursement will be done only for the staff who was on duty and will be restricted to the salary paid to him/her by the contractor as agreed in the contract.
- c. For absentees payment will not be done Payment of agency commission and reimbursement, if any, shall be made as per terms of the contract.
- d. The contractor shall ensure maintenance of adequate no. of manpower as per Annexure -B and also arrange a pool of stand-by housekeeping staff in case any housekeeping staff absences from the duty, the reliever of equal status shall be provided by the contractor from an existing pool of housekeeping staff. If the required numbers of workers are less than the minimum required as per Annexure -B, a penalty @ Rs. 200/- per worker per day will be deducted from the bill.
- e. The housekeeping staff deployed through contractor in the health facility (ies) shall not claim any benefit, compensation, absorption or regularization of their services in the govt. establishment either under the provision of Industrial Disputes Act., 1947 or Contract Labour (Regulation & Abolition) Act, 1970. The contractor shall have to obtain an undertaking from the deployed persons to the effect that the deployed person is the employee of the contractor (agency) and shall submit the said undertaking to the Contracting Authority. In the event of any litigation on the status of the deployed persons, the Contracting Authority/Society shall not be a necessary parties, however, in any event, either the deployed persons or to the order of the Court, the District Health Society is made necessary parties in dispute to adjudicate the matter, the contractor has to reimburse the expenditure that would have been borne by the Contracting Authority.
- f. The housekeeping staff deployed by the contractor shall not divulge or disclose any details of office, operational process, technical know-how, security arrangement, administrative/ organizational matters to any third person, as all of that are confidential and secret in nature. In the event of being found that the official secrecy has been disclosed and for the purpose of security arrangement and or for other purpose, it is desirable to remove the said person, the nodal officer of the health facility has every right to remove the said person, immediately and responsibility if any to be borne by the contractor.
- g. The contractor shall ensure that the person deployed are disciplined and shall enforce prohibition of consumption of alcoholic drinks, paan, Gutkha, smoking, loitering and shall not engage in gambling, satta or any immoral act.

19. Materials:

Any deviation in the housekeeping tools quality and quantity quoted will invoke penalty as per Annexure-B. In case the contractor has not provided the sufficient no. of equipment, tools, tackles and consumables, the hospital may procure it and deduct the cost from the bills of the contractor.

20. Risk Clause:

- a. The contractor shall at all times have standby arrangements for carrying out the work under the contract in case of any failure of the existing arrangement. Contracting Authority reserves the right for termination of the contract at any time by giving One month written notice, if the services are found unsatisfactory and also has the right to award the contract to any other selected tenderer at the risk & cost and responsibilities of existing contractor and excess expenditure incurred on account of this will be recovered from the contractor's Security Deposit or pending bill or by raising a separate claim.
- b. All necessary reports and other information will be supplied on a mutually agreed basis and regular meetings will be held with the nodal officer of the respective health facility (ies)/ Tender Inviting Authority/Contracting Authority. Contractor and its staff shall take proper and reasonable precautions to preserve from loss, destruction, waste or misuse the areas of responsibility given to them by the Hospital, and shall not knowingly lend to any person or company any of the effects or assets of the Hospital, under its control.
- c. In the event of loss/damage of equipment etc. at the premises of the health facility (ies) due to negligence/carelessness of contractor staff, if established after a joint enquiry, then the contractor shall compensate the loss to Health Facility (ies). The contractor or its representative/s shall meet the designated respective nodal officer/Tender Inviting Authority or his/her representative(s) regularly to take feedback regarding the Housekeeping Services.
- d. The contractor will also maintain a complaint/suggestion book, at every health facility (ies) where his/her staff is deployed, for comments on the housekeeping services.
- e. The contractor shall, in performing its part of this Agreement, ensure the safety of the building and the persons working in or visiting the health facility(ies) premises and shall indemnify by any act of the contractor or its employees or staff etc.
- f. The contractor shall not assign or sublet this Agreement or any part thereof to any third party.
- g. Training on behavior aspects and ethics must be done regularly. Government health facility way of working should be communicated to all contract staff. Training report of the same must be submitted once in a month.
- h. License, if any, required for Housekeeping Services at the site will be made available by the contractor (service provider).

21. Dispute Settlement :

- i) All disputes and differences of whatsoever nature, whether existing or future between the parties hereto touching or concerning the agreement, meaning, operation or effect thereof or to the rights and liabilities of the parties or arising out of or in relation thereto whether during or after completion of the contract or whether before or after determination, repudiation , foreclosure, termination or breach of the agreement (other than those in respect of which the decision of any person is, by the contract, expressed to be final and binding) shall, after written notice by either party to the agreement to the other and to the Contracting Authority i.e. Member Secretary-District Health Society,Rewa, be referred for adjudication to the Sole Arbitrator to be appointed as hereinafter provided.
- ii) District Magistrate will act as the Sole Arbitrator to adjudicate the disputes and differences between the parties for all hospitals falling within that particular district. The Service Provider shall not be entitled to raise any objection to the appointment of such person as the Sole Arbitrator on the ground that the said person has to deal or had dealt with the matter to which the contract relates or that in

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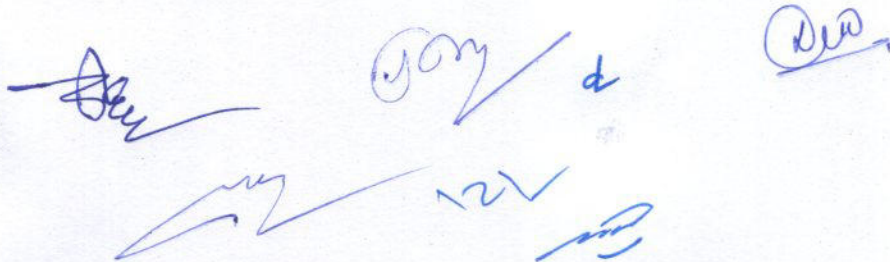
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the course of his/her duties, he/she has/had expressed views on all or any of the matters in dispute or difference.

- iii) In the event of the Arbitrator to whom the matter is referred to, does not accept the appointment, or is unable or unwilling to act or resigns or vacates his office for any reasons whatsoever, the District Magistrate, shall nominate/appoint another person, not below the rank of Addl. Collector, as aforesaid, to act as the Sole Arbitrator.
- iv) Such another person nominated as the Sole Arbitrator shall be entitled to proceed with the arbitration from the stage at which it was left by his predecessor. It is expressly agreed between the parties that no person other than the Appointing Authority or a person nominated by the Appointing Authority as aforesaid, shall act as an Arbitrator. The failure on the part of the Appointing Authority to make an appointment on time shall only give rise to a right to a Service Provider to get such an appointment made and not to have any other person appointed as the Sole Arbitrator.
- v) The Award of the Sole Arbitrator shall be final and binding on the parties to the Agreement.
- vi) The work under the Contract shall, however, continue during the Arbitration proceedings.
- vii) The Arbitrator may give a composite or separate Award(s) in respect of each dispute or difference referred to him and may also make interim award(s) if necessary.
- viii) The fees of the Arbitrator and expenses of arbitration, if any, shall be borne equally by the parties unless the Sole Arbitrator otherwise directs in his award with reasons. The Award of the Sole Arbitrator shall be final and binding on both the parties.
- ix) Subject to the aforesaid, the provisions of the Arbitration and Conciliation Act, 1996 or any statutory modification or re-enactment thereof and the rules made thereunder, shall apply to the Arbitration proceedings under this Clause.
- x) The Contract shall be governed by and constructed according to the laws in force in India. The parties hereby submit to the exclusive jurisdiction of the Courts situated at Rewa for all purposes. The Arbitration shall be held at REWA and conducted in English/ Hindi language.

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Annexure-A

Scope of Services

Area of work:

All open and covered area within the boundary of the Health facility including roof and basement (if any) will be in the scope of housekeeping services to be provided by the contractor.

Cleaning Services:

The main objective is to provide a high level of a neat, clean, hygienic and presentable look to the entire area. The contractor and his management team will supervise the awarded work. The contractor has to ensure that the staff deployed is dressed in neat and clean uniform approved by the Health Facility will also monitor the entire work and staff.

Patient care Services:

Apart from housekeeping services as described below, the Housekeeping staff shall also assist the hospital nursing staff in day-to-day patient care such as receiving and dropping patients at the entrance, taking patients to diagnostic / laboratory, sending blood / stool / urine samples to laboratories etc. Housekeeping staff shall also perform minor plumbing work in the health facility to rectify leakage of water, replacement of taps (taps to be provided by the health facility), tap washers, repair of cisterns, cleaning of water head tanks etc. Housekeeping staff shall also inform any breakages in tiles/leakages in roofs to the nodal officer.

General Instructions:

- a. All collection, storage, transportation and disposal of hospital waste shall be in accordance with Bio-Medical Waste (Management and Handling Rules of India, 1998 amended in 2000 and any other amendments or other regulations, in this regard).
- b. A detailed Hospital Waste Management Plan shall be prepared and get approved from the nodal officer of the health facility before start of work.
- c. All infected, chemical, Radiation, Cytotoxic Health care waste shall be segregated, collected, stored, transported and disposed in accordance with set guidelines of safety, ensuring that at no stage it gets mixed with general waste. Unscientific burning shall not be permitted, different coloured bags/containers namely red, yellow, black, blue and puncture proof or stainless steel, lead containers shall be used depending on the category of waste.
- d. The waste shall be carefully secured or pre-treated for transportation to a common facility for disposal.
- e. Waste shall not be transferred from one bag to another. Bags should be tied when three fourths full and then placed in a bigger bag / container for transporting.
- f. Covered Trolleys or containers should be used for transportation. Before final disposal/ treatment waste should be kept in specified location and in specific liners and containers.
- g. The scope includes segregation, collection, storage, transportation within and outside the Hospital until final disposal. All statutory rules and regulations and legal requirements are to be followed at each stage.

Abu *gony d* *Dep*

General Requirements and Documentation

- Organisational structure and line of authority.
- Housekeeping manual and all SOP (Standard Operating Procedures).
- List of equipment used.
- Color coding
- On job training and documentation
- Description of each category of housekeeping.
- Hospitable and polite behavior with patients and hospital staff.
- HBV Vaccination of all staff
- Maintaining records of the following:
 - a) Needle stick injuries
 - b) Amount of biomedical waste going out to outsourced agency
 - c) Memorandum of understanding
 - d) Complaint book

- Maintaining logs and checklist.
- Both male and female staff should be posted in areas like wards, ICUs, Casualty and OPD, CCU & Wards (wherever applicable)
- Female patients should be attended by female staff only.
- Immediate replacement of on-leave staff.
- Rotation of staff if required.

Attendance

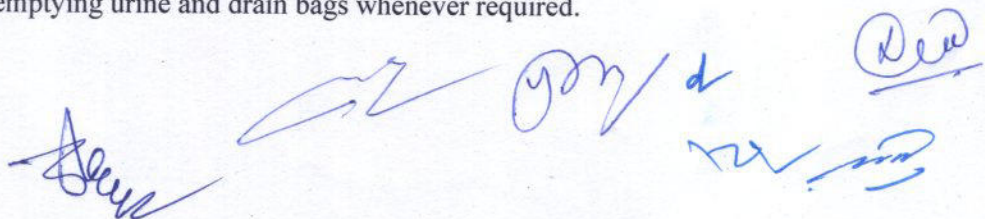
The Contractor will properly maintain muster roll of the person employed/engaged in connection with the work at the premises of the Health Facility and should use biometric online attendance system.

(A) Daily Services

Housekeeping / cleaning services should be provided round the clock on all days including holidays, so that all areas are neat and clean all the time. Working hours should be adjusted in such a manner that cleaning work in the morning should be completed half an hour before the start time of normal work.

Housekeeping staff has to do following activities for all of the Hospital rooms of all the departments, stores, canteen/kitchen(if not outsourced), consultants chambers, wards, ICUs, Operation Theaters, CSSD , Laundry, Labs, Blood Bank, all corridors and all covered and open areas (wherever these departments exists)

- (1) Cleaning, scrubbing and disinfecting bathrooms, toilets, wash basins, sanitary fittings, floors etc. of all the areas including wards, ICUs, OT and all other departments at regular intervals on daily basis.
- (2) Cleaning sweeping, mopping with disinfectant stair cases, cabins, lobbies, reception, pantries, kitchen, canteen, CSSD, Laundry, Corridors Ceilings, Office Rooms, training rooms at regular intervals on daily basis.
- (3) Vacuum cleaning of all carpets and upholstered furniture
- (4) Cleaning and disinfecting kidney trays, urinals bed pans, sputum mugs, humidifiers, suction bottles and emptying urine and drain bags whenever required.



- (5) Cleaning blood spills and others such as human excrement, urine vomitus, sterile body fluids as & when required.
- (6) Cleaning, dusting electrical switch boards, light fixtures, fans, air conditioner vents, name plates, door mats, firefighting equipment, computer systems, phones, doors, windows, furniture, window glasses, grills, curtains etc.
- (7) Cleaning of dust bins, waste paper baskets, cobwebs etc. and disposing off all collected refuse on daily basis at regular intervals i.e. 3 times a day.
- (8) The dust bins shall be washed and garbage bags need to be placed in all garbage bins to avoid stains and clear them when it is full.
- (9) Collect garbage in specified colour coded bags from all dust bins and garbage bins existing inside the premises and shall dispose at the designated area within the hospital.
- (10) Refilling, replacing and emptying of sharp containers at all stations.
- (11) Offering and assisting the patient with kidney tray, urinals, bed pans, sputum cups when required and disposing the contents in the sluice room, clean, disinfect and keep it ready for next use.
- (12) Cleaning the patients who have soiled themselves with stool, urine, vomitus with assistance of Patient attendant / nursing orderly / staff nurse / nursing sister.
- (13) Washing linen which are soiled by urine, vomitus, faeces and others with 1% hypochlorite solution and send to laundry.
- (14) Spraying room fresheners in all rooms on daily basis at regular intervals.
- (15) Assist in transporting dead bodies to mortuary and dispose off and amputated limbs or other parts to bio medical waste collection point.
- (16) Assist in fumigation as per schedule.
- (17) Cleaning, mopping, disinfecting OT floors, walls, ceilings / OT lights in morning before starting the case, in between cases and terminal cleaning at the end of the day (as per instruction & direction of OT In charge).
- (18) Clean the patients' bed, lockers, trolleys, wheel chairs and surrounding areas twice a day or when patient is discharged or when soiling occurs.
- (19) Cleaning and carbolization of ICU beds, OT beds between cases (as per instruction & direction of OT In charge).
- (20) Washing of slippers in ICUs, OT, dialysis etc.
- (21) Scrubbing / cleaning of toilets, wash basins, sanitary fittings, glasses, toilets, floors etc.
- (22) Cleaning and disinfecting all vitreous fixtures including toilet bowls, urinals, sinks, toilet seats, containers etc. Brush thoroughly to include below water level and under rims including areas at hinges and cistern handles. Re-stock toiletries, which include liquid hand soap, toilet rolls, air fresheners, sanitary cubes, naphthalene balls in toilets, etc. after daily check-ups in the morning, afternoons and on call basis during daytime.
- (23) All the garbage collected at the designated points spread over the health facility premises as well as the Hospital general waste which does not require incineration should be cleared on daily basis to municipality defined yards outside health facility campus. In addition to this the cleaning of garbage points shall also be the responsibility of the contractor. If the garbage is not lifted as per above defined mode, penalty of Rs. 500/- on each failure occasion shall be imposed on the Contractor.
- (24) It is the responsibility of the contractor's deployed housekeeping staff to clear the chocking of sinks, wash basins, floor traps, nahani traps, EWC, IWC, P Traps, Rain water pipes, sewer chamber & sewer lines, the chocking shall be cleaned within 2(Two) hours after reporting the complaint. If there is any loss/ inconvenience to health facility owing to chocking, appropriate penalties shall be imposed on the contractor.

- (25) Cleaning of all open areas between the building and boundary including sweeping of roads, lawns, paths, cleaning open drains, common areas of Residential Buildings, Pump Rooms, Pump House, AC Plants, Electrical Substation, Nurse Hostel, Main gate etc. as directed by the designated nodal officer of the health facility.
- (26) Any additional work assigned by the ward I/C of the area where the housekeeping staff has been placed on duty. Once assigned an area the housekeeping staff will be under the control and supervision of the sister I/C/Supervisor/Officer on duty of the area.

B) Waste Disposal Management (Including Bio-Medical Waste) :

- i. The contractor will prepare a flowchart indicating the method of collection / disposal, etc.
- ii. The contractor will teach and train his staff for the collection / disposal work. The garbage will have to be disposed off at least thrice a day.
- iii. The contractor will make arrangement to collect garbage in specified colour coded bags from all designated area within the hospital.
- iv. Supervision of collection of BMW shall be done by the housekeeping staff.
- v. Ensure that all the bins are cleared daily.

C) Weekly Services :

The deep cleaning of the entire area will be done by the contractor once a week as under :-

- (1) Dusting of entire area including windows / windowpanes / doors / ledges , etc.
- (2) Thorough cleaning / sweeping / washing / mopping with disinfectant cleaning of all floors, staircases and toilets, scrubbing of all floors and ceramic tiles base. Cleaning of ceilings and high walls, removal of wash stains on walls , cleaning of roofs, porches etc.
- (3) Cleaning of sanitary fitting, toilet drain pipes etc. in the toilets with standard cleaning material.
- (4) Cleaning of all windows glasses and grill with detergent/ cleaning agents.
- (5) Washing of outside area with High Pressure Jet Machine.
- (6) Clean all chrome fittings, glass frames, soap holders etc. to a shiny finish.
- (7) The tenderer will make a cleaning program and submit to designated nodal officer of the health facility for weekly cleaning so that the concerned officials / In-charge for the particular area can be deputed on the day of cleaning to make the area available and supervise the cleaning work.
- (8) The contractor will work in the specified area mentioned in the scope of work.
- (9) The contractor will provide the duty register to the designated nodal officer of the health facility as required.

D) Housekeeping Monitoring and Control

For better management and smooth services, the following monitoring mechanism will be adopted by the contractor :-

1. Toilets Checklist

This is to be attached on the back of the toilet door. It is to be filled up by the Contractor supervisor on duty daily.

2. Management/Housekeeping Services Requirements/ Complaints Report.

This is to be filled up by the management and administrative staff of the Contractor who receive/observe the complaints/requirements for any of the Services. All suggestions, complaints related to services or staff

deployed by the contractor will be registered at site and reported to designated nodal officer of the health facility. The contractor will take immediate action to resolve the same failing which the Penalty Clause will be invoked.

3. Housekeeping Services Complaint Register.

This register is to be completed on the basis of information received by the Housekeeping Supervisor from the designated nodal officer of health facility, inspection of the site, material on site, attendance sheet of the staff, weekly report, client letter/fax/e- mail, verbal complaints from officials of the health facility etc. and necessary action is to be taken.

ADDITIONAL SCOPE PERTAINING TO HOSPITAL

Housekeeping in the hospital conditions is different than the housekeeping services in other commercial organisations. Housekeeping staff has to work with the infected patients and has to handle dangerous infected materials and waste. Along with the routine housekeeping activities the housekeeping staff has to show his / her humanitarian concern towards the patient and provide him/her all types of required help and services. Such services may be need based and might not been included in the general scope of work but they have to be provided by the housekeeping staff if needed.

In view of the above, any work assigned by the sister I/C/Supervisor/Officers for the patient benefit like cleaning of vomits, urine, stool, blood or any undesired material produced by the ill patient or helping him/her in changing of soiled cloths/Linen or any type of need in emergency and helping the ill patient in any type of need is included in the scope of work.

The housekeeping staff shall maintain cleanliness in the patient rooms/ ward throughout the day and shall clean the room thoroughly on patient's discharge and keep it ready for the next arrival.

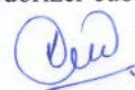
The cleaning material used by contractor should not be reactive to, kota stone, vitrified tiles, furniture, upholstery, ceramic fittings of toilets, if it is found that at damages occur due to use of wrong chemicals the same shall be rectified on risk and cost of contractor.

2. Operation Theaters:

Operation theaters are the most important place in the hospital which needs maximum care and cleanliness by the housekeeping staff.

Repeated cleaning and disinfection of the operation theaters after every operation, removal of the biomedical waste including human body parts and soiled waste, cleaning the used soiled linen as per SOPs of the Operation Theaters and any other type of work assigned by the sister I/C/Supervisor/ Officer of operation theater to the housekeeping staff has to be performed efficiently.

- All the dustbins washed and lined with colour- coded bags in the morning. The trash bag shall be changed as per schedule.
- Operation theatre walls shall be thoroughly cleaned using a specialized soap/disinfectant solution before and after every operation.
- Floor shall be washed and thoroughly mopped with a specialized soap/disinfectant solution . The entire operations theatre floor area shall be scrubbed once a day.
- Toilets/ bathrooms will be cleaned with soap solution and kept odor free using deodorizer cubes.



- The common areas, doctor's lounge, nurses lounges, change rooms, waiting lounge and inside operation theater shall be swept and mopped in the morning and at regular intervals to keep them clean.
- The floor scrubbing will be done in the night or as and when asked for according to the scheduled operations and movements in that area.
- It is to be brought to the notice that if Operation Theaters walls and floors are coated with epoxy coating materials, during the process of cleaning, mopping, disinfection, fumigation, it is to be ensured by the contractor that epoxy coatings shall not be damaged, scratched or chemically harmed. The cleaning materials shall be epoxy friendly. If any complaint /damage has been observed in the epoxy coatings of operation theaters the same shall be rectified on the risk and cost of contractor.
- The disinfectant required for OT, ICU, CCU will be provided by Contractor.

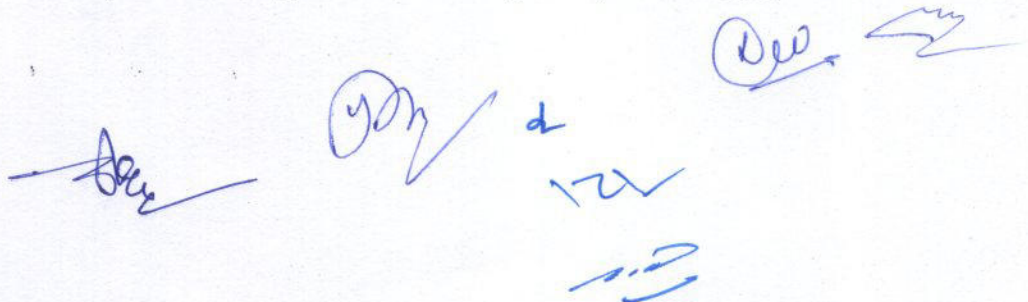
3. CLEANING OF OFFICES/DOCTORS' ROOMS

- The contractor's housekeeping staff shall remove trash from office dustbins and change the trash liner every evening before closing hours.
- The offices shall be dry dusted and swept after the closing hours.
- Vacuum cleaning shall be done on carpets and upholstery.
- The worktables shall be mopped with soap solution in the morning.
- The office shall be mopped with soap solution in the morning.
- Office staff rest rooms/toilets shall be cleaned using soap solution and kept odor free using deodorizer.

4. CLEANING OF LABORATORY AND OTHER CRITICAL AREAS

- All the dustbins shall be washed and lined with colour coded bags in the morning. The trash bags shall be cleaned using a specialized soap/disinfectant solution in the morning.
- The floor shall be thoroughly mopped with a specialized soap solution.
- The entire laboratory area shall be scrubbed at least twice in a week.
- Toilets/bathrooms shall be cleaned with soap solution and kept odor free using deodorizer cubes.
- The common areas shall be swept and mopped in the morning and at regular intervals to keep them clean.

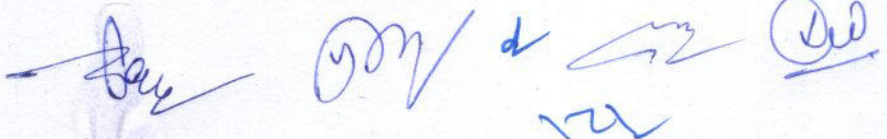
Rotation of staff in critical areas like OT, Laboratory, ICU & Wards may be kept at minimum.


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PROVISIONAL CLEANING SCHEDULE

S. No.	ACTIVITY	FREQUENCY	AGENTS USED
3. MODERATE RISK AREA WARDS			
1	Garbage Removal	Thrice a day and more when bags are 3/4 th full	As per the BMW guidelines
2	Dry Mop	Thrice a day	Feather brush
3	Dusting	Thrice a day	Z colour duster
4	Mopping	Thrice a day	Germicide, or any Hospital approved disinfectant
5	Washroom & wash Basins Cleaning	Thrice a day and as & when Required	Germicide, or any Hospital approved disinfectant
4. CANTEEN AND KITCHEN			
1	Garbage Removal	Thrice a day or more when bags are 3/4 th full	As per the BMW guidelines
2	Dry mop	Thrice a day	Feather brush
3	Dusting	Thrice a day	Z colour duster
4	Mopping	Thrice a day and as & when Required	Germicide, or any Hospital approved disinfectant
5	Washroom & wash Basins Cleaning	Once a week (Sunday)	Detergent, or any Hospital approved disinfectant
5. PUBLIC AREA WASHROOM			
1	Cleaning	Every 2 nd hourly	Germicide, or any Hospital approved disinfectant
2	Washroom & wash Basins Cleaning	Thrice a day and as & when Required	Germicide, or any Hospital approved disinfectant
6. LOBBY			
1	Garbage Removal	Thrice a day/ when bags are 3/4 th Full	As per the BMW guidelines
2	Dry mop	Thrice a day	Feather brush
3	Dusting	Thrice a day	Z colour duster
4	Mopping	Thrice a day	Germicide, or any Hospital approved disinfectant
7. OPD AREA			
1	Garbage Removal	Thrice a day/ when bags are 3/4 th Full	As per the BMW guidelines
2	Dry mop	Thrice a day	Feather brush
3	Dusting	Thrice a day	Z colour duster
4	Mopping	Thrice a day	Germicide, or any Hospital approved disinfectant
5	Washroom & wash basins Cleaning	Thrice a day and as & when Required	Germicide

**Authority needs to assess exact requirement as per health facility and indicate accordingly.*



S. No. ACTIVITY

		FREQUENCY	AGENTS USED
8. STORES (MEDICAL SURGICAL, NON - MEDICAL)			
1	Garbage Removal	Thrice a day/ when bags are 3/4 th Full	As per the BMW guidelines
2	Dry Mop	Thrice a day	Feather brush
3	Dusting	Thrice a day	Z colour duster
4	Mopping	Thrice a day	Germicide, or any Hospital approved disinfectant
9. MORTUARY			
1	Garbage Removal	Thrice a day/ when bags are 3/4 th Full	As per the BMW guidelines
2	Dry mop	Twice a day	Feather brush
3	Dusting	Twice a day	Z colour duster
4	Mopping	Thrice a day	Germicide, or any approved disinfectant
10. ADMINISTRATION RECORD / ENGINEERING OFFICE			
1	Garbage Removal	Once a day/ when bags are 3/4 th Full	As per the BMW guidelines
2	Dry mop	Once a day/ as & when required	Feather brush
3	Dusting	Once a day/ as & when required	Z colour duster
4	Mopping	Once a day/ as & when required	Germicide, or any Hospital approved disinfectant
5	Washroom & wash basins Cleaning	Thrice a day and as & when Required	Germicide, or any Hospital approved disinfectant
11. CSSD / LAUNDRY			
1	Garbage Removal	Once a day/ when bags are 3/4 th Full	As per the BMW guidelines
2	Dry mop	Twice a day/ as & when required	Feather brush
3	Dusting	Twice a day/ as & when required	Z colour duster
4	Mopping	Twice a day/ as & when required	Germicide, or any Hospital approved disinfectant
5	Mopping sterile storage area (CSSD)	Once a day	Virux Solution or any other solution approved by Hospital
6	Washing of sterile area (CSSD)	Once a day (Saturday afternoon)	Virux Solution, or any other solution approved by Hospital
7	Assist in Fumigation (CSSD)	As & When required	Virux Solution, or any other solution approved by Hospital
12. RADIOLOGY			
1	Garbage Removal	Twice a day/ when bags are 3/4 th Full	As per the BMW guidelines

2	Dry Mop	Twice a day/ as & when required	Feather brush
3	Dusting	Twice a day/as & when required	Z colour duster
4	Mopping	Twice a day/ as & when required	Germicide, or Any Hospital approved disinfectant
5	Washroom & wash basins Cleaning	Thrice a day and as & when Required	Germicide, or Any Hospital approved disinfectant
13. LABORATORY			
1	Garbage Removal	Once a day/ when bags are 3/4 th Full	As per the BMW guidelines
2	Dry mop	Thrice a day	Feather brush
3	Dusting	Twice a day	Z colour duster
4	Mopping	Thrice a day	Germicide, or Any Hospital approved disinfectant
5	Cleaning of work benches	Twice a day/ as & when required	0.25% Hypochlorite/ or any standard disinfectant prescribed by Hospital.
6	Washroom & wash basins Cleaning	Thrice a day and as & when Required	Germicide, or Any Hospital approved disinfectant
7	Assist in Fumigation	Once a month	Bacillocid Or Other material solution approved by Hospital
8	Washing of Slippers	Once in a week	Detergent

Dilution of Wizard in all areas = 40 ml in 1 litre of water

Cleaning of spillage of Blood/Body Fluids

1. Use disposable gloves.
2. Cover area with 1% Sodium Hypochlorite
3. Leave for 20 minutes
4. Collect residue with disposable paper. Wipe and discard in bag.
5. Wash surface with detergent and dry.
6. All waste, gloves, wipe, discard, seal and dispose as clinical waste/mop cleaning – detergent wash and dry.

Buckets – detergent wash and dry

(If contaminated 1% Sodium Hypochlorite overnight rinse and dry)

Body packing services :-

The consumables shall be provided by Hospital the contractor shall carry out the body packing services as directed by Hospital In-charge.

Annexure-B

Resource Requirement

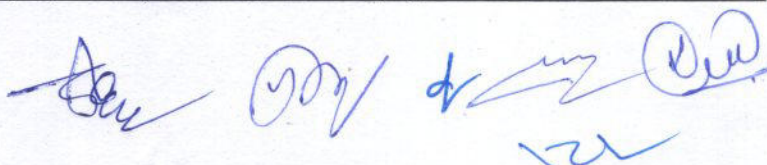
The contractor has to provide the following:

1. Cleaning Material:

All the cleaning material, soap solutions, room fresheners, naphthalene balls, disinfectants, deodorants will be provided by the contractor, and the payment for the same will be reimbursed to the contractor on monthly basis against the submission of original bills of cleaning materials and their consumption report duly certified by designated nodal officer of the health facility.

2. All dust bins and coloured waste disposable bags will also be provided by the contractor, and the payment for the same shall be reimbursed to contractor on monthly basis against submission of bills of items and their use certified by designated nodal officer of the health facility. All dustbins should have replenishible lining of appropriate polythene as per applicable government norms.
3. The contractor has to provide all the manpower, equipment, tools and tackles, their accessories /refills pertaining to housekeeping services.
4. The contractor has to provide supervisory and management support by his own staff to get the maximum output from the housekeeping force provided to the hospital. Teaching and training for the same has to be done by the contractor.
5. Following minimum No. of equipment tools, tackles, their accessories, consumables etc. to be provided and maintained in the Hospital by the contractor to the housekeeping staff. Number can be increased/decreased as per requirement.

S.N	List of equipment
1	SCRUBBING MACHINE SINGLE DISK WET/DRY SCRUBBING MACHINCE RE-43 OR
2	EQUIVALENT
3	INDUSTRIAL TYPE VACCUME CLEANER
4	INDUSTRIAL TYPE CHOKING CLEANER MECHANISED ROD TYPE CHOKING
5	CLEANER (100 ft. length)
6	HIGH PRESSURE JET
7	WRINGER TROLLEY
8	CADDY BASKET
9	GLASS CLEANING KIT
10	WET MOPS KENTACKY
11	WET MOPS ROUND (FOR BATH ROOMS)
12	SWEEPING BRUSHES (DRY DUST CONTROL MOPS)
13	HARD BROOMS FOR GROUND SWEEPING
14	Nylon scrubbers, dusters, hard and soft brooms, 14 buckets, squeezers



The number of items given above is to be maintained at site according to specified frequency/time. Qty. and frequency of use may be increased depends on work load, hence to be provided as and when required. The necessary stand-by arrangement of equipment/materials shall be the contractor's responsibility. Contractor has to manage above machines and their consumables/spare parts within the Management Fee/Service Charges. No extra payment shall be made to the contractor for providing machines and its maintenance. Any shortage in the above if observed at the site, the necessary penalty shall be imposed.

Uniforms of housekeeping staff, I- Cards, Covered trolleys, dustpans, mops, buckets, wipers, gloves, dusters, scrubbers, sponge, brooms, brushes, safety gear etc. to be provided by the contractor as per requirement. If housekeeping staff is found without uniform and safety gloves, gumboots etc. (which are required for safety of housekeeping staff & infection control), the contractor shall pay penalty of Rs. 100/-per day or at each instance. For repeated non-compliance, double the penalty i.e. Rs. 200/- shall be payable.

6. MANPOWER REQUIREMENT: *As per Annexure-I*

Number of Manpower given above may be decreased or increased depending on the requirement.

7. Consumables which are required to perform the housekeeping task are as follows (which may increase or decrease). The bidder has to mention rates for these consumable: *(Items and qty. to be decided, as per the requirement, by the authority before floating the tender)*

2	Checked Cloth - Duster -22" x22"	Khandalwal/Check Duster	Nos.			
3	Soft Broom	Standard Quality	Nos.			
4.	Hard (Coconut) Broom	Standar Quality	Nos.			
5.	Mr. Clean Floor Wiper (Squeezer)-15" Heavy Duty	Mr. Clean/ Today/Hik	Nos.			
6.	Hand Gloves - Rubber	Standard Quality	Nos.			
7.	Scotch Bite (Birla 3M) Pad - Big[4"x6"]	Scotch Bite/ Good Home	Nos.			
8.	Dusting Brush - Nylon / Plastic	Superior Quality	Nos.			
9.	Toilet Brush - Nylon [Crown Brush]	Superior Quality	Nos.			
10.	Floor Scrubbing Brush - 7"	Superior Quality	Nos.			
11.	Segregation Polythene Bags					
	80 Micron, 22"x20"	Standard Quality	Nos.			
	100 Micron, 25"x30"	Standard Quality	Nos.			
	120 Micron, 28"x32"	Standard Quality	Nos.			
	130 Micron, 35"x40"	Standard Quality	Nos.			
12.	Phenyl	Doctor+/B engal Chemical/Surya/	Lt.			
13.	Toilet Freshener	Standard Quality	Lt.			
14.	Odonil packet (medium size)	Odonil/Go od Home/Aqua	Nos.			
15.	Toilet Cleaner	Johnson,Diversy/Ha rpic / Commande Cello/Monty/	Nos.			
16.	Plastic Dustbin	Polyset				
17.	Lagga/ Road Broom Seek	Superior Quality	Nos.			
18.	Medimex Hand Soap	Medimix/L ifeboy/Det ol	Nos.			

(Handwritten signatures and initials in blue ink)

19.	Black Pad for RE-43 Machine	Standard Quality	Nos.			
20.	White Pad RE-43 Machine	Standard Quality	Nos.			
21.	Room Freshener R-5, Taski -R-3, (Glass Cleaner),	Johnson Diversy/Da bur/Good Homes	Lt.			
22.	Make- Johnson Diversy	Johnson Ltr. Diversy/ Trenc/ Minitch	Lt.			
23.	Feather Brush	Standard Quality	Nos.			
Total amount of consumables for One Year (in Rs.)						
Total amount of consumables for One Month (in Rs.)						

Penalties: The penalties will be imposed on violation of terms and conditions of agreement as per the list given below:

S.N.	Description of Irregularities	Penalty
1	If the required workers are less than the minimum required	@ Rs. 200/- per worker /day
2	If the garbage is not lifted as per defined mode & scheduled	@ Rs. 500/- on each failure Occasion
3	Staff not in Uniform/ without I Card/ not wearing safety tools i.e. gloves, gumboots etc.	@ Rs. 100/- per worker /day
4	If it is found that no action is being taken within One hour after the complaint of Un-clean premises and improper Housekeeping	@ Rs. 200/- per complaint
5	Misbehaviour by the housekeeping staff to HEALTH FACILITY employee or Patient/ patient relative/ visitors.	@ Rs. 500/- per incident
6	Recurring of irregularities given at Sl.No. 1,2,3,4 & 5	Double the penalties amount mentioned in Sr. No. 1 to 5

Note : In case the agency fails to provide any of equipment tools, tackles & consumables continuously for a period of 15 (fifteen) days, Hospital authority has the right to purchase the non- available equipment/tools, tackles or consumables on the market rates and deduct the cost of same from the contractors bill in addition to the imposition of applicable penalties.

Annexure-C

TECHINAL TENDER FORM

Date _____ Ref. Your Tender Document No. _____

To,
Chief Medical and Health Officer
Secretary
District Health Society
District Rewa (M.P.)

1. We, the undersigned have examined the above mentioned Tender document. We now offer to deploy housekeeping staff and supervisors to perform duties as mentioned in Scope of Work at Annexure-A and at the rates as mentioned in our financial bid.
2. If our tender is accepted, we undertake to perform the services in accordance with the terms and conditions in the Tender document.

(Handwritten signatures and initials)

3. We further confirm that, if our tender is accepted, we shall provide you with a performance security of required amount in an acceptable form in terms of the Tender Document for due performance of the contract.
4. We agree to keep our tender valid for acceptance as required in the Tender Document, or for subsequent extended period, if any, agreed to by us. We also accordingly confirm to abide by this tender up to the aforesaid period and this tender may be accepted any time before the expiry of the aforesaid period. We further confirm that, until a formal contract is executed, this tender read with your written acceptance thereof within the aforesaid period shall constitute a binding contract between us.
5. We further understand that you are not bound to accept the lowest or any tender you may receive against your above referred tender enquiry.
6. We confirm that we do not stand deregistered/banned/blacklisted by any Govt. Authorities.
7. We confirm that we fully agree to the terms and conditions specified in above mentioned Tender Document, including amendment/ corrigendum if any.

(Signature with date)

(Name and designation) Duly authorised to sign tender for and on behalf of
 _____ (Name of Tenderer)

N.B : The above tender form, duly signed and sealed by the authorised signatory of the company, should be enclosed with Technical Tender.

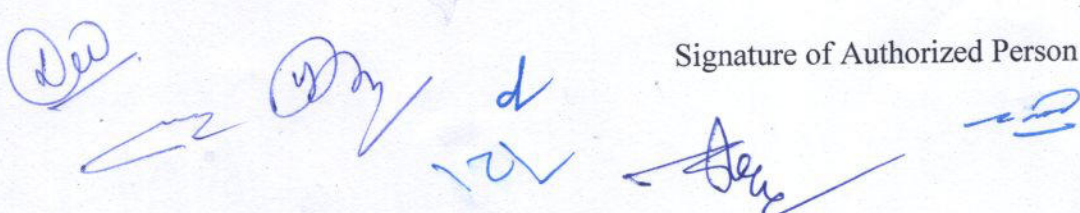
Annexure-D

Part-(i)

Declaration

1. I, son/daughter of Shri....., proprietor/partner/director/authorized signatory of M/s, am competent to sign this declaration and execute this tender document.
2. I have carefully read and understood all the terms and conditions of the tender and hereby convey my acceptance of the same.
3. The information / documents furnished along with the above applicable are true and authentic to the best of my knowledge and belief. I/we, am / are well aware of the fact that furnishing of any false information / fabricated document would lead to rejection of my tender at any stage liabilities towards prosecution under appropriate law.

Signature of Authorized Person



(Name, designation and seal)

Date :

Place :

N.B : The above declaration, duly signed and sealed by the authorised signatory of the company, should be enclosed with Technical Tender.

Annexure-D

Part-(ii)

Details of staff available with the Agency

Sr. No.	Name	Employee Code	Qualification	ESI No.	PF No.	Experience in House Keeping year

The above format may be used to provide employee details.

Signature of Tend

Name and designation of signatory with seal

Date:

Place:

N.B : The above details, duly signed and sealed by the authorised signatory of the company, should be enclosed with Technical Tender.

Annexure-D, Part-(iii)

B. PROFORMA FOR THE PERFORMANCE STATEMENT OF TENDERER (of last three years):

Sr. No.	Name and address of client; Name, Designation and contact no./e-mail id. of The officer Concerned	Contract details including total manpower deployed	Value of Contract (Rs.)	Duration of the contract (From to To)	Client satisfactory certificate enclosed (Yes/No)

[Handwritten signatures and initials in blue ink]

	Additional information, if any				

Signature of tenderer
 Name and designation of signatory with seal

Date:

Place:

N.B: The above details, duly signed and sealed by the authorised signatory of the company, should be enclosed with Technical Tender

Annexure – E

FINANCIAL BID FOR HOUSEKEEPING SERVICES
(to be printed on letterhead of Tenderer)

Financial Offer – Tender rates must be submitted herein. The rate format will be accepted exclusively online.

Note:

- If the bidder quotes wages (of the required manpower) less than the prevailing Collectorate Labour Rates, his/her bid shall be rejected.
- 2. The agency will have to provide two sets of uniform per year including Identity Cards to all the workers & gum boots and hand gloves, safety goggles, masks (to whom required as per work allocation) of good quality and colour code as prescribed.
- 3. Contractor shall provide & maintain machineries and its consumables at health facility (ies) as mentioned in technical bid within the above cost. Contractor shall also provide cleaning material of which payment shall be reimbursed as per terms of bid document. The authority shall pay wages, cost of cleaning materials and service charges (which is fixed) to the contractor as per terms & conditions of tender document. No payment, other than this, shall be made to the contractor.
- 4. The contractor will have to make payment through e-transfer after opening of individual bank account for the workers deployed at health facilities and also submit the copy of the monthly bank statements of the concerned workers to the designated nodal Officer of health facility after transferring wages. Further, the proof of ESI/EPF deposit to the concerned authorities should also be submitted to designated Nodal Officer of health facility/payment authority and only after receipt/verification, payment of the same shall be made by the authority. However, Contracting Authority reserves the right to reimburse wages to the deployed staff directly through e-transfer.
- 5. Service Tax shall be paid if applicable.

I/we also declare that, I/we will abide by all the rules and regulation of District Health Society and concerned Hospital, if awarded the Tender. I/we are also aware that the Tender Inviting Authority reserves his right to cancel our Tender in part or full without assigning any reason, what so ever, and for the same, I/we will have no right to challenge the same in any court of law.

Signature of Authorized Person Full Name: Company's Seal:

The image shows several handwritten signatures in blue ink. One signature is a large, stylized cursive signature. To its right is a circular stamp containing the name 'Dua'. Below these are several other smaller, less legible signatures and marks.

Annexure-H

Format of Contract Agreement

THIS AGREEMENT made the day of, Between _____
_____ (hereinafter "the Client") of the one part and M/s _____
_____ (hereinafter called "the Contractor") of the other part:

WHEREAS the Client is desirous that certain services viz. Supply Housekeeping Services in the tender reference no. _____ Dated _____ and has accepted a bid by the Contractor for the performance services for the sum of Rs. _____ /- (*Rupees* _____ *only*) (hereinafter called "the Contract Price") and supply of consumables as per rates given in the financial bid of its tender.

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

1. In this Agreement words and expressions shall have the same meanings as are respectively assigned to them in the Conditions of Contract referred to, and they shall be deemed to form and be read and construed as part of this agreement.

2. The following documents shall be deemed to form and be read and construed as part of this Agreement, viz.:

- a) The Letter of Acceptance issued by the Client.
- b) The supplier's bid including enclosures, annexures, etc.
- c) The General Conditions of the Contract
- d) The Scope of Work
- e) The Financial Bid
- f) Any other document listed in the supplier's bid and replies to queries, clarifications issued by the purchaser, such confirmations given by the bidder which are acceptable to the contractor and the entire Addendum issued as forming part of the contract.

3. In consideration of the payments to be made by the Client to the Contractor as hereinafter mentioned, the Contractor hereby covenant with the Client to provide, the goods and services and to remedy defects therein in conformity in all respects with the provisions of the Contract.


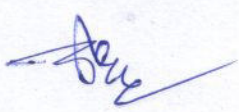

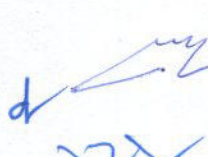

4. The Client hereby covenants to pay the Contractor in consideration of the provision of the goods and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the Contract at the times and in the manner prescribed by the Contract.

Brief particulars of the goods and services which shall be supplied / provided by the Contractor are as under.

Cost of consumables used during performance of services shall be reimbursed on monthly basis as per rates quoted by the Contractor.

IN WITNESS where of the parties here to have caused this Agreement to be executed in accordance with the laws in force ,the day and year first above written.

Signed, Sealed and Delivered by the

Said _____ (For the Client)

In the presence of.....

Signature

Name

Address

Witness 1. 2.

Signed, Sealed and Delivered by the

Said _____ (For the Contractor)

In the presence of

Signature

Name

Address

Witness 1. 2.

Annexure-I: List of Health institution and required manpower

S.no	Name of Block	Name of Delivery Points	Category of Delivery Point	Part Time workers		Full time Workers				
				L-1 Del. Points		L-2 DP			L-3 DP	
				SHC @ 1	PHC @ 2	PHC @2	CHC@4	CH @6/12	CHC @ 5	CH @ 6/16
1	Govindgad	CHC Govindgarh	L-2	0	0	0	4	0	0	0
2		CHC Rahat	L-2	0	0	0	4	0	0	0
3		PHC Teekar	L-1	0	2	0	0	0	0	0
6	Raipur karchuliyan	CHC Gurh	L-2	0	0	0	4	0	0	0
7		CHC Raipur Karchuliyan	L-2	0	0	0	4	0	0	0
8		PHC Amiliya	L-1	0	2	0	0	0	0	0
9		PHC Laxpanpur	L-1	0	2	0	0	0	0	0
10		PHC MANIKWAR ug	L-1	0	2	0	0	0	0	0
13	Sirmaur	CH SIRMAUR ug	L-3	0	0	0	0	0	0	0
14		CH Semariya	L-2	0	0	0	0	6	0	0
15		PHC Baikunthpur	L-2	0	0	2	0	0	0	0
16		PHC Beeda	L-2	0	0	2	0	0	0	0
17		PHC Chachai	L-1	0	2	0	0	0	0	0
19	Gangeo	CHC MANGWAN Ug	L-2	0	0	0	4	0	0	0
20		CHC Gangeo	L-2	0	0	0	4	0	0	0
21		PHC Lagaon	L-2	0	0	2	0	0	0	0
23	Jawa	CH Jawa	L-2	0	0	0	0	6	0	0
24		PHC Chaukhandi	L-2	0	0	2	0	0	0	0
25		PHC Dabhaura	L-2	0	0	2	0	0	0	0

(Handwritten signatures and initials)

26		SHC Panwar	L-1	1	0	0	0	0	0	0	
23	Tyothar	CH Teonthar	L-2	0	0	0	0	12	0	0	
24		CHC Chakghat	L-2	0	0	0	4	0	0	0	
25		PHC Garhi	L-2	0	0	2	0	0	0	0	
26		PHC Raipur Sonauro	L-2	0	0	2	0	0	0	0	0
		23	CH MAUGANJ ug	L-3	0	0	0	0	0	0	16
24	Mauganj	PHC Devtalab	L-2	0	0	2	0	0	0	0	
25		PHC Dhera	L-2	0	0	2	0	0	0	0	
26		PHC Malaigawan	L-1	0	2	0	0	0	0	0	
27		SHC Sitapur	L-1	1	0	0	0	0	0	0	
23		Hanumana	CHC Hanumana	L-2	0	0	0	4	0	0	0
24	PHC Pahadi		L-2	0	0	2	0	0	0	0	
25	PHC PIPRAHI ug		L-2	0	0	2	0	0	0	0	
26	PHC Hata		L-1	0	2	0	0	0	0	0	
27	SHC Patehra		L-1	1	0	0	0	0	0	0	
23	Naigarhi		CHC Naigarhi	L-2	0	0	0	4	0	0	0
24		SHC Bhir			1	0	0	0	0	0	0
				L-1							
		Total		4	14	22	36	24	0	16	

संस्थागत प्रसव L1, L2 & L3 वर्ष 2025-2

S.No.	Block	Level	HMIS Type	HMIS Facility name
1	Gangev	2	CHC	CHC MANGWAN Ug
2	Gangev	2	CHC	CHC Gangeo
3	Gangev	2	PHC	PHC Lalgaon
1	Hanumana	2	CHC	CHC Hanumana
2	Hanumana	2	PHC	PHC Pahadi
3	Hanumana	2	PHC	PHC PIPRAHI ug
4	Hanumana	1	PHC	PHC Hata
5	Hanumana	1	SHC	SHC Patehra
9	Jawa	2	CH	CH Jawa
10	Jawa	2	PHC	PHC Chaukhandi
11	Jawa	2	PHC	PHC Dabhaura
12	Jawa	1	SHC	SHC Panwar
6	Mauganj	3	CH	CH MAUGANJ ug
7	Mauganj	2	PHC	PHC Devtalab
8	Mauganj	2	PHC	PHC Dhera
9	Mauganj	1	PHC	PHC Malaigawan
10	Mauganj	1	SHC	SHC Sitapur
11	Naigarhi	2	CHC	CHC Naigarhi
12	Naigarhi	1	SHC	SHC Bhir
20	Raipur Karch.	2	CHC	CHC Gurh
21	Raipur Karch.	2	CHC	CHC Raipur Karchuliyan
22	Raipur Karch.	1	PHC	PHC Amiliya
23	Raipur Karch.	1	PHC	PHC Laxpanpur
24	Raipur Karch.	1	PHC	PHC MANIKWAR ug
25	Rewa	3	DH	DH Rewa
26	Rewa	2	CHC	CHC Govindgarh
27	Rewa	2	CHC	CHC Rahat
28	Rewa	1	PHC	PHC Teekar
29	Sirmour	3	CH	CH SIRMAUR ug
30	Sirmour	2	CH	CH Semariya
31	Sirmour	2	PHC	PHC Baikunthpur
32	Sirmour	2	PHC	PHC Beeda
33	Sirmour	1	PHC	PHC Chachai
34	Teonthar	2	CH	CH Teonthar
35	Teonthar	2	CHC	CHC Chakghat
36	Teonthar	2	PHC	PHC Garhi
37	Teonthar	2	PHC	PHC Raipur Sonauri

24.04.2026