TENDER REF. NO.: KK/158/2026/JPKAS(TC)

MINISTRY OF HEALTH

NEGARA BRUNEI DARUSSALAM

THE PROVISION OF CLEANING AND GRASS CUTTING SERVICES FOR TEMBURONG HEALTH OFFICE FOR A PERIOD OF THREE (3) YEARS

TENDER FEE : $10.00

RECEIPT NO. :

CLOSING DATE : ON TUESDAY, 04th AUGUST 2026

TIME : 2.00 PM

FOA :

THE CHAIRMAN
MINI TENDER BOARD, TENDER BOX
GROUND FLOOR, MINISTRY OF HEALTH
COMMONWEALTH DRIVE
BANDAR SERI BEGAWAN BB3910
NEGARA BRUNEI DARUSSALAM

[CLUSTERING]

SECTION 2

SPECIFICATIONS

THE PROVISION OF
CLEANING AND GRASS CUTTING SERVICES FOR TEMBURONG HEALTH OFFICE
FOR A PERIOD OF THREE (3) YEARS

1. GENERAL

- Tenderers are sought from suitably qualified cleaning contractors who wish to be considered for the provision of cleaning and grass cutting services (hereinafter 'the Services') at the Temburong Health Office (hereinafter 'the Health Office').
- The duration of the provision of Services is for **three (3) years.**

2. JOB SCOPE

- The Contractor shall provide the Services to the Health office for a period of **three (3) years** including the surrounding area and compound as set out in **Schedule A.**
- The Services include typical **cleaning services, replacement or top-up of consumables and waste management**. General guidelines and requirements of the cleaning services are provided for in **Schedule B**.
- The Contractor is expected to meet or exceed the quality standards required for each for the functioning areas set by the Health Office, as provided for in **Schedule C**, and cleaning frequency specifications as described in **Schedule D** respectively.
- Joint inspection by the Health office's representatives and contractor representative (Contract Manager) shall be conducted from time to time to ensure that these standards are met.

3. WARRANTY

- The Contractor warrants that it has the requisite manpower/personnel, equipment, machinery, material, skill and expertise to the satisfactory provision of the cleaning services for the Health Office.

4. CONTRACT PRICE AND PAYMENT

- The Contractor shall submit a breakdown of the contract price.
- The Ministry of Health reserves the right to reduce (during renovation) or extend the contract price to the new area according to rate set out in the Contract Price.
- The Contractor shall submit the invoice of the previous month **on the first week of each month**. All claims shall be addressed to:

  Director of Environmental Health Services
  Department of Environmental Health Services
  Ministry of Health
  Commonwealth Drive, Jalan Menteri Besar
  Bandar Seri Begawan
  Negara Brunei Darussalam

- Payment will be made within forty five (45) days after submission of the invoice and other related documents.
- Payment claims will be verified based on the checklist forms submitted by the Contractor and the monthly reports received from the Medical Officer for three (3) consecutive months.
- Written warnings will be sent to the Contractor if the quality of work is proven to be unsatisfactory. The Department of Environmental Health Services is entitled to make deductions, following advice from the Ministry of Health, with regards to the amount payable to the Contractor. The deductions will be based on the following categories :

Average Monthly Performance	Payment Due	Payment Due After 3rd Warning
90 - 100 %	100 %	-
80 - 89 %	90 %	50 %
70 - 79 %	80 %	50 %
0 - 69 %	50 %	50 %

5. CONDITION OF PREMISES

- The Contractor is required to inspect the Health Office and fully acquaint itself with the premises in respect of the conditions, accessibility, working space, storage accommodation and other limitations imposed on access to the premises.
- All costs arising from or in connection with such conditions or limitations are deemed to be included in the contract price.

6. ACCESS TO PREMISES

- Reasonable access shall be provided by the Medical Officer to the Contractor's personnel for the purpose of providing the cleaning services.
- Prior approval shall be sought from the Medical Officer to conduct the cleaning services to be carried out after office hours.
- For this purpose, the Contractor shall be responsible for collecting and returning any keys promptly to the security office.
- The Contractor shall inform any replacement of its personnel to the Medical Officer

7. WORKING HOURS

- The Contractor shall provide the Services for the Health Office on a daily basis excluding Fridays, Sundays and public holidays as specified in **Schedule E.**
- The Contractor shall ensure all his personnel comply with the working days and hours set out by the Health Office.
- The Health Office reserves the right to amend the working hours without prior notice to the Contractor.
- The Contractor shall ensure that his personnel are present at their designated work areas during such working hours.
- Immediate steps shall be taken by the Contractor to provide temporary replacement/relief to make up the full strength of the personnel required to provide the Services to the satisfaction of the Medical Officer.
- Replacement must be made not later than two (2) hours before commencement of the shift with approval from the Medical Officer or Officer-in-charge. Failure to provide such replacements will result in the imposition of a penalty on the contractor according to the following scale:

  Contract Manager : $50.00 per contract manager/shift
  Supervisor : $25.00 per supervisor/shift
  Worker : $15.00 per worker/shift
- Weekly duty rosters for deploying the number of workers shall be submitted by the Contractor to the Medical Officer for approval. Any changes made to the roster must be immediately notified to the Medical Officer or Officer-in-charge.
- The Contractor is also required to make allowance for any additional expenses which may be incurred due to the work which his employees may be required by the Health Office outside the working hours.
- The Contractor may be required to perform floor polishing outside office hours to avoid causing any inconvenience to the public.

8. PERSONNEL

- To ensure the proper and efficient execution of the Services, the Contractor shall provide and employ an adequate number of qualified workers to perform the Services as set out in **Schedule F.**
- The Contractor shall be given one month to recruit and train his staff to ensure that the Health Office's requirements and standards are met. Training of the Contractor's staff to commence immediately upon recruitment.
- A list of workers shall be submitted on a monthly basis to the Medical Officer for monitoring and security purposes.

A. CONTRACT MANAGER AND SUPERVISORS

- The Contractor shall appoint a Contract Manager with the approval from the Department of Environmental Health Services. The Contract Manager shall work exclusively for the Contractor and stationed full time at the Health Office.
- The Contract Manager must be able to make decisions on behalf of the Contractor.
- Approval for replacement of the Contract Manager must be sought in the event s/he falls ill (on medical leave) or is due to go on leave.
- The Contractor shall provide experienced and competent language-speaking supervisors and be deployed exclusively for the provision of the Services.
- The Contractor shall submit the CVs, basic duties and responsibilities of the Contract Manager and Supervisor.

B. MEDICAL SCREEENING

- The Contractor shall ensure that all his personnel appointed for the provision of the Services have undergone medical screening and deemed medically fit to perform the Services.

C. REMOVAL OF PERSONNEL

- The Medical Officer reserves the right to remove or replace any of workers employed by the Contractor from the Health Office's premises, who in the opinion of the Medical Officer has misbehaved or is incompetent or negligent in the performance of his/her duties.

D. WAGES AND WELFARE

- The Contractor is responsible for the wages, insurance, medical and welfare of his workers in accordance with the requirements of the Labour Department, Brunei Darussalam.
- The Contractor shall take out, at its own expense, with an insurance approved in writing by the Department of Environmental Health Services a policy or policies each specifically endorsed to provide indemnity to the Contractor and to the Health Office against any liabilities arising out of claims by an personnel for payment of compensation under the Workmen's Compensation Act (**Cap. 74 of the Laws of Brunei**).

E. EMPLOYMENT OF ILLEGAL WORKERS

- The Contractor undertakes that he will not employ, and will ensure that all of its sub-contractors will not employ, any illegal foreign workers.
- The Contractor will ensure that his workers possess the necessary employment passes if they are employed outside Brunei Darussalam.

F. UNIFORM

- The Contractor must ensure that **all** his personnel are neatly and properly attired in uniforms.
- Uniforms are to be provided by the Contractor at his own cost. Design, colour and materials of the uniform must also be approved by the Department of Environmental Health Services.

9. TRAINING AND DEVELOPMENT

- The Contractor is to provide basic cleaning training for his personnel in accordance with the Health Office's requirements before assigning them to the provision of the Services.
- The Contractor shall provide on-the-job training and orientation, at its own expense, to all his personnel as follows:
  - ✓ All cleaners : minimum 2 weeks
  - ✓ Supervisors : 3 weeks
- The training shall be conducted by the Contractor at the Health Office's premises.
- The Contractor shall employ a qualified trainer to train all personnel on basic hospital cleaning.
- The Contractor shall also provide and maintain at its own cost all training equipment and manuals necessary for this purpose.
- The Health Office reserves the right to send any of the Contractor's personnel for retraining if deemed incompetent by the Health Office.
- The Contractor shall bear the expenses incurred to retrain or replace his personnel during the retraining period.

10. SAFETY AND HYGIENE

- The Contractor shall observe and comply at all times with all current prevailing laws and regulations relating to safety and hygiene in carrying out the Services, and take all necessary and prudent precaution to ensure the safety on the Health Office's premises of his own staff and personnel, the staff and property of the Health Office and the general public.
- Proper signboards and barriers shall be erected and maintained during the progress of the Services which may endanger the safety of the Health Office's staff and the general public. The signboards and barriers must be sufficiently large to attract attention and shall include words such as "DANGER" or "BAHAYA", "CAUTION WET FLOOR" or "AWAS LANTAI BASAH", as appropriate.
- The Contractor shall comply with all instructions, policies and regulations as may be issued by the Department of Environmental Health Services from time to time in relation to safety and hygiene in the provision of the Services.

11. EQUIPMENT AND CHEMICALS TO BE USED

- The Contractor is responsible to procure and provide at its own expenses of all necessary equipment, tools and materials, as listed out in **Schedule E**, for the efficient provision of the Services.
- A list of the proposed equipment to be used in the provision of the Services, together with the manufacturer's brochure/s, shall be submitted in the format set out in **Section 3** of this Invitation To Tender.
- The Contractor shall ensure that an adequate supply of consumables shall be provided in the wards, toilets and other specified areas in the Health Office. The Contractor is also required to submit a list indicating the brand/quality and quantity of products/materials he intends to provide including the Manufacturer Safety Data Sheet (MSDS) in the format set out in **Section 3** of this Invitation To Tender.
- All equipment, tools and materials must be approved by the Department of Environmental Health Services prior to use for the provision of the Services.
- The Contractor undertakes and warrants that all equipment, tools and materials utilized for the Services shall be free from all defects, patent or latent, and fit and suitable for the purpose of providing the Services and shall be compliant with relevant industry standards.
- The Contractor is responsible for the safe storage of the equipment, tools and materials at its own expenses.
- The Contractor shall use only certified electrical appliances and circuit breakers.
- All chemicals used in the provision of the Services must meet the following standards:
  - ✓ Disinfectant for isolation wards. Operation Theatre and Laboratory – BS.EN1276:1997 requirements against HIV, Hepatitis B and other bacteria;
  - ✓ A neutral detergent is recommended for general cleaning of the Health Office;
  - ✓ Toilet cleaners – BS.EN13967:2001 requirements. pH level must be appropriate to the drainage pipe system of the Health Office;

- ✓ Multi-purpose cleaners – BS.EN1276:1997 requirements pH level must be applicable to all hard floor surfaces and vinyl floor surfaces. The contractor will ensure that the appropriate chemical is used as any damages to the flooring surfaces will affect the warranty of the flooring surfaces;
- ✓ Strippers be specifically used for vinyl floor surfaces and hard floor surfaces to prevent staining or discoloration of the floor polishes;
- ✓ Floor polishes must be emulsion polish suitable for vinyl and hard floor surfaces;
- ✓ Stainless steel cleaners must be suitable for all metals or chrome fitting with an acceptable pH level to prevent corrosion to steel fitting.

- The standards required for the provisions in the toilet requisites are as follows:
  - ✓ Paper towels – pulp, 2 ply or hand towel;
  - ✓ Toilet roll – pulp 2 ply;
  - ✓ Liquid soap – neutral (pH 7).
- The Contractor shall provide polythene bags or any other similar approved containers for the collection and deposit of rubbish. All rubbish collected shall be brought to the bin centre collection twice a day.
- For the purpose of infection control and bacteria control, the identification of tools and equipment utilized in the different areas of the Health Office is **essential**. In this respect, clear identification by colour coding of the various items of cleaning equipment is considered the most effective method of restricting equipment to individual areas of the Health Office.
- All tools and equipment used in the following areas shall be colour-coded according to the following:

Infection/Isolation areas	Yellow
Toilets/Bathrooms/Dirty Utility Room	Red
General Cleaning	Blue

12. WATER AND ELECTRICITY

- The Health Office shall provide all water and electricity required for the provision of the Services.
- The Contractor shall ensure the use of water and electricity for the provision of the Services is economic and not wasteful, and undertakes that all personnel will strictly adhere to this.

13. MAINTENANCE AND REPAIR WORKS

- The Contractor shall call directly to the Medical Officer to report any fault detected during the housekeeping process.
- The Contractor shall report any damage (due to negligence of the workers) of any cleaning element of Health Office's property immediately to the Medical Officer and also the Contract Manager.
- Cost of repair/replacement of any damage to the equipment or property belonging to the Health Office caused by the Contractor's personnel shall be borne by the Contractor.

14. STORE

- The Health Office shall provide the Contractor space for storage of all equipment, machinery, tools and consumable items to be used in the provision of the Services.
- Should the Contractor wishes to set up a temporary store, prior written approval from the Medical Officer must be obtained.

15. SECURITY ARRANGEMENT

- The Contractor's personnel shall immediately leave the Health Office's premises if requested by the Medical Officer.
- The Contractor shall at its own expenses provide, for all his personnel, identification passes as specified by the Department of Environmental Health Services. Any damaged pass shall be replaced by the Contractor at its own cost.

- Any lost or damaged passes must be reported immediately to the Medical Officer and upon approval from the Medical Officer, replace such lost/stolen pass at the Contractor's own costs.
- The Contractor shall ensure that his personnel do not, at any time, enter into areas which are not part of the Health Office's premises except as directed by the Medical Officer.
- For security purposes, the Contractor will provide the Medical Officer with the following particulars of his workers at least one (1) month before the commencement of the Services:
  - ✓ Name
  - ✓ Address
  - ✓ Identity Card Number / Passport Number
  - ✓ Gender
  - ✓ Citizenship
  - ✓ Expiry date of work pass (for foreign workers)

16. REGULATIONS, LICENCES AND PERMITS

- The Contractor is responsible to procure and maintain all necessary licences, permits and approvals, and shall at all times comply with all legal and regulatory requirements applicable to the provision of the Services.
- In the event of any change in legal or regulatory requirements during the contract period, the Contractor shall promptly and at its own expense take any necessary action for complying with the same.
- The Contractor is to comply with best practices as may be proposed or recommended by any relevant bodies in the relevant industry, and also ensure that the standard of Services provided shall, at the minimum, be of such quality and standard as is generally regarded as good in the relevant industry.

17. CHECKLIST AND INSPECTIONS

- The Contractor is required to record daily and periodic cleaning works in a format acceptable to the Department of Environmental Health Services. These checklist forms will be used as a basis for performance evaluation.
- The Supervisor must ensure that these checklist forms are duly completed and signed by the Medical Officer after completion of the cleaning services at the end of every week. These forms shall be submitted on the first day of the following week in which they are completed and signed.
- The checklist forms shall be graded by the Medical Officer.
- The Contractor will also carry out joint inspection with the Department of Environmental Health Services on an agreed schedule in addition to the monthly housekeeping and performance evaluation meetings. Records of such meeting are to be provided to the Department of Environmental Health Services.

SCHEDULES

SCHEDULE A:	**AREAS TO BE CLEANED**
SCHEDULE B:	**GENERAL GUIDELINES TO CLEANING**
SCHEDULE C:	**QUALITY STANDARDS**
SCHEDULE D:	**CLEANING SCHEDULE AND FREQUENCY**
SCHEDULE E:	**WORKING HOURS**
SCHEDULE F:	**ALLOCATION OF PERSONNEL**
SCHEDULE G:	**LIST OF EQUIPMENT AND SUPPLIES TO BE PROVIDED BY CONTRACTOR**
SCHEDULE H:	**CHECKLIST FORMS**

SCHEDULE A

AREAS TO BE CLEANED

The following areas are to be cleaned:

- Toilets
- Lobby (Waiting Area)
- Staircases
- Doctor's Room
- Staff's Room
- Lobby (Waiting Area)
- Corridor
- Kitchen
- Administrative Room
- Counter Registration
- Immunisation / Injection Room
- Multipurpose Room
- Store
- General Office

Compound / Surrounding Area

- This area includes the car parks, the grass (inside/outside the gate - **3 meter from gate)**, the drains, the garden, the roof and all surrounding building.

SCHEDULE B

GENERAL GUIDELINES TO CLEANING

The following guidelines shall be followed by the Contractor in the provision of Services. These guidelines are not exhaustive, and may be changed from time to time, notice of which will be given to the Contract Manager.

Typical Cleaning Services:

- All rooms and surrounding areas, daily and routine cleaning
- All washrooms /sinks and replenish supplies on a regular basis
- All supply carts stored in unit, shelves and frames
- All refrigerators and appliances
- Offices, desk, furniture, phone, computer screens and all office desk and wall fixtures
- Shelves, ledges and vents
- Vending machines, face and tops
- All areas in the building, including Main Lobbies, corridors and stairs and entrance mats
- All exterior glass on ground level and windows, including screens
- Window coverings, blinds and exchange cubicle, security grilles, window and shower curtains
- Provide comprehensive floor care program (scrub/polish/topcoat/strip/finish):
  - ✓ All scrubbing shall be done with a heavy-duty scrubbing machine
  - ✓ Burnishing of floors shall be done with a high-speed burnishing machine
- Move furnishing and equipment from rooms when performing project cleaning
- Mops and buckets, including materials and equipment used for toilet cleaning shall be segregated and shall not be used to clean other parts of the Health Office. The mops must be washed at 70°C, to prevent cross-infection.
- Spills body fluids/water/general fluids, and may include chemical spill according to Health Office /Clinic protocol
- Clean entrance mats located in parked
- Clean car parks (both public and staff car parks), roads and drains within and surrounding the Health Office

Waste Management Services

- Collect waste (non-clinical) from all rooms
- The waste collection should be transported to the Waste Disposal Station
- No waste containers of any description are to be dragged along the floors
- Provide appropriate polythene bags for non-clinical waste and storage bins
- Provide gloves, masks, aprons and visors for handling of waste
- Exchange/empty small garbage bags

Facilities Management

- Move heavy furniture or equipment
- Report all facility conditions that affect the cleaning operation, present as a safety hazard, or is detrimental to the image of a visually pleasing environment

Landscaping Services

- Includes cleaning of landscape & drains
- Grass cutting (2 times per month or as required)
- Maintenance of plants and/or flowers within surrounding area of building include car park

SCHEDULE C

QUALITY STANDARDS

A. IDENTIFYING RISKS

I. VERY HIGH RISK FUNCTIONAL AREAS

Required standard
In the functional area designated as very high risk, the required cleaning standards are of critical importance. The outcomes must be achieved through the highest level of intensity and frequency of cleaning.

As patients are at very high risk of infection, a frequent and responsive cleaning service is essential. Defined protocols and processes in addition to the outcomes need strict adherence.

Functional areas
- Isolation Room
- Emergency Room

Additional internal areas
It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning. These include bathrooms, corridors, storerooms, lecture/meeting rooms, offices, pan rooms and staff lounges.

II. HIGH RISK FUNCTIONAL AREAS

Required standard
The required standards are of high importance. The outcomes must be maintained by frequent scheduled cleaning and a capacity to spot clean.

Functional areas
- Triage Room
- Sterile supply areas (including sterilizing room)

Additional internal areas
It is essential that areas adjoining high risk functional areas also receive the same level of cleaning. These include balconies, bathrooms, corridors, meeting rooms, pantry/nourishment station, offices, pan rooms, staff lounges and storerooms.

III. MODERATE RISK FUNCTIONAL AREAS

Required standard
In the functional areas designated as moderate risk, the required standards are important for both hygiene and aesthetic reasons. The outcomes should be maintained through regular cleaning on a scheduled basis, with some capacity to spot clean in between.

Functional areas
- Kitchens
- Public Thoroughfares
- Toilets
- Urine Test Room
- Injection Room
- Treatment Room
- Waiting rooms
- Breastfeeding room

Additional internal areas
It is essential that areas adjoining moderate risk functional areas also receive the same level of cleaning. These include balconies, bathrooms, corridors, elevators, meeting rooms, pantry/nourishment section, offices, stairwells, pan rooms, staff lounges and storerooms.

IV. LOW/MINIMAL RISK FUNCTIONAL AREAS

Required standard
The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a scheduled or project basis, with a capacity to spot clean in between.

Functional areas
- Administrative areas
- Non-sterile supply
- Record storage and archives
- Lecture Room

Additional internal areas
It is essential that areas adjoining low/minimal risk functional areas also receive the same level of cleaning. These include balconies, bathrooms, corridors, elevators, meeting rooms, pantry/kitchenette, offices, staff lounges, storerooms and loading docks.

B. REQUIREMENTS AND STANDARDS FOR THE FUNCTIONAL AREAS

This part covers four main components which will encompass the cleaning services:
1. Building
2. Fixtures
3. Patient Equipment
4. General environment

I. BUILDING

1) **External features, fire exits and stairwells**
Includes: landings, ramps, stairwells, fire exits, steps, entrances/exits, porches, patios, balconies, eaves and external light fittings.

Required standard
- Landings, ramps, stairwells, fire exits, steps, entrances, porches, patios, balconies, eaves, external light fittings are free of dust, grit, dirt, leaves, cobwebs, rubbish, cigarette butts and bird excreta.
- Handrails are clean and free of stains.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
High risk ▪ Triage Room ▪ sterile supply areas (including sterilizing room)	**Highly Important** The outcomes must be maintained by frequent scheduled cleaning and a capacity to spot clean. It is essential that areas adjoining high risk functional areas also receive the same level of cleaning.
Moderate risk ▪ Kitchens ▪ Public Thoroughfares ▪ Toilets ▪ Urine Test Room ▪ Injection Room ▪ Treatment Room ▪ Waiting rooms ▪ Breastfeeding room	**Very important** The required standards are important for both hygiene and aesthetic reasons. The outcomes should be maintained through regular cleaning on a scheduled basis, with a capacity to spot clean in between. It is essential that areas adjoining moderate risk functional areas also receive the same level of cleaning.
Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

2) **Walls, skirtings and ceilings**
Includes: interior partitions, registers (interior and exterior) light switches, ceiling support beams and trusses.

Required standard
- Internal and external walls and ceilings are free of dust, grit, lint, soil, film and cobwebs.
- Walls and ceilings are free of marks caused by furniture, equipment or staff.
- Light switches are free of fingerprints, scuffs and any other marks.

- Light covers and diffusers are free of dust, grit, lint and cobwebs.
- Polished surfaces are of a uniform lustre.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
High risk ▪ Triage Room ▪ sterile supply areas (including sterilizing room)	**Highly Important** The outcomes must be maintained by frequent scheduled cleaning and a capacity to spot clean. It is essential that areas adjoining high risk functional areas also receive the same level of cleaning.
Moderate risk ▪ Kitchens ▪ Public Thoroughfares ▪ Toilets ▪ Urine Test Room ▪ Injection Room ▪ Treatment Room ▪ Waiting rooms ▪ Breastfeeding room	**Very important** The required standards are important for both hygiene and aesthetic reasons. The outcomes should be maintained through regular cleaning on a scheduled basis, with a capacity to spot clean in between. It is essential that areas adjoining moderate risk functional areas also receive the same level of cleaning.
Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

3) **Windows**
Includes: internal and external surfaces of all windows, double paned windows with venetian blinds, window ledges, all internal and external glass, mirrors and flyscreens.

Required standard
- External and internal surfaces of glass are clear of all streaks, spots and marks, including fingerprints and smudges.
- Window frames, tracks and ledges are clear and free of dust, grit, marks and spots.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
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Risk	Standards
Moderate risk ▪ Kitchens ▪ Public Thoroughfares ▪ Toilets ▪ Urine Test Room ▪ Injection Room ▪ Treatment Room ▪ Waiting rooms ▪ Breastfeeding room	**Very important** The required standards are important for both hygiene and aesthetic reasons. The outcomes should be maintained through regular cleaning on a scheduled basis, with a capacity to spot clean in between. It is essential that areas adjoining moderate risk functional areas also receive the same level of cleaning.
Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

4) **Doors**
Includes: doorknobs, handles and door guides, relief grilles and door plates, door tracks and jambs.

Required standard
- Internal and external doors and doorframes are free of dust, grit, lint, soil, film, fingerprints and cobwebs.
- Doors and doorframes are free of marks caused by furniture, equipment or staff.
- Air vents, relief grilles and other ventilation outlets are kept unblocked and free of dust, grit, soil, film, cobwebs, scuffs and any other marks.
- Door tracks and door jambs are free of grit and other debris.
- Polished surfaces are of a uniform lustre.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
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Moderate risk ▪ Kitchens ▪ Public Thoroughfares ▪ Toilets ▪ Urine Test Room ▪ Injection Room ▪ Treatment Room ▪ Waiting rooms ▪ Breastfeeding room	**Very important** The required standards are important for both hygiene and aesthetic reasons. The outcomes should be maintained through regular cleaning on a scheduled basis, with a capacity to spot clean in between. It is essential that areas adjoining moderate risk functional areas also receive the same level of cleaning.
Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

5) **Hard floors**
Includes: vinyl, tiles, concrete, wood and lino.

Required standard
- The floor is free of dust, grit, litter, marks and spots, water or other liquids.
- The floor is free of polish or other build-up at the edges and corners or in traffic areas.
- The floor is free of spots, scuffs or scratches on traffic lanes, around furniture and at pivot points.
- Inaccessible areas (edges, corners and around furniture) are free of dust, grit, lint and spots.
- Polished or buffed floors are of a uniform lustre.
- Appropriate signage and precautions are taken regarding pedestrian safety of newly cleaned or wet floors.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
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Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

6) **Soft floors**
Includes: carpets and carpet tiles

Required standard
- The floor is free of dust, grit, litter, marks and spots, water or other liquids.
- The floor is free of stains, spots, scuffs or scratches on traffic lanes, around furniture and at pivot points.
- Inaccessible areas (edges, corners and around furniture) are free of dust, grit, lint and spots.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning.

Risk	Standards
	It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
High risk ▪ Triage Room ▪ sterile supply areas (including sterilizing room)	**Highly Important** The outcomes must be maintained by frequent scheduled cleaning and a capacity to spot clean. It is essential that areas adjoining high risk functional areas also receive the same level of cleaning.
Moderate risk ▪ Kitchens ▪ Public Thoroughfares ▪ Toilets ▪ Urine Test Room ▪ Injection Room ▪ Treatment Room ▪ Waiting rooms ▪ Breastfeeding room	**Very important** The required standards are important for both hygiene and aesthetic reasons. The outcomes should be maintained through regular cleaning on a scheduled basis, with a capacity to spot clean in between. It is essential that areas adjoining moderate risk functional areas also receive the same level of cleaning.
Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

7) **Ducts, grills and vents**
Includes: exterior surface of duct outlets, air vents and grills, registers, air conditioners, relief grilles, exhaust fans, extraction fans and other ventilation outlets.

Required standard
- All ventilation outlets are kept unblocked and free of dust, grit, soil, film and cobwebs.
- All ventilation outlets are kept clear and uncluttered following cleaning.

[Note: Cleaning and maintenance of filters of air conditioners etc must be undertaken in accordance with the manufacturers' requirements or otherwise determined by the Health Office.]

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
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Risk	Standards
Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

II. FIXTURES

1) **Electrical fixtures and fittings**
Includes: computer equipment, refrigerators, microwaves, dryers, TVs and associated fittings, light fittings, telephones, drinking fountains, vending machines, exhaust fans, light switches and insect killing devices.

Required standard
- Electrical fixtures and appliances are free of grease, dirt, dust, encrustations, marks, stains and cobwebs.
- Electrical fixtures and appliances are kept free from signs of use or non-use.
- Hygiene standards are satisfied where the fixture or appliance is used in food preparation.
- Motor vents etc. are clean and free of dust and lint.
- Drinking fountains are clean and free of stains and mineral build-up.
- Insect killing devices are free of dead insects and are clean and functional.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
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Moderate risk ▪ Kitchens ▪ Public Thoroughfares ▪ Toilets ▪ Urine Test Room ▪ Injection Room ▪ Treatment Room ▪ Waiting rooms ▪ Breastfeeding room	**Very important** The required standards are important for both hygiene and aesthetic reasons. The outcomes should be maintained through regular cleaning on a scheduled basis, with a capacity to spot clean in between. It is essential that areas adjoining moderate risk functional areas also receive the same level of cleaning.
Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

2) **Furnishings and fixtures**
Includes: chairs, sofas, stools, beds, tables, cupboards, wardrobes, lockers, trolleys, benches, shelves and storage racks, waste/rubbish bins, plants, fire extinguishers, fire alarms, bed screens, curtains, blinds and drapes.

Required standard

- Hard surface furniture is free of spots, soil, film, dust, fingerprints and spillages.
- Soft furnace furniture is free from stains, soil, film and dust.
- Furniture legs, wheels and castors are free from mop strings, soil, film, dust and cobwebs.
- Inaccessible areas (edges, corners, folds and cervices) are free of dust, grit, lint and spots.
- All high surfaces are free from dust and cobwebs.
- Curtains, blinds and drapes are free from stains, dust, cobwebs, lint and signs of use or non-use.
- Equipment is free of tapes/plastic, etc, which may compromise cleaning.
- Furniture has no odour that is distasteful or unpleasant.
- Shelves, benchtops, cupboards and wardrobes/lockers are clean inside and out and free of dust and litter or stains.
- Internal plants are free of dust and litter.
- Waste/rubbish bins or containers are clean inside and out, free of stains and mechanically intact.
- Fire extinguishers and fire alarms are free of dust, grit, dirt and cobwebs.

[Note: Furniture should not be repaired using tapes etc. that may compromise cleaning. Damaged furniture should be reported to the Health Office management.]

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
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Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

3) **Toilets and bathroom fixtures**
Includes: toilets, urinals, sinks, showers, baths, wash basin areas, taps, tap handles, sluices, bath mats, shower curtains and shower/bath rails.

Required standard

- Porcelain and plastic surfaces are free from smudges, smears, body fats, soap build-up and mineral deposits.
- Metal surfaces, shower screens and mirrors are free from streaks, soil, smudges, soap build-up and oxide deposits.

- Wall tiles and wall fixtures (including soap dispensers and towel holders) are free of dust, grit, smudges/streaks, mould, soap build-up and mineral deposits.
- Shower curtains and bath mats are free from stains, smudges, smears, odours, mould and body fats.
- Plumbing fixtures are free of smudges, dust, soap build-up and mineral deposits.
- Bathroom fixtures are free from odours that are distasteful or unpleasant.
- Sanitary disposal units are clean and functional.
- Consumable items are in sufficient supply.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
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Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

III. PATIENT EQUIPMENT

Includes: wash bowls, commodes, shower chairs, bed pans, bottles, lifting machines, patient slides, harnesses, call buttons, meal tables, medical gas containers, rehabilitation equipment.

Required standard:
- Equipment is free from soil, smudges, dust, fingerprints, grease and spillages.
- Equipment is free of tapes/plastic etc. that may compromise cleaning.
- Equipment legs, wheels and castors are free from mop strings, soil, film, dust and cobwebs.
- Equipment has no odour that is distasteful or unpleasant.
- Equipment is free from signs of non-use.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.

Risk	Standards
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Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

IV. ENVIRONMENT

1) General tidiness

Required standard

- The area appears tidy and uncluttered.
- Floor space is clear, only occupied by furniture and fittings designed to sit on the floor.
- Furniture is maintained in a fashion which allows for cleaning.
- Fire access and exit doors are left clear and unhindered.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
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Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be

▪ Record storage and archives ▪ Lecture room	achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

2) **Odour control**

Required standard
- The area smells fresh.
- There is no odour which is distasteful or unpleasant.
- Room deodorizers are clean and functional.

Risk	Standards
Very high risk ▪ Areas with patients in protective isolation	**Critically important** Patients are at very high risk of infection, and a frequent and responsive cleaning service is ESSENTIAL. Defined protocols and processes in addition to the outcomes need strict adherence. The outcomes must be achieved through the highest level of intensity and frequency of cleaning. It is essential that areas adjoining very high risk functional areas also receive the most intensive level of cleaning.
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Low/minimal risk ▪ Administrative areas ▪ Non-sterile supply ▪ Record storage and archives ▪ Lecture room	**Important** The required standards are important for aesthetic and, to a lesser extent, hygiene reasons. The outcomes should be achieved through regular cleaning on a program or scheduled basis, with a capacity to spot clean in between.

SCHEDULE D

CLEANING SCHEDULE AND FREQUENCY

NO.	AREAS	SCHEDULE AND FREQUENCY						
	GENERAL AREAS	**FLOOR**	**WALL**	**WINDOW DOOR**	**CEILING**	**FURNITURES FIXTURES & EQUIPEMNTS**	**EMPTY BAG HOLDER**	**CLEANING OF GENERAL (G) & CLINICAL CW BAG HOLDER**
A.	1. CORRIDOR	V/DM 4XD AR	SC 1XW AR HDV/C 1XW	SC 1XD AR	ADV/C 1XW AR	-	Every 2 hours AR	(G) 1XW
	▪ METAL RAILING ▪ GLASS PANELS	-	-	SC 1XD SC 1XD	-	-	-	-
	2. ALL STAIR CASE	V/DM 3XD AR	SC AR DW 1XW	SD AR DW 1XW	HDV/C 1XW	-	-	-
	~~3. LIFT~~	V/DM 2XD SC AR	DW 2XD	DW 2XD POLISH 1XW	SC AR HDV/C 1XD	-	-	-
	4. TOILET (PUBLIC)	WS 6XD, AR VMS, SC AR WET MOP AR	WS 3XD AR SC AR	SC AR DW 3XW	HDV/C 1XW	W2XD WS 2XD RT AR	Every 2 hours. AR	(G) 1XW
	5. OFFICE ▪ ADMINISTRATION	V/DM 1XD 2 1XW AR	SC AR WS AXM	SC AR DW 1XM	SC AR HDV/C	DW 1XD	2XD	(G) 1XW
	▪ TOILET	W 2XD WS 1XW	SC AR	DW 1XW SC AR	SC AR HDV/C 1XM	RT 1XD, AR WS 1XD	2XD	(G) 1XW
	▪ KITCHEN/ PANTRY	W2D WS 1XD	WS 1XD	W 1XD	DW 1XW	-	2XD	(G) 1XW AR
	6. ALL STORES	V/DM 2XW	SC AR	DW 1XW SC AR	SC AR HDV/C 1XM	DW 1XM	1XD	(G) 1XW

LEGEND:

V/DM	- VACUUM / DUST AND MOP	M	- MONTHLY
SC	- SPOT CLEANING	HDV/C	- HIGH DUST VACUUM/CLEAN
DW	- DAMP WIPE	E	- END OF DAY
EOD	- END OF THE DAY	RT	- REPLENISH TOILETRIES
W	- WASH	WS	- WASH & SCRUB
P	- POLISH	V	- VACUUM
AEC	- AFTER EACH CASE	VMS	- VACUUM MOP & SANITISE
W	- WEEKLY	DSC	- DAILY SPOT CLEANING
PCC	- POST CASE CLEANING	AR	- AS REQUIRED
D	- DAILY		

SCHEDULE E

WORKING HOURS

Day:	Morning Session:	Afternoon Session:	Evening Session:
Monday	7.00 am – 2.00 pm	2.00 pm – 4.30 pm	NA
Tuesday	7.00 am – 2.00 pm	2.00 pm – 4.30 pm	NA
Wednesday	7.00 am – 2.00 pm	2.00 pm – 4.30 pm	NA
Thursday	7.00 am – 2.00 pm	2.00 pm – 4.30 pm	NA
Friday	NA	NA	NA
Saturday	7.00 am – 2.00 pm	2.00 pm – 4.30 pm	NA
Sunday	NA	NA	NA

Areas Inside Building : Office Hours only OR if required any time

Areas outside building : Office hours OR Friday/Sunday/Public Holidays, as when required)

Office hours : 7.00 am – 4.30 pm

SCHEDULE F

ALLOCATION OF PERSONNEL

The Contractor shall employ the minimum number of skilled or semi-skilled workmen as enumerated below:

- **Supervisor cum cleaner : 1**
- **Cleaners : 2 (1 Male and 1 Female)**

SCHEDULE G

LIST OF EQUIPMENT AND SUPPLIES TO BE PROVIDED BY CONTRACTOR

All tools, equipment, chemicals and materials to be used in the cleaning services shall be provided by the Contractor such as:-

	Machines	Quantity
1	Burnishing machine	1
2	Carpet shampooing machine	1
3	Vacuum cleaners	
	▪ Wet Vacuum Machine	1
	▪ Dry Vacuum Machine	1
4	Polishing machine	1
5	Scrubbing machine	1
6	Grass cutter	1
7	Pruning machine	1
8	Trimmer machine	1
9	Water jet	1
	Chemical	
1	Floor polish	
2	Toilet cleaner	
3	Disinfectants	Adequate when used
4	Deodorant	
5	Bleach	
	Gardening tools	
1	Scoop	
2	Hoe	
3	Wheelbarrows	
4	Choppers	Adequate when used
5	Garden fork	
6	Spade	
	Other equipment	
1	Brooms	
2	Dustbins	
3	Garbage trolleys	
4	Dustpans	Adequate when used
5	Janitor Cart	
6	Mop Squeeze bucket with wet mop	

SCHEDULE H

CHECKLIST FORMS

EPARTMENT OF ENVIRONMENTAL HEALTH SERVICES
MINISTRY OF HEALTH

FORM E – BI – MONTHLY

LOCATION _____
SECTION _____
MONTH _____
OFFICER IN CHARGE _____

No.	Description of work	Mark	Comments
1.	**General cleaning of all external glass panels and frames.**		
2.	**Shampooing of carpet.**		
3.	**Cleaning walls, ceiling, air-conditioner supply and return air-grilles and light covers / diffusers.**		
4.	**Pruning of plants, collect and remove for disposal all cut branches.**		

PLEASE INDICATE THE MARKS AS FOLLOWS:

1. NOT SATISFACTORY
2. GOOD
3. VERY GOOD
O. WORK NOT CARRIED OUT
N. NOT APPLICABLE

Signature : _____

Date :_____

Note:
Mark (*) will be filled by Officer In-Charge.

DEPARTMENT OF ENVIRONMENTAL HEALTH SERVICES
MINISTRY OF HEALTH

FORM D – MONTHLY

LOCATION _____
SECTION _____
MONTH _____
OFFICER IN CHARGE _____

No.	Description of work	Mark	Comments
1.	General cleaning, scrubbing / stripping, sealing and polishing of floor (Tiled/Vinyl Floor) and staircases.		
2.	General cleaning of all internal glass panels, frames and security grilles.		
3.	Application of NPK fertiliser to all plants.		
4.	Weeding operating to all planted areas, removal and disposal of all weeds and rubbish collected.		

PLEASE INDICATE THE MARKS AS FOLLOWS:

1. **NOT SATISFACTORY**
2. **GOOD**
3. **VERY GOOD**

O. WORK NOT CARRIED OUT
N. NOT APPLICABLE

Signature : _____

Date : _____

Note:
Mark (*) will be filled by Officer In-Charge.

DEPARTMENT OF ENVIRONMENTAL HEALTH SERVICES
MINISTRY OF HEALTH

FORM C – FORTNIGHTLY

LOCATION _____
SECTION _____
MONTH _____
OFFICER IN CHARGE _____

No.	Description of work			Mark	Comments
		Week 1	Week 3		
1.	General cleaning of toilets – scrubbing of floor; wash-down and scrub walls and clean windows; and scrubbing of fixtures and fittings.				
2.	Grass cutting, raking and removal of cut grass for disposal.				

PLEASE INDICATE THE MARKS AS FOLLOWS:

1. **NOT SATISFACTORY**
2. **GOOD**
3. **VERY GOOD**

O. WORK NOT CARRIED OUT
N. NOT APPLICABLE

Signature : _____

Date :_____

Note:
Mark (*) will be filled by Officer In-Charge.

DEPARTMENT OF ENVIRONMENTAL HEALTH SERVICES
MINISTRY OF HEALTH

FORM B – WEEKLY

LOCATION _____
SECTION _____
MONTH _____
OFFICER IN CHARGE _____

No.	Description of work	M	T	W	T	S	M	T	W	T	S	M	T	W	T	S	M	T	W	T	S	M	T	W	T	S	Mark	Comments
1	Spot cleaning/dusting and removal of cobwebs and insect debris from walls, columns and ceiling; light fittings; and air-conditioner supply and return air grilles																											

PLEASE INDICATE THE MARKS AS FOLLOWS:

1. NOT SATISFACTORY
2. GOOD
3. VERY GOOD
O. WORK NOT CARRIED OUT
N. NOT APPLICABLE

Signature : _____

Date :_____

Note:
Mark (*) will be filled by Officer In-Charge.

DEPARTMENT OF ENVIRONMENTAL HEALTH SERVICES
MINISTRY OF HEALTH

FORM A – DAILY

LOCATION _____
SECTION _____
MONTH _____
OFFICER IN CHARGE _____

No.	Description of Work	M	T	W	T	S	M	T	W	T	S	M	T	W	T	S	M	T	W	T	S	M	T	W	T	S	Mark	Comments
1	Sweep and mopping of floor and staircases and burnishing of floor. Use hospital grade disinfectant for all floors at dialysis wards.																											
2	Vacuum and spot clean carpet.																											
3	Dusting of windows and frames and window blinds/curtains; spot cleaning of glass panels and frames; and cleaning handrails.																											
4	Damp dusting/wiping and disinfect furniture, counters, fittings, labels, equipment worktop, cupboards and public telephones and damp-wiped televisions, fire extinguishers and fire hose reel cabinets.																											
5	Cleaning of toilets and supply of toilets and supply toilet paper, deodorant and scented tablets to urinals.																											

No.	Description of Work	M	T	W	T	S	M	T	W	T	S	M	T	W	T	S	M	T	W	T	S	M	T	W	T	S	Mark	Comments
6	Sweeping and mopping of drive-in porch, foyer and covered area.																											
7	Sweeping building apron and drains; driveway and compound drain.																											
8	Sweep of car park.																											
9	Collect and removal of rubbish.																											

PLEASE INDICATE THE MARKS AS FOLLOWS:

1. NOT SATISFACTORY
2. GOOD
3. VERY GOOD
O. WORK NOT CARRIED OUT
N. NOT APPLICABLE

Signature : _____

Date :_____

Note:
Mark (*) will be filled by Officer In-Charge.

SECTION 3

FORM TO BE USED

CONTENTS

SCHEDULE A

TENDER FORM

To:

TENDER REFERENCE NO.: KK/158/2026/JPKAS(TC)

INVITATION TO TENDER
THE PROVISION OF CLEANING AND GRASS CUTTING SERVICES FOR TEMBURONG HEALTH OFFICE FOR A PERIOD OF THREE (3) YEARS

TENDER OF *(name of tenderer)*

Company/Business Registration No.: _____

Tender Closing Date: _____

NO.	DESCRIPTION	PRICE (B$)
Monthly charges for cleaning services for: **Temburong Health Office**		
1	**Monthly Charges for Cleaning Services**	
2	**Monthly Charges for Grass Cutting Services**	
3	**Total Monthly Charges**	
4	**Total Charges for Three (3) Years**	

1. We offer and undertake on your acceptance of our Tender to provide the above mentioned services in accordance with your Invitation To Tender.

2. Our Tender is fully consistent with and does not contradict or derogate from anything in your Invitation To Tender. We have not qualified or changed any of the provisions of your Invitation To Tender.

3. We shall execute a formal agreement in the appropriate form set out in Section 4 – Contract of the Invitation To Tender together with such further terms and conditions, if any, agreed between the Government and us.

4. OUR OFFER IS VALID FOR **SIX (6) CALENDAR MONTHS** FROM THE TENDER CLOSING DATE.

5. When requested by you, we shall extend the validity of this offer.

6. We further undertake to give you any further information which you may require.

Dated this day of 20 .

Tenderer's official stamp:

_____
Signature of authorised officer of Tenderer
Name:
Designation:

SCHEDULE B

INFORMATION SUMMARY

2.1 Tenderers shall provide in this Schedule the following information:

a. Management summary

b. Company profile (including Contractor and sub-contractor(s), if any)

c. Years of experience (as of the Tender Closing Date) of the Contractor and sub-contractor(s) in the:

- ***Provision of Cleaning Services***

d. Other information which is considered relevant

SCHEDULE C

SUB-CONTRACTS

3.1 Tenderers shall complete Table 3.1 with information about all the companies involved in the provision of the services and items specified in this tender. This shall include details about the Contractor and each sub-contractor involved, as well as their respective responsibilities.

3.2 Tenderers shall also indicate in Table 3.1 any alliance relationship established with each sub-contractor. An alliance is defined as a formal and binding business relationship between the allied parties.

Table 3.1 - Responsibility Table

Company Name	Responsibility Description	Alliance Relationship between Contractor and Sub-contractor(s)		
		Alliance Exists? (Y/N)	Date Established	Alliance Description
Contractor				
		Not Applicable	Not Applicable	Not Applicable
Sub-contractor(s)				

SCHEDULE D

COMPANY'S BACKGROUND

4.1 Each of the companies involved in this tender, including Contractor and sub-contractor(s) (if any), shall provide information on the company's background, scope of operations, financial standing and certified copy of its Certificate of Incorporation or Certificate of Registration (as the case may be).

SCHEDULE E

REFERENCES

5.1 Tenderers shall submit a list of customers in Table 5.1 to whom the Contractor has provided similar services and items as specified in this tender in the recent 5 years as of the Tender Closing Date.

Table 5.1 - References of previous customers

Customer Name and Address	Customer Type (Govt or Quasi Govt)*	Contact Person	Title	Contact Number, Fax Number and E-mail Address

***Note: Tenderers shall indicate whether the customer is a Government or Quasi Government organisation. A Quasi Government is defined as an organisation which (1) is managed and controlled by the Government; or (2) has at least 50% shares being held by the Government. Please leave the column blank if the customer is neither a Government or Quasi Government organisation.**

5.2 The Ministry of Health shall treat all the information submitted under this schedule in strict confidence.

5.3 The Ministry of Health reserves the right to contact the references for tender assessment purposes.

SCHEDULE F

DECLARATION

6.1 Tenderers shall complete and submit the Declaration form below.

PENGAKUAN PENENDER
TENDERER'S DECLARATION

SCHEDULE G

LIST OF EQUIPMENT

7.1 Tenderers are required to list out the equipment and tools including the quantity required, which shall be used in providing the services described in **Section 2** of this Invitation To Tender. Tenderers are allowed to add in any other equipment and tools which are deemed necessary for the execution of the services. **(FAILURE TO FILL THE OFFER DETAIL SHALL BE IDENTIFIED AS NON-COMPLIED TO THE OFFER)**

NO.	LIST OF EQUIPMENT AND MACHINERY	QUANTITY	BRAND
1.	Janitor Cart		
2.	Mop Squeeze bucket with wet mop		
3.	Dry Mop		
4.	Vacuum Cleaner		
5.	Wet and Dry Vacuum Machine		
6.	Polishing Machine		
7.	Scrubbing Machine		
8.	Carpet Shampoo Machine		
9.	Carpet Dryer		
10.	Wet Suction		
11.	High Pressure Cleaner		
12.	Grass Cutter		
13.	Pruning Machine		
14.	Glass Cleaning Tools		
15.	Caution Signboards		
16.	Lobby Dustpan		
17.	Toilet Bowl Brushes		
18.	Brute Angle Brooms		
19.	Aluminium Ladders		

SCHEDULE H

LIST OF CHEMICALS

8.1 Tenderers are required to list out the chemicals which are intended to be used for the services. **(FAILURE TO FILL THE OFFER DETAIL SHALL BE IDENTIFIED AS NON-COMPLIED TO THE OFFER)**

NO.	DESCRIPTION	BRAND	COUNTRY OF ORIGIN
1.	Floor Sealer		
2.	Floor Polish		
3.	Floor Stripper		
4.	Carpet Shampoo		
5.	Carpet Pre-Treatment		
6.	Disinfectant for Cubicle area		
7.	General disinfectant		
8.	Furniture Polish/Cleaner		
9.	Buffing Liquid		
10.	Deodoriser		
11.	Deodorant Block		
12.	Liquid Hand Soap		
13.	Toilet Bowl Cleaner		
14.	Toilet Disinfectant		
15.	Toilet Paper		
16.	Glass/Mirror Cleaner		

SCHEDULE G

OPERATIONAL COSTS

9.1 Tenderers are required to fill in information required below which are intended to be used for the services.
(FAILURE TO FILL IN REQUIRED DETAILS SHALL BE IDENTIFIED AS NON-COMPLIED TO THE OFFER)

a) Monthly Salaries

DETAILS	NO. OR PERSONNEL OFFERED (A)	MONTHLY SALARY (B)	TOTAL MONTHLY SALARY (A x B)
Supervisor cum Cleaner			
Cleaners			

b) List of equipment and machineries

NO.	EQUIPMENT AND MACHINERIES	TOTAL OFFERED	BRAND	PRICE PER UNIT	TOTAL PRICE
1.	Janitor Cart				
2.	Mop Squeeze bucket with wet mop				
3.	Dry Mop				
4.	Vacuum Cleaner				
5.	Wet and Dry Vacuum Machine				
6.	Polishing Machine				
7.	Scrubbing Machine				
8.	Carpet Shampoo Machine				
9.	Carpet Dryer				
10.	Wet Suction				
11.	High Pressure Cleaner				
12.	Grass Cutter				
13.	Pruning Machine				
14.	Glass Cleaning Tools				

NO.	EQUIPMENT AND MACHINERIES	TOTAL OFFERED	BRAND	PRICE PER UNIT	TOTAL PRICE
15.	Caution Signboards				
16.	Lobby Dustpan				
17.	Toilet Bowl Brushes				
18.	Brute Angle Brooms				
19.	Aluminium Ladders				
TOTAL PRICE FOR MACHINERIES AND EQUIPMENT					

c) CHEMICALS AND TOILETRIES

NO.	DETAILS	BRAND	MONTHLY USAGE ESTIMATION (A)	PRICE PER UNIT (B)	TOTAL (A x B)
1.	Floor Sealer				
2.	Floor Polish				
3.	Floor Stripper				
4.	Carpet Shampoo				
5.	Carpet Pre-Treatment				
6.	Disinfectant for Cubicle area				
7.	General disinfectant				
8.	Furniture Polish/Cleaner				
9.	Buffing Liquid				
10.	Deodoriser				
11.	Deodorant Block				
12.	Liquid Hand Soap				
13.	Toilet Bowl Cleaner				
14.	Toilet Disinfectant				

NO.	DETAILS	BRAND	MONTHLY USAGE ESTIMATION (A)	PRICE PER UNIT (B)	TOTAL (A x B)
15.	Toilet Paper				
16.	Glass/Mirror Cleaner				
TOTAL PRICE FOR CHEMICALS AND TOILETRIES					

d) Grasscutting

NO.	DETAILS	MONTHLY CHARGES
1	Grass cutting Service	

e) SUMMARY FOR OPERATIONAL COSTS

ESTIMATED OPERATIONAL COSTS THE PROVISION OF CLEANING AND GRASS CUTTING SERVICES FOR TEMBURONG HEALTH OFFICE FOR A PERIOD OF THREE (3) YEARS	
KETERANGAN	**ANGGARAN SEBULAN**
1. Salaries	
2. Machineries and Equipment	
3. Chemicals and Toiletries	
4. Grass cutting Service	
MONTHLY OPERATIONAL COSTS	