MEMO

DATE : 14 JANUARY 2025

ADDRESSED FROM : HEALTH AND WELLNESS MANAGER

ADDRESSED TO : TERMINAL MANAGER TPT CTCT

PROVISION OF ON-SITE PARAMEDIC SERVICES FOR TRANSNET SOC LTD, OPERATING AS TRANSNET PORT TERMINALS ("TPT"), AT THE PORT OF CAPE TOWN (CONTAINERS & MULTI PURPOSE – TERMINAL), FOR A PERIOD OF TWELVE MONTHS

Dear Procurement Manager, please find the attached SOW for: Paramedic Services

Sanction : GL Account: 491527 Cost Centre: 4131

The attached scope of work is complete to the best of my knowledge and is not subject to change. The level of completeness is sufficient to take this scope of work out to RFP as a project specification. This scope of work/specification has been discussed with the respective terminal and agreed with to by all stakeholders concerned, as per the signatures below. Should this scope change substantially then this document will be recirculated for signatures and the revised document will be presented to you for going out on RFP.

Keeping in mind that this document passes responsibility for the procurement phase of this project over to you until the signed contract document is returned to me for my records.

SCOPE OF WORK

1. EXECUTIVE OVERVIEW

Transnet Port Terminals, as the employer is obligated under Section 8 of the Occupational Health and Safety Act (Act 85 of 1993) "General duties of employers to their employees". Section (1) states the requirement for employers to provide and maintain a workplace that is safe and without risk to the health of their employees. Section 16 of the same act deals with the proper delegation of health and safety duties. The legislator starts with the person "who is responsible for the overall management and control" of the business. Section 16 (2) appoints the Managing Executive of the terminal as the person that is responsible to assign health and safety duties to the rest of management under his or her control. The Occupational Health and Safety Act (OHS Act), No. 85 of 1993, requires that every employer shall make an evaluation of the risks to which employees are exposed in the workplace and furthermore, that he shall take steps to make such conditions safe where necessary.

2. GENERAL SCOPE OF REQUIREMENTS

- 2.1 The service provider shall be required to provide two (2) Intermediate Life Support paramedics working on a rotational shift, from 18h00 to 06h00 daily, 7 days a week, that is compliant with the minimum standards for Paramedic Services as per the laws and regulations governing ambulance services within the Western Cape.
- 2.2 The ILS will be stationed at the Cape Town Terminal at the onsite Clinic. The expectation is for the service provider to immediately respond to an incident/ medical emergency alert/ notification. This will be done in conjunction with the SHEQ Officer who will be responsible for the transportation of the ILS to the incident/ injury/ medical emergency.
- 2.3 The service provider shall be required to provide two (2) Intermediate Life Support paramedics working on a rotational shift, from 18h00 to 06h00 daily, 7 days a week, that is compliant with the minimum standards for Paramedic Services as per the laws and regulations governing ambulance services within the Western Cape.
- 2.4 The ILS will be stationed at the Cape Town Terminal at the onsite Clinic. The expectation is for the service provider to immediately respond to an incident/ medical emergency alert/ notification. This will be done in conjunction with the SHEQ Officer who will be responsible for the transportation of the ILS to the incident/ injury/ medical emergency.
- 2.5 To ensure safe and effective emergency care on site, as well as referral of the injured/ sick from the site to hospital or treating Dr. The service provider will ensure safe and effective emergency care on site thus, responsible for the assessment of the nature/ severity of the incident/ medical emergency and triage and act accordingly with regards to stabilizing injured/ medical emergency employees.
- 2.6 The service provider shall respond rapidly to requests for assistance in an emergency situation and initiate call out of the TNPA ambulance based on their assessment of the severity of the incident/injury/ medical emergency. When the ambulance arrives, the service provider in line with their scope of practice will be expected to assist the ambulance personnel at the incident/ injury/ medical

- emergency scene. In addition, the service provider will be responsible for the handover of injured/medical emergency employees to the ambulance personnel.
- 2.7 The service provider shall be liable for all costs relating to telephones, cell phones, Wi-Fi, radio licensing and or closed-circuit television (if required) and/or any other communication devices as stipulated in this tender.
- 2.8 The service provider shall provide proper uniform/Protective Clothing to all staff including badges/identity cards and shall ensure that their appearance is smart in all respect.
- 2.9 The service provider shall actively participate in TPT's emergency preparedness/ mock drills/ simulations as and when required.
- 2.10 Assist in Disaster Management if and when required. Initiate patient evacuation to local hospitals in the event of a mass casualty incident.
- 2.11 The equipment will meet at least the minimum national standards. All manufacturer specifications, periodic calibration tests and maintenance schedules will be fully adhered to and documented.
- 2.12 Adherence to all national legislation as well as all requirements as determined by the client will be maintained. This will be finalised on acceptance of the tender submission.
- 2.13 A patient report form will be generated for every patient treated and transported, which will be audited by the Emergency Resource Coordinator. Report forms that will, at a minimum, identify: the details of the patient; location at which the service was provided; response time; diagnoses.
- 2.14 All staff will be required to sign a non-disclosure and confidentiality agreement aimed at protecting client confidentiality.
- 2.15 Monthly statistical reports on all incidents, call outs, transportation to hospital, toolbox talks, simulations done.
- 2.16 Conduct informal emergency response awareness training for employees as and when required.
- 2.17 Monthly checking of First Aid Boxes and replenishment.
- 2.18 The Service Provider will be expected to perform weekly inspections on the following:
 - All automated external devices e.g defibrillator
 - Rescue Jump Bags
 - Rescue First Aid boxes

3. CRITICAL FUNCTIONAL REQUIREMENTS

- **3.1** The service provider must be in the business of providing Medical Emergency Services for the past (three) years continuously.
 - Supporting documents to be provided: A minimum of two (2) written references issued by the respondent's clients (different clients) which shall be used to verify the Respondent's past performance.
 - Kindly note that the references must specifically set out the number of years the respondent has provided Medical Emergency services.

- **3.2** Equipment availability: The service provider must at all times have the necessary equipment on hand with sufficient stock levels.
- **3.3** Verification of qualification and skill of resources.
 - The service provider shall ensure that it has qualified and competent staff which is tasked with providing the required services to TPT and are experienced in carrying out its responsibilities and who shall have the requisite skills to maintain life and reduce injuries in emergency situations while transporting patients to a care facility:
 - The service provider shall therefore have a minimum of 2 (two) persons who will be required to provide the Intermediate Life Support Emergency Services.
 - The patient attendant shall be registered as an Intermediate Life Support.
 - The personnel should be registered in terms of the Medical, Dental and Supplementary Health Services Professions Act 56 of 1974 with the Health Profession Council of South Africa.
 - (Supporting documents to be provided: <u>Certified copy of the current registration card</u> of the intermediate life support practitioner.)
 - Local Footprint: The service provider's place of business shall be within the Western Cape
 Region
 - (Supporting documents to be provided: Confirmation that office falls within the Western Cape Region on company letterhead or utility bill).
- 4. THE SERVICE PROVIDER SHALL BE REQUIRED TO HAVE PROFESSIONAL INDEMNITY INSURANCE / PROFESSIONAL LIABILITY INSURANCE / GENERAL INSURANCE / PUBLIC LIABILITY INSURANCES.
 - a) The Service Provider shall, during the term of the Agreement and at its own expense, effect and keep current policies of insurance as follows:
 - b) Medical Malpractice cover for a minimum of R25 million (twenty-five million rands) up to a maximum of R50 million (fifty million rands) per case.
 - c) Transnet Cape Town Terminals must be named as the additional insured in all the policies listed above.
 - d) The Service Provider shall submit proof of insurance at the commencement of the contract, and thereafter annually at the renewal of the policies, for the duration of the agreement.
 - e) Any payments received from insurers shall be used for the compensation of any loss, damage, and medico legal hazards.
 - f) The Service Provider shall not make any alteration to the terms of any insurance policy without the prior approval from Cape Town Terminals.
 - g) Nothing in this clause limits the obligations, liabilities, or responsibilities of the Service Provider under the Agreement or otherwise. Any amount not insured or not recovered from the insurers,

or any deductible payable shall be borne by the Service Provider in accordance with these obligations, liabilities, or responsibilities.

5. SCOPE OF WORK FOR ON-SITE EMERGENCY MEDICAL SERVICES

- 5.1 The service provider shall be required to supply TPT with two (2) ILS paramedics on rotational shifts who will be on-site after hours between 18h00 until 06h00, 7 days a week.
- 5.2 The service provider will provide emergency medical response and pre-hospital service in the event of any call out.
- 5.3 The service provider will provide medical assistance on the scene of the incident and initiate call-out of the TNPA ambulance for transporting the patient to the nearest health care facility for definitive treatment.
- 5.4 The service provider as an emergency service shall not partake in any unlawful industrial strike action.
- 5.5 The service provider will assist the sisters of the on-site TPT clinic with their duties of which forms part of the TPT wellness program where the 'on-site service is opted for' and will be required to work closely with the TPT SHEQ Department.
- 5.6 The service provider will also be required to ensure that the WCL2 forms are accurately completed when dealing with injury on duty cases.
- 5.7 The scope of work broadly described herein and assigned to the service provider as their area of responsibility is inclusive of all consultancy and all other services required in connection with the completion of work whether specifically mentioned herein or not and rendering such consultancy services will not entitle the service provider to charge any additional fees in as much the same as included in the overall professional fees payable to them.
- 6. The following minimum standards of INTERMEDIATE LIFE SUPPORT Emergency Medical Services incorporate the minimum equipment at the various category levels and the personnel qualifications at the various category and functional levels.

6.1 Intermediate Life Support Services

• This level of patient transfer and treatment refers to an ill or injured patient requiring limited invasive medical intervention and intermediate life support medical care.

6.2 Personnel

• A minimum of 2 (two) persons will be required as staff to provide the Intermediate Life Support services, both of whom shall have appropriate qualifications with appropriate protective clothing.

6.3 Equipment

6.3.1 Diagnostic Tools:

- a) Thermometer
- b) Stethoscope
- c) Pulse Oximeter
- d) Pupil Torch
- e) BP (Aneroid Sphygmomanometer with cuff)

- f) Blood glucose monitor & monitoring strips
- g) Rescue scissors

6.3.2 Airway & breathing

- h) N95 Mask
- i) Cricothyroidotomy kit
- j) Oxygen Mask (Adult)
- k) Gauge/flowmeter for 10 litre O2 Cylinder
- I) Portable Oxygen Cylinder Regulator
- m) Oropharyngeal Airway No 000
- n) Oropharyngeal Airway No 00
- o) Oropharyngeal Airway No 0
- p) Oropharyngeal Airway No 1
- q) Oropharyngeal Airway No 2
- r) Oropharyngeal Airway No 3
- s) Humidifier
- t) Nasal Cannulae
- u) Nebulisers
- v) Suction Catheters
- w) Magill's Forceps
- x) Bag Valve Mask Reservoir Resuscitator (Adult)
- y) Suction Unit
- z) Nasogastric Tubes (Adult)
- aa) Needle thoracentesis (Adult)

6.3.3 Circulation

- a) 1000ML Ringers Lactate
- b) 1000ml Normal Saline
- c) 200ml Normal Saline
- d) 10 Drop fluid Administration set
- e) 20 Drop fluid Administration set
- f) 60 Drop fluid Administration set
- g) 14G Cannulae/ Needle
- h) 16G Cannulae / Needle
- i) 18G Cannulae / Needle
- j) 20G Cannulae / Needle
- k) 22G Cannulae / Needle
- I) 24G Cannulae / Needle
- m) Tagaderm
- n) Blood Lancets

- o) Cardiac Monitor / AED
- p) Electrodes
- q) ECG Paper
- r) Gel
- s) Pacing Pads
- t) Blood Administration set
- u) 2.5ml Syringe
- v) 5ml Syringe
- w) 10ml Syringe
- x) 20ml Syringe
- y) 50ml Syringe
- z) Hypodermic Needles
- aa) Micropore
- bb) Tourniquet
- cc) Webcol

6.3.4 Dressings

- a) Large Burn Dressing
- b) Small Burn Dressing
- c) 75mm Bandage
- d) 100mm Bandage
- e) Adhesive Tape
- f) Antiseptic Solution
- g) Maternity Pack
- h) Gauze Swabs
- i) Sterile Gauze
- j) Linen Savers
- k) 100 x 100 mm Wound Dressing
- I) 100 x 200 mm wound Dressing
- m) XL Wound Dressing (Multi Trauma)

6.3.5 Medication:

- a) Acetyl Salicylic Acid (Aspirin) Tablets 300mg
- b) Activated Charcoal Powder
- c) Adrenaline 1 mg/ml Injection
- d) Combineb
- e) Dextrose Intravenous 50ml
- f) Feneterol 1.25mg/2ml UDV
- g) Glucogon 1mg
- h) Hydrocortisone 100mg/2ml Injection
- i) Ipratropium Bromide 0.25mg/2ml
- j) Magnesium Sulphate 1g/2ml injection

- k) Methoxyflurane/ Penthrop
- I) Naloxone Hydrochloride 0.4mg/ml injection
- m) Oral Glucose Powder/Gel 25g
- n) Salbutamol UDV
- o) Metoclopramide Monohydrochloride (10mg/2ml) Injection
- p) Ibuprofen (NSAID) 200mg Tablets
- q) Voltaren 75mg/injection
- r) Paracetamol (Oral) 500mg Tablet & 120mg/5ml Syrup 50ml
- s) Prednisolone (Oral) 5 Mg Tablets

6.3.6 Splinting and Immobilisation:

- a) Long Splint
- b) Short Splint
- c) Head Blocks with straps
- d) Scoop Stretcher
- e) Trauma Board
- f) Cervical Collars (Adult)
- g) Space Blanket
- h) Spider Harness
- i) Traction Splint

6.3.7 Others:

- a) Pillow
- b) Blankets
- c) Gloves S/M/L
- d) PPE Helmet / Goggles / MVA Vest
- e) Sharps Container
- f) Regurgitation Bags / Receiver (Vomit Bags)
- g) Waste Disposal Bag Red /Yellow /Clear

7. TECHNICAL EVALUATION.

Technical Evaluation Criteria		Points Weightings	Scoring guideline	
Competent/qualified personnel (Intermediary Life Support level qualified Paramedic/ Ambulance Emergency Assistant) (evidence = tertiary qualification of ILS/ AEA paramedic and registration with appropriate body) Provide evidence that paramedic has no less than 2 years' experience as a registered ILS/ AEA		40	Respondent must provide number of suitable qualified personnel with their qualification and current registration with appropriate body attached: * 2 or more qualified personnel = 40 * 1 qualified personnel = 20 * No qualified personnel = 0	
Equipment Availability as detailed in the SOW under each of the headings	6.3.1: Diagnostic Tools 6.3.2: Airway and Breathing 6.3.3: Circulation 6.3.4: Dressings 6.3.5: Medication 6.3.6: Splinting and Immobilisation 6.3.7: Other (e.g. PPE)	40	 Respondent must have the equipment as detailed in each of the categories Provide list of equipment as detailed in categories 6.3.1 to 6.3.7: All 7 or more = 40 Less than 7 = 0 	
Previous experience as per Scope of Work Respondent must provide evidence of being operational within the past 3 years consecutively, and submit written references which can include current and past clients = evidence:		10	 3 or more written client references = 10 2 references = 5 1 or no reference = 0 	
Valid Insurance Confirmation Respondent should have valid insurance and/or Professional indemnity insurance, Public liability and/or General Liability insurance to the minimum value of R25million per incident/ case, a copy of the insurance policy to be attached and/or letter from the underwriter = evidence:		10	 Valid insurance to the value of R25million per incident/ case = 10 Valid insurance less than the value of R25million per incident/ case = 5 No insurance = 0 	
Total Weighting:		100		
Minimum qualifying score required:		70		

8. Management and Meetings

It is the intention of Transnet Port Terminals that all Parties use the techniques generally employed to manage the contract. The latter involves but is not limited to holding meetings designed to jointly manage the administration of the contract proactively with the objective of minimising the adverse effects of risks and surprises for both Parties.

Title and purpose	Approximate time & interval	Location	Attendees
Kick-off meeting	Once off at beginning of contract	Port of Cape Town Transnet Port Terminals Cape Town	Occupational Health and Wellness Manager, SCM Representatives, (appropriate key persons) and Service Provider
Overall contract progress and feedback	Port of Cape Town Monthly Transnet Port Terminal Cape Town		Health and Wellness Manager, SCM Representatives, (appropriate key persons) and Service Provider
Ad Hoc	As and when necessary	Port of Cape Town Transnet Port Terminals Cape Town	Health and Wellness Manager, SCM Representatives, (appropriate key persons) and Service Provider

9. Health and Safety Information

The Service Provider must comply with the following Safety Management Plan (SMP): All health and safety matters associated with the works will be dealt with in accordance with Occupational Health & Safety Act, 1993 (Act No. 85 of 1993) and the Transnet integrated Management System (TIMS). The service provider shall prepare, implement, and administer the Health and Safety Management Plan (HSMP). The Health and Safety Management Plan must provide a systematic method of managing hazards and implementing control measures. The service provider must prepare and submit the Occupational Health & Safety (SHE) file to the SHEQ Department for acceptance before commencement of services as per the contract. The SHE File is always to be kept on site. The file is to contain amongst others, if applicable:

- a. Principal Contractors Organogram
- b. Letter Of Good Standing with Compensation Fund
- c. Appointments
- d. Induction: Employees and Visitors: Staff Medical Certificates
- e. Principal service provider SHEQ Policy
- f. Health & Safety Plan, Integrated Legal Register, Client Specification
- g. Fall Protection Plan (If Applicable)
- h. Risk Assessments: Method Statements: Safe Operating Procedures
- i. Incidents / Accidents Register and Investigation Reports
- j. Health And Safety Training Records Induction Records and Toolbox Talks
- k. Emergency Contact Telephone Numbers
- I. Business Continuity Plan Including Emergency Plan
- m. Documented Proof of Daily Toolbox Safety Talks/ DSTI
- n. All Registers
- o. Welfare Facilities
- p. Mandatary Agreement
- q. Communication Plan
- r. Qualification, Professional Body Registrations and Training Records
- s. General (Section 37(2), Site Access Certificate)

10. The Contractor's Invoices

The invoice must correspond with the monthly cost amount due to the service provider as stated in the letter of ward or signed agreement. The invoice states the following:

- a. Invoice addressed to Transnet SOC Ltd;
- b. Transnet SOC Limited's VAT No: 4720103177;

- c. Invoice number
- d. The Service Provider VAT Number
- e. The Vendor number
- f. Invoices submitted presented for the attention of the Occupational Health and Wellness Manager

11. Termination of Services

Transnet reserves its right to cancel the Contract/Order in whole or in in part at any time at least seven (7) days written notice to the service provider.