**ONLINE PROGRAMME MANAGEMENT (OPM) SYSTEM PROVIDER**

**COMPETITIVE FLEXIBLE PROCEDURE**

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| **Part 1: Your information and the bidding model.** |

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| **Part 1** | **Your information**This section seeks background information about the bidder. **This part is not evaluated but completion is mandatory.** |
| **Question No.** | **Question** | **Response** |
|  | ***Preliminary questions*** |  |
| 1 | Name (if registered, please give the registered name) |  |
| 2 | Central digital platform unique identifier |  |
| 3 | Please confirm if you are bidding as a single supplier (with or without sub-contractors) or as part of a group or consortium. If you are bidding as part of a group or consortium (including where you intend to establish a legal entity to deliver the contract), please provide: a. the name of the group/consortiumb. the proposed structure of the group/consortium, including the legal structure where applicablec. the name of the lead member in the group/consortiumd. your role in the group/consortium (e.g. lead member, consortium member, sub-contractor) |  |
| 4 | Where applicable, please confirm the lot(s) you are bidding for – Not Applicable. |  |
| 5 | Are you on the debarment list? |  |
|  | ***Confirmation of core supplier information*** |  |
| 6 | Please confirm that you have submitted up-to-date core supplier information on the CDP and share this information with us via a **PDF download**. This must include:a. basic informationb. economic and financial standing informationc. connected person information (persons with the right to exercise, or who actually exercise, significant influence or control over the supplier, or over whom the supplier has the right to exercise, or actually exercises, significant influence or control over, for example: directors, majority shareholders and parent and subsidiary companies)d. exclusion grounds information |  |

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| **Part 2: Additional exclusions information** |

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| **Part 2** | **Additional exclusions information** This section seeks background information about the bidder, associated persons and subcontractors. It is not evaluated but completion is mandatory. |
| **Question no.** | **Question** | **Response** |
|  | ***Associated persons*** |  |
| 7 | Are you relying on any associated persons to satisfy the conditions of participation? (these are other suppliers who might be sub-contractors or consortium members but not a guarantor).Where applicable, conditions of participation are outlined in Part 3***If so, please complete Q8, Q9 & Q10 (otherwise Q8, Q9 & Q10 are not applicable).*** |  |
| 8 | For each supplier/associated person, please confirm which condition(s) of participation you are relying on them to satisfy. |  |
| 9 | For each associated person, you must confirm they are registered on the CDP and have shared with us their information via **PDF download**:a. basic informationb. economic and financial standing information ***(if they are being relied upon to meet conditions of participation regarding financial capacity)***c. connected person informationd. exclusion grounds information |  |
| 10 | Please confirm if any of your associated persons are on the debarment list. |  |
|  | ***Intended subcontractors*** |  |
| 11 | Please provide: a. a list of all suppliers who you intend to sub-contract the performance of all or part of the contract to (either directly or in your wider supply chain)b. their unique identifier (if they are registered on the CDP), or otherwise, a Companies House number charity number, VAT registration number, or equivalentc. a brief description of their intended role in the performance of the contract***If you are not intending to sub-contract the performance of all or part of the contract, then this question and Q12 are not applicable.***If a sub-contractor is unknown at the start of the procurement (or brought in during it), state this clearly. Relevant details of the sub-contractor should then be provided once their identity and role is confirmed. This information should be shared with the authority as soon as possible and at least by final tenders. |  |
| 12 | Please confirm if any intended sub-contractor is on the debarment list (Yes or No). |  |

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| **Part 3: Questions relating to conditions of participation** |

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| **Part 3A** | **Standard questions** |
| **Question no.** | **Question** | **Declaration** |
|  | ***Financial capacity to perform the contract*** |  |
| 13 | Please confirm that you satisfy the following minimum requirements which the authority has set as conditions of participation:* **Minimum annual turnover of £10 million.**
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| 14 | Are you relying on another supplier to act as a guarantor?If so, please provide their name and evidence of their economic and financial standing. |  |
| 15 | Please confirm whether you already have, or can commit to obtain, prior to the award of the contract, the levels of insurance cover indicated below:a. Employer’s (Compulsory) Liability Insurance\* = **£5 million.**b. Public Liability Insurance = **£10 million.**c. Professional Indemnity Insurance = **£2 million.**d. Product Liability Insurance = **£5 million.**\*There is a legal requirement for certain employers to hold Employer’s (Compulsory) Liability Insurance of £5 million as a minimum. See the Health and Safety Executive website for more information: www.hse.gov.uk/pubns/hse39.pdf.  |  |
|  | ***Legal capacity to perform the contract*** |  |
| 16 | Please confirm that you satisfy the following minimum requirements which the authority has set as conditions of participation:Not applicable |  |
| 17 | Please confirm that you have in place, or that you will have in place by the award of the contract, the human and technical resources to perform the contract to ensure compliance with the UK General Data Protection Regulation and to ensure the protection of the rights of data subjects.Please provide details of the technical facilities and measures (including systems and processes) you have in place, or will have in place by contract award, to ensure compliance with UK data protection law and to ensure the protection of the rights of data subjects. Your response should include, but should not be limited to facilities and measures:● to ensure ongoing confidentiality, integrity, availability and resilience of processing systems and services● to comply with the rights of data subjects in respect of receiving privacy information, and access, rectification, deletion and portability of personal data● to ensure that any consent based processing meets standards of active, informed consent, and that such consents are recorded and auditable● to ensure legal safeguards are in place to legitimise transfers of personal data outside the UK (if such transfers will take place)● to maintain records of personal data processing activities ● to regularly test, assess and evaluate the effectiveness of the above measures |  |
|  | ***Technical capacity to perform the contract*** |  |
| 18 | Please complete the attached OPM Supplier Questionnaire – Technical Ability spreadsheetIn the table below please provide details of up to three contracts to meet conditions of participation relating to technical ability set out in the ITP, in any combination from either the public or private sectors (which may include samples of grant-funded work). Where this procurement is for goods or services, the examples must be from the past three years.The named contact provided should be able to provide written evidence to confirm the accuracy of the information provided.For consortium bids, or where you have indicated that you are relying on an associated person to meet the technical ability, you should provide relevant examples of where the associated person has delivered similar requirements. If this is not possible (e.g. the consortium is newly formed or a special purpose vehicle is to be created for this contract) then three separate examples should be provided between the principal member(s) of the proposed consortium or members of the special purpose vehicle or sub-contractors (three examples are not required from each member).If you cannot provide at least one example of previous contracts, in no more than 500 words please provide an explanation for this and how you meet the conditions of participation relating to technical ability. |  |

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|  | **Contract 1** | **Contract 2** | **Contract 3** |
| Name of customer organisation who signed the contract |  |  |  |
| Name of supplier who signed the contract |  |  |  |
| Point of contact in the customer’s organisation. |  |  |  |
| Position in the customer’s organisation |  |  |  |
| E-mail address |  |  |  |
| Description of contract. |  |  |  |
| Contract Start date. |  |  |  |
| Contract completion date. |  |  |  |
| Estimated contract value |  |  |  |

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| 19 | **Experience of sub-contractor management**Where you intend to sub-contract a proportion of the contract, please demonstrate how you have previously maintained healthy supply chains with your sub-contractor(s) (which may be the intended sub-contractor(s) for this procurement or any others used previously).The description should include the procedures you use to ensure performance of the contract. |  |
| 20 | **Organisational standards**Where conditions of participation have specified organisational qualifications or standards, please provide details of how these are met, or other equivalent standards that equal or exceed what has been requested. |  |
| 21 | **Health and safety**Please describe the arrangements you have in place to manage health and safety effectively and control significant risks relevant to the contract (including risks from the use of contractors, where relevant). |  |

**Contact details and declaration**

I declare that to the best of my knowledge the answers submitted and information contained in this document are complete, accurate and not misleading.

I declare that, upon request and without delay I will provide any additional information requested of us.

I understand that the response to this questionnaire will be used to assess whether our organisation is entitled to participate in, or continue to participate in, this procurement.

I understand that our organisation may be excluded from the procurement if requested information has not been provided, if any of this response or any follow up responses are incomplete, inaccurate or misleading, if confidential information has been accessed or if we have unduly influenced your decision-making in this procurement.

I am aware of the consequences of serious misrepresentation.

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| Signature (electronic is acceptable) |  |
| Date  |  |

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| **Contact details of those making the declaration** |
|  | **Response** |
| Contact name |  |
| Name of organisation |  |
| Role in organisation |  |
| Phone number |  |
| E-mail address  |  |
| Postal address |  |