

**CONFIDENTIAL REFERENCE FOR PROVISION OF: AN INFECTION,
PREVENTION AND CONTROL SERVICE**



APPENDIX E

NAME OF CONTRACTOR REFERENCE RELATES TO:	
REFEREE CONTACT NAME:	
PROCUREMENT OFFICER:	Abigail Coyne

IT IS THE RESPONSIBILITY OF THE TENDERING ORGANISATION TO SEND THIS TEMPLATE TO REFEREES AND ENSURE THAT REFEREES COMPLETE AND SEND TO: procurement@cheshireeast.gov.uk BY SUBMISSION DEADLINE OF 11/12/15.

1. When did the contractor undertake work for your organisation? Please state start date and end date (if applicable):
2. If the contractor is a current contractor to your organisation, please specify in what capacity.
3. Please state:

Approximate value of business	Year	£
	Year	£
	Year	£

4. Please describe the nature of the work carried out for your organisation
5. Please indicate your view of the applicant's performance in the following areas:

Criteria		Rating					
		Low			High		
1	Consistency of service quality	1	2	3	4	5	6
2	The service provided to agreed timescales	1	2	3	4	5	6
3	Satisfaction with services provided	1	2	3	4	5	6
4	The service consistently offers value for money	1	2	3	4	5	6
5	Latest practices and technologies are adopted	1	2	3	4	5	6
6	The service complies consistently with the specification	1	2	3	4	5	6
7	Problems are addressed quickly and effectively	1	2	3	4	5	6
8	Accounting arrangements are effective	1	2	3	4	5	6

9	Administration systems are effective	1	2	3	4	5	6
10	Effective management information is provided regularly	1	2	3	4	5	6

6. Have you ever needed to terminate a contract or order early? YES/NO

If yes, please give details:

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7. Have you ever had cause to decline to offer an available extension to contract under any agreement with this company?

YES/NO

If yes, please give details

8. Have you ever received unsatisfactory service that has resulted in a complaint?

YES/NO

If yes, please give details:

9. Would you be prepared to use this company again for a similar service?

YES/NO

If no, please give details:

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10. What is your general impression of the applicant's business organisation?

11. If the applicant uses subcontractors to deliver parts of your works/services, what is your general impression and experience of their selection and control of their subcontractors?

12. Is this company able to trade with you electronically?

YES/NO

Signed:

Date:

Print Name:

Designation:

Organisation/Company:

Address:

Tel. No.:

Fax No.:

Email address: