

# **GUYANA SHORE BASE INC**

## **PROVISION OF EXPATRIATE MEDICAL CASE MANAGEMENT, MEDICAL EVACUATION, AND REPATRIATION SERVICES**

### **SCOPE OF WORK**

## **1.0 DESCRIPTION OF WORKS – GENERAL**

### **1.1 Project Description**

The Contractor shall manage, coordinate, and provide professional Expatriate Medical Case Management, Medical Evacuation, and Repatriation Services performed by qualified and licensed health care professionals operating within registered, licensed, compliant, and approved health care facilities in Guyana and abroad. As applicable, the Contractor shall provide or coordinate the use of materials and equipment required to support the efficient execution of the services to be provided. The services to be supplied under the Contract shall be in accordance with the details as described in the scope of works that were provided with the Tender Document.

Expatriate Medical Case Management, Medical Evacuation, and Repatriation Services, as outlined within the scope of works, will include compliance by the Contractor with all General Conditions of the Contract, even if they are not specifically mentioned in the various clauses of these Specifications. This should include all materials, equipment, and related items needed during the provision of Expatriate Medical Case Management, Medical Evacuation, and Repatriation Services.

The provision of this service should take into account the costs associated with emergency medical evacuations, locally and abroad, rehabilitation services that may be required to support return to work management, and, where applicable, funeral arrangements and repatriation of deceased parties, which are to be recharged to Guyana Shore Base Inc. (GYSBI). It will also include the provision of safety equipment for workers and adequate sanitary arrangements. The services to be supplied shall also include all the following, but are not limited to, the general preparation work for the coordination of required medical and post-medical services, and any other work that may be related and necessary for satisfactory compliance with the scope of work.

## 2.0 SPECIFICATIONS, DRAWINGS, ATTACHMENTS, AND EXHIBITS

All works shall be performed in accordance with the following description, specifications, and other documents, which by this reference are made a part thereof.

Appendix	Document
A	Scope of Works
	QH-PL-006-EXC-C - GYSBI QHSSE Management Handbook for External Parties
	Evaluation Criteria

## 3.0 DESCRIPTION OF WORKS – SPECIFIC

The Work described in Sections 1.0 and 2.0 of this document shall include, but not be limited to, the following:

- 3.1 **Contract Duration** – This Agreement is effective on the “Effective Date” and shall continue in effect for [identify period], unless earlier terminated in accordance with the provisions of this Agreement.
- 3.2 **Service Provision** – The Contractor shall provide Expatriate Medical Case Management, Medical Evacuation, and Repatriation Services, which encompass the following scope:
1. Pre-employment Medicals
  2. Receipt, revision of referrals, and initial case screening and triage for medical case management, ensuring efficient customer service and communication through identified points of contact (POCs).
  3. Revision of medical records and execution of comprehensive medical needs assessments.  
**Note:** This may include Medical Evacuation (MEDEVAC), i.e., en-route care and transportation via Ambulance to an approved local hospital or medical care facility, or via Helicopter/Airplane abroad as applicable for emergent cases.
  4. Development and management of individualized care plans and coordination of appropriate medical treatment and services as cases evolve.
  5. Medical case progression management, advocacy for appropriate and evidence-based care, and navigational support for local and international healthcare systems.
  6. Regular communication and collaboration, ensuring clients/client representatives are updated and educated where appropriate.

7. Coordination of rehabilitation and transitional care services to ensure safe and timely recovery and return to work management.
8. Determination of case closure and readiness, and management of transition/discharge planning and documentation.
9. Coordination and management of repatriation and funeral arrangements as applicable.

**3.3 Resources** – The Contractor shall:

1. Ensure all in-house and subcontracted managerial, administrative, and medical emergency response personnel are appropriately qualified, experienced, and licensed as applicable.
2. Provide or, where applicable, coordinate the use of suitable transportation, supplies, and materials and certified/calibrated medical equipment required to support the provision of Expatriate Medical Case Management, Medical Evacuation, and Repatriation services.

All support service providers must be appropriately registered, licensed, and compliant with the relevant regulatory requirements, and must align with the following applicable standards/Acts:

3. Hospitals –
  - Health Facilities Licensing Act 2007 and 2008 Regulations
  - ISO 7101 Healthcare organization management – Management systems for quality in healthcare organizations – Requirements
4. Laboratories –
  - GYS 170 – General Requirements for the operations of a laboratory, and/or
  - ISO 15189 Medical Laboratories – Requirements for quality and competence.
5. Pharmacies – Pharmacy Practitioners Act No. 9 of 2023.

**3.4 Service Requirement** – The provision of Expatriate Medical Case Management, Medical Evacuation, and Repatriation services shall include:

1. The development and management of a customized Medical Emergency Response Plan (MERP), outlining:
  - i. All roles and responsibilities related to on and off-site services,
  - ii. relevant contact details for approved POCs,
  - iii. Medical Emergency Response Flowcharts in line with agreed processes
  - iv. a standard pricing list for all relevant service costs.
2. 24/7 access to:

- i. Initial case screening and triage
- ii. Medical Care and Assistance
- iii. Health Consultations and Medical Risk Assessment support
- iv. On-the-ground Medical Care Coordination – Emergent and Non-Emergent

**3.5 Non-Compliance** – The Senior QHSSE Manager/employer representative shall notify the Contractor of any non-compliance. The Contractor shall respond within the agreed/prescribed number of days to outline what corrective actions will be taken, where applicable, after receiving the notice.

**3.6 Pre-Service Requirements** – The Contractor is required to submit the following documentation to support GYSBI's pre-assessment and qualification process:

1. A proposal outlining systems in place to meet the requirements outlined in sections 3.2-3.5 above, along with
2. Quotations associated with the following potential work and non-work related medical case scenarios, considering all possible support services required, inclusive of MEDEVAC, to efficiently and effectively manage the same until return to work and case closure:
  - i. First Aid Cases
  - ii. Non-Emergent cases
    - a. Medical Health Risk Assessments – Pre-deployment
    - b. Post Operative Pain Management
    - c. Food poisoning
  - iii. Urgent but Non-emergent
    - a. Allergic Reactions
      - Food
      - Medications
      - Other
    - b. Chest Pain Evaluation
  - iv. Emergent Cases
    - a. Physical Injury – Struck by/Crushed by
      - On-Site GYSBI
      - Off-site Residential or during commute
    - b. Hypo/Hyperglycemia Management
    - c. Hypertensive Crisis
    - d. Acute
      - GI Bleed

- Asthma Exacerbation
- Stroke
- Pulmonary Embolism
- Kidney Injury
- e. Anaphylaxis
- f. Blood Transfusion Reaction
- g. Sepsis Management
- h. Postpartum Hemorrhage
- v. Case Progressions outcomes:
  - a. Local Funeral Home arrangements
  - b. Repatriation of live and/or deceased persons to the following regions:
    - Africa
    - Asia
    - Europe
    - North America
    - Native South America
    - Oceania

**Note:** If required, a list of specific locations can be provided.