PAST PERFORMANCE QUESTIONNAIRE

Perfusion/Autotransfusion Services

1. Background: The San Juan VA Caribbean Healthcare System (SJVCHS) has an ongoing requirement for Perfusion/Autotransfusion Services. The vendor has identified you as a reference to validate the their past performance. This questionnaire concerns past or current contracts for which you have personal knowledge.

2. Instructions: Please complete this questionnaire based on the following guidance.
Please take the time to answer the questions to the best of your knowledge. Circle the responses that best describe the company's performance, and write in a narrative explanation for your answer. Use a N/A rating to indicate that you have no performance information for that particular area, or if the question does not apply to you. Each question has space for your comments. If more space is needed, please attach additional sheets to the end of the questionnaire and reference the respective question. Handwritten (ink) responses are sufficient.

Please complete the following questionnaire to assist our evaluation of the company's past performance and return no later than the date that the contractor advises. Please return to Fernando G. Defillo email at Fernando.defillo@va.gov.

Name of Company: _____

Title/Description of services provided:

_____

_____

Please evaluate the past performance using only the following ratings without variation. If the rating is **Marginal** or **Unsatisfactory**, please provide additional information in the appropriate block or in the remarks section of this form.

"O" =	**Outstanding**	**=**	**Performance greatly exceeded the contract requirements**
"A" =	**Above Average**	**=**	**Performance exceeded the contract requirements**
"S" =	**Satisfactory**	**=**	**Performance met the contract requirements**
"M" =	**Marginal**	**=**	**Performance met the minimum contract requirements but some material aspects of the company's performance were less than satisfactory**
"U" =	**Unacceptable**	**=**	**Performance was poor and/or did not satisfy contract requirements**

CUSTOMER SATISFACTION

1. Company maintained a professional staff.

Outstanding Above Average Satisfactory Marginal Unacceptable

BRIEF EXPLANATION OF RATING GIVEN:

_____
_____
_____

2. Company was responsive to inquiries regarding contract/agreement.

Outstanding Above Average Satisfactory Marginal Unacceptable

BRIEF EXPLANATION OF RATING GIVEN:

_____
_____
_____

3. Company was flexible in responding to urgent requirements.

Outstanding Above Average Satisfactory Marginal Unacceptable

BRIEF EXPLANATION OF RATING GIVEN:

_____
_____
_____

4. Overall customer satisfaction.

Outstanding Above Average Satisfactory Marginal Unacceptable

BRIEF EXPLANATION OF RATING GIVEN:

_____
_____
_____

COMPLIANCE WITH STAFFING REQUIREMENTS

5. Company provided sufficient notice of personnel changes/additions, to ensure adequate time to credential personnel.

Outstanding Above Average Satisfactory Marginal Unacceptable

BRIEF EXPLANATION OF RATING GIVEN:

_____
_____
_____

6. Company consistently provided trained/qualified staff.

Outstanding Above Average Satisfactory Marginal Unacceptable

BRIEF EXPLANATION OF RATING GIVEN:

_____
_____
_____

7. Company ensured staff remained fully qualified/proficient at all times.

Outstanding Above Average Satisfactory Marginal Unacceptable

BRIEF EXPLANATION OF RATING GIVEN:

_____
_____
_____

Additional Comments

8. Was the company ever issued a cure or show cause notice under the referenced contract/agreement?

If yes, explain in "comments." Yes / No

Comments:

_____
_____
_____

9. Would you hire this company again?

If no, explain in "comments." Yes No

BRIEF EXPLANATION OF RATING GIVEN:

_____
_____
_____

Overall Rating: _____

Name of Evaluator: _____ E-Mail: _____

Position Title /Grade:_____ Phone Number: _____

Company/City: _____Date questionnaire completed: _____