

REQUIREMENT SPECIFICATION

REQUEST FOR PROPOSAL FOR THE PROVISION OF TRANSPORTATION SERVICES FOR PATIENT'S DIALYSIS SESSION (STRATEGIC PARTNERSHIP)

1. Introduction

- 1.1. The National Kidney Foundation ("NKF") wishes to appoint service provider (the "**Contractor**") for the provision of transport for patient's dialysis session, such service as described in Scope of Service (the "**Services**") to all NKF Dialysis Centres ("**DC**") in Singapore.

2. Scope of Service

- 2.1. There are Two (2) different scope of Services in this Request for Proposal ("**RFP**"):
• **Annex A** - Scope of Service for Medical Transport
• **Annex B** - Scope of Service for Wheelchair Accessible Transport
- 2.2. The Contractor can quote for service(s) in Annex A and/or B.
- 2.3. The Contractor shall perform the Services according to the requirements specified in **Annex A and/or B**, as according to their submission of bid(s).
- 2.4. The Contractor must maintain sufficient service liability coverage of at least \$1 million. These insurance policy(s) must cover liability arising from the services rendered, from start to finish. Service liability coverage may include but is not limited to, public liability insurance, valid comprehensive motor insurance, third-party vehicle insurance which include coverage for the patients and all passengers.
- 2.5. The start point to finish point is defined as:
• Chair/Bed to Chair/Bed (Service for Medical Transport)
• Kerb to DC Door (Service for Wheelchair Accessible Transport)
- 2.6. Sufficiency is determined by NKF. NKF's decision is final.

3. Quality Requirement and Delivery Schedule

- 3.1. The Services shall be delivered to such of DCs as NKF shall stipulate from time to time. Please refer to **Annex H** for the detailed listing of DCs (as at date of this document). For the avoidance of doubt, NKF reserves the right at any time to increase or decrease the number of and to vary and /or change the location of any or all of the listed DCs.
- 3.2. As of date of this RFP, the estimated current number of patients requiring the services over a period of **thirty-six (36) months** is:
• **171** for Medical Transport, with an expected growth of **2** patients per month over the contract period.
• **584** for Wheelchair Accessible Transport with an expected growth of **3** patients per month over the contract period.
• **87** for dialysis escort service, with an expected growth of **1** patient per month over the contract period.

This number is subject to changes due to patient hospitalisation, deceased or out of the dialysis program.

- 3.3. The estimated number of services required per patient is a total of **thirteen (13)** sessions in a month.

4. Term of Contract

- 4.1. The Contractor shall provide the Services over an initial period of **thirty-six (36) months**, starting from **September 2026 to August 2029** which shall include the following:

- Medical Transport services and/or Wheelchair Accessible Transport Services

with NKF having an option to extend for further periods of **twenty-four (24)** months each on the same terms and conditions as stated in the Contract (as may be amended, varied, supplemented and/or replaced from time to time).

- 4.2. NKF has the option to terminate in accordance with the Conditions of Contract by giving a written notice of termination to the Contractor at any time prior to the end of the current term.
- 4.3. Unless otherwise stipulated by NKF, all purchases for the Services made during the extended period of this Contract shall be subjected to the terms and conditions hereof (as may be amended, varied, supplemented and/or replaced from time to time), and the Services purchased during such extended period shall be deemed to be Services as defined in this Contract.

5. RFP Briefing

- 5.1 Contractors are encouraged to attend a briefing session on the date and time specified below:

Date: 3 December 2025, Wednesday

Time: 2:00 pm - 3:30 pm

Mode: NKF HQ, 81 Kim Keat Road, Singapore 328836

- 5.2 To participate in the briefing session, vendors have to email to raymond.thong@nkfs.org with details on the company's name, attendee's name and email address by **1 December 2025, Monday, 10.00am**. The meeting details would be emailed to Vendors who had expressed their interest to attend.

6. Submission of RFP Bids

- 6.1. The quotation submitted by the Contractor shall be in accordance with the Price Schedule. Each Contractor shall provide price quotations for the following categories:

- **Medical Transport:** Single, Round, Ad-hoc trips, and additional charges for patients with weight $\geq 100\text{kg}$;
- **Wheelchair Accessible Transport:** Single, Round, and Ad-hoc trips;

- 6.2. The Contractor is required to provide the following information and/or documents to NKF:

- 6.2.1. Latest HCSA License;

- 6.2.2. Vehicle registration with MOH and/or LTA;
 - 6.2.3. **Annex E & Annex F** - Vehicle Requirement (for Medical Transport and Wheelchair Accessible Transport);
 - 6.2.4. In-house training records of drivers on how to handle wheelchair bound patients (for Wheelchair Accessible Transport);
 - 6.2.5. Relevant Service Liability Insurance and Vehicle Insurance;
 - 6.2.6. Latest annual report or published accounts;
 - 6.2.7. Original copy of the information on the latest business profile by the Accounting and Corporate Regulatory Authority (ACRA). The date of the business profile should be no more than ninety (90) days from the date of submission;
 - 6.2.8. Name and contact details of at least one (1) reference customer (Reference check may be conducted on the references provided by the Contractor)
 - 6.2.9. Testimonials from clients
 - 6.2.10. Any other documents relevant to the tender of service
- 6.3. Upon the expiry of the HCSA Licence and the relevant service liability insurance, the Contractor shall provide NKF with copies of the renewed licence and insurance coverage immediately.

ANNEX A**SCOPE OF SERVICE FOR MEDICAL TRANSPORT
(STRATEGIC PARTNERSHIP)****1. Scope of Work for Medical Transport**

- 1.1. The Contractor to provide Medical Transport services only for NKF patients who have been granted the assistance within the approved effective period.
- 1.2. The Scope of Work required for each patient consist of either a single trip or a round trip that includes transferring from the bed or chair of the patient's place of residence to the dialysis chair of the assigned DC and/or vice versa.
- 1.3. Chair/Bed to chair/bed is defined as providing transfer service from the start point which is defined as the bed or chair of the patient's place of residence to the finish point which is defined as the dialysis chair/bed of the assigned DC and/or vice versa. The process of transfer will only involve the use of stretcher to ensure patients' safety. The Contractor must ensure proper handover to the staff member at the assigned DC before leaving patient.
- 1.4. Medical Transport service provider must be registered with the Ministry of Health (MOH) and Land Transport Authority (LTA) and in compliance with the following:
 - Healthcare Services Act (HCSA);
 - Healthcare Services (Emergency Ambulance Service & Medical Transport Service) Regulations;
 - MOH License Conditions for Medical Transport Service; and
 - All other applicable regulations as stipulated by the relevant authorities.
- 1.5. Installation of In-Vehicle cameras in all vehicles that are conveying NKF patients is encouraged but not mandatory.
- 1.6. In the event of any resistance from the patient in coming for dialysis on their scheduled dialysis day, the Contractor shall inform respective DCs and assigned Social Worker/Admissions Counsellor. The Contractor will still have to make a trip to the DC to stamp the acknowledgement slip even if the patient refuses to go for dialysis. Such a trip would be considered as a single trip.
- 1.7. Requirement for Stretcher
 - 1.7.1. All patients are to be conveyed via Medical Transport stretcher whilst on enroute and need to be transported safely. The Contractor shall ensure that appropriate measures and protocols are in place.
 - 1.7.2. The Contractor shall ensure that patients are conveyed in an appropriate and safe manner in accordance with the requirements of the License Conditions for Medical Transport Service. For instance, if the health condition warrants a patient to be conveyed via stretcher, but he/ she refuses to do so, the Contractor shall not proceed with the transportation arrangement.
 - 1.7.3. If the health condition of patient warrants the patient to be conveyed using a wheelchair instead of a stretcher, an indemnity form must be signed between the patient and the Contractor.
 - 1.7.4. For patients staying in a non-lift landing block, the Contractor shall transport the patient using stair chair from patient's home down the flight of stairs and then

transfer the patient from stair chair to stretcher onto the Medical Transport vehicle, the same applies on the return trip from DC to home. The stair chair used should be capable of carrying patients weighing up to 120kg.

- 1.7.5. For patients staying in a lift landing block, the Contractor shall convey the patient by using a stretcher from home and onto the Medical Transport, the same applies for the return trip from DC to home.
- 1.8. The Contractor shall assist patients in taking their weight at the DCs and thereafter the Contractor shall ensure a proper handover of patient to the staff member.
- 1.9. Hospital Arrangements
- 1.9.1. When a situation requires the patient to be transported from the DC to the A&E department of a Public Health Institution (PHI), such transport shall be deemed a replacement for the return trip to the patient's residence and shall therefore be regarded as a round trip. The staff member may arrange for an emergency ambulance when necessary and the cost of the emergency ambulance shall be borne by the patient.
- 1.9.2. In cases where patients are required to be sent to a PHI for further assessment, staff member will inform the Contractor at least 30 minutes before the scheduled time on the cancellation of the return trip for the patient. Such trip would be considered as a single trip for patients even though they are scheduled for a round trip.
- 1.9.3. For the avoidance of doubt, clause (1.9.1 and 1.9.2) is only applicable when the request is made by a staff member of the patient's NKF' DC to a PHI. A proof of stamp, signature and date of request by the requesting staff member is required.
- 1.9.4. In cases where patients are ferried from the DC to a PHI for their follow-up appointment or other purposes in the absence of a request made under clause (1.9.3.) above, such trips are considered outside the appointed Scope of Work. The cost of such trips will be borne by the patient. NKF shall not be responsible for the costs of services outside the Scope of Work. The additional costs (if any) must be resolved with the patient directly. NKF shall not be responsible for the patient's safety/wellbeing during such trips. Such trips would be considered as single trip if the Contractor was scheduled to bring the patient to the DC.
- 1.10. Pick Up and Drop Off Information
- 1.10.1. The Contractor shall adhere to the stipulated time on ferrying patients to and fro of the DC. The stipulated time for the different shifts are detailed below:

Dialysis Shift	Shift Start Time	Specifications	Stipulated Time
Morning	7.30 am	- Earliest pickup from patient's place of Residence	6.00 am
		- Patient to reach DC latest by	7.30 am
		- Latest pickup from DC	1 hr after dialysis ends
Noon	12.00 nn	- Earliest pickup from patient's place of residence	10.30 am
		- Patient to reach DC latest by	12.15 pm
		- Latest pickup from DC	1 hr after dialysis ends
Evening	6.00 pm	- Earliest pickup from patient's place of residence	4.30 pm
		- Patient to reach DC latest by	6.00 pm
		- Latest pickup from DC	1 hr after dialysis ends



- 1.10.2. The Contractor would be informed of any cancellation not lesser than 30 minutes before the arranged collection time. If such a situation arises, the trip would be considered a single trip for patients even though they are scheduled for round trips.
- 1.10.3. The Contractor shall inform the respective DCs and assigned Social Worker/Admissions Counsellor of any delays in ferrying patients at the soonest possible.
- 1.10.4. In circumstances where patient pick-up or drop-off does not occur at the DC, NKF does not have oversight and control over such arrangements.
 - In such scenarios, the Contractor shall assume full responsibility and liability for ensuring the safety, proper handling, and wellbeing of the patient during the pick-up and drop-off process.
 - The Contractor shall take all reasonable measures to ensure a safe and proper pick-up and drop-off, and shall be held liable for any negligence, omission, or failure arising from such non-DC transport arrangements.

2. Liability and Duty of Care

- 2.1. The Contractor acknowledges that it has direct control over the transport environment, staff, vehicles, and equipment used and is therefore best placed to ensure the safety and wellbeing of the patient during the journey. Accordingly, the Contractor shall be solely responsible and liable for any negligence, misconduct, or failure to exercise reasonable care that may result in harm, injury, or distress to patients.
- 2.2. NKF shall assess and communicate the level of care required for each patient to the Contractor. Such information shall include, but not be limited to, details relating to patient transfer needs, medical or equipment requirements not routinely provided (e.g. oxygen tanks), patient mental capacity, sanitising requirements (e.g. vehicle wipe-down after transport), and any other medical or special needs relevant to the patient's condition and transport safety.
 - 2.2.1. The Contractor shall implement all necessary measures to ensure the safety, comfort, and wellbeing of patients throughout the service period.
 - 2.2.2. The Contractor shall maintain proper records of any special patient requirements (including medical conditions, mobility assistance, or other care needs) as communicated by NKF and shall ensure such information is accessible to relevant personnel involved in service delivery.
- 2.3. NKF shall communicate any relevant clinical information and special patient care requirements to the Contractor in a clear and timely manner (for example, via email) to allow the Contractor sufficient time to make the necessary arrangements to accommodate such requirements.
- 2.4. The Contractor shall ensure that accurate and updated contact details of patients and NKF's DC are properly documented and readily accessible to its operational staff. The Contractor shall ensure that its staff are aware of and able to use such contact information as needed to facilitate communication and coordination.
- 2.5. The Contractor shall always remain contactable and responsive during service operations. In the event of any emergency, delay, or other contingency affecting patient care or transport schedules, the Contractor shall immediately notify the relevant DC and Social

Workers and take prompt action to mitigate any adverse impact on patient wellbeing, safety, and/or service continuity.

3. Additional Contractual Terms

- 3.1. The Contractor must be able to accommodate shift changes due to medical appointments or any other unforeseen circumstances, including Sundays and Public Holidays. Trips rendered on Sundays and Public Holidays should be charged as the price quoted in the Price Schedule regardless of whether it is scheduled or unscheduled trip.
- 3.2. The Contractor shall remain flexible and responsive to accept interim transport referrals from Public Healthcare Institutes (PHIs) as and when required by NKF, subject to operational feasibility and prior notice.
- 3.3. NKF shall allocate patients to the Contractor based on geographical zones on a best-effort basis. NKF reserves the right to adjust the patient allocations as necessary to meet patient care requirements and maintain operational efficiency.
- 3.4. The Contractor to allow NKF to appoint in-house and external auditors periodically to perform a compliance audit to ensure that all vehicles conveying NKF patients are in line with the critical service requirements.
- 3.5. The Contractor must not release any information, e.g. name or photograph etc, of patients to any external parties beyond NKF, without NKF's consent.

4. Lapse of Service

- 4.1. NKF will not tolerate any negative attitude lodged against the Contractor with evidence and such negative attitude shall be considered as a service lapse.
- 4.2. Other service lapses include (but are not limited to) delay in picking patients to and from the DC and non-compliance with the defined Scope of Work stated in paragraph 1 above.
- 4.3. The Contractor must not appoint any other vendors to provide, on the Contractor's behalf, the applicable transport service that the Contractor is authorised under a license to provide or any aspect of the transport service.

5. Incident Report ("IR") and Demerit Points

- 5.1. The Contractor is required to inform the respective DCs and assigned Social Worker/Admissions Counsellor at the soonest possible, or within 24 hours at the latest, should there be any incident involving a patient during their care.
- 5.2. Subsequently, The Contractor is required to submit a report of this incident to the NKF Purchasing department and assigned Social Worker/ Admission Counsellor within 48 hours.
- 5.3. NKF reserves the right to issue demerit points for each item stated in **Annex G**.
- 5.4. NKF's decision is final and irrevocable.
- 5.5. For every **three (3)** demerit points incurred by the Contractor within a calendar month, a charge of **\$1,000** will be levied. This is in addition to any other remedies which NKF may have under this Contract.

- 5.6. The penalty shall be deducted from any payment due or becoming due to the Contractor. Alternatively, NKF also has the sole discretion and right to require the Contractor to pay the charge so imposed.
- 5.7. The Contractor agrees and acknowledges that the charge is not a penalty but an incentive for the Contractor to provide good service to NKF.
- 5.8. Additionally, NKF reserves the right to terminate the service contract after the Contractor is issued demerit points, depending on the severity of the offence.

6. Strategic Partner

- 6.1. The Strategic Partner shall accept and fulfil all slot requests issued by NKF up to the total number of committed slots stipulated in the Price Schedule (calculated based on the number of vehicles). For the avoidance of doubt, the committed slots constitute a monthly guaranteed allocation of patients to the Strategic Partner and shall include patients who are hospitalised, unless and until NKF issues a formal written notice to release the slots.
- 6.2. Upon the Strategic Partner's fulfilment of Clause 6.1, NKF shall remunerate the Strategic Partner for each committed slot on the basis of the actual number of trips performed for that slot in the relevant month. NKF shall further remunerate the Strategic Partner for any additional trips undertaken in excess of the committed slots. All claims for payment must be substantiated by duly endorsed acknowledgement slips.
- 6.3. Failure to comply with clause (6.1.) will result in the Strategic Partner being paid **only** for the trips rendered with endorsed acknowledgement slips, regardless of the committed slots stated in the Price Schedule. In addition, non-compliance may require the Strategic Partner to reimburse NKF, upon demand, for any costs or expenses incurred by NKF in arranging alternative services for affected patients.
- 6.4. If the total number of patients assigned to the Strategic Partner in a given month is fewer than the total committed slots, and clause (6.1.) has been fulfilled, NKF shall pay the difference equivalent to standard thirteen (13) trips per unfilled slot for that month.
- 6.5. The Strategic Partner may accept more patients than the total committed slots indicated in the Price Schedule. In such cases, NKF shall pay for all trips rendered with endorsed acknowledgement slips.

7. Payment

- 7.1. An acknowledgement slip shall be issued by the Contractor to the DC upon completion of safe transfer of our patient to the DC. The acknowledgement slip should be duly endorsed by the staff member at the DC after each service rendered and the Contractor is not allowed to consolidate the acknowledgement slip and obtain endorsement for service delivery on monthly basis.
- 7.2. Under normal circumstances, each calendar month shall comprise a standard allocation of thirteen (13) trips. Notwithstanding the foregoing, the Services shall be rendered and remunerated strictly on a "Payment Per Usage" basis. The Service Provider shall be entitled to payment corresponding solely to the actual number of trips duly completed within the relevant month. Should the number of trips vary from the standard allocation, payment shall be made based on the actual number of trips rendered.
- 7.3. Upon the receipt of the invoice from the Contractor, the Contractor shall give NKF no less than sixty (60) days to make payment. If any invoice is not submitted to NKF within six (6)



months upon the completion of the Services, NKF shall be released and discharged from any liability to make any payment of the debt in relation to such invoice.

- 7.4. The Contractor shall obtain an endorsement on the acknowledgement slip from the respective DC upon the safe transfer of each patient.
- For two-way transport, two separate endorsements are required - one for each trip (to and from the DC).
 - For one-way transport, a single endorsement is required.
- 7.5. The Contractor must ensure that the acknowledgement slip is signed on the same day the transport service is rendered. Consolidation of unendorsed acknowledgement slips is strictly prohibited. Failure to obtain the required signatures will result in the job being deemed forfeited.
- 7.6. The Contractor is to submit all invoices and acknowledgement slips via sharepoint portal.
- 7.7. Co-payment
- For cases where the subsidy does not cover the entire charge of service, the Contractor is required to collect co-payment from patients at the end of the month.
 - The Contractor will be informed of the co-payment amount by the assigned Social Worker and/or via welfare confirmation letter.
 - The Contractor is to advise their policy on cutting off their services should the patient not make payment after service is rendered. NKF is not liable for the collection of co-payment on behalf of the Contractor.

8. Termination Clause

- 8.1. A confirmation letter will be sent (via email) to the Contractor notifying the details for the approved transport memo for each patient. The Contractor shall take note of the end date for transport service stated in the confirmation letter. NKF will only inform the Contractor if there is a termination of service prior to the approved end date.
- 8.2. The Contractor shall provide 1 month written notice for the termination of service for any reason whatsoever. Failure of which will result in the Contractor reimbursing NKF on demand for any costs and expenses incurred during NKF's attempt to provide alternative services.

9. Indemnity Clause

The Contractor shall indemnify, defend and hold harmless NKF, its servants, agents, directors, employees, officers, and departments from and against all or any liability, claims, expenses, including court costs and fees of solicitors (on a full indemnity basis) and other professionals in respect of any loss or damage (including special and consequential loss or damage) suffered by any person(s) whatsoever (including but not limited to any patient or visitor) to any property or personal injury to or death of any person arising out of or in connection with or contributed to by a breach of any term or warranty of this Contract by the Contractor, its servants, agents or the negligence or wilful default of the Contractor, its servants and/or agents, and the Contractor may not enter into any settlement, agreement, arrangement or compromise in respect of the above indemnity that may have a material adverse effect on NKF.



10. Conflict

Where any of the Terms and Conditions of this Scope of Service conflicts or at variance with the Conditions of Contract, the Terms and Conditions of this Scope of Service shall prevail.

Accepted By:

Authorised Signature: _____

Date: _____

Signatory Name: _____

Signatory Title: _____

Telephone Number: _____

Contractor's Name: _____

Email Address: _____

Contractor's Stamp: _____

ANNEX B**SCOPE OF SERVICE FOR WHEELCHAIR ACCESSIBLE TRANSPORT**
(STRATEGIC PARTNERSHIP)**1. Scope of Work for Wheelchair Accessible Transport**

- 1.1 The Contractor to provide transport service only for NKF patients who have been granted assistance within the approved effective period.
- 1.2 The Scope of Work required by each patient consists of either a single trip or a round trip from the kerb of patient's place of residence to the door of assigned DC and/or vice versa.
- 1.3 Kerb to DC's door is defined as providing transfer service from the start point which is the raised edged between pavement and the road of the patient's place of residence to the finish point, which is defined as the door of the assigned DC and/or vice versa.
- 1.4 In the event of any additional service outside the boundary defined in clause (1.3.) requested by patient, the Contractor should decline such service by not proceed with the transportation arrangement.
- 1.5 Installation of In-Vehicle cameras in all vehicles that are conveying NKF patients is encouraged but not mandatory.
- 1.6 In the event of any resistance from the patient in coming for dialysis on their scheduled dialysis day, the Contractor shall inform respective DCs and assigned Social Worker/Admissions Counsellor. The Contractor will still have to make a trip to the DC to stamp the acknowledgement slip even if the patient refuses to go for dialysis. Such trip would be considered as a single trip.
- 1.7 Requirement for Wheelchair
 - 1.7.1 For patients conveying on the wheelchair, they must be secured by seat belt and/or harness onto the wheelchair. Belt restraint must fit over the pelvis and shoulder for effective protection. The wheelchair must be well secured by the 4 points restrain system, a bolt underneath the wheelchair locks securely into the base to prevent it from stirring/moving.
 - 1.7.2 The Contractor shall ensure that all patient transportation is conducted in a safe and secure manner. The Contractor shall ensure that appropriate measures and protocols are in place to always maintain adequate infection control.
 - 1.7.3 The Contractor shall ensure that every vehicle that is used to provide services conforms to or exceeds all the requirements in **Annex E** (including during times of emergency or pandemic) and from authorities such as Ministry of Health (MOH) or Land Transport Authority of Singapore (LTA)
- 1.8 Hospital Arrangements
 - 1.8.1 When a situation requires the patient to be transported from the DC to the A&E department of a Public Health Institution (PHI), such transport shall be deemed a replacement for the return trip to the patient's residence and shall therefore be regarded as a round trip. The staff member may arrange for an emergency ambulance when necessary and the cost of the emergency ambulance shall be borne by the patient.

- 1.8.2 In cases where patients are required to be sent to a PHI for further assessment, staff member will inform the Contractor at least 30 minutes before the scheduled time on the cancellation of the return trip for the patient. Such trip would be considered as a single trip for patients even though they are scheduled for a round trip.
- 1.8.3 For the avoidance of doubt, clause (1.8.1. and 1.8.2.) is only applicable when the request is made by a staff member of the patient's DC to the PHI. A proof of stamp, signature and date of request by the requesting staff member is required.
- 1.8.4 In cases where patients are ferried from the DCs to the PHI for their follow-up appointment or other purposes in the absence of a request made under clause (1.8.3.) above, such trips are considered outside the appointed Scope of Work. The cost of such trips will be borne by the patient. NKF shall not be responsible for the costs of services outside the Scope of Work. The additional costs (if any) must be resolved with the patient directly. NKF shall not be responsible for the patient's safety/wellbeing during such trips. Such trips would be considered as single trip if the Contractor was scheduled to bring the patient to the DC.

1.9 Pick Up and Drop Off Information

- 1.9.1 The Contractor shall adhere to the stipulated time on ferrying patients to and from the DC. The stipulated time for the different shifts are detailed below:

Dialysis Shift	Shift Start Time	Specifications	Stipulated Time
Morning	7.30 am	- Earliest pickup from patient's place of Residence	6.00 am
		- Patient to reach DC latest by	7.30 am
		- Latest pickup from DC	1 hr after dialysis ends
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		- Patient to reach DC latest by	12.15 pm
		- Latest pickup from DC	1 hr after dialysis ends
Evening	6.00 pm	- Earliest pickup from patient's place of residence	4.30 pm
		- Patient to reach DC latest by	6.00 pm
		- Latest pickup from DC	1 hr after dialysis ends

- 1.9.2 The Contractor would be informed of any cancellation not lesser than 30 minutes before the arranged collection time. If such a situation arises, the trip would be considered a single trip for patients even though they are scheduled for round trips.
- 1.9.3 The Contractor shall inform the respective DCs and assigned Social Worker/Admissions Counsellor of any delays in ferrying patients at the soonest possible.
- 1.9.4 The Contractor may transport more than one patient in a single trip, provided that all applicable safety protocols and requirements are strictly adhered to
- 1.9.5 In circumstances where patient pick-up or drop-off does not occur at the DC, NKF does not have oversight and control over such arrangements.
- In such scenarios, the Contractor shall assume full responsibility and liability for ensuring the safety, proper handling, and wellbeing of the patient during the pick-up and drop-off process.
 - The Contractor shall take all reasonable measures to ensure a safe and proper pick-up and drop-off, and shall be held liable for any negligence, omission, or failure arising from such non-DC transport arrangements.

2. Liability and Duty of Care

- 2.1. The Contractor acknowledges that it has direct control over the transport environment, staff, vehicles, and equipment used and is therefore best placed to ensure the safety and wellbeing of the patient during the journey. Accordingly, the Contractor shall be solely responsible and liable for any negligence, misconduct, or failure to exercise reasonable care that may result in harm, injury, or distress to patients.
- 2.2. NKF shall assess and communicate the level of care required for each patient to the Contractor. Such information shall include, but not be limited to, details relating to patient transfer needs, medical or equipment requirements not routinely provided (e.g. oxygen tanks), patient mental capacity, sanitising requirements (e.g. vehicle wipe-down after transport), and any other medical or special needs relevant to the patient's condition and transport safety.
 - 2.2.1. The Contractor shall implement all necessary measures to ensure the safety, comfort, and wellbeing of patients throughout the service period.
 - 2.2.2. The Contractor shall maintain proper records of any special patient care requirements (including medical conditions, mobility assistance, or other care needs) as communicated by NKF and shall ensure such information is accessible to relevant personnel involved in service delivery.
- 2.3. NKF shall communicate any relevant clinical information and special patient care requirements to the Contractor in a clear and timely manner (for example, via email) to allow the Contractor sufficient time to make the necessary arrangements to accommodate such requirements.
- 2.4. The Contractor shall ensure that accurate and updated contact details of patients and NKF's DC are properly documented and readily accessible to its operational staff. The Contractor shall ensure that its staff are aware of and able to use such contact information as needed to facilitate communication and coordination.
- 2.5. The Contractor shall always remain contactable and responsive during service operations. In the event of any emergency, delay, or other contingency affecting patient care or transport schedules, the Contractor shall immediately notify the relevant DC and Social Workers and take prompt action to mitigate any adverse impact on patient wellbeing, safety, and/or service continuity.

3. Additional Contractual Term

- 3.1. The Contractor must be able to accommodate shift changes due to medical appointments or any other unforeseen circumstances, including Sundays and Public Holidays. Trips rendered on Sundays and Public Holidays should be charged as the price quoted in the Price Schedule regardless of whether it is scheduled or unscheduled trip.
- 3.2. The Contractor shall remain flexible and responsive to accept interim transport referrals from Public Healthcare Institutes (PHIs) as and when required by NKF, subject to operational feasibility and prior notice.
- 3.3. NKF shall allocate patients to the Contractor based on geographical zones on a best-effort basis. NKF reserves the right to adjust the patient allocations as necessary to meet patient care requirements and maintain operational efficiency.
- 3.4. The Contractor to allow NKF to appoint in-house and external auditors periodically to perform a compliance audit to ensure that all vehicles conveying NKF patients are in line with the critical service requirements.

- 3.5. The Contractor must not release any information, e.g. name or photograph etc, of escorted patients to any external parties beyond NKF, without NKF's consent.

4. Lapse of Service

- 4.1 NKF will not tolerate any negative attitude lodged against the Contractor with evidence and such negative attitude shall be considered as a service lapse.
- 4.2 Other service lapses include (but are not limited to) delay in picking patients to and from the DC and non-compliance with the defined Scope of Work stated in paragraph 1 above.
- 4.3 The Contractor must not appoint any other vendors to provide, on the Contractor's behalf, the applicable transport service that the Contractor is authorised under a license to provide or any aspect of the transport service.

5. Incident Report ("IR") and Demerit Points

- 5.1 The Contractor is required to inform the respective DCs and assigned Social Worker/Admissions Counsellor at the soonest possible, or within 24 hours at the latest, should there be any incident involving a patient during their care.
- 5.2 Subsequently, The Contractor is required to submit a report of this incident to the NKF Purchasing department and assigned Social Worker/ Admission Counsellor within 48 hours.
- 5.3 NKF reserves the right to issue demerit points for each item stated in Annex G.
- 5.4 NKF's decision is final and irrevocable.
- 5.5 For every three (3) demerit points incurred by the Contractor within a calendar month, a charge of \$1,000 will be levied. This is in addition to any other remedies which NKF may have under this Contract.
- 5.6 The penalty shall be deducted from any payment due or becoming due to the Contractor. Alternatively, NKF also has the sole discretion and right to require the Contractor to pay the charge so imposed.
- 5.7 The Contractor agrees and acknowledges that the charge is not a penalty but an incentive for the Contractor to provide good service to NKF.
- 5.8 Additionally, NKF reserves the right to terminate the service contract after the Contractor is issued demerit points, depending on the severity of the offence.

6. Strategic Partner

- 6.1. The Strategic Partner shall accept and fulfil all slot requests issued by NKF up to the total number of committed slots stipulated in the Price Schedule (calculated based on the number of vehicles). For the avoidance of doubt, the committed slots constitute a monthly guaranteed allocation of patients to the Strategic Partner and shall include patients who are hospitalised, unless and until NKF issues a formal written notice to release the slots.
- 6.2. Upon the Strategic Partner's fulfilment of Clause 6.1, NKF shall remunerate the Strategic Partner for each committed slot on the basis of the actual number of trips performed for that slot in the relevant month. NKF shall further remunerate the Strategic Partner for any

additional trips undertaken in excess of the committed slots. All claims for payment must be substantiated by duly endorsed acknowledgement slips.

- 6.3. Failure to comply with clause (6.1.) will result in the Strategic Partner being paid **only** for the trips rendered with endorsed acknowledgement slips, regardless of the committed slots stated in the Price Schedule. In addition, non-compliance may require the Strategic Partner to reimburse NKF, upon demand, for any costs or expenses incurred by NKF in arranging alternative services for affected patients.
- 6.4. If the total number of patients assigned to the Strategic Partner in a given month is fewer than the total committed slots, and clause (6.1.) has been fulfilled, NKF shall pay the difference equivalent to standard thirteen (13) trips per unfilled slot for that month.
- 6.5. The Strategic Partner may accept more patients than the total committed slots indicated in the Price Schedule. In such cases, NKF shall pay for all trips rendered with endorsed acknowledgement slips.

7. Payment

- 7.1. An acknowledgement slip shall be issued by the Contractor to the DC upon completion of safe transfer of our patient to the DC. The acknowledgement slip should be duly endorsed by the staff member at the DC after each service rendered and the Contractor is not allowed to consolidate the acknowledgement slip and obtain endorsement for service delivery on monthly basis.
- 7.2. Under normal circumstances, each calendar month shall comprise a standard allocation of thirteen (13) trips. Notwithstanding the foregoing, the Services shall be rendered and remunerated strictly on a "Payment Per Usage" basis. The Service Provider shall be entitled to payment corresponding solely to the actual number of trips duly completed within the relevant month. Should the number of trips vary from the standard allocation, payment shall be made based on the actual number of trips rendered.
- 7.3. Upon the receipt of the invoice from the Contractor, the Contractor shall give NKF no less than sixty (60) days to make payment. If any invoice is not submitted to NKF within six (6) months upon the completion of the Services, NKF shall be released and discharged from any liability to make any payment of the debt in relation to such invoice.
- 7.4. The Contractor shall obtain an endorsement on the acknowledgement slip from the respective DC upon the safe transfer of each patient.
 - For two-way transport, two separate endorsements are required - one for each trip (to and from the DC).
 - For one-way transport, a single endorsement is required.
- 7.5. The Contractor must ensure that the acknowledgement slip is signed on the same day the transport service is rendered. Consolidation of unendorsed acknowledgement slips is strictly prohibited. Failure to obtain the required signatures will result in the job being deemed forfeited.
- 7.6. The Contractor is to submit all invoices and acknowledgement slips via sharepoint portal.
- 7.7. Co-payment
 - For cases where the subsidy does not cover the entire charge of service, the Contractor is required to collect co-payment from patients at the end of the month.
 - The Contractor will be informed of the co-payment amount by the assigned Social Worker and/or via welfare confirmation letter.



- The Contractor is to advise their policy on cut off service should the patient not make payment after service is rendered. NKF is not liable for the collection of co-payment on behalf of the Contractor.

8. Termination Clause

- 8.1 A confirmation letter will be sent (via email) to the Contractor notifying the details for the approved transport memo for each patient. The Contractor shall take note of the end date for transport service stated in the confirmation letter. NKF will only inform the Contractor if there is a termination of service prior to the approved end date.
- 8.2 The Contractor shall provide 1 month written notice for the termination of service for any reason whatsoever. Failure of which will result in the Contractor reimbursing NKF on demand for any costs and expenses incurred during NKF's attempt to provide alternative services

9. Indemnity Clause

The Contractor shall indemnify, defend and hold harmless NKF, its servants, agents, directors, employees, officers, and departments from and against all or any liability, claims, expenses, including court costs and fees of solicitors (on a full indemnity basis) and other professionals in respect of any loss or damage (including special and consequential loss or damage) suffered by any person(s) whatsoever (including but not limited to any patient or visitor) to any property or personal injury to or death of any person arising out of or in connection with or contributed to by a breach of any term or warranty of this Contract by the Contractor, its servants, agents or the negligence or wilful default of the Contractor, its servants and/or agents, and the Contractor may not enter into any settlement, agreement, arrangement or compromise in respect of the above indemnity that may have a material adverse effect on NKF.

10. Conflict

Where any of the Terms and Conditions of this Scope of Service conflicts or at variance with the Conditions of Contract, the Terms and Conditions of this Scope of Service shall prevail.

Accepted By:

Authorised Signature: _____

Date: _____

Signatory Name: _____

Signatory Title: _____

Telephone Number: _____

Contractor's Name: _____

Email Address: _____

Contractor's Stamp: _____

ANNEX E

REQUIREMENT OF WHEELCHAIR ACCESSIBLE TRANSPORT
(INTERNAL NAME: VAN)

S/N	Description of Requirement	Comply Yes/No		Remarks
		Yes	No	
1	Vehicle must be installed with the wheelchair lift designed to raise and lower a patient on wheelchair to enter and exit a vehicle.			
2	Capable of taking on a minimum of 1 patient on wheelchair.			
3 Wheelchair Platform				
a	Platform size for 1 wheelchair patient: Width: 700 mm (minimum) Length: 1200 mm (minimum) (If not please state platform dimensions)			
b	Lifting capacity: minimum 140 kg			
c	Operated with hand-held control or fully automatic			
d	With a manual backup system for raising and lowering the platform in case of electric failure.			
e	Patient and wheelchair is secured when platform is in operation with locking mechanism such as platform installed with inner roll stop and outboard roll stop to secure wheelchair etc.			
f	Minimum doorway height of 1230 mm to ensure overhead clearance between the door opening and raised lift platform. (If not please state doorway height)			
g	Reflective tape to be placed at the edge of wheelchair platform to enable objects to become visible at night or in low light situations.			
4 Vehicle Interior				
a	Passenger seats must be easily foldable or remove when required.			
b	Space for at least 1 patient seated on wheelchair: Length: 1130 mm (minimum) Width: 690 mm (minimum) Height: 1340 mm (minimum) (If not please state allocated space dimensions)			
c	Wheelchair must be secured facing towards the front or rear of the vehicle.			
d	Handrails or handholds installed at wheelchair area should not be extended into the wheelchair space.			
e	Wheelchair space must be fitted with wheelchair tie-down system or wheelchair restraint system.			
f	Patient travelling on wheelchair is secured with restraint system such as seat belt and/or shoulder harness.			
g	Padded head and back restraint was installed for patient on wheelchair.			

S/N	Description of Requirement	Comply Yes/No		Remarks
		Yes	No	
h	Seat belts are installed for seated patients.			
i	Inside cabin camera for monitoring of patient safety.			
5 Safety Equipment				
a	A fire extinguisher that complies with EN3 standard and stowed safely in the vehicle.			
b	First Aid Kit installed and complies with the authority's recommendation.			
c	Warning signage - an advance warning triangle that complies with the approved standard by LTA.			
d	Automatic activation of hazard warning lights when the entrance or exit door is opened.			
6 Other safety requirements				
a	A vehicle with signage to indicate that the vehicle is wheelchair accessible.			
b	Provided signage to the wheelchair user and driver on the positioning of wheelchair and the use of seat belts/restraint system for all passengers.			
c	Installed handrails and stanchions at the entrance of vehicle to assist patient in boarding the vehicle.			
d	The surface of vehicle floor area must be slip-resistant.			
e	Lights should be fitted in the vehicle to allow both wheelchair users and other passengers to board and alight the vehicle safely.			
f	Reflective tape on the exterior of the vehicle to ensure visibility of the vehicle in low light situations.			

Accepted By:

Authorised Signature: _____

Date: _____

Signatory Name: _____

Signatory Title: _____

Telephone Number: _____

Contractor's Name: _____

Email Address: _____

Contractor's Stamp: _____

ANNEX F

REQUIREMENT OF MEDICAL TRANSPORT
(Internal Name: Ambulance)

S/N	Description of Requirement	Comply Yes/No		Remarks
		Yes	No	
1	Vehicle Exterior			
a	A medical transport service must ensure that each approved medical transport bears the words "MEDICAL TRANSPORT" on the front, rear and both sides of the approved medical transport.			
b	The Vehicle does not bear the words "EMERGENCY AMBULANCE", or any abbreviation or derivative of those words, in any language.			
c	The Vehicle is not fitted with any siren or beacon lights.			
2	Vehicle Interior			
a	Patient compartment of each approved medical transport is not less than All changes have been saved 1.5 metres in width by 1.3 metres in height.			
b	Vehicle is installed with frosted or tinted windows in the patient compartment to ensure patient's privacy.			
c	Inside cabin camera for monitoring of patient safety.			
3	Safety Equipment			
a	A fire extinguisher that complies with EN3 standard and stowed safely in the vehicle.			
b	First Aid Kit installed and complies with the authority's recommendation.			
c	Warning signage an advance warning triangle that complies with the approved standard by LTA.			
d	Vehicle is fitted with an adequate number of passenger seats and attendant seats which are equipped with safety belts			
4	Medical Equipment			
a	Requirements for airway and ventilation equipment, such as portable or fixed suction apparatus with a regulator, portable oxygen apparatus capable of metered flow with adequate tubing, portable and fixed oxygen-supply equipment, oxygen-administration equipment (adequate length tubing and oxygen fact masks) and etc.			
b	Requirements for cardiac equipment: AED is available on the vehicle.			
c	Requirements for trauma supplies/equipment, such as burn gels, triangular bandages, elastic or crepe or gauze, roll bandages, sterile gauze pads, adhesive tape, arterial tourniquet (windlass), plasters, pen torch/pen light.			
d	Requirements for infection control equipment, such as eye protection, face protection, respiratory protection, gloves, coveralls or gowns, hair covers, shoe covers (min 4/number of crew). - Also including hand sanitiser, disinfectant solution for cleaning equipment, disposable trash bags for disposing of biohazardous waste.			
e	Other miscellaneous requirements, such as automatic blood pressure device, pulse oximeter with paediatric and adult			

S/N	Description of Requirement	Comply Yes/No		Remarks
		Yes	No	
	function, ear thermometer or digital thermometer, trauma scissors (for cutting clothing, belts, boots), flashlights, blankets, trolley sheets or linens and pillows, incontinence sheets.			
5 Other Vehicle Requirements				
a	Ensure that the Medical Transport is always in a clean and sanitary condition.			
b	Ensure that the Medical Transport has sufficient space to accommodate the conveyance of patients who are lying down and/or patients who are seated.			
c	Ensure that the Medical Transport has sufficient space for the Service Crew to administer life-saving measures on patients.			
d	Ensure that any equipment and items in the Medical Transport are securely fastened or stored in such a manner so as not to compromise the health and safety of any patients or the Service Crew.			
e	Stretcher Capacity: Max weight of patient			

Accepted By:

Authorised Signature: _____

Date: _____

Signatory Name: _____

Signatory Title: _____

Telephone Number: _____

Contractor's Name: _____

Email Address: _____

Contractor's Stamp: _____

ANNEX G**DEMERIT POINTS**

S/N	Description	Demerit Point
Critical (Risks involving patient's safety / high-risk issues)		
1	Adverse incident affecting patients that is directly caused by the Contractor's negligence or deficiency in service provision.	3
2	Patients left unattended in a vehicle and/or before handover to the DC.	3
3	Inappropriate management of patients, including failure to determine the correct mode of transport, manpower, or equipment required during conveyance.	3
4	Inappropriate transfer of wheelchair-bound patients without the use of a hydraulic lift.	3
5	Staff failing to comply with required safety standards or competencies.	3
6	Drivers exceeding speed limits while ferrying patients.	3
7	Drivers failing to enforce the use of seat belts by all vehicle occupants.	3
8	Drivers operating a vehicle while unfit for duty, including fatigue, illness, or under the influence of alcohol, drugs, or medication that impairs alertness.	3
Major (Operational / Compliance issues that can escalate if unchecked)		
9	Outsourcing of transport services to another vendor.	3
10	Failure to report incidents within 24 hours to MSW/ACs.	2
11	Failure to maintain vehicles in good condition by conducting daily inspections according to the checklist, or failure to wipe down the vehicle after each patient dispatch.	2
12	Failure to adhere to stipulated schedules for transporting patients to and from the DC, or non-compliance with the defined Scope of Work.	2
13	Medical transport not kept clean, free from pests, or lacking adequate infection control measures.	1

14	Failure to maintain effective communication protocols, including the use of functioning phones for coordination and emergencies.	1
Minor (Professionalism / Service quality issues)		
15	More than two (2) complaints from nurses within a month.	1
16	Staff being reported and verified to be rude.	1
17	Failure to uphold patient dignity and privacy, including inappropriate handling or disregard for confidentiality.	1

Accepted By:

Authorised Signature: _____

Date: _____

Signatory Name: _____

Signatory Title: _____

Telephone Number: _____

Contractor's Name: _____

Email Address: _____

Contractor's Stamp: _____

ANNEX H**LIST OF DIALYSIS CENTRES (DC)**

S/No	Name & Address of DC
1	ADT (761 Woodlands) The Hour Glass-NKF Dialysis Centre (Admiralty Branch) 761 Woodlands Ave 6 #01-108, S(730761) Tel: 63622153/ Fax: 63622360
2	ALJ (102 Aljunied) Hong Leong-NKF Dialysis Centre 102 Aljunied Crescent #01-265, S(380102) Tel: 67433572/ Fax: 67430817
3	AM2 (633 Ang Mo Kio) Western Digital-NKF Dialysis Centre 633 Ang Mo Kio Ave 6 #01-5155, S(560633) Tel: 64590113/ Fax: 65521697
4	AM3 (565 Ang Mo Kio) Pei Hwa Foundation-NKF Dialysis Centre 565 Ang Mo Kio Ave 3 #01-3401, S(560565) Tel: 65526569/ Fax: 65526539
5	BB2 (113A Bukit Batok) Singapore Buddhist Youth Mission-NKF Dialysis Centre 113A Bukit Batok West Ave 6 #01-01, S(651113) Tel: 65136873/ Fax: 63227715
6	BD2 (105 Bedok) Man Fatt Lam Buddhist Temple-NKF Dialysis Centre 105 Bedok North Ave 4 #01-2168, S(460105) Tel: 62437349/ Fax: 62140210
7	BDR (213 Bidadari) Lorong Koo Chye Sheng Hong Temple-NKF Dialysis Centre 213 Bidadari Park Dr #03-14, S(360213) Tel: 6550 4459/ Fax: 65504462
8	BED (27 New Upper Changi) Singapore Pools-NKF Dialysis Centre 27 New Upper Changi Road #01-694, S(462027) Tel: 64444278/ Fax: 64444978
9	BM2 (128 Bukit Merah) The Singapore Buddhist Lodge-NKF Dialysis Centre 128 Bukit Merah View #01-22, S(150128) Tel: 68780552/ Fax: 68780021
10	BP1 (274 Bangkit) New Creation Church-NKF Dialysis Centre 274 Bangkit Road #01-54, S(670274) Tel: 67646400/ Fax: 67642004
11	BP2 (275 Bangkit) Le Champ-NKF Dialysis Centre (Bukit Panjang Branch) 275 Bangkit Road #01-96, S(670275) Tel: 68912782 / Fax: 68912592

12	CLE (326 Clementi) Lew Foundation-NKF Dialysis Centre 326 Clementi Ave 5 #01-175, S(120326) Tel: 6775 0668/ Fax: 6775 0891
13	CP1 (IRC Level 1) The Sirivadhanabhakdi Foundation-NKF Dialysis Centre 500 Corporation Road S(649808) Tel: 63593610/ Fax: 62514174
14	CP2 (IRC Level 2) The Sirivadhanabhakdi Foundation-NKF Dialysis Centre 500 Corporation Road S(649808) Tel: 63593610/ Fax: 62514175
15	FNV (465 Fernvale) Christopher Heng Tiaw Boon Memorial Fund-NKF Dialysis Centre 465 Fernvale Road #01-07, S(790465) Tel: 65504439/ Fax: 65504457
16	GMH (1 Ghim Moh) Woh Hup-NKF Dialysis Centre 1 Ghim Moh Road #01-358, S(270001) Tel : 64679200/ Fax : 64679231
17	HG1 (114 Hougang) Singapore Buddhist Welfare Services-NKF Dialysis Centre 114 Hougang Ave 1 #01-1298, S (530114) Tel: 63826332/ Fax: 63830203
18	HG2 (628 Hougang) NKF Hougang-Punggol Dialysis Centre 628 Hougang Ave 8 #01-108, S(530628) Tel : 6284 1877/ Fax : 6284 0867
19	JE1 (240C Jurong East) Yuhua Grassroots Organisations-NKF Dialysis Centre 240C Jurong East Ave 1 #01-01, S(603240) Tel : 69704847/ Fax : 69701849
20	JW1 (744 Jurong West) Sheng Hong Temple-NKF Dialysis Centre 744 Jurong West Street 73 #01-19, S(640744) Tel: 67941061/ Fax: 67941071
21	JW2 (940 Jurong West) The Sirivadhanabhakdi Foundation-NKF Dialysis Centre 940 Jurong West Street 91 #01-441 S(640940) Tel: 63166246/ Fax: 63166194
22	KKT (NKF Centre) Tay Choon Hye-NKF Dialysis Centre 81 Kim Keat Road, S(328836) Tel: 65062291/ Fax: 62549947
23	KLA (43 Bendemeer) Kwan Im Thong Hood Cho Temple-NKF Dialysis Centre (Kolam Ayer Branch) Blk 43 Bendemeer Road, #01-1018, S(330043) Tel: 62913946/ Fax: 62913969

24	MSD (204 Marsiling) Jo & Gerry Essery-NKF Dialysis Centre 204 Marsiling Drive S(730204) Tel: 63680291/ Fax: 63680267
25	PN2 (One Punggol) Kwan Im Thong Hood Cho Temple-NKF Dialysis Centre 1 Punggol Drive, #04-08, Singapore 828629 Tel: 69708130/ Fax: 69708134
26	PNG (Punggol Oasis Terraces) Ngiam Kia Hum & Family-NKF Dialysis Centre 681 Punggol Drive #02-02, S(820681) Tel: 62437020/ Fax: 62437022
27	PR2 (427 Pasir Ris) TL Whang Foundation-NKF Dialysis Centre 427 Pasir Ris Drive 6 #01-35/43, S(510427) Tel: 62431008/ Fax: 62434332
28	PSR (180 Pasir Ris) Tampines Chinese Temple-NKF Dialysis Centre 180 Pasir Ris Street 11 #01-06, S(510180) Tel: 65839500/ Fax: 65830779
29	QT1 (55 Strathmore) San Wang Wu Ti Religious Society-NKF Dialysis Centre 55 Strathmore Ave #01-145, S(140055) Tel: 67780330/ Fax: 67776155
30	SK1 (Sengkang Community Hosp) Sang Wang Wu Ti Religious Society-NKF Dialysis Centre 1 Anchorvale Street #01-26, S(544835) Tel: 69084501/ Fax: 69084504
31	SMI (101 Simei) Kwan Im Thong Hood Cho Temple-NKF Dialysis Centre (Simei Branch) 101 Simei Street 1 #01-892, S(520101) Tel: 6785 9882/ Fax: 67866268
32	SRG (201 Serangoon) IFPAS-NKF Dialysis Centre 201 Serangoon Central #01-30, S(550201) Tel: 62854113/ Fax: 62842553
33	TM1 (935 Tampines) National Trades Union Congress/Singapore Pools-NKF Dialysis Centre 935 Tampines Street 91 #01-333, S(520935) Tel: 67898534/ Fax: 67845244
34	TM2 (271 Tampines) Wong Sui Ha Edna-NKF Dialysis Centre 271 Tampines Street 21 #01-99, S(520271) Tel: 67899878/67896965/ Fax: 67897336
35	TP1 (225 Toa Payoh) Toa Payoh Seu Teck Sean Tong-NKF Dialysis Centre 225 Toa Payoh Lor 8 #01-54, S(310225) Tel: 62542066/ Fax: 6251 9484

36	TP2 (Toa Payoh West CC) Seck Hong Choon-NKF Dialysis Centre 200 Toa Payoh Lor 2 #03-01, S(310225) Tel: 69704190/ Fax: 69704195
37	TWY (113 Teck Whye) Leong Hwa Chan Si Temple-NKF Dialysis Centre 113 Teck Whye Lane #01-666, S(680113) Tel: 67690178/ Fax: 6769 9231
38	UBK (19 Upper Boon Keng) Sakyadhita-NKF Dialysis Centre 19 Upper Boon Keng Road, #01-1220, S(380019) Tel: 67431278/ Fax: 67431237
39	URD (311 Ubi) Foo Hai-NKF Dialysis Centre 311 Ubi Ave 1 S(400311) Tel: 67648864/ Fax: 67478823
40	WCR (701 West Coast) The Hour Glass-NKF Dialysis Centre (West Coast Branch) 701 West Coast Road S(120701) Tel: 65601184/ Fax: 67750891
41	WD1 (825 Woodlands) Thong Teck Sian Tong Lian Sin Sia-NKF Dialysis Centre 825 Woodlands Street 81 #01-30, S(730825) Tel: 63651810/ Fax: 63654179
42	WD2 (365 Woodlands) SCAL-NKF Dialysis Centre (Woodlands Branch) 365 Woodlands Ave 5 #01-490, S(730365) Tel: 63624905/ 63623956/ Fax: 63625849
43	YS1 (203 Yishun) Toa Payoh Seu Teck Sean Tong-NKF Dialysis Centre 203 Yishun Street 21 #01-239, S(760203) Tel: 67594002/ Fax: 67594003
44	YS2 (639 Yishun) Le Champ-NKF Dialysis Centre (Yishun Branch) 639 Yishun Street 61 #01-168, S(760639) Tel: 62571860/ Fax: 62571650
45	YS3 (840 Yishun) SCAL-NKF Dialysis Centre (Yishun Branch) 840 Yishun Street 81 #01-382, S(760840) Tel: 64813006/ Fax: 64813076
46	YS4 (Yishun Community Hospital) Keppel-NKF Dialysis Centre 2 Yishun Central 2 #03-01, S(768024) Tel: 69704213/ Fax: 69704216

Note: NKF reserves the right at any time to increase or decrease the number of and to vary and / or change the location of any or all of the listed Dialysis Centres.