

**Expression of Interest
VSC – EOI 001/2025**

for

**Provision of After-Hours
Emergency Veterinary Service**

Issued by:

Veterinary Surgeons' Council

Expression of Interest EOI 001/2025

Issue Date: 2 July 2025

**Response/Submission Date and Time Extended to: 13 July 2025 at
23:59PM CET**

Table of Contents

- Section A: Instructions
- Section B: General Information
- Section C: Details of Information Requested
- Section D: Additional Information
- Section E: Application Form

Section A: Instructions

Response to this Expression of Interest is to be submitted via email.

All submissions shall be treated in confidence and must be sent by email to vsc@gov.mt no later than **13 July 2025 at 23:59 PM CET**.

Section B: General Information

1) Purpose

The purpose of this Expression of Interest is to identify veterinary clinics licensed in line with SL 437.106 interested in participating in a **After-Hours Emergency Veterinary Service Scheme**. The scheme will provide after-hours emergency veterinary services across three regions:

- **Gozo,**
- **Malta North,** and
- **Malta South.**

The selected clinics will receive fixed payments for providing emergency veterinary services in Malta and Gozo during the night, Sundays and Public holidays for the duration of the scheme, which will operate for as long as an animal hospital is established and active.

2) Beneficiary

The beneficiary, being the Veterinary Surgeons' Council is the point of contact for this Expression of Interest. Please refer any inquiries to:

Veterinary Surgeons Council
Address: Main Building Room 4, Abattoir Street Marsa MRS

E-mail: vsc@gov.mt

3) Scope and Terms & Conditions

3.1 Provision of Emergency Veterinary Services:

The primary goal of the After-Hours Emergency Veterinary Service Scheme is to safeguard animal care and welfare during hours when veterinary services are typically unavailable. In response to current service gaps, the objectives outlined below define the framework for

addressing the urgent need for accessible, high-quality emergency veterinary care across Malta and Gozo.

The scheme will provide financial incentives to Veterinary Clinics for the provision of after-hours emergency veterinary services across the three regions:

- Gozo,
- Malta North, and
- Malta South

Participating clinics will be paid **€200 per night or Sunday or Public Holiday** for every shift they operate, regardless of the number of cases treated.

Clinics will charge pet owners directly for services at their own discretion.

All eligible clinics will be selected and will be required to offer the emergency service in accordance with the rotational schedule established by the Veterinary Surgeon's Council.

3.2 Other Conditions:

The service shall be provided within the scheme's operational period and in accordance with the schedule agreed upon after selection, which is for a period of 6 months, and which may be extended for a further 6 months with the same terms and conditions.

Each region (Gozo, Malta North, Malta South) will have one designated clinic available each night / Sunday or Public holiday to handle emergencies.

Selected clinics are expected to operate on their assigned nights between 8.00PM and 8:00 AM during night shifts and 8.00AM and 8:00 PM on Sundays and Public holidays.

Applicants must be fully licensed to run a veterinary clinic in line with Subsidiary Legislation 437.106 Private Veterinary Establishments (Licensing) Regulations.

Payments under this scheme will be disbursed on a quarterly basis, calculated on the number of nights / Sundays and Public holidays allocated and utilized as per the approved rotational schedule. Each payment will be made within 30 days following the end of each three-month period.

Successful applicants shall enter into an agreement with the Veterinary Surgeons' Council, which shall be subject to the conditions laid down in this Expression of Interest, any other conditions in line with the Laws of Malta and shall also include any other specific conditions and arrangements required to ensure proper governance and enforcement of the scheme conditions.

Interested clinics must submit the required documentation and complete the form in **Section E**.

Section C: Details of Information Requested

1) General Economic Operator Information

The Contracting Authority is asking interested licensed clinics to submit a response containing the following information:

- ✓ Declaration concerning exclusion grounds

I hereby declare that I do not fall under any of the grounds listed under Part VI of LN352/2016.

- ✓ Declaration concerning selection criteria
- ✓ Warrant number/s of the licensee/s issued by the Veterinary Surgeons Council of Malta.
- ✓ In line with Subsidiary Legislation 437.106, the License Number of the veterinarian/s running the clinic where the services will be provided.

2) Specific Project Overview

Interested clinics will be assigned to offer Emergency Veterinary Services according to the Schedule established by the Veterinary Surgeon's Council in the designated region between 8.00PM and 8:00 AM during night shifts and 8.00AM and 8:00 PM during Sundays and Public Holidays.

3) Response Format

Responses should be clear, concise, and specific. Submit all requested information in Section E, along with any observations or suggestions that may assist the Contracting Authority, including the region practiced in, and number of nights / Sundays per week/Public Holidays / month you can offer services.

All responses must be sent via email to vsc@gov.mt no later than 13 July 2025 at **23:59 PM CET**.

Section D: Additional Information

1. A roster will be established and coordinated by the Veterinary Surgeons' Council.
2. Separate applications must be submitted for different clinics owned by the same owner / veterinarian.
3. All information accessed during engagement shall be confidential.
4. Promotion of the scheme and relevant clinics on call will be organised by the Veterinary Surgeons' Council.
5. Reporting Requirements:
 - Number of calls/patients benefitting from the service.
6. Monitoring and Evaluation:
 - Progress and compliance will be regularly reviewed during the contract period.

Section E – Application Form

Detail	Information
Name of Veterinary Clinic:	
Locality:	
Licensee Number (Veterinary Surgeon Licensed to run the clinic):	
Name of Licensee/s:	
Warrant Number of Licensee:	
VAT No:	
Tel/Mobile Nos:	
Address:	
Postcode:	
E-mail address:	
IBAN No:	
Swift Code:	

Number of nights / Sundays/Public Holidays / week to be committed by the clinic:	
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Declaration

I, the undersigned, hereby declare that, if selected, I commit to providing a veterinary emergency service through my clinic within the designated region during the hours of 8:00 PM to 8:00 AM during night shifts and 8:00 AM to 8:00 PM during Sundays and Public holidays, as required. I acknowledge that this service is a fundamental component of the role and confirm my ability and willingness to fulfil this obligation throughout the duration of the engagement.

I further declare that I have read and fully understood the terms and conditions of the scheme. I agree to comply with all stipulated requirements, including any additional conditions that may be specified in the agreement related to the scheme.

I undertake to provide free and unhindered access to the Veterinary Surgeons' Council or any Government Audit Organisation to the clinic premises for the purposes of monitoring, verification, and to ensure the effective implementation of the scheme.

I confirm that all information provided by me in this application is true, complete, and accurate to the best of my knowledge and belief. I understand that the provision of false or misleading information may lead to disqualification from the scheme and/or the withdrawal of any benefits granted under it.

Finally, I declare that I am not subject to any of the disqualifying grounds listed under Part VI of Legal Notice 352 of 2016.

Name of Applicant: _____

Name of Clinic: _____

Signature: _____

Date: _____