Request for Proposal

For

Selection of Telemedicine Services Provider

For

Setup, Operations, Management and Maintenance of

New & Existing Telemedicine Centres (at Sub-Centre, PHC,CHC&CH level)

for

Department of Health & Family Welfare

Government of Himachal Pradesh

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This RFP is not an agreement and is not an offer or invitation by the Authority to any party other than the Bidders who are qualified to submit the bid Proposal. The purpose of this RFP is to provide the Bidders with information to assist the formulation of their proposals. This RFP does not purport to contain all the information each Bidder may require.

This RFP may not be appropriate for all companies / consortium partners / and it is not possible for the Authority to consider the investment objectives, financial implications, and any other specific information needs of the potential bidders / parties. Interested bidders / parties are expected to

evaluate this RFP accordingly.

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1. Invitation to RFP

1.1 RFP Notice:

Request for Proposal (RFP) for the Selection of Service Provider for the Setup, Operations, Maintenance and Management of "Himachal Pradesh Telemedicine Services Project" at 50 Sub Centres & Operations & Management of exiting telemedicine setup on 25 locations at PHC, CHC & CH level in the State of Himachal Pradesh. The bidder will have to setup, operate, maintain & manage the new and existing telemedicine system and telemedicine services on a Program Management Mode.

The Program Management includes Setup, Operations, Maintenance and provision of Telemedicine clinical advisory and consultation services for complete integrated IT enabled Telemedicine services program at 50 selected Sub Centres & on existing 25 locations (at PHC, CHC & CH level) for a duration of Three (3) years which may be extended to a suitable period based on the performance and as deemed necessary by the Authority. Based on performance, the authority may choose to increase the number of centres or reallocate some of the existing telemedicine centres to new locations under this program.

The Bidder shall be responsible for providing all types of applications / services, as mentioned in this RFP document & scope of work, as part of this project.

1.2 Invitation to RFP:

National Health Mission, Department of Health & Family Welfare, Government of Himachal Pradesh invites technical and financial bids from interested bidders for setup, operations, maintenance and management of Telemedicine Services at 50 selected Sub Centres & operations of existing telemedicine centres on 25 locations (at PHC, CHC & CH level), in the State of Himachal Pradesh.

1.3 Stages:

The bidders, who intend to participate in this bid, are required to follow the below mentioned stages:

- Pre-Bid Meeting
- Bid Submission
- Opening of Pre-Qualification and Technical Bid
- Opening of Financial bid of all the qualified bidders.
- The successful L1- bidder may be called for negotiations by the Authority before the award of the Contract.

1.4 General Instructions:

- a) Interested Companies / Bidders may download the RFP document from the website www.nrhmhp.gov.in or www.hphealth.nic.in
- b) Authority has the right to reject the proposal without assigning any reasons.
- c) This RFP document is not transferable.
- d) Bid Validity: 180 days
- e) The bidder must submit the D.D of Rs. 2000/- as bid document fee, Rs. 10000/- towards bid processing charges (Non-Refundable) and Rs. 10 Lacs towards Bid Security/ EMD amount in an envelope along with Technical Bid.
- f) The envelopes should be super scripted with "Bid Document Fee, Bid Processing Fees & Bid Security / Earnest Money Deposit (EMD) for the tender for the selection of Service Provider for Setup, Operations, Management & Maintenance of Telemedicine Services Project for the State of Himachal Pradesh". Bid Document, Bid Processing fees & E.M.D. must be in the form of Demand Draft in the name of Mission Director, NHM Himachal Pradesh, and payable at Shimla along with the covering letter.
- g) Technical bids without Bid Document Fees, Bid Processing Fees and Bid Security / EMD shall be rejected.

1.5 Bid Schedule

		Timelines
1	Date of Publication of RFP Document on NHM	27 th November 2018
	H.P. website (<u>www.nrhmhp.gov.in</u> / www.hphealth.nic.,in	
	Date, time and place for Pre Bid meeting	11 th December 2018 in the Office of MD. NHM H.P

3	Last date for submission of queries for clarifications (Only by e-mail) Mail id (ddnrhmhp@gmail.com and misnrhmhp@gmail.com)	13 th December 2018
4	Last date and time for submission of proposals (Technical and Commercial)	22 nd December 2018 (till 11:00 AM)
5	Date and time for opening of technical proposals	22 nd December 2018 at 2:30 PM
6	Date, time and place for opening of financial/commercial proposals	The place, date and time for opening of financial/commercial proposal will be informed to the technically qualified bidder
7	Contact person for queries	Dr. Gagandeep Dhillon, SPO-e-Health (9418173271 & Mr Devender Sen, Consultant, MIS (9418471840)
8	Address for Communication	Mission Director, Shanti Bhawan, Phase-3, Sector-6 New Shimla (Kanga Dhar), Shimla- 171009
9	Bid Validity	180 days

2. Scope of Work:

2.1 Background:

The state of Himachal Pradesh is a mountain State with hilly and treacherous terrain. Health care needs in mountainous, remote and isolated areas with rugged terrain face a lot of challenges. The Government had envisaged overcoming these challenges using Telemedicine as a tool to enable quality health care service delivery under this innovative program. In order to provide quality health care services to remote and isolated locations of the State, National Health Mission, Government of Himachal Pradesh, is inviting bids from eligible "Service Providers". Through this program, a wide range of health care services including **tele-speciality consultations**, **tele-super-speciality consultations** and **selective laboratory services** (reagent to be arranged by Service Provider) are to be provided along with development of a financially viable, sustainable and socially relevant health care solution. The Government may choose to expand and scale up this tele-health care project with the selected Service Provider in the near future or shift some of the existing telemedicine centres from PHC, CHC & CH level to Sub-Centre level.

The key goal of this project is to provide citizens living in distant places of Himachal Pradesh with access to quality health care services at Sub Centres and other select locations through the telemedicine platform maintained and managed by competent Service Provider with the advancements of Information and Communication Technologies.

2.2. Challenges:

The proposed setup, operations, maintenance and management of telemedicine services at Sub Centres and on existing 25 telemedicine locations at CHC, CH & PHC level, shall address the following:

- o Sustain general and specialty telemedicine services.
- o Reduce distance barriers and improve access to quality health services.
- o Document the challenges in provision of quality tele health care.
- o Avoid unnecessary travel time to meet health professionals.
- o Access to specialist health services for patients through tele-medicine.
- o Reduce the cost of patient transfers.
- o Knowledge transfer through remote education and research.

2.3 Scope of the Project:

2.3.1 <u>Telemedicine Services Setup, Operations, Maintenance & Management:</u>

Service Provider shall setup, operate, maintain and manage cost effective telemedicine infrastructure consisting of web based technology with required bandwidth as per the proposed telemedicine solution by the bidders / Service providers (Min. recommended- 1 mbps of internet bandwidth)

- 1. Service Provider shall setup, operate & maintain a new network as per Service Provider's methodology for tele-consultation services with a minimum uptime guarantee of 95%. The Service Provider shall develop suitable Dashboards for measuring the uptime / monitoring the performance of Telemedicine Centres and provided access of Dashboards / Reports to the Authority to monitor the performance on real time basis. The Service provider shall conduct feasibility study and provide internet connectivity (Minimum 1 mbps or as required for the proposed solution) through broadband / any other method at the selected Sub Centres, PHCs, CHCs & CHs.
- 2. Service Provider shall setup, operate, maintain & manage telemedicine services at the identified 50 Sub Centres & maintain the existing telemedicine centres on 25 location (including shifting of some of the telemedicine centres from PHC, CHC & CH level to new subcentres as per the requirement of State if any).

- 3. Service Provider shall recruitment one paramedics (GNM) at each sub centre & on exiting 25 telemedicine location (total 75 locations) for providing telemedicine services.
- 4. Service provider shall provide required computer hardware, peripheral device, medical devices and Laboratory Equipments as per Service Provider's methodology to setup, maintain and manage telemedicine services at selected 50 Sub Centres & maintain existing 25 telemedicine centres (at PHC, CHC, CH level). The existing infrastructure & hardware available on 25 locations in can also be used by the service provider for setting up / maintaining these existing telemedicine centres in addition to the required additional infrastructure.
- 5. Management of Specialist OP services (General Medicine, Paediatrics and Obstetrics & Gynaecology) through Telemedicine / Tele-Consultations and Tele Lab facility.
- 6. Management of Tele specialty consultations and super specialty consultations (General Medicine, Paediatrics and Obstetrics & Gynaecology) & ensure that Consultants are registered with MCI which should be substantiated by provision of the following documents:
 - a. The bidder should attach copies of board certificates and the certificates and CV of Specialist Doctors. (Minimum of five needs to be enclosed.)
- 7. Tele-Specialist Consultations on all working days from Monday to Saturday (9:30 AM to 1:30 PM & 2:00 PM to 4:00 PM) have to be managed remotely. The specialties include <u>General Medicine</u>, Obstetrics and Gynaecology and Paediatrics.
- 8. Management of Tele-Laboratory facilities with the following investigations and associated equipment (POC Kits) with reagents (to be provided by Service Provider):
 - a. Haemoglobin
 - b. Urine (R/E & M/E)
 - c. Blood Sugar
 - d. STS
 - e. HIV
 - f. Malarial Parasite
- 9. Development of real time Dashboards for monitoring and provision of submission of daily, weekly reports, monthly progress reports and annual report of the project.
- 10. Methodology for internal and external audit. Minimum yearly one audit should be conducted.
- 11. Coordination for patient shifting / referrals to higher health institutions as and when required with the help of Government Consultants / Doctors.
- 12. Annual maintenance of hardware/ equipments and equipment management

2.3.2 <u>Manpower Requirement:</u>

2.3.2.1 Service Provider has to deploy the following manpower as per the scope defined by the Authority.

Title	Posts	Qualification	Location			
Staff Nurse / Paramedics	1	GNM	At the selected			
			Locations (75			
			Telemedicine			
			Centres)			
Clinica	Clinical Practitioners (for Tele-Consultations)					
General Medicine	1	MD (Medicine)	At Specialist Hub			
			/ Node			
Obstetrics & Gynaecology	1	MD (Obstetrics & Gynaecology)	At Specialist Hub / Node			
Paediatrics	1	MD (Paediatrics)	At Specialist Hub / Node			

2.4 Training:

The Service Provider shall provide 3-4 weeks professional, structured, and certified training for its employees to be posted in Telemedicine Centres, in line with the following:

- 1. Clinical training for the paramedics
- 2. Lab testing and reporting training to GNM
- 3. Computer skills
- 4. Soft skills
- 5. Electronic Medical Record and Patient Data Base Management
- 6. Data Protection

Regular refresher trainings must be provided by the Service Provider.

2.4 Project Timelines:

- The Telemedicine services shall be started in the identified health facilities by the Service Provider within 90 days from the date of Award of Contract
- Performance of the Project –No of patients, details of diagnosis, referral cases, investigations handled and success stories as per Electronic Health Record (EHR) to be maintained through Telemedicine Application (Dashboard access at different levels as per requirements of Authority to monitor the uptime and performace of Telemedicine Centres).

3. Instructions to Bidders

3.1 Definitions

- 1. "Applicable Law" means the laws and any other instruments having force of law in India as they may be issued force from time to time.
- 2. "Proposals" means proposals submitted by bidders in response to the RFP issued by National Health Mission, Department of Health & Family Welfare, Himachal Pradesh for selection of Service Provider for Setup, Operations & Management of Telemedicine Services Project.
- 3. "Authority" means the National Health Mission, Department of Health & Family Welfare, Government of Himachal Pradesh.
- 4. "Committee" means members assigned by the National Health Mission, Department of Health & Family Welfare" and Government of Himachal Pradesh.
- 5. "Service Provider SP" means any private or public entity, which will provide the services to Authority.
- 6."Contract" means the Contract signed by the parties along with the entire documentation as specified in the RFP
- 7. "Effective date" means the date from which the contract comes into force and effect.
- 8. "Government" means Government of Himachal Pradesh.
- 9."Member" means any of the entities that make up the joint venture / consortium / association, in relation responding to this RFP
- 10. "DH & FW" means Department of Health & Family Welfare of Himachal Pradesh.
- 11. "Personnel" means professional and support staff provided by the SP and assigned to execute the services under RFP.
- 12. "Services" means the work to be performed by the SP pursuant to the selection by DH & FW and to the contract to be signed by the parties under this RFP.

3.2 Who may Bid

The companies / bidder's legal entities meeting the following qualification criteria will be short listed and considered for technical evaluation.

NOTE: The Bidder shall be a company registered under Company's Act 1956 or Society Registration Act etc.

3.3. Eligibility Criteria

1. The Bidder should be a Health Care Service Provider with minimum 100 beds Hospital and having experience of running Hospital Services for a period of at least 5 (five) years and experience of setting up, operations and management of at least 20 (Twenty) Telemedicine Centres as on 31st March 2018. The Bidder should have the availability of Specialist Doctors (Obstetrics & Gynaecology, Paediatrics & General Medicine) exclusively for specialised Tele-Consultations to be done with the identified Telemedicine Centres (CVs of Specialist Doctors to be attached / valid documents should be submitted)

or

- 2. The Bidder (in case of non Health Care Service Provider) should have experience of setting up (supply, integration, installation, commissioning) and operations & management of at least 50 (Fifty) Telemedicine Services / Centres / telemedicine stations as on 31st March 2018 & should have the availability /capability of providing Specialist Doctors (Obstetrics & Gynaecology, Paediatrics & General Medicine) exclusively for specialised Tele-Consultations to be done with the identified Telemedicine Centres. (CVs of Specialist Doctors to be attached / valid documents should be submitted)
- 3. The Bidder should have experience of setting up & operations & management of Telemedicine Services for at least 3 years as on 31st March 2018.
- 4. The Bidder should also have a minimum of 2 years of experience with any State or Central Government in implementing / managing the Telemedicine / Tele health related services as on 31st March 2018.(Documentary evidence to be submitted)
- 5. The Bidder should have a minimum 10 seats medical call centre to support and manage Telemedicine services. The Bidder should enclose attested registration copies from statutory authorities such as DOT etc
- 6. The Bidder must have an average turnover of Rs. 50 Crore in the last three financial years as on 31st March, 2018. Audited statements of last three Financial Years must be attached.
- 7. The Bidder should have the experience of setting up of at least 10 (Ten) Telemedicine centres with the facility of conducting Laboratory Tests and should provide under taking of conducting HB, Blood Sugar, Urine RE/ME, STS, HIV and Malerial Parasite in the indentified Telemedicine Centres / Health Facilities (Documentary evidence with Proposal / implementation methodology should be provided)
- 8. The Bidder shall produce the satisfactory completion of work / s certificate in reference to the ongoing & completed projects / programs. The Bidder's Telemedicine Application should be as

per the standards defined by Ministry of Health & Family Welfare, GOI, for the establishment of National Telemedicine Network. The telemedicine application should have the provision of creation of proper electronic health record (EHR) of patients and dashboards. The Telemedicine application must have SNOMED-CT, ICD & HL-7 nomenclature & the undertaking to get the Telemedicine application audited / certified from CDAC Pune should be submitted. Valid copy of the Certifications (SNOMED CT, HL-7, ICD-10 etc.) should be attached.

- 9. The Bidder should not be under a declaration of ineligibility for corrupt and fraudulent practices by Government of Himachal Pradesh and / or black-listed by any of the central or State Departments.
- 10. The Bidder, after being awarded the Letter of Award, shall have to produce Performance security worth 10% of the Total Contract value in the shape of Bank Guarantee issued by any nationalized bank / any scheduled bank in India.
- 11. Copy of the certificate of registration of GST, EPF, ESI and Service Tax with the appropriate authority valid as on date of submission of tender documents

3.4 Identified Health Facilities for the implementation of Telemedicine:

List of identified Sub-Centres is as under:

S.NO	DISTRICT	BLOCK	SUB-CENTRE
1	Chamba	Kihar	Bihali
2	Chamba	Tissa	Devikothi
3	Chamba	Tissa	Ladhan
4	Chamba	Pukhri	Dhulhar
5	Chamba	Pukhri	Kalota
6	Chamba	Pukhri	Sach
7	Chamba	Choori	Bakani
8	Chamba	Samote	Kainthli
9	Chamba	Samote	Kahari
10	Kangra	Bhawarna	Gharana
11	11 Kangra Bhawarna		Saprul
12	Kangra	Dadasiba	Sanda
13	Kangra	Indora	Mand Maini
14	Kangra	Nagrota Bagwan	Sadoon Bargran
15	Kinnaur	Sangla (Kalpa)	Brua
16	6 Kinnaur Sangla (Kalp		Kanai
17	Mandi	Janjehli	Dharwa Thach
18	Mandi	Bagsaid	Kelodhar

19	Mandi	Janjheli	Bhat Ki Dhar
20	Mandi	Bagsaid	Tandi
21	Mandi	Padhar	Kass
22	Mandi	Bagsaid	Devidarh
23	Mandi	Bagsaid	Kelodhar
24	Mandi	Bagsaid	Lot
25	Mandi	Padhar	Kass
26	Mandi	Padhar	Jhatingri
27	Mandi	Rohanda	Doldhar
28	Mandi	Rohanda	Paura Kothi
29	Mandi	Janjehli	Judas
30	Mandi	Janjehli	Bhatidhar
31	Mandi	Janjehli	Khunachi
32	Mandi	Janjehli	Kandhikandool
33	Mandi	Janjehli	Jughand
34	Mandi	Janjehli	Devdhar
35	Mandi	Ladbharol	Khaddar
36	Mandi	Ladbharol	Ootpur
37	Shimla	Chirgaon	Janglik
38	Shimla	Chirgaon	Khasdhar
39	Shimla	Nerwa	Bijmal
40	Shimla	Nerwa	Minda
41	Sirmaur	Shillai	Gumat
42	Sirmaur	Shillai	Kota-Pav
43	Sirmaur	Sangrah	Bhrari
44	Sirmaur	Sangrah	Ser-Tandula
45	Kullu	Anni	Kamand
46	Kullu	Nirmand	Randal
47	Kullu	Nirmand	Koil
48	Kullu	Nirmand	Nore
49	Kullu	Banjar	Larji
50	Sirmaur	Shillai	Pashmi

Note: The selected Bidder shall have to start Telemedicine facility in the identified 50 Sub-Centres (after conducting feasibility for internet connectivity). In case, it is not feasible to setup telemedicine centre in any of the identified sub-centre due to internet connectivity issues or other valid reasons, new locations / sub-centres shall be provided to Service Provider from the following list.

S.NO	DISTRICT	BLOCK	SUB-CENTRE
1	Sirmaur	Shillai	Panog
2	Sirmaur	Sangarh	Kuffer
3	Sirmaur	Sangarh	Jarak

4	Sirmaur	Rajpur	Chandni
5	Sirmaur	Rajpur	Dugana
6	Sirmaur	Dhagera	Pannar
7	Sirmaur	Dhagera	Burma Papri
8	Sirmaur	Dhagera	Meerpur Kotla
9	Sirmaur	Rajpur	Jamna
10	Sirmaur	Rajpur	Killour
11	Sirmaur	Pachhad	Dudhan
12	Sirmaur	Pachhad	Chakal
13	Sirmaur	Shillai	Pasmi
14	Sirmaur	Shillai	Panog
15	Sirmaur	Shillai	Hallahn
16	Sirmaur	Sangrah	Jarag
17	Sirmaur	Sangrah	Lana Masur
18	Sirmaur	Sangrah	Trimalga
19	Sirmaur	Sangrah	Kuffer
20	Kullu	Naggar	Seo-Bag
21	Kullu	Anni	Tandi
22	Kullu	Banjar	Jibhi
23	Kullu	Banjar	Ghat
24	Kullu	Anni	Sinvi
25	Kullu	Naggar	Bhang

List of Existing 25 Telemedicine Centres is as under:

District	Sr No	Telemedicine Centre
	1	CH Tissa
	2	CH Dalhause
	3	CH Chowari
	4	CH Bharmour
	5	CHC Holi
Chamba	6	CHC Kihar
	7	CHC Choori
	8	CHC Salooni
	9	CHC Sahoo
	10	PHC Pukhri
	11	PHC Banikhet
	12	CH Sarahan
	13	CH Dadahu
Sirmour	14	CHC Sangrah
	15	CHC Shillai
	16	CHC Rajpura

	17	PHC Jamta		
	18	CHC Nauradhar		
	19	PHC Haripurdhar		
	20	CH Nerwa		
	21	CHC Tikkar		
Shimla	22	CHC Dodrakawar		
Sillilla	23	CHC Nankhari		
	24	CHC Chirgaon		
	25	CH Kumarsain		
CH= Civil Hospital				
CHC= Community Health Centre				
PHC= Primary Health Centre				

• **NOTE:** State may shift some of the existing telemedicine centres from above mentioned locations to new locations (Sub-Centres or PHCs/CHCs). The selected Bidder would be required to shift the infrastructure and manpower to location finalized by NHM.

3.5 Bid Processing Fee

- 1) **Bid Document Fee of Rs. 2000/-** and **Bid Processing Fee** of **Rs. 10000/-** (Rupees Ten Thousand only) in the form of DD in favour of "Mission Director, National Health Mission-Himachal Pradesh" payable at Shimla, should be deposited towards cost of tender document along with technical bid.
- 2) The Bid Document & Bid Processing fees shall be non-refundable
- 3) Proposals not accompanied by Bid Processing Fees shall be rejected.

3.6 Earnest Money Deposit (EMD)

- 1. Earnest Money Deposit Rs10 Lacs/- (Rs. Ten Lacs only) in the form of DD in favour of "Mission Director, National Health Mission-Himachal Pradesh." payable at Shimla
- 2. Proposals not accompanied by EMD shall be rejected.
- 3. The successful bidder's EMD shall be discharged / returned by the Authority only after the signing of the contract and submission and acceptance of performance security.
- 4. Unsuccessful bidder's EMD shall be discharged / refunded within 30 days after selection of successful bidder
- 5. The EMD shall be forfeited:
 - a) If a Bidder withdraws its bid during the period of Bid validity specified by the Bidder on the Bid Form
 - b) Or in case of a successful Bidder, if the Bidder fails to sign the Contract to furnish the performance security
- 6. The bidder is liable to pay liquidated damages and penalty imposed by the tender inviting

Authority in the event of non-fulfilment of any of the terms and conditions as per this RFP.

3.7 Pre-Bid Conference / RFP Clarification

A prospective bidder requiring any clarification of the bidding documents should submit their queries as indicated under section 1.5 "Bid Schedule" of this document.

3.8 Validity of Proposal

Proposals shall remain valid for a period of **180 days** (one hundreds eighty days) after the date of proposal opening prescribed in the RFP. A Proposal valid for shorter period may be rejected as non-responsive. Authority may solicit the bidders' consent to an extension of Proposal validity (but without any modification in Scope of Work).

3.9 Right of Authority

Authority reserves the right to accept or reject any proposal, and to annul the proposal process and reject all proposals at any time prior to award of contract, without thereby incurring any liability to the affected bidder(s) or any obligation to inform the affected bidder(s) of the grounds for such decision.

3.10 Preparation of Proposal

- 1. Bidder may choose to conduct a pre-feasibility study of various health centres for preparation of proposal (including the feasibility of required internet connectivity / bandwidth)
- 2. The Proposal and all associated correspondence shall be written in English and shall conform to prescribed formats.
- 3. The Proposal shall be typed & shall be initialled on all pages by authorized representative of the bidder to bind the bidder to the contract. The authorization shall be indicated by Power of Attorney and shall accompany the proposal.
- 4. Alteration or deletion of any part in the tender document is not permitted.
- 5. Bidder is required to submit the complete proposal along with required forms etc. The proposal shall be exactly according to the presented formats given in the RFP / tender documents. All columns of the prescribed formats should be filled, and all questions in the tender document must be answered. Any additional information should be enclosed separately and referred to in the relevant column in the proposal formats.
- 6. The technical response should be concise. Proposal responses not as per the specified format may be liable to be rejected
- 7. Committee may call the Bidders for detailed Technical presentations. All such shall be at the

cost of bidder

8. The EMD, Bid Document Fee and Bid Processing Fee should be submitted in an envelope with the technical bid and shall be marked as "EMD, Bid Document & Bid Processing Fee for selecting the Service Provider (SP)".

Envelopes should be addressed to:

Mission Director, National Health Mission, Shanti Bhawan, Phase-3 Setor-6, New Shimla (Kangna Dhar) Shimla, H.P.-171009

3.11 Bid Submission, Receipt & Opening of Proposal:

3.11.1. Sealing and Marking of Bids:

- a. The Bidder shall complete the Technical Bid and a Financial Bid furnished with this document giving details as per the format mentioned in the RFP/ Bid Document (on website www.nrhmhp.gov.in/www.hphealth.nic.in)
- b. Telex, e-mailed or facsimile bids will be rejected.
- 3.11.2. The Bidder's authorized representative shall sign an attendance register evidencing their attendance. In the event of the specified date of bid opening being declared holiday for the tendering Authority, the bid shall be opened at the appointed time and location on the next working day
- 3.11.3. Prices shall be quoted in Indian Rupees only in the prescribed formats (BOQ).

3.12 Performance Bank Guarantee

- i. The successful Bidder has to furnish a security deposit as guarantee of the performance of the contract
- ii. The firm/company whose bid is accepted shall deposit 10% of the amount of Contract Value as Performance Security/ Bank Guarantee. In case of additional work is allotted, the successful bidder has to deposit the additional Performance Security accordingly. The Performance Security shall be in the form of Bank Guarantee valid for a period of three (3) years from the date of actual start of operations.
- iii. The proceeds of the Performance Security/ Bank Guarantee shall be payable to Mission Director, National Health Mission,-Himachal Pradesh. as compensation for any loss resulting from the Service Provider's failure to complete its obligations under the Contract.

- iv. The Performance Security shall be denominated in Indian Rupees and shall be in the form of a Bank Guarantee (BG) issued by a nationalized / scheduled banks in India within 30 days of the receipt of notification of award from Authority.
- v. The successful bidder shall furnish the performance security in accordance with the conditions of the contract, in the performance security form provided in the bidding documents in the Performa prescribed in the tender document.
- vi. The Performance Security will be discharged by Mission Director, National Health Mission, Himachal Pradesh, and returned to the Bidder on completion of the bidder's performance under the contract.
- vii. In the event of any amendments in contract, the bidder shall furnish the amendment to the Performance Security within 21 days of receipt of such amendment communication from the Authority.
- viii. No interest shall be payable on the Performance Bank Guarantee amount. The Authority may invoke the above Bank Guarantee for any kind of recoveries.

3.13 Confidentiality

Information relating to the examination, clarification and comparison of the proposals shall not be disclosed to any bidders or any other persons not officially concerned with such process until the selection process is over. The undue use by any bidder of confidential information related to the process may result in rejection of its proposal. Except with the prior written consent of Authority, no party, shall, at any time communicate to any person or entity any confidential information acquired in the course of the Contract.

3.14 Disqualification

Authority may at its sole discretion and at any time during the evaluation of proposal, disqualify any bidder, if the bidder has:

- 1. Submitted the Proposal documents after the response deadline or with price adjustment / variation.
- 2. No Bidder shall submit more than one Bid for this RFP. A Bidder bidding individually, or as a member of a Consortium shall not be entitled to submit another bid (or) will not be allowed to be a part of a consortium with another entity for this RFP.
- 3. Proposals identified with false representations in the forms, statements and attachments submitted in proof of the eligibility requirements.
- 4. Proposals exhibited a record of poor performance such as doing abandon works, not properly

- completing the contractual responsibilities, inordinately delaying completion or financial failures, etc. in any project in the preceding three years.
- 5. Submitted a proposal that is not accompanied by required documentation or is non-responsive.
- 6. Failed to provide clarifications related thereto, when sought.
- 7. Been declared ineligible/ black listed by the Government of Himachal Pradesh & Govt. of India, or any of the PSU in the State & Centre Government, for corrupt and fraudulent practices or has been blacklisted.

4. Methodology & Criteria for Bid Evaluation

4.1 Evaluation of Technical Bid / Bid Evaluation Committee

- Authority shall form an Evaluation Committee, which shall evaluate the Technical Proposals
 / Bids submitted by the Bidders. During evaluation of proposals / Bids, Authority may, at its
 discretion, ask the bidders for clarification of their Technical Proposals and to provide live
 demonstration of the proposed solution.
- The Financial Bids of Bidders meeting the eligibility criteria shall be opened.
- The L-1 bidder shall be called for negotiation and contact shall be awarded to the L1- Bidder.

5. Payment Terms

- 5.1 The Service Provider shall be paid **at the end of each quarter** upon submission of invoice. The payment will be made as per the rates finalized (award of contract) to the Successful Bidder after adjustment of Penalties if any.
- 5.2 The Quarterly payments shall be made on the basis of Services / uptime of each Telemedicine Centre.

6. Service Level Agreement and Penalties

6.1 Service Level Agreement (SLA)

6.1.1 The purpose of this Service Level Agreement (SLA) is to define the levels of service which shall be provided by the Service Provider under the Telemedicine Services Programme for Himachal Pradesh, for the duration of the contract for providing Hardware, Software, Internet Connectivity, Medical Devices, Laboratory Equipments (with availability of reagents) Medical Consumables, Manpower Deployment, Electronic Medical Record, Dashboards / Reports, Training, Maintenance and Warranty support against the stated scope of work.

- 6.1.2 Mission Director, NHM, Himachal Pradesh shall regularly review the performance of the services being provided by the Service Provider as per Service Level Agreement. The Vendor shall have to make provision in the application itself to calculate uptime / Downtime.
 - "Uptime" shall mean the time period for which the specified services / components with specified technical and service standards are available to the Telemedicine Centre and users.
 - Uptime, in percentage, of any IT component can be calculated as: Uptime % = (uptime) / (Total Time) * 100
 - "Downtime" shall mean the time period for which the specified services / components with specified technical and service standards as per SLAs are not available to Telemedicine Centre and users.
 - "Incident" refers to any event / abnormalities in the functioning of specified services that may lead to disruption in normal operations.
 - "Resolution Time" shall mean the time taken (after the incident has been reported at the concerned reporting center), in resolving (diagnosing, troubleshooting and fixing) or escalating to (the second level, getting the confirmatory details about the same and conveying the same to the end user), the services related troubles during the first level escalation. The resolution time shall vary based on the severity of the incident reported.
 - The functionality for calculating the uptime and downtime as per the SLA should be made in the telemedicine application and access of Dashboard for monitoring purpose should be provided to the Authority.
- 6.1.3 **Backup Policy:** The service provider shall have a complete backup of all the data (EMR and other related data records) along with the VC recording for the complete duration of the project at a backup server and hand over the data to the Mission Director, NHM,-Himachal Pradesh, at the end of every year and at the end of project, the retrieval software (for data to be in readable and extractable format) for further usage.

6.2 Monitoring and Evaluation

- a) The performance will be periodically reviewed by Mission Director, NHM, Himachal Pradesh.
- b) The services and records of the service shall be subject to inspection by designated officers of NHM /Directorate of Health Services, Himachal Pradesh.
- c) Evaluation of performance may be undertaken by Mission Director, NHM, H.P.
- 6.2.1 Modifications in terms of reference including scope of the services can only be made by

written consent of both parties. However, basic conditions of the agreement shall not be modified.

6.3 Project Delays

The Vendor will have to strictly adhere to time lines mentioned in Section 2.5. Penalty of amount equal to Rs. 500/- per location for each day of delay shall be levied from the vendor in case of delays. These penalties will be deducted for up to a maximum of 45 days after which Mission Director, NHM, H.P. reserves the right to terminate the contract and shall forfeit the Performance Security / Bank Guarantee for breach of contract.

6.4 Equipment/Network/ Telemedicine System Failure

- The Service Provider shall ensure proper running of entire system at all the times. In the event
 of equipment/network/ telemedicine system failure, the Service provider shall be required to
 make alternate arrangements and ensure that the Telemedicine services are available at all the
 centres, uninterruptedly.
- No penalties will be charged for uptime of up to 95%. However, Service Provider should make best efforts to keep the network up and run for smooth functioning of services.
- For uptime of less than 95 % to 85 %, 10% of the operational cost for respective Telemedicine centres (for particular month) shall be deducted.
- For uptime less than 75 % to 65%, 20% of the operational cost for respective Telemedicine centres (for particular month) shall be deducted.
- For uptime less than 65 % to 50%, 30% of the operational cost for respective Telemedicine centres (for particular month) shall be deducted.
- For Less than 50 % uptime, no Operational cost shall be paid for particular month.
- In order to monitor & calculate uptime of each Telemedicine centre, real time access to system generated dashboards shall be provided by Service Provider to the Authority.

7. General Terms and Conditions

7.1 Application

These general conditions shall apply to the extent that provisions in other parts Contract do not supersede them. For interpretation of any clause in the RFP or Contract Agreement, the interpretation of the Authority shall be final and binding on the Total Service Provider.

7.2 Relationship between parties

Nothing mentioned herein shall be constructed as relationship of master and servant or of principal and agent as between the Authority and the Service Provider. The Service Provider subject to this contract for selection has complete charge of personnel performing the services under the Project from time to time. The Service Provider shall be fully responsible for the services performed by them or on their behalf hereunder. The Authority will allocate work/assignment to the Service Provider.

7.3 Standards of Performance

The Service Provider shall give the services and carry out their obligations under the Contract with due diligence, efficiency and economy in accordance with generally accepted professional standards and practices. The Service Provider shall always act in respect of any matter relating to this contract as faithful to the Authority. The Service Provider shall abide by all the provisions/Acts/Rules etc of information technology prevalent in the country. The Service Provider shall confirm to the standards laid down in RFP in totality.

7.4 Delivery and Documents

As per the time schedule agreed between parties for specific projects given to the Service Provider from time to time, the Service Provider shall submit all the deliverables on due date as per the delivery schedule. No party shall, without the other party's prior written consent, disclose contract, drawings, specifications, plan, pattern, samples or other documents to any person other than an entity employed by the affected party for the performance of the contract. In case of the termination of the contract, all the documents prepared by the Service Provider under this contract shall become joint property of Authority and Service Provider.

7.5 Service Provider Personnel

The Service Provider shall employ and provide such qualified and experienced personnel as may be required to perform the services under the specified project as assigned by the Authority. This is a specialized domain of 'e-health' and it is desirable from the Service Provider to deploy the personnel, who have adequate knowledge and experience in the domain related with this project. It is desirable that the Service Provider shall hire the services of domain specialists, if required, to work on the Project effectively.

7.6 Applicable Law

Applicable Law means the laws and any other instruments having the force of law in India as they may

be issued and in force from time to time. The contracts shall be interpreted in accordance with the laws of the Union of India and that of Himachal Pradesh.

7.7 Use of Contract Documents and Information

- 1) The service provider shall not, without prior written consent of the Authority, disclose the Contract, or any provision thereof, or any specification, plan, drawing, pattern, sample or information furnished by or on behalf in connection therewith, to any person other than a person employed by the service provider in performance of the Contract. Disclosure to any such employed person shall be made in confidence and shall extend only so far as may be necessary for purposes of such performance.
- 2) The service provider shall not, without prior written consent of the Authority, make use of any document or information except for purposes of performing the Contract.
- 3) Any document, other than the Contract itself, shall remain the property of the Authority and shall be returned (in all copies) to the Authority on completion of the service provider's performance under the Contract, if so required by Mission Director, NHM, Department of Health and Family Welfare H.P.
- 4) The service provider shall permit the Authority to inspect the service provider's accounts and records relating to the performance of the service provider and to have them audited by auditors appointed by the Authority, if so required by the Authority.

7.8 Governing Language

The Contract shall be written in English language. English version of the Contract shall govern its interpretation. All correspondence and other documents pertaining to the contract, which are exchanged between the parties, shall be written in the English language.

7.9 Sub Contracts

No Sub Contracting shall be allowed for this project.

7.10 Assignments

The Service Provider shall not assign the project to any other agency, in whole or in part, to perform its obligation under the Contract, without the prior written consent of the Authority.

7.11 Change Orders

The Authority may at any time, by written order given to the Service Provider make changes within the general scope of the Contract in any one or more of the following:

- i. The place of delivery; and/or the Services to be provided by the service provider.
- ii. The vendor should be ready to accommodate additional equipment/services at later stages. Additional cost for the same will be finalized mutually.

7.12 Termination

Under this Contract, the Authority may, by written notice terminate the Service Provider in the following ways:

- 1. Termination by Default for failing to perform obligations under the Contract if the quality is not up to the specification or in the event of non-adherence to time schedule.
- 2. Termination for Convenience: Authority by written notice sent to the service provider, may terminate the Contract, in whole or in part, at any time for its convenience. The notice of termination shall specify that termination is for Authority's convenience, the extent to which performance of the service provider under the Contract is terminated, and the date upon which such termination becomes effective and in such case their Performance Security shall be forfeited.
- 3. Any service that has been completed or rendered and within 30 days after the service provider's receipt of notice of termination shall be accepted by the Authority at the Contract terms and prices.
- 4. Termination for Insolvency: The Authority may at any time terminate the Contract by giving written notice to the service provider, if the service provider becomes bankrupt or otherwise insolvent. In this event, termination will be without compensation to the Supplier / service provider, provided that such termination will not prejudice or affect any right of action or remedy which has accrued or will accrue thereafter to the Authority.

In all the three cases termination shall be executed by giving written notice to the Service Provider. Upon termination of the contract, payment shall be made to the Service Provider for:

- 1) Services satisfactorily performed and reimbursable expenditures prior to the effective date of termination
- 2) Any expenditure actually and reasonably incurred prior to the effective date of Termination
- 3) No consequential damages shall be payable to the Service Provider in the event of such termination.

7.13 Force Majeure

Notwithstanding anything contained in the RFP, the Service Provider shall not be liable for liquidated damages or termination for default, if and to the extent that, it's delay in performance or other failures to perform its obligations under the agreement is the result of an event of Force Majeure. For purposes of this clause "Force Majeure" means an event beyond the control of the Service Provider and not involving the Total Service Provider's fault or negligence and which was

not foreseeable. Such events may include wars or revolutions, fires, floods, epidemics, quarantine restrictions and freight embargos. The decision of the Authority regarding Force Majeure shall be final and binding on the Total Service Provider.

If a Force Majeure situation arises, the Service Provider shall promptly notify the Authority in writing, of such conditions and the cause thereof. Unless otherwise directed by the Authority in writing, the Service Provider shall continue to perform its obligations under the agreement as far as reasonably practical, and shall seek all reasonable alternative means for performance not prevented by the Force Majeure event.

7.13.1 Payments in case of Force Majeure

During the period of their inability of services as a result of an event of Force Majeure, the Service Provider shall be entitled to continue to be paid under the terms of this contract, as well as to be reimbursed for additional costs reasonably and necessarily incurred by them during such period for the purpose of the services and in reactivating the service after the end of such period.

7.14 Resolution of Disputes

If any dispute arises between parties, then there would be two ways for resolution of the dispute under the Contract.

7.14.1 Amicable Settlement

Performance of the Contract is governed by the terms and conditions of the Contract, however at times dispute may arise about any interpretation of any term or condition of Contract including the scope of work, the clauses of payments etc. In such a situation either party of the contract may send a written notice of dispute to the other party. The party receiving the notice of dispute will consider the notice and respond to it in writing within 30 days after receipt. If that party fails to respond within 30 days, or the dispute cannot be amicably settled within 60 days following the response of that party, then Clause 7.14.2 for resolution of disputes shall become applicable.

7.14.2 Resolution of Disputes

In the case dispute arising between the Authority and the Service Provider, which has not been settled amicably, any party can refer to Secretary (Law) to the Government of Himachal Pradesh who will act as the Sole Arbitrator.

7.15 Taxes and Duties

The Service Provider shall fully familiarize themselves about the applicable indirect taxes (such as VAT, Sales Tax, Service Tax, GST, duties, fees, levies, etc.) on amount payable by Authority under

the contract. The Service Provider and personnel shall pay such indirect tax, duties, fees and other impositions (wherever applicable) levied under the applicable law. The TDS shall be deducted on the amount payable to the Service provider as per Income Tax Act-1961

7.16 Legal Jurisdiction

All legal disputes between the parties shall be subject to the jurisdiction of the Courts situated at Shimla, Himachal Pradesh only

7.17 Binding Clause

All decisions taken by the Authority regarding the processing of this tender and award of contract shall be final and binding on all parties concerned.

7.18 Notice

Any notice, request or consent required or permitted to be given or made pursuant to this contract shall be in writing. Any such notice request or consent shall be deemed to have been given or made when delivered in person to an authorized representative of the party to whom the communication is addressed, or when sent to such party at the address mentioned in the project specific Contract Agreement.

ANNEXURES

Date: Tender No.:	Annexure-1 Bid	<u>Proposal Form</u>	
To Sir / Madam			
which is hereby duly acknow	vledged. We, the under ele-Health Services ir	g Addendums (insert numbers, if rsigned, offer to provide service n Himachal Pradesh, in confor Fechnical and Financial bid.	es for the operations,
delivery schedule, which sha is given to us. If our bid is accepted, we so contracted value / as per hundred and eighty only) da	hall be specified in the hall obtain the Bank RFP Document. We asys after the date fixed	services in accordance with the Contract Document to be signed. Guarantee from a bank equivariagree to abide by this bid for a for bid opening as mentioned up may be accepted at any time be	d if the work order alent to 10 % of the period of 180 (One nder the Instruction
We understand that you are r	not bound to accept the	lowest or any bid you may rece	ive.
Dated this	_ day of	20	
Signature (in the capacity of)			
Duly authorized to sign Bid t	for and on behalf of		

Annexure 2: Particulars of Bidding Organizations

In the case of a bidding consortium, this form needs to be submitted for each member of the Consortium/ Joint Venture

	der for Selection of Service provider for the Setup	
	agement of Telemedicine Services programme, at Selected	50 Sub Centres & existing 25
Tele	medicine Centres.	
1	Name and full address of the firm/ Company/ Organization	
	Details of Registered Office	
	Address	
2	Telephone No(s)	
	Fax No(s)	
	E-mail address	
	Company website	
3	Income Tax Registration number. (PAN)	
4	Service Tax Registration No.	
5	Years of operations in India	
6	Whether Public Limited Company or Private Limited	
	Company or any other entity (Give details)	
7	In case of a company, details of Director, Managing	
	Director etc and their Share holding and their respective	
	liabilities in carrying this tender and discharge of	
	subsequent	
8	Does the company have an office in Himachal Pradesh? If	
	so, provide address of the office and details of the	
	activities conducted in the office	
9	Name and addresses and designation of the persons who	
	will represent the Bidder while dealing with DHFW (only	
	required for the lead bidder). (Attach letter of authority)	
1.0		
10	Has the company been blacklisted by any state or central	
1.1	government entity, including PSUs.	
11	Details of service / support network and infrastructure	
	available in India. (If Any)	
Note	e: Above details are mandatory, Bidder may use additional she	ets for above submittals.
	(Authorised Signatory)	
	Name:	
	Designation & Authority:	
	Place:	
	Date:	
	Stamp:	
	Company Name:	
	Business Address:	

Annexure 3: Performance Bank Guarantee

To: Mission Director, National Health Mission, Shanti Bhawan, Phase-3 Sector-6 Kangna Dhar, New Shimla, Himachal Pradesh-171009 WHEREAS (Name of Service provider) hereinafter called "Service Provider" has undertaken, in pursuance of Contract No._____ dated 20 ______ to render services for setting up Operations & Management of the Telemedicine Services in Himachal Pradesh for the Government of Himachal Pradesh as per the terms and condition of the RFP Document dated_____. AND WHEREAS it has been stipulated by you in the said Contract that the Service Provider shall furnish a Bank Guarantee from a Nationalized Bank / any scheduled bank in India for the sum specified therein as security for compliance with the Supplier / service provider's performance obligations in accordance with the Contract. AND WHEREAS we have agreed to give the Supplier / service provider a Guarantee: WE, THEREFORE, hereby affirm that we are Guarantors and responsible to you, on behalf of the service provider, up to a total of Rs ----- and we undertake to pay you, upon your first written demand declaring the service provider to be in default under the Contract and without civil or arguments, any sum or sums within the limit of Rs ----- (Amount of Guarantee) as aforesaid, without your need to prove or to show grounds or reasons for your demand of the sum specified therein. This guarantee is valid until the ______day of _____ Signature and Seal of Guarantors Date & Address:

Annexure 4: Past Experience

For each project being shown as relevant past experience of providing services being described in the document, please provide a profile based on the following template. Please provide only broad details of the projects.

S.No	Information Sought	Details
Customer	· Information	•
1	Customer Name	
	Name of the contact person from the client orga	nization
	who can act as a reference with contact coordina	tes
	Name	
	Designation	
2	Address	
	Phone Number	
	Mobile Number	
	Email ID	
Project De	etails	1
3	Project Title	
4	Start Date / End Date	
5	Current Status (In Progress / Completed)	
6	Number of responding firm's staff deploye	d on this
	project (peak time)	
Value o	of the	
Project		
7	Order value of the project (in rupees lakhs)	
'	order value of the project (in rupees takins)	
0	N. d. 1 d. CD	
8	Narrative description of Project:	1 ' 4
	(Highlight the components / services involved)	
	project that are of similar nature to the pr	oject for
	which this Tender is floated	
9	Description of actual services provi	ided by
	the responding firm within the project	
	relevance to the envisaged components	
	involved in the project for which this RFP is fl	
	T J	
10	Description of the key areas	where
	significant contributions are made for the succ	ess of the
	project	
11	Order Copies & Performance Certificate	received
	from Client is attached with this statement	
L		

Annexure 5: Key Personnel

Part1:

Using the format below, please provide the summary information on the profiles you propose to include for evaluation and the roles they are expected to play in the project:

S.No.	Proposed Role	No. of Resources	Area of Expertise	Key Responsibilities

Part 2: CV for Professional Staff Proposed

Please provide detailed professional profiles of the staff proposed for evaluation. The profile for a single staff member must not exceed two pages.

S. No	Description	Details					
1	Name						
2	Designation						
2 3	Role proposed for						
4	Current responsibilities in the responding firm						
5	Total years of relevant experience						
6	Years of experience with the responding firm						
7	Educational qualifications:						
	Degree						
	Academic institution graduated From						
	Year of Graduation						
	Specialization (if any)						
8	Professional Certifications (if any)						
9	Professional Experience details (project-wise):						
	Project name						
	Client						
	Key project features in brief						
	Location of the project						
	Designation						
	Role						
	Responsibilities and activities						
	Duration of the project						
10	Covering Letter: Summary of the Individual's experience which has direct relevance to the project (maximum 1 page)						

Each CV must be accompanied by the following undertaking from the staff member:

Certification

I, the undersigned, certify that to the best of my knowledge and belief, this CV correctly describes me, my qualifications, and my experience. I understand that any wilful misstatement described herein may lead to my disqualification or dismissal, if engaged.

[Signature of staff member]	
Date:	
(Authorized Signatory)	
Name:	
Designation & Authority:	
Place:	
Date:	
Stamp:	
Company Name:	_
Business Address:	

Annexure 6: Financial Bid

Tender	Inviting Authority:	
Name	of Work:	
Bidder	Name:	
Sr.No	. Item Description	Monthly Operational Cost per Sub- Centre / Health Facility
1	Operational Cost - For the Operations, & Management of each Telemedicine Centre (Without Taxes)	

Note: All the costs which include capital investment on account of setting up of Telemedicine Centre (providing IT Hardware, Telemedicine Software, Medical Equipment / Lab Equipments (with reccuring cost of reagents) and internet connectivity) should be taken into consideration for the calculation of Operations & Management charges of Telemedicine centres/ per month. The cost of required internet connectivity / band width after conducting the feasibility study should be included in the financial proposal by the Bidders accordingly.

^{*}Service tax will be paid as per the prevailing rates from time to time.

Annexure 7: Request for Clarification

Bidder's Request for Clarification							
Name of Organization submitting request		Name & position of person submitting request	Address of organization including phone, fax, email points of contact				
			Tel: Fax: E-mail:				
S No	Pidding Dogument	Content of DED requiring	Daints of Clarification				
S.No.	Bidding Document Reference (Clause /Page)	Content of RFP requiring clarification	Points of Clarification required				
1							
2							
3							
4							

Annexure 8: Tele-Lab Equipments for conducting Tests

List of equipment using POC Kits for Tele Laboratory which are to be provided by the bidders on each Telemedicine Centre for the following laboratory tests

- 1. Hb
- 2. Blood Sugar
- 3. Urine RE/ ME
- 4 STS
- 5. HIV
- 6. Malarial Parasite

*Note: The above list is an indicative list of tests, and the bidders are encouraged to add any other tests and devices under Tele-laboratory. <u>The cost of reagents for conducting Laboratory tests shall be borne by the Bidder / Service Provider.</u>

Annexure 9: IT Equipment

List of IT equipment proposed to be provided by the Bidders in each Telemedicine Centre:

S.NO	Hardware Description	Quantity per Telemedicine Centre
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		

*Note: The bidder is required to provide the quantity of equipment as per the requirements. All the proposed equipments should be functional / covered under AMC during the period of Project.

<u>Annexure 10: IT Equipment available on existing 25 Telemedicine Centres & 5 Sub-Centres</u>

Computer Hardware & Medical Equipment available in existing 25 Telemedicine Centres and 5 Sub-Centres Name of Block District Description of Functional Rema S.N Quantity Telemedici Computer Hardware, /Telemedi Status rks O. ne Centre Peripheral Devices & cine (Functiona **Medical Equipments** Centre 1 / Out of Order) Laptop, Printer, HD-1 Tissa Tissa Chamba Web 1 Each Functional Cam, Speaker, Mike Laptop, Printer, HD-2 Chamba Web Functional Dalhausi Samote 1 Each Cam, Speaker, Mike Laptop, Printer, HD-3 Chowari Samote Chamba Web 1 Each Functional Cam, Speaker, Mike Laptop, Printer, HD-Bharmo 4 Bharmaur Chamba Web 1 Each Functional Cam, Speaker, Mike Laptop, Printer, HD-Bharmo 5 Holi Chamba Web 1 Each Functional Cam, Speaker, Mike Laptop, Printer, HD-6 Kihar Kihar Chamba Web 1 Each Functional Cam, Speaker, Mike Laptop, Printer, HD-7 Choori Choori Chamba Web Functional 1 Each Cam, Speaker, Mike Laptop, Printer, HD-Web 8 Salooni Kihar Chamba 1 Each Functional Cam, Speaker, Mike Laptop, Printer, HD-9 Sahoo Pukhri Chamba Web 1 Each Functional Cam, Speaker, Mike Laptop, Printer, HD-Pukhri Chamba 1 Each Functional 10 Pukhri Web Cam, Speaker, Mike Laptop, Printer, HD-Web 1 Each 11 Banikhet Samote Chamba Functional Cam, Speaker, Mike Laptop, Printer, HD-12 Sarahan Pachhad Sirmour Web 1 Each Functional Cam, Speaker, Mike Laptop, Printer, HD-13 Dadahu Sangrah Sirmour Web 1 Each Functional Cam, Speaker, Mike

14	Sangrah	Sangrah	Sirmour	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
15	Shillai	Shillai	Sirmour	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
16	Rajpura	Rajpura	Sirmour	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
17	Jamta	Jamta	Sirmour	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
18	Noaradhar	Sangrah	Sirmour	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
19	Haripurdha r	Sangrah	Sirmour	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
20	Nerwa	Nerwa	Shimla	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
21	Tikker	Tikker	Shimla	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
22	Dodrakwar	Chirgao n	Shimla	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
23	Nankhari	Nankhar i	Shimla	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
24	Chirgaon	Chirgao n	Shimla	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
25	Kumarsain	Kumars ain	Shimla	Laptop,Printer,HD- Web Cam,Speaker,Mike	1 Each	Functional	
26	Dharwatha ch	Jhanjelli	Mandi	Laptop,Printer,HD- Web Cam,Speaker,Jio- Dongle,Glucometer, Glucometer srips- 100),BP Appratus,Pulse Oxymeter,Stethoscop	1 Each	Functional	Prese ntly Hard ware in 5 Sub- Centr es provi
27	Ser Tandula	Sangrah	Sirmour	Laptop,Printer,HD-Web Cam,Speaker,Jio-Dongle,Glucometer, Glucometer srips- 100),BP Appratus,Pulse Oxymeter,Stethoscop e	1 Each	Functional	ded on replac ement basis. New Comp uter Hard

28	Bharari	Sangrah	Sirmour	Laptop,Printer,HD-Web Cam,Speaker,Jio-Dongle,Glucometer, Glucometer srips- 100),BP Appratus,Pulse Oxymeter,Stethoscop e	1 Each	Functional	ware to be provi ded by the imple menti ng agenc
29	Gumat	Shillai	Sirmour	Laptop,Printer,HD-Web Cam,Speaker,Jio-Dongle,Glucometer, Glucometer srips- 100),BP Appratus,Pulse Oxymeter,Stethoscop e	1 Each	Functional	у.
30	Kotapav	Shillai	Sirmour	Laptop,Printer,HD-Web Cam,Speaker,Jio-Dongle,Glucometer, Glucometer srips- 100),BP Appratus,Pulse Oxymeter,Stethoscop e	1 Each	Functional	

^{*} All laptop are same with make & model no -Lenevo B40

Note: The Bidder shall be allowed to use the existing hardware (available in working condition) on 25 Telemedicine centres. If the hardware is outdated or non-functional, bidder shall provide the required hardware on each location accordingly as per the implementation mythology and the Operational Cost per health facility should be worked accordingly.

^{*} All printer are same with make & model no –Richo P111