

Selection of Consultant – Firm [Quality and Cost Based Selection (QCBS)]

FOR

**Project Management Technical Support Agency (PMTA) under Mizoram Health Systems
Strengthening Project (MHSSP)
(Without e-Procurement)**

**Minutes of Pre-Proposal Conference for Selection and Employment of Project Management
Technical Support Agency (PMTA)**

Date: 5 January 2021

With reference to the above, the proposals were invited for “Selection and Employment of Project Management Technical Support Agency (PMTA) of Mizoram Health Systems Strengthening Project (MHSSP)”

Ref No:IN-DOHFW-202185-CS

The Pre-Bid meeting was virtually held on scheduled date i.e. 5 January 2021 at 14:00 hrs as per below link:

Zoom Meeting Link –

<https://us05web.zoom.us/j/85288433125?pwd=MVg4M1hZK2lzR3ZOOUi0ZiNuQk1UT09>

Meeting ID: 852 8843 3125

Passcode: fdRh4P

A) Officers present from MHSSP, Department of Health and Family Welfare:

- 1) Dr Lalnuntluangi, Deputy Project Director, WB-MHSSP
- 2) Dr Vanlalchhuangi, Procurement Expert, WB-MHSSP

B) Consultant’s Representative present:

- 1) Kapil Dev Singh – IQVIA
- 2) Gaurav Agarwal – IQVIA
- 3) VinayakSarolia, IQVIA
- 4) Chander Pal Thakur, IQVIA
- 5) Himanshu Sikka, Practice Lead - Health, IPE Global
- 6) Rohan Krishna, Ecorys
- 7) AaliSinha, , IPE Global
- 8) AshishJaiswal,SRIT India Pvt Ltd.
- 9) LipsaNayak , MedicaSynergiePvt Ltd
- 10) Dr Vijay P V , Integra-ventures.com
- 11) Akanksha Jaiswal, Tattva Foundation

List of queries raised and clarifications of the same is attached as **Annexure-1** and amendment to be issued is attached as **Amendment- 1**.

Enclosure: As mentioned above

Project Director,
MHSSP,

Department of Health and Family Welfare
Aizawl, Mizoram, ***Pin-796009***

Annex 1

Queries raised by the bidders in Pre-Proposal Conference for “Selection and Employment of Project Management Technical Support Agency (PMTA) under Mizoram Health System Strengthening Project (MHSSP)” held on 5th January 2021

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
1	Page Number(s): 76 & 78 Section 7 Terms of reference	Domain 2: Health facility assessment, developing BOQ, construction supervision and management. This will include support for the assessment of health infrastructure, develop revamping plan along with BOQs and provide monitoring support of construction work.	<ol style="list-style-type: none"> 1. We request Authority to confirm how many such Health facility should be undertaken for the purpose of developing BOQ and construction Supervision. Along with the number of these facilities request you to kindly state the current status of each of these facilities to assess the amount of work. 2. Is this activity to be under taken for all: The project will invest in infrastructure development in 2 ANM schools, 2GNM schools, 1 college of nursing, 5 under- construction nursing schools (3 GNM & 2 ANM). 3. What is the status of each of the 5 under-construction nursing schools? 4. 1 State and 3 district warehouse, 10 District Hospitals, 2 Sub-Divisional Hospitals and 7 Community Health Centres, in case the extra staff is required to undertake for aforementioned activities, at what rate Authority shall reimburse. 5. Whether these facilities already exist? If yes, which facilities are green fields projects and which facilities need up-gradation (brown fields) and to what extent would such up-gradation be required? 	<p>1-4)DH-9, SHD-2, CHC-9, PHC-39, SC - 20</p> <p>ANM-2, GNM- 2, B.Sc (Nursing)-1</p> <p>Under – Construction status: ANM (Aizwal)- 80% completed ANM(Mamit)- On-going GNM(Serchhip)-90% completed.</p> <p>The remaining 2 GNM schools’ construction is yet to be started. The consultant along with PMU can decide during the implementation to include that in the scope.</p>

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			<p>6. In case of greenfield facilities, what is the status of land acquisition?</p> <p>7. What is the location of each of the listed facilities?</p> <p>8. An area wise break up for each facility would be essential to understand the extent of physical development of different items of the project.</p> <p>9. If some facilities already exist, which facilities will be green field and which will be brown field?</p> <p>10. What approximate sizes/areas envisaged for each of these facilities? For example, what would be the intake capacity of the ANMs or the GNMs or the District Hospitals?</p> <p>11. Additionally, what could be the exact area requirement of each of these facilities?</p>	<p>5.) All facilities exist. All hospitals need upgradation.</p> <p>6.) No land acquisition required.</p> <p>The consulting firm will not undertake any construction activity. It will facilitate development of requirements and advertisement and monitor the progress of work.</p> <p>7.) Kindly access at Hyperlink¹ of Department of Health and Family Welfare, Government of Mizoram.</p> <p>8 -11.) Most of the works are rehabilitation, repair, and not complex. The requirement for each facility may have common requirements and variable</p>

¹<https://health.mizoram.gov.in/uploads/attachments/cb615dd812979015cbd80c5542498e9e/health-map.pdf>

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				<p>requirements. The common requirements may be standardised to prepare the estimated cost. The estimate needs to be prepared based on the applicable Schedule of Rates (SR).</p> <p>Consultant has to propose based on the functional requirement and intake capacity, existing areas and the gaps therein.</p> <p>The intake capacity of all Nursing schools is 20 seats.</p>
2	<p>Page Number(s): 80-83</p> <p>Section 7 Terms of reference Domain 2</p>		<p>If a contour map of a representative district hospital is provided, it would go a long way in calculating the work load for the consultant under Domain 2 of the assignment.</p>	<p>Readymade contour maps are not available with the department</p>
3	<p>Page Number(s): 80-83</p> <p>Section 7 Terms of reference Domain 2</p>		<p>A sub-soil investigation report and contour survey are a must prior to preparing the architectural/structural drawings for these facilities. Whether sub-soil investigation & contour survey for each of the land parcels to be carried out by the State Government or will it be the responsibility of the consultant?</p>	<p>By the consultant</p>
4	<p>Page Number(s):: 80-83</p> <p>Section 7 Terms of reference</p>		<p>Whether the architectural & design consultancy is to be carried out at one go for these facilities or whether the State Government has a phase wise plan for rolling out the preparatory work for these facilities? If there is a phase wise plan, could you</p>	<p>In phased manner. This will be taken up as per the Procurement plan of the department. The DHFW, Government of Mizoram will share details of planned facilities (annually) by providing</p>

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	Domain 2		please share the same?	reasonable time for preparation of these designs.
5	Page Number(s):: 80-83 Section 7 Terms of reference Domain 2		To undertake the construction supervisory work, the RFP mentions visit of two engineers once every fortnight to each site of work. Would this mean placement of site engineers in Mizoram during construction phase/s of the facilities?	Yes, the site engineers are same as field supervision Engineers [Supervision Engineers – Civil (3) and Electrical Engineers – (1)]. These will be allocated sites for supervision by Hospital Design and Development Expert in consultation with PMU, MHSSP. <i>Kindy refer to Amendment Serial Numbers: 1, 3 and 4.</i>
6	Page Number(s): 80-83 Section 7 Terms of reference Domain 2		The payment structure is not in sync with the workload of the consultant under Domain 2 of the assignment. Request the client to consider making milestone payments with respect to this domain of the assignment since this part has typical milestone delivery as per the RFP. As a matter of fact, the RFP mentions achievement of specific milestones from D2.1.1 till D2.1.9 and D2.2.1 till D2.2.8 which can not be compared with a monthly payment mechanism. Monthly payment mechanism under Domain2 will relate to a minor aspect of the workload concerning the supervision of construction work only.	Kindly note that the payments are quarterly for time based in puts. Depending upon the consolidated inputs from all domains, the consultant may raise Invoice for the previous quarter. This will automatically take care of proportional inputs spread throughout the payment period from all domains.
7	Page Number(s): 76 Section 7 Terms of reference	Domain 4: Developing a complete Enterprise Resource Planning (ERP) solution for health insurance schemes. The firm will be responsible for	<ol style="list-style-type: none"> Who shall own the proprietary rights of the ERP solution developed by the consultant. We understand that the Authority shall bear all the cost related to development, maintenance and handing over the ERP solution. 	<ol style="list-style-type: none"> Propriety rights shall be owned by the Government/Authority As per GCC 27 Proprietary Rights of the Client in Reports and Records, GCC 27.1 and GCC 27 and SCC 27.1 clearly defines the rights of ERP

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		developing the policy options and appropriate platform for ERP solution based integration of state and national insurance schemes	<ol style="list-style-type: none"> 3. Who shall be responsible for maintenance of the ERP solution? 4. Is it required to be developed a new software or an existing solution may also be customized on licence basis (cost of license to be born by Authority) 5. Implementation shall be Cloud based or Departmental Data Center 6. What shall be provision on connectivity part 7. Whether the DC-DR implementation is to be done or Single Instance shall be operative 8. Approx number of Hospitals, where Hospital Information System shall be operative 9. Financial Management System shall be bank based or any Treasury interface is to be incorporated 10. How many locations and how many batches of the Training is to be delivered 11. Whether the Infra for training shall be provided by the Department or not 12. The costs of the team engaged to develop the IT application suite is to be provided in the financial proposal or would be provided 	<ol style="list-style-type: none"> solution is with the Client including the source code. 2. Yes. Please incorporate in the appropriate Fin Forms. 3. The service provider during the tenure of the service agreement; thereafter it will be taken over by the Authority 4. Options to be provided by the Service Provider with pros and cons and clear recommendations for the Authority to take informed decision in this regard. 5. Preferably Department data center, but options to be provided by the Service Provider with pros and cons and clear recommendations for the Authority to take informed decision in this regard. 6. Authorities will ensure. 7. The scope of work is limited to development and support implementation. 8. The no. of empaneled hospitals in the state insurance scheme are 42 (all outside state) and 103 under PMJAY (89 public and 14 private). 9. Bank-based with no treasury interface 10. SHA to give the details 11. By the Department 12. To be provided in the financial proposal

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		a. Develop an integrated IT application suite covering the following modules b. D4.2.3 Training of staff at the state and district levels in use of the ERP solution □ □	additionally later? 13. Is the training cost at state and district level to be included in the financial proposal or would be additionally provided later? If to be included in the financial proposal, would the cost be limited to the cost of the trainer and her/his fee/travel costs or entire cost of venue, hospitality during training, training materials, equipment hiring, per-diem to trainees, travel costs to trainees?	13. Training costs to be provided by the Consultant and limited to cost of personnel, TA and materials from the Consultant. All other logistic and participants costs to be borne by the Authority.
8	Page Number(s): 76 Section 7 Terms of reference	Domain 6: Technical support for capacity building across project components and training of Village Health, Sanitation and Nutrition Committees (VHSNC) in selected districts. support Training of VHSNCs for improving the enrolment, coverage and utilization under the health insurance programs. a. D6.1.2 Develop or adapt the training package informed through a formative research in the pilot area. b. D6.1.3 Pre-testing of package with target	Please clarify how many such trainings are envisaged and in how many villages. Also, suggest how many rounds of communication strategy would be required in 5 years. Request you to kindly elaborate on the kind of implementation support required wrt health insurance domain. Are the costs of formative research to be included in the financial proposal or would be provided additionally later? In case it is to be provided in the financial proposal, what is the envisaged sample size of the same? Are the costs of D.6.1.3, D.6.1.4 and D.6.1.5 to be included in the financial proposal or would be provided additionally later?	Trainings will be conducted in villages of two districts – Kolasib and Lawngtlai. Consultant to provide training design and complete strategy. Consultant to provide detailed design of complete communication strategy. Implementation support is the provision of handholding support to the state to integrate the process beyond 5 years timespan. Yes, the cost of formative research will be included in the financial proposal. Costs to be included in the current financial proposal. The expectation from the agency is to provide final content and design of tools. Post the finalization, the art works and finalized copies in ready-to-print formats

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		<p>audiences.</p> <p>c. D6.1.4 Designing and printing the finalized tools for the roll-out.</p> <p>d. D6.1.5 Development of e-modules/ videos for training.</p>		(pdf and open files of design) to be submitted to government.
9	Page Number(s): 77 Section 7 Terms of reference	It is mentioned under D1.1.2 Technical and management support to the PMU- D1.1.2.1 Review documents submitted by each cell of the PMU and World Bank.	<p>How many cells are operational in PMU</p> <p>What is the current structure and human resources of the PMU and what is the envisaged structure and human resources that would be supported and whose capacity development would be undertaken for transfer of knowledge throughout the tenure of the assignment?</p>	<i>Kindy refer to Amendment Serial Number: 2</i>
10	Page Number(s): 92 Section 7 Terms of reference	K-7 The field supervision team should be Civil and Electrical engineers with at least three years" experience in the hospital infrastructure strengthening. The firm is encouraged to have field supervision team, who are well versed in similar terrain and situation	<p>The scope of work given under D.2.1, D2.2 & D.2.3 requires team of soil testing experts, structural engineers, civil engineers, architects, draftsmen, MEP engineers, interior designers, bio-medical engineers, costing experts.</p> <p>Are the costs of these teams to be included in the financial proposal or will be determined later and funded additionally?</p>	<p>All costs associated with assessing, planning, designing and estimating the development of the infrastructure as indicated in D2 including costs of experts (as required) and preliminary testing (if any) to be done are to be included in the Financial Proposal as per the SoW defined in D 2.1 and D 2.2</p> <p><i>Kindy refer to Amendment Serial Number: 3 and 4</i></p>
11	Page Number(s): 85-87 Section 7 Terms of reference	Domain 5: Developing and rollout of communication strategy for increasing demand for services under the insurance schemes. □	a. Is the cost of RA KAP to be included in the financial proposal or would be provided additionally later? In case it is to be provided in the financial proposal, what is the envisaged sample size of the RA?	a. Yes, the cost of RA KAP to be included in the financial proposal. The agency needs to develop a robust SBCC strategy and include the sample size for RA at 2 selected districts of

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		<p>a. D5.1.1 Undertake a rapid KAP assessment <input type="checkbox"/></p> <p>b. The materials development process to include: <input type="checkbox"/></p> <p>D5.2.2 Developing communication materials including IEC materials as per the field analysis and project requirement and with inputs from relevant stakeholders. <input type="checkbox"/></p> <p>D5.2.3 Pre-testing of messages, tools and materials for different media/ target audience, with selected audience. <input type="checkbox"/></p> <p>c. D5.3 Support the State to roll-out the communication strategy in targeted areas: This will include: D5.3.1 Training of the relevant staff/consultants/master trainers at the state, district and sub-district level on the tools.</p> <p>d. D5.4.2 Undertake midline and endline KAP assessment in targeted areas.</p>	<p>b. Are the costs of development of communication materials and their pre-testing and finalisation to be included in the financial proposal or would be provided additionally later?</p> <p>c. Are the costs of training at state, district and sub-district levels to be included in the financial proposal or would be provided additionally later? If to be included in the financial proposal, would the cost be limited to the cost of the trainer and her/his fee/travel costs or entire cost of venue, hospitality during training, training materials, equipment hiring, per-diem to trainees, travel costs to trainees?</p> <p>d. Are the costs of midline and endline KAP assessment to be included in the financial proposal or would be provided additionally later? In case it is to be provided in the financial proposal, what is the envisaged sample size of the same?</p>	<p>Kolasib and Lawngtlai.</p> <p>b. The costs of development of communication material as required for pre-testing to be included in the proposal. Post the finalization, the art works and finalized copies in ready-to-print formats (pdf and open files of design) to be submitted to government.</p> <p>c. The proposal will include all costs of trainings at state, district and sub-district level. The training costs will be inclusive of all fees/ travel costs, training materials, travel and perdiems cost of trainees too.</p> <p>d. The midline and end-line costs are to be included in the financial proposal as per the SBCC strategy developed by the agency.</p>

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12	Page Number(s): 92 Section 7 Terms of reference Team Composition & Qualification Requirements for the Key Experts - Terms of Reference (Section 7)	Hospital Design and Development Expert Minimum Qualification and Desired Professional Experience Degree not less than B. Arch/B. Tech/ B.E and having sound knowledge of hospital infrastructure redesigning and strengthening The field supervision team should be Civil and Electrical engineers with at least three years" experience in the hospital infrastructure strengthening. The firm is encouraged to have field supervision team, who are well versed in similar terrain and situation.	1. We understand that the field supervision team of non-key experts- Civil and Electrical engineers will be required along with the Hospital Design and Development expert. Please confirm how the payment for extra resources shall be made The number of personnel required in the field supervision team is not given. Please clarify. Also suggest if the field staff can be hired on need basis during the course of the project as they are not required full time for the project. We understand that person months for supervision team would fall under category non key expert (NK-10) which is 12 person months as specified on page 96. Please confirm.	1. The field supervision team [Health Facility Development Supervision Engineers – Civil (3) and Electrical Engineers – (1) [mentioned in the Non – Key experts NK10 and NK11 respectively] reports to K7: Hospital Design and Development Expert], as specified in the RFP and will not be required full time. The work of the supervisors will start only after award of contact to the selected contactors and with approval from the project director. The payment for all the non key experts will be made on the basis of time spend/ need based and on receipt of their field observation reports. Added the non – experts NK10 and NK11 of 60 man months added for supervision team 30 months was kept as buffer and unforeseen requirements <i>Kindy refer to Amendment Serial Number: 3 &4</i>
13	Page Number(s): 96 Section 7 Terms of reference	Additionally, the consultant shall provide the rates for the above-mentioned experts in three levels – Senior as per the above	Which rate will be used for the purpose of calculating the proposed budget of the bidder?	<i>Kindy refer to Amendment Serial Number: 5</i>

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		qualification, mid-level as per same qualification but lesser experience and junior level with lower qualification and experience from the same area of discipline.		
14	Page Number(s): 96 Section 7 Terms of reference	While evaluating Technical proposals, CVs of the Key Experts proposed by the Consultant for the non-key position will be not be evaluated. But the selected agency will be expected to deploy the experts as per indicative qualification and experience specified for each position in the above table. Additionally, the consultant shall provide the rates for the above-mentioned experts in three levels – Senior as per the above qualification, mid-level as per same qualification but lesser experience and junior level with lower qualification and experience from the same area of discipline.	Does it mean that we have to provide budget for non-key position too?	Yes. The proposal price includes both key and non – experts. Kindly refer to FORM FIN-3 BREAKDOWN OF REMUNERATION
15	Page Number(s): 32 & 34	Data Sheet Point 6.1 a. The number members in the consortium shall not	These two points are seemingly contradictory. Please clarify which is applicable	<i>Kindy refer to Amendment Serial Number: 6</i>

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	Section 2 Data Sheet	<p>be more than 4 (Four) including the lead consulting firm. <input type="checkbox"/></p> <p>b. Consortium agreement between the consortium members shall have to be attached along with the RFP document, clearly stating the lead agency, specific role and contributions of each consortium member, and member coordination mechanisms. <input type="checkbox"/></p> <p>Data Sheet 14.1.1 Shortlisted Consultants may associate with</p> <p>(a) non-shortlisted consultant(s): No</p> <p>Or</p> <p>(b) other shortlisted Consultants: No</p>		
16	Page Number(s): 35 Section 2 Data Sheet	Datasheet 17.1 & 17.4	Proposal submission is to be done online. In this case, is it still required to submit the technical proposal as one original and one copy as per data sheet 17.4?	<i>Kindy refer to Amendment Serial Number: 7</i>
17	Page Number(s): 36-38	Datasheet 21.1	How is “relevant experience in the region” defined for the key experts as per data sheet 21.1?	Based on the details and supporting documents on <i>working level fluency in</i>

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	Section 2 Data Sheet			<p><i>local language(s)/knowledge of local culture or administrative system, government organization, etc</i></p> <p>Relevant experience in the North East Region to include the states of Arunachal Pradesh, Assam, Meghalaya, Mizoram, Manipur, Nagaland, Tripura and Sikkim.</p>
18	Page Number(s): 37-38 Data Sheet Instruction to Consultants (Section 2)	21.1 (B) The number of points to be assigned to each of the above positions (K-1 to K-6) shall be determined considering the following three sub-criteria and relevant percentage weights: a. General qualifications (general education, training, and experience): 20% b. Adequacy for the Assignment (relevant education, training, experience in the sector/similar assignments): 50% c. Relevant experience in the region (working level fluency in local language(s)/knowledge of local culture or administrative system, government organization, etc.): 30%	<p>We understand that the position K-1 to K-6 shall be determined considering the following three sub criteria and relevant percentage weights. Please clarify how the other three i.e K-7 to K-9 will be determined.</p> <p>Sub criteria a. and b. of 21.1 (B) for evaluation of key experts define similar parameters in terms of education, training and experience. Please clarify the difference between 21.1 (B) a. and 21.1 (B) b.</p>	<p>21.1 (B) a. is General Education and Training</p> <p>21.1 (B) b is relevant education and specific experience to the assignment.</p> <p>Number of points assigned for all the key experts from K1-K9 will have same weightage.</p> <p><i>Kindy refer to Amendment Serial Number: 8</i></p> <p>Example only of public health quality expert; 21.1.(B) a. General qualification: Medical graduate +Hospital management/ MPH, Medical Graduate + MD + hospital management Certified NQAS, NABH accessor, trained NQAS+ NABH</p> <p>21.1.(B) b: Adequacy for assignment: Work experience of Undertaking Quality assurance + Experience of Training on</p>

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				Quality assurance and number of years
19	Page Number(s): 38 Data Sheet Instruction to Consultants (Section 2)	21.1 (B) c. Relevant experience in the region (working level fluency in local language(s)/knowledge of local culture or administrative system, government organization, etc.): 30%	We understand relevant experience in the North-East region. Please confirm. We request the Authority to kindly make changes in the percentage weights for relevant experience in region from 30% to 10%.	Relevant experience in the North east region to include the states of Arunachal Pradesh, Assam, Meghalaya, Mizoram, Manipur, Nagaland, Tripura and Sikkim <i>Kindy refer to Amendment Serial Number: 8</i>
20	Page Number(s): 38 Data Sheet Instruction to Consultants	21.1 (C) Transfer of knowledge (training) program (relevance of approach and methodology): 5 marks	We request the Authority to clarify the specific requirement to score full marks under this criterion.	Besides the training and capacity building programs envisaged in the ToR, the consultant is expected to propose few appropriate & Innovative methodologies and approaches to build internal capacity of the PMU during the project. These initiatives are required to sustain the improved operations and maintain the assets created through the project during the post project period.
21	Page Number(s): 42 Annex: Guideline for email-based submission of proposals	Submission of Proposal 10. The Technical Proposal submission form (Form TECH-1) and complete Financial Proposal should be signed and scanned by the authorized representative.	We request the Authority to kindly accept digital signature of the authorized representative for the Form Tech-1 and complete Financial proposal.	Regret to accept to Digital Signature. To enable the shortlisted consultants to submit during the Pandemic, the email-based submission procedure was carefully developed and incorporated in the RFP. This will be helpful for submission for all the shortlisted consultants with ease.
22	Page Number(s): 40 Data Sheet Instruction to	32.1 The successful Consultant shall submit the Beneficial Ownership Disclosure Form.	We understand that the Beneficial Ownership Disclosure Form has to be submitted only by the Consultant who has been awarded the contract. Please confirm.	Confirmed. As specified in the SCC 32.1, after the expiry of standstill period the client shall simultaneously request the successful Consultant to submit, within

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	Consultants (Section 2)			eight (8) Business Days, the Beneficial Ownership Disclosure Form.
23	Page Number(s): 36 Data Sheet Instruction to Consultants (Section 2) Page Number(s): 36	Bid due Date and Time, 19 January 2021 at 11:00 am.	We request the Authority to kindly grant extension of at least two (2) weeks for submission of a quality and informed bid. Request for deadline extension by 4 weeks	<i>Kindy refer to Amendment Serial Number: 9</i>
24	Page Number(s): 125 Section 8: Conditions of Contract and Contract Forms General Conditions of Contract (GCC) Clause 24 Liability	24. Insurance to be taken out by the Consultant 24.1. The Consultant (i) shall take out and maintain, and shall cause any Subconsultants to take out and maintain, at its (or the Sub-consultants", as the case may be) own cost but on terms and conditions approved by the Client, insurance against the risks, and for the coverage specified in the SCC, and (ii) at the Client's request, shall provide evidence to the Client showing that such insurance has been taken out and maintained and that the current premiums	We request the authority to kindly modify this clause as follows 24. Insurance to be taken out by the Consultant 24.1. The Consultant (i) shall take out and maintain, and shall cause any Sub-consultants to take out and maintain, at its (or the Subconsultants", as the case may be) own cost but on terms and conditions approved by the Client, insurance against the risks, and for the coverage specified in the SCC, and (ii) at the Client's request, shall provide evidence to the Client showing that such insurance has been taken out and maintained and that the current premiums therefore have been paid. The Consultant shall ensure that such insurance is in place prior to commencing the Services as stated in Clause GCC 13.	No change

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		therefore have been paid. The Consultant shall ensure that such insurance is in place prior to commencing the Services as stated in Clause GCC 13.		
25	Page Number(s): 144 Section 8: Conditions of Contract and Contract Forms Special Conditions of Contract (SCC) Clause 23.1 Liability	The following limitation of the Consultant's Liability towards the Client can be subject to the Contract's negotiations: "Limitation of the Consultant's Liability towards the Client: (a) Except in the case of gross negligence or willful misconduct on the part of the Consultant or on the part of any person or a firm acting on behalf of the Consultant in carrying out the Services, the Consultant, with respect to damage caused by the Consultant to the Client's property, shall not be liable to the Client: (i) for any indirect or consequential loss or damage; and (ii) for any direct	We request the authority to kindly modify this clause as follows The following limitation of the Consultant's Liability towards the Client can be subject to the Contract's negotiations: "Limitation of the Consultant's Liability towards the Client: (a) Except in the case of gross negligence or willful misconduct on the part of the Consultant or on the part of any person or a firm acting on behalf of the Consultant in carrying out the Services, the Consultant, with respect to damage caused by the Consultant to the Client's property, shall not be liable to the Client: (i) for any indirect or consequential loss or damage; and (ii) for any direct loss or damage that exceeds one (1) times the total value of the Contract; (b) This limitation of liability shall not (i) affect the Consultant's liability, if any, for damage to Third Parties caused by the Consultant or any person or firm acting on behalf of the Consultant in carrying out the Services; (ii) be construed as providing the Consultant with	No change

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		<p>loss or damage that exceeds one (1) times the total value of the Contract;</p> <p>(b) This limitation of liability shall not affect the Consultant's liability, if any, for damage to Third Parties caused by the Consultant or any person or firm acting on behalf of the Consultant in carrying out the Services; (ii) be construed as providing the Consultant with any limitation or exclusion from liability which is prohibited by the applicable law in India</p> <p>[Notes to the Client and the Consultant: Any suggestions made by the Consultant in the Proposal to introduce exclusions/limitations of the Consultant's liability under the Contract should be carefully scrutinized by the Client and discussed with the Bank prior to accepting any changes to what was</p>	<p>any limitation or exclusion from liability which is prohibited by the applicable law in India.</p>	

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		<p>included in the issued RFP. In this regard, the Parties should be aware of the Bank's policy on this matter which is as follows:</p> <p>To be acceptable to the Bank, any limitation of the Consultant's liability should at the very least be reasonably related to (a) the damage the Consultant might potentially cause to the Client, and (b) the Consultant's ability to pay compensation using its own assets and reasonably obtainable insurance coverage. The Consultant's liability shall not be limited to less than a multiplier of the total payments to the Consultant under the Contract for remuneration and reimbursable expenses. A statement to the effect that the Consultant is liable only for the re-performance of faulty Services is not acceptable to the Bank. Also, the Consultant's liability should never be limited for loss or damage</p>		

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		<p>caused by the Consultant's gross negligence or willful misconduct.</p> <p>The Bank does not accept a provision to the effect that the Client shall indemnify and hold harmless the Consultant against Third Party claims, except, of course, if a claim is based on loss or damage caused by a default or wrongful act of the Client to the extent permissible by the law applicable in the Client's country.]</p>		
26	<p>Page Number(s): 144</p> <p>Section 8: Conditions of Contract and Contract Forms</p> <p>Special Conditions of Contract (SCC)</p> <p>SCC 23.1</p>		<p>Please clarify the maximum liability for the Consultant. We assume this is 1x of the contract value however, please confirm.</p>	<p>As mentioned in the SCC 23.1 the liability is limited to contract value. Extract is reproduced for ready reference</p> <p>(iii) for any direct loss or damage that exceeds one (1) times the total value of the Contract</p>
27	Page Number(s): 12	3.1 The Consultant is	We request the Authority to kindly remove	No change

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
	<p>Section 2: Instruction to Consultants and Data Sheet</p> <p>Clause 3 Conflict of Interest</p>	<p>...future work.</p> <p>3.2 The Consultantby the Bank.</p> <p>3.2.1 Without limitation ... below:</p> <p>a. Conflicting Activities (i) Conflict between ..implementation.</p> <p>c. Conflicting Assignments (ii) Conflict among ...Client.</p> <p>d. Conflicting Relationships (iii)Relationship with the .. Contract.</p> <p>Page 124, Clause 21</p> <p>21. Conflict of Interest 21.1. The Consultant .., Discounts, etc.</p> <p>21.1.1 The payment of ...to Clause GCC 21.1.3, the ...additional payment.</p> <p>21.1.2 Furthermore, if the</p>	<p>reference to 'Affiliates' from the specified clause.</p>	

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		<p>Consultant, ..the account of the Client.</p> <p>b. Consultant and Affiliates Not to Engage in Certain Activities</p> <p>21.1.3 The Consultant agrees ..of the project.</p> <p>c. Prohibition of Conflicting Activities</p> <p>21.1.4 The Consultant ...this Contract.</p> <p>e. Strict Duty to Disclose Conflicting Activities</p> <p>21.1.5 The Consultant ..its Contract.</p>		
28	<p>Page Number(s): 149</p> <p>Section 8: Conditions of Contract and Contract Forms</p> <p>Special Conditions of Contract (SCC)</p>	<p>SCC 50.1 (a) and (b)</p> <p>Payment schedule:</p>	<p>a. We request for an advance payment to be made available to the preferred bidder</p> <p>b. We request the final payment % to be 10% instead of the currently indicated 15%</p>	<p>a. The contract is not provisioned with advance payment as mentioned in the SCC 50.1 (a) datasheet.</p> <p>b. No change</p> <p>Kindly refer to the amendment 13 and 14 for revised Payment terms and deliverables</p>

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
29	Page Number(s): 120 Section 8: Conditions of Contract and Contract Forms General Conditions of Contract (GCC)	GCC 19: Termination New clause to be added	We request the Authority to kindly add the following clause: The Consultant may terminate this Agreement, or any particular Services, immediately upon written notice to the Client if the Consultant reasonably determines that it can no longer provide the Services in accordance with applicable law or professional obligations.	No change
31	Page Number(s): 33 Section 2: Data Sheet- Instruction to Consultants	10.1 2nd Inner Envelope with the Financial Proposal: (1) FIN-1 (2) FIN-2 (3) FIN-3 (4) FIN-4 (5) Statement of Undertaking (if required under Data Sheet 10.2 below) 10.2 Statement of Undertaking is required-Yes [Please refer to paragraph (e) in Form TECH-1]	We request the Authority to please clarify if a separate Statement of Undertaking needs to be provided in the Financial proposal, when it has already been included in Form Tech-1 of the Technical Proposal.	Not required in the Financial Proposal. Tech -1 Form (f) needs to be completed <i>[e] [Note to Client: Only if required in ITC10.2 (Data Sheet 10.2), include the following: In competing for (and, if the award is made to us, in executing) the Contract, we undertake to observe the laws against fraud and corruption, including bribery, in force in the country of the Client.]</i> Kindly refer to Amendment Serial Number: 10
32	Page Number(s): 78 Section 7. Terms of Reference Domain 1: D	Reference D1.1.5 - Evaluation: assist PMU in designing and monitoring evaluations and assessments as and when required. From our	Request MHSSP to clarify if PMTA will be involved in only designing the M&E plans for various activities under PMU or to provide support for implementation at the ground as well? If PMTA will be involved in executing these M&E and assessments, then what will be the number per year	The PMTA will be involved in design of Monitoring and evaluation systems, Collate, analyze the data and report preparation as and when required. The actual data collection will be done by the project staff or agencies.

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
	1.1.5: Evaluation	working experience, we understand clients engage third party agencies to conduct Monitoring and Evaluation of such large-scale projects.	and sample frame to be covered?	
33	Page Number(s): 79 Section 7. Terms of Reference Domain 1: D1.2.7	Reference D1.2.7 – Ensure that goods, works and services are procured and provided cost effectively as per predetermined standards mentioned in the bidding document and contract agreement and in line with World Bank Procurement Regulations.	Request MHSSP to clarify/define that the agency will only provide technical support for procurement in terms of defining BOQs, bid document preparation, Contract negotiation and finalization only, or the agency will be engaged in the actual procurement process for MHSSP?	PMTA will be involved in BOQs, bid document preparation only. Contract negotiation, finalisation and actual procurement process are part of PMU not part of PMTA. MHSSP / PMU is the Implementation Agency, and all procurement related decision will be taken by IA. The PMA consultant is expected to provide the desired advisory support in the scope of ToR and facilitation of the procurement process.
34	Page Number(s): 80 Section 7. Terms of Reference Domain 2:	Reference Domain 2: Health facility assessment, developing BOQ, construction supervision and management. Our past experience of conducting similar assignments reflect that infrastructure development of 33 facilities which includes	In a summary, to complete the task mentioned in RFP for domain 2 will require the additional engagement of Non-Key experts and approximate 90-man months required from engineering/architecture background team which is not mentioned in the total 222-man months for Non-Key experts. We request you to reconsider and add additional man months to complete the task defined in RFP.	<i>Kindy refer to Amendment Serial Number: 3 and 4</i>

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		<p>(nursing schools, under construction nursing schools, state/district warehouses, DH/SDH/CHC) is an intensive task and it will require more qualified non key experts like Architect, Civil Engineer, Structural Engineer, HVAC Engineer, MEP Engineer, Drafter and Surveyor with work station.</p> <p>To conduct the desired assignment following steps will be followed: ❖</p> <p>Onsite visit to the facilities needs to be conducted for AS IS assessment by the above-mentioned team members. 3-4 days per facility will be required to develop the AS IS drawings of existing structure. Team will also be engaged in developing the CAD drawings of existing structure.</p> <p>❖ Based on the AS IS drawings, again 2- 3-member team will revisit the facilities for the</p>		

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		<p>realignment/reengineering of the facilities. 2-3 days per facility will be required to develop the preliminary/detailed drawings, site design of facilities.</p> <p>❖ Based on the redesign and upgraded layouts of facilities, above team will develop the structure wise, site wise and lot wise BOQs. 8-10 days will be required to develop the facility wise BOQs.</p>		
35	<p>Page Number(s): 80</p> <p>Section 7. Terms of Reference Domain 2</p>	<p>Reference Domain 2: Health facility assessment, developing BOQ, construction supervision and management</p>	<p>For soil testing, environment / social approvals, will PMU be responsible to appoint a contractor and take his findings for approval or the contractor appointed by the PMU will have to get the necessary approval by itself, please clarify?</p>	<p>PMTA will facilitate in the Environmental social assessment along with PMU. The Assessment reports will be submitted by PMTA to the PMU for final approval.</p> <p>PMTA will undertake soil testing of the sites using its human resource, and will provide the certification with remedies, if any, for the same. Soil testing has to be done by the PMTA in a nationally accredited lab. The cost of the national lab soil testing will be reimbursed by the client.</p>
36	<p>Page Number(s): 80</p> <p>Section 7. Terms</p>	<p>Reference D2.2.3 – Preparation of Concept Design and Site Plan. As per the RFP, the project</p>	<p>Request the MHSSP to clarify/define what type of support required from the PMTA agency for 5 under construction nursing schools?</p>	<p>Support for Infrastructure development as per INC norms.</p>

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
	of Reference Domain 2: D2.2.3	will invest in infrastructure development in 2 ANM schools, 2GNM schools, 1 college of nursing, 5 under- construction nursing schools (3 GNM & 2 ANM).		
37	Page Number(s): 80 Section 7. Terms of Reference Domain 2: D2.2.3	Reference D2.1.3 Diagrammatic Plans	For diagrammatic plans, drawings, BOQ we will need to have necessary municipal drawings of the area. Will the client assist in getting the municipal drawings etc?	Client will facilitate the municipal drawings wherever available.
38	Page Number(s): 82 Section 7. Terms of Reference Domain 2 D2.3	Reference D2.3 Supervision visits during the implementation phase: for the evaluation of the quality of the work done in terms of the compliance of the BoQ and material used for the work execution. Full time construction PMC engineers are required to ensure the quality of construction work.	From our experience, it is suggested to place at these staff for duration of 3 years to ensure the quality of ongoing construction work.	<i>Kindy refer to Amendment Serial Number: 3 and 4</i>
39	Page Number(s): 83 Section 7. Terms	Reference D2.3.1 It is expected a team of two engineers will take an average of 4 hours to	We request MHSSP to have a provision of at least 4 full time engineers to ensure monitoring visit at each site	<i>Kindy refer to Amendment Serial Number: 3 and 4</i>

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
	of Reference Domain 2 D2.3.1	complete a comprehensive site verification. Each site must be visited at least once in a fortnight from the day of work order today of completion Considering the geography of the state and working experience of similar assignments in similar geography, two engineers will not be sufficient to visit each site at least once in a fortnight.		
40	Page Number(s): 80 Section 7. Terms of Reference Domain 2:	Reference Domain 2: Objective Provide detailed Bill of Quantities for Nursing schools (INC Norms), Nursing college (INC Norms) and warehouses based on the gap assessment report;	Request to clarify that the agency is also responsible for the tender and bid management of infrastructure revamping of healthcare facilities, warehouses, nursing schools and colleges? Please clarify if support is required in terms of defining BOQs, bid document preparation, Contract negotiation and finalization only.	MHSSP / PMU is the Implementation Agency, and all procurement related decision will be taken by IA. The PMA consultant is expected to provide the desired advisory support in the scope of ToR and facilitation of the procurement process.
41	Page Number(s): 85 Section 7. Terms of Reference Domain 4: D 4.1.3	Reference D4.1.3 - Developing a plan / schematic for converting existing manual and fragmented technology-based processes into an integrated application.	Request MHSSP to provide details of 'fragmented technology-based processes' and what technology stack is being currently used for them.	The Consultant is expected to assess initially during the design phase.

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		From our working experience, more information will help in making an effective plan for newer application.		
42	Page Number(s): 85 Section 7. Terms of Reference Domain 4: D4.1.4	Reference D4.1.4 – Develop an integrated IT application suite covering the following modules (indicative list) <ul style="list-style-type: none"> ▪ Beneficiary identification, verification and management module ▪ Hospital empanelment module Hospital transaction module including patient registration, treatment records, discharge, preauthorization, online claims submission ▪ Grievance management module Financial management module Fraud prevention and 	Request MHSSP to clarify if these applications need to be developed as fresh or an agency can propose best in class ready to use solution. This information will help calculate development efforts. Please provide details of functional and technical compliances of proposed modules. Please clarify if data migration is in scope of vendor. If yes, then please provide details of type of data which needs to be migrated.	Regarding fresh development versus ready to use solutions, the consultant will provide merits and demerits for both the options and help State take viable decision.

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		<ul style="list-style-type: none"> management ▪ Monitoring and audits module ▪ MIS and reports 		
43	Page Number(s): 85 Section 7. Terms of Reference Domain 4: D4.1.5	Reference D4.1.5: Develop data security plan and access and control protocols	Request MHSSP to clarify, if there are any specific security standards which an agency needs to follow while formulating this plan	The consultant is expected to propose the best solution and technology available in industry, especially given the sensitivity associated with individual database.
44	Page Number(s): 85 Section 7. Terms of Reference Domain 4: D4.1.6	Reference D4.1.6: Provide hardware / server specifications and costs	Request MHSSP to provide details of already existing hardware/ server specifications. This will help in hardware planning.	The consultant is expected to assess/map the existing resources
45	Page Number(s): 85 Section 7. Terms of Reference Domain 4: D4.2.3	Reference D4.2.3: Training of staff at the state and district levels in use of the ERP solution.	Request MHSSP to provide number of users which specific locations. Also, who will be responsible for training related expenses like training venue, material, AV aids, TA DA and accommodation for participants?	The consultant is expected to assess tentative numbers at levels and create respective profiles All logistics and participant related expenses like their travel, DA, venue, AV aids shall be provided by the MHSSP.
46	Page Number(s): 86 Section 7. Terms of Reference Domain 5: 5.1.1: Undertake a Rapid	Reference D5.1.1 - Undertake a rapid KAP assessment and review of existing information/ studies to gain a deeper understanding of the	Request MHSSP to clarify on targeted community, sample size expected and geographical area to be covered in Rapid Assessment. This will help in calculation of OPE and planning for resources based on sample size and geography to be covered.	The RA to be conducted in two districts – Lawngtlai and Kolasib. The agency to design their strategy but a statistically significant sample size is expected.

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
	Assessment	SBCC challenges to be addressed.		
47	Page Number(s): 87 Section 7. Domain 5: 5.3: Support the state to roll out the communication strategy	Reference D5.3.1 – Training of the relevant staff/consultants/master trainers at the state, district and subdistrict level on the tools	Request MHSSP to clarify/define who will be responsible for training related expenses like training venue, material, AV aids, TA DA and accommodation for participants? How many training batches are expected at each level: state, district and sub-district level?	The cost of the training, venue and participants and logistics for participants will be from the project, not from PMTA. The calculation of batches will be done by the PMTA after needs assessment. The agency can suggest the strategy as per their technical expertise.
48	Page Number(s): 87 Section 7. Domain 5: 5.3: Support the state to roll out the communication strategy	Reference D5.3.2 - Handhold the state health department to cascade the SBCC messages	Request MHSSP to define handholding support. Will it be monitoring and supportive supervision support only or dissemination of SBCC messages via means like printed IEC material, broadcasting messages, running campaigns etc. If printing of IEC material and running campaigns will be part of scope of work, please clarify who will bear expenses for these and what is the number and quantity of each communication mean If communication campaigns or media campaigns to be run, what will be the duration and frequency of these campaigns? Please clarify if communication channels are upon PMTA to define or it needs to focus on only pre-defined communication channels by MHSSP	a. The hand-holding is the culmination of stakeholder engagement, formative work, pre-testing and finalization of the tools and other preparatory work needed to implement a culturally-appropriate and effective SBCC campaign to positively influence social behaviours and norms. The agency is required to provide training to government staff for effective implementation of SBCC campaign. A well-thought-out plan distinguishes the agency's SBCC strategy. b. The minimum number of copies as required for finalization of IEC material will be part of scope of work. As described above (point no.11), the agency will hand over all approved/

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
				<p>finalized versions in soft copy formats (pdf and open files) to the designated government official.</p> <p>c. The final media campaign and costs thereof can be suggested in the proposal and the government of Mizoram will take the final decision on duration and frequency.</p> <p>d. The agency can suggest innovative communication channels in their strategy and not restrict themselves to the MHSSP channels only.</p>
49	<p>Page Number(s): 87</p> <p>Section 7. Terms of Reference Domain 5: 5.4: Monitoring and evaluation of the strategy</p>	Reference D5.4.2 - Undertake midline and endline KAP assessment in targeted areas.	<p>Is there any sample size decided for conducting end line and baseline?</p> <p>Please clarify if targeted areas have been identified and what is their geographical coverage e.g, how many districts, blocks, villages?</p> <p>If target areas cover all districts of Mizoram, then there will be requirement of additional Non-Key experts with experience and expertise of survey data collection</p>	<p>a. As per the strategy, the agency can suggest the required sample size for end-line and baseline studies.</p> <p>b. The targeted districts are Kolasib and Lawngtlai. The number of blocks and villages can be suggested by the agency.</p> <p>c. The target areas do not require to cover ALL districts of Mizoram. The study districts are only 2 Kolasib and Lawngtlai. It is suggested that study team to consist of local Mizo members with relevant experience in survey data collection.</p>
50	<p>Page Number(s): 87</p> <p>Section 7. Terms of Reference</p>	Reference D6.1.2 – Develop or adapt the training package informed through a formative research in the pilot area	<p>Request MHSSP to clarify what is the sample size expected to be covered in this formative research?</p> <p>What is the geographical coverage of pilot area? How many districts/ blocks/ villages to be covered?</p>	Formative research to be conducted in two districts – Kolasib and Lawngtlai. Agency may suggest a statistically significant geographical size of the pilot

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
	Domain 6: 6.1: Develop/ adapt the training package			area.
51	Page Number(s): 87 Section 7. Terms of Reference Domain 6: 6.1: Develop/ adapt the training package	Reference D6.1.2 – should be a mix of face-to-face and digital training	Request MHSSP to provide clarity on scope of digital training. Will these be based on online platforms like Zoom, MS Teams or through LMS platforms? In case of LMS platform, additional resources (Non-Key Experts) will be required like Instructional designers, graphic designers, LMS experts and developers, which are not mentioned in Non-Key experts.	Digital trainings are envisaged as e-modules which maybe developed in local language and will be available with the government as self-paced trainings. NK9 column clearly mentions that the agency can draw upon additional non-key experts as per the requirement.
52	Page Number(s): 87 Section 7. Terms of Reference Domain 6: 6.1: Develop/ adapt the training package	Reference D6.1.5 – Development of e-modules/ videos for training	Request MHSSP to provide clarity on emodules/ videos for training. What type of videos are expected: animated or trainer recording or simple PPT videos with background narration? For trainer recorded videos, there will be additional requirement of recording studio, editing software and resources (Non-Key experts) like Instructional designers and audio-video mixers. Please clarify For animated videos, additional resources will be required like Instructional designers and graphic designers. Please clarify	Digital trainings are envisaged as e-modules which maybe developed in local language and will be available with the government as self-paced trainings. The agency can share their expertise in various formats that can be developed to meet the requirements. NK9 column clearly mentions that the agency can draw upon additional non-key experts as per the requirement. NK9 column clearly mentions that the agency can draw upon additional non-key experts as per the requirement. The financial proposal to include the details.

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
			How many videos are expected in this assignment and what will be the duration of each video?	The agency can provide their expertise on the number and duration.
53	Page Number(s): 88 Section 7. Terms of Reference Domain 6: 6.2: Support the State to roll-out the training package in targeted areas	Reference D6.2.2 – Creating a cadre of master trainers in the state	It is understood that training for creating master trainers will be face to face. Request MHSSP to clarify who will be responsible for training related expenses like training venue, material, AV aids, TA DA and accommodation for participants? How many batches of master training to be conducted and what is the expected number of master trainers in each batch? This number will help plan budget for related logistics and OPE expenses.	The cost of the training, venue and participants and logistics for participants will be from the project, not from PMTA. The calculation of batches will be done by the PMTA after needs assessment The strategy to be developed by PMTA for two districts.
54	Page Number(s): 88 Section 7. Terms of Reference Domain 6: 6.2: Support the State to roll-out the training package in targeted areas	Reference D6.2.3 – Handhold the state health department to cascade the training down to the village level.	Request MHSSP to define handholding support. Will it be supportive supervision and monitoring or even conduction of F2F and digital trainings till village/ community level? Who will bear expenses for cascade training like venue, material, AV aids, TA DA and accommodation of participants?	Yes, it includes all. The purpose is to integrate this in the system over the period of five years. The cost to be borne by the project.
55	Page Number(s): 32 Section 2. Instructions to Consultants E. Data Sheet	Reference 6.1 (a). The number members in the consortium shall not be more than 4 (Four) including the lead consulting firm.	It is mentioned that the agency can bid in a consortium of not more than 4 agencies, whereas at point no. 14.1.1 at page no. 34, it is mentioned that the consortium cannot be done with shortlisted or nonshortlisted agency. We seek clarification that at this stage agency can go for consortium with any other new agency to enhance their capacity to	<i>Kindy refer to Amendment Serial Number: 6</i>

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
			deliver the defined assignment or not?	
56	Page Number(s): 33 Section 2. Instructions to Consultants E. Data Sheet	Reference 11.1 Participation of Sub-consultants, Key Experts and Non-Key Experts in more than one Proposal is permissible: No	Considering the varied nature of the work detailed out in the RFP, kindly clarify whether the sub-contracting by the agency is allowed or not?	Sub-contacting is not allowed. However, the consultant may associate with non-shortlisted consultant to enhance their capacity. Kindly refer to modified ITC14.1.1 (a). Amendment Number 6.
57	Page Number(s): 88 Section 7. Terms of Reference 3. Team Composition & Qualification Requirements	Reference: An indicative manpower requirement for the assignment of entire 60 months must include key experts who will be deployed for full time during the project implementation.	Please clarify, if this full-time deployment of 60 months for each key expert can be divided among field and home days or they are required for full time at Aizawl?	Full time in Aizawl
58	Page Number(s): 88 Section 7. 3. Team Composition & Qualification Requirements	Reference: Table: NK 10: Total for Non- Key Experts = 222 person months Given the wide scope of work under each domain, total person months mentioned for Non-Key experts seems very less. Based on our experience	(a) Considering the nature of work, we also request department to fix the minimum number of person months for Non-Key experts so that it will give a fair chance to all agencies during the evaluation. (b) Request MHSSP to clarify whether budget proposed for non-key experts will be considered for financial evaluation? (c) If yes, as this may vary for different agencies,	(a) Fixed and mentioned for the non-Key experts. Also, provided slight buffer of 12 months for any other experts. The ToR mentions that <i>the consultant may re-appropriated based on their estimate and workplan as per the Scope of Work in the ToR.</i> (b) Yes. As the total proposal price sum of remuneration and reimbursable

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		<p>of conducting the similar kind of assignments, we request the department to increase the time of Non-Key experts as expected person months will increase to more than 222 person months.</p> <p>Reference: Table: NK 10: With reference to the time assigned for the non-key experts mentioned in the table:</p>	<p>please clarify on evaluation process. Will it be evaluated at total proposed cost or individual rates of nonkey experts proposed?</p> <p>(d) In case of total proposed cost to be considered, request you to kindly reconsider number of person months fixed for non-key experts.</p> <p>(e) Request MHSSP to clarify whether engagement of Non-Key Experts in the project will be in one stretch or it will be scattered across five years?</p> <p>(f) Request MHSSP to clarify that the non key experts will be based in the Aizawl or it will be need based engagement at client site and rest of the work at the back office?</p>	<p>expenses. Remuneration includes charges for key as well as non-key experts [FORM FIN-3 BREAKDOWN OF REMUNERATION]</p> <p>(c) Evaluation is based on the Total Proposal Price.</p> <p>(d) Already fixed.</p> <p>(e) Scattered. Based on the methodology and workplan.</p> <p>(f) Duly considering the nature of work, expected substantial portion need to be at Aizawl.</p>
59	<p>Page Number(s): 96</p> <p>Section 7. Terms of Reference</p> <p>3. Team Composition & Qualification Requirements</p>	<p>Reference: Additionally, the consultant shall provide the rates for the above-mentioned experts in three levels</p> <p>We understand that for Non-Key experts, individual financial rates will be provided in the financial formats. In addition to these, rates to be provided in three levels (senior, mid-level, junior) for any future requirement</p>	<p>Request MHSSP to clarify on details of these three levels in terms of education qualification and years of experience?</p>	<p><i>Kindy refer to Amendment Serial Number: 5</i></p>

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
		of engagement.		
60	Page Number(s): 96-98 Section 7. Terms of Reference 4. Time Schedule and Deliverables	Reference: Reporting Requirements and Time Schedule for Deliverables. In the TOR, work has been clearly mentioned for each domain but there is no clarity of time schedule and deliverables for Domain 2.	Requesting MHSSP to clarify the timelines to complete the task because it is required to map the resource requirement to complete the task.	It is difficult to mention the timeline at this stage as the work will be done in phased manner that will be further decided by PMTA and PMU. However, we expect the first 6 months will be for assessment of infrastructure to come up with final BOQ followed by construction supervision subject to completion of procurement.
61	Page Number(s): 88 Section 7. Terms of Reference Team Composition		Request MHSSP to clarify that the shortlisted agency for PMTA will get an office space by MHSSP or the agency needs to budget office cost and office expenses in their budget.	<i>Kindy refer to Amendment Serial Number: 11</i>
62	Page Number(s): 92 Section 7. Terms of Reference 3. Team Composition & Qualification Requirements	Reference: Table K7: The field supervision team should be Civil and Electrical engineers with at least three years" experience in the hospital infrastructure strengthening. The firm is encouraged to have field supervision team, who are well versed in similar terrain and situation.	As per our understanding, the mentioned field supervision team would be a team of engineers under Hospital Design and Development expert. Since there is no mentioned of field supervision team under Non-Key Expert, request MHSSP to clarify whether agency is to itself decide on the team size.	<i>Kindy refer to Amendment Serial Number: 3 and 4</i>
63	Page Number(s):	Reference: 21.1: (B) Key	We request MHSSP to please modify the three sub-	<i>Kindy refer to Amendment Serial</i>

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
	37 Section 2. Instructions to Consultants E. Data Sheet	Expert’s qualifications and competence for the assignment	<p>criteria and relevant percentage weight as:</p> <p>The number of points to be assigned to each of the above positions (K-1 to K-9) shall be determined considering the following three sub-criteria and relevant percentage weights:</p> <p>a. General qualifications (general education, training, and experience): 30%</p> <p>b. Adequacy for the Assignment (relevant education, training, experience in the sector/similar assignments): 50%</p> <p>c. Relevant experience in the region (working level fluency in local language(s)/knowledge of local culture or administrative system, government organization, etc.): 20%</p>	Number: 8
64	Page Number(s): 88 Section 7: Terms of Reference 3- Team Composition & Qualification	Team Composition & Qualification requirement of key expert- under K1- Team Leader under minimum & desired professional qualification as “ He/Se be atleast post graduate like public health..... A Ph.D in Management or public health desirable”	Please to add A Ph.D in Management or public health or Social Science or any discipline is desirable	No Change in the qualification of K-1

S/N	Section / Clause / Reference	Existing Clause	Clarification requested	Clarification
65	Page Number(s): 87 Section 7: Terms of Reference Domain 6	Technical support for Capacity Building across project component and training of VHSNC in selected districts.	How many districts and no of VHSNCs is not mentioned? Please provide this information.	VHSNC trainings for two districts is expected – Kolasib and Lawngtlai. The complete design and strategy is expected from the agency.

Amendment-1

“Selection and Employment of Project Management Technical Support Agency (PMTA) under Mizoram Health System Strengthening Project (MHSSP)” held on 5th January 2021

Amendment No	Section/ Clause/ reference	Existing Clause	Amendment
1	Page Number(s)::83 Section 7 Terms of reference Domain 2	D.2.3.1 <i>It is expected a team of two engineers will take an average of 4 hours to complete a comprehensive site verification. Each site must be visited at least once in a fortnight from the day of work order today of completion</i>	D.2.3.1 <i>The Consultant is expected to take up periodical site visit at least once every fortnight and as required for efficient supervision, review of works being implemented including guiding the contractor/ client and for effectively discharging its responsibilities as PMC as given in the Scope of Work (SoW) D2</i>
2	Page Number(s): 77 Section 7 Terms of reference Domain 1	D1.1.2 Technical and management support to the PMU- D1.1.2.1 Review documents submitted by each cell of the PMU and Govt of Mizoram to ensure they meet standards and guidelines of the government as well as the World Bank.	D1.1.2 Technical and management support to the PMU- D1.1.2.1 Review documents submitted as per the requirement of the PMU to ensure they meet standards and guidelines of the government as well as the World Bank.
3	Page Number(s): 92 Section 7 Terms of reference 3. Team Composition & Qualification Requirements for the Key Experts	K7 Hospital Design & Development Expert Extract Table 1: Minimum Qualifications Desired and Indicative Experience of Key Experts Kindy refer to next row.	K7 Hospital Design & Development Expert: Extract of Table 1 (Amended) : Minimum Qualifications Desired and Indicative Experience of Key Experts Kindy refer to next row.

Amendment No	Section/ Clause/ reference	Existing Clause	Amendment		
	Extract of Table 1: Minimum Qualifications Desired and Indicative Experience of Key Experts				
	S. No.	Key Position and Number	Desired Role	Minimum Qualification and Desired Professional Experience	Estimated person Months
	K7	Hospital Design and Development Expert	S/he will support the activities related to engineering works in the health facilities, that includes assessment and design for repair and renovation of the targeted health facilities, explore and suggest the most suitable solution for making the health facilities functional as per local needs.	Degree not less than B.Arch/B. Tech/ B.E and having sound knowledge of hospital infrastructure redesigning and strengthening The field supervision team should be Civil and Electrical engineers with at least three years' experience in the hospital infrastructure strengthening. The firm is encouraged to have field supervision team, who are well versed in similar terrain and situation.	60 months
	Extract of Table 1 [Amended]: Minimum Qualifications Desired and Minimum Experience of Key Experts				
	S. No.	Key Position and Number	Desired Role	Minimum Qualification and Desired Professional Experience	Estimated person Months
	K7	Hospital Design and Development Expert	S/he will support the activities related to engineering works in the health facilities, that includes assessment and design for repair and renovation of the targeted health facilities, explore and suggest the most suitable solution for making the health facilities functional as per local needs. Responsible for contract management and supervision of awarded works in the health facilities with support of Health Facility Development Supervision Engineers – (3) and Electrical Engineers – (1) [mentioned in the Non – Key	Degree not less than B.Arch/B. Tech/ B.E and having sound knowledge of hospital infrastructure redesigning and strengthening. S/he should have minimum of 5-7 years of experience in design, development, supervision of Engineering Works awarded for the development of Health Facilities at State of Mizoram	36 months

Amendment No	Section/ Clause/ reference	Existing Clause			Amendment								
		experts NK10 and NK11 respectively											
4	Page Number(s): 96 Section 7 Terms of reference Team Composition & Qualification Requirements for the Key Experts -Terms of Reference (Section 7)	Extract of Table 2: Minimum Qualifications Desired and Indicative Experience of Non- Key Experts <table border="1"> <tr> <td>NK10</td> <td>Any other expert as per need</td> <td><i>The Consultant is advised to propose within this permissible limit.</i></td> <td>12</td> </tr> <tr> <td></td> <td></td> <td><i>Total for Non- Key Experts [The consultant may re-appropriated based on their estimate and workplan as per the Scope of Work in the ToR. If Financial Proposal Exceeds this limit, the proposal will be rejected.</i></td> <td>222</td> </tr> </table>			NK10	Any other expert as per need	<i>The Consultant is advised to propose within this permissible limit.</i>	12			<i>Total for Non- Key Experts [The consultant may re-appropriated based on their estimate and workplan as per the Scope of Work in the ToR. If Financial Proposal Exceeds this limit, the proposal will be rejected.</i>	222	Extract of Table 2 (Amended) : Minimum Qualifications Desired and Minimum Experience of Non- Key Experts. Kindy refer to next row.
NK10	Any other expert as per need	<i>The Consultant is advised to propose within this permissible limit.</i>	12										
		<i>Total for Non- Key Experts [The consultant may re-appropriated based on their estimate and workplan as per the Scope of Work in the ToR. If Financial Proposal Exceeds this limit, the proposal will be rejected.</i>	222										
Extract of Table 2 [Amended]: Minimum Qualification Desired and Minimum Experience of Non-Key Experts													
	S. No.	Key Position and Number	Desired Role	Minimum Qualification and Desired Professional Experience	Estimated Person Months								
	NK10	Health Facility Development Supervision Engineers Civil – (3)	To provide support of Hospital Design and Development Expert	B.E/ B.Tech in Civil Engineering with 5-7 years' experience in new building construction and renovation/ rehabilitation of building works. Medical facilities would be added advantage	<i>3 members with lead member – 15 person months for each: 45 person months</i>								

Amendment No	Section/ Clause/ reference	Existing Clause		Amendment	
	NK11	Health Facility Development Supervision Engineer – Electrical – (1)	To provide support of Hospital Design and Development Expert	B.E/ B.Tech in Electrical Engineering with 5-7 years' experience in new building construction and renovation/ rehabilitation of building works. Medical facilities would be added advantage	<i>1 member – 15 person months</i>
	NK12	Any other non key expert to accomplish the scope of services and deliverables prescribed in the ToR		<i>Qualification and experience in commensurate with the proposed experts</i>	<i>30 person months</i>
				<i>Total for Non- Key Experts. The Consultant is advised to propose within this permissible limit.</i> <i>[The consultant may re-appropriate based on their estimate and workplan as per the Scope of Work in the ToR.</i>	<i>300 person months</i>
5	Page Number(s): 96 Section 7 Terms of reference	While evaluating Technical proposals, CVs of the Key Experts proposed by the Consultant for the non-key position will be not be evaluated. But the selected agency will be expected to deploy the experts as per indicative qualification and experience specified for each position in the above table. Additionally, the consultant shall provide the rates for the above-mentioned experts in three levels –		While evaluating Technical proposals, CVs of the Key Experts proposed by the Consultant for the non-key position will be not be evaluated. But the selected agency will be expected to deploy the experts as per minimum qualification and experience specified for each position in the above table.	

Amendment No	Section/ Clause/ reference	Existing Clause	Amendment
	3. Team Composition & Qualification Requirements for the Key Experts	Senior as per the above qualification, mid-level as per same qualification but lesser experience and junior level with lower qualification and experience from the same area of discipline.	
6	Page Number(s): 33 Section 2 Instructions to Consultants Data Sheet	Data Sheet 14.1.1 Shortlisted Consultants may associate with (c) non-shortlisted consultant(s): No Or (d) other shortlisted Consultants: No	ITC 14.1.1 Shortlisted Consultants may associate with (a) non-shortlisted consultant(s): YES Or (b) other shortlisted Consultants: No
7	Page Number(s): 35 Section 2 Instructions to Consultants Data Sheet	17.4 (a) Technical Proposal: one (1) original and 1 copies	17.4 (a) Technical Proposal: one (1) original.
8	Page Number(s): 37-38 Section 2	21.1 (B) The number of points to be assigned to each of the above positions (K-1 to K-6) shall be determined considering the following three sub-criteria and relevant percentage weights: a. General qualifications (general education, training, and experience): 20% b. Adequacy for	21.1 (B) The number of points to be assigned to each of the above positions (K-1 to K-9 Key experts) shall be determined considering the following three sub-criteria and relevant percentage weights: a. General qualifications (general education, training, and

Amendment No	Section/ Clause/ reference	Existing Clause	Amendment
	Instructions to Consultants Data Sheet	the Assignment (relevant education, training, experience in the sector/similar assignments): 50% c. Relevant experience in the region (working level fluency in local language(s)/knowledge of local culture or administrative system, government organization, etc.): 30%	experience): 25% b. Adequacy for the Assignment (relevant education, training, experience in the sector/similar assignments): 60% c. Relevant experience in the region (working level fluency in local language(s)/knowledge of local culture or administrative system, government organization, etc.): 15%
9	Page Number(s): 35 Section 2 Instructions to Consultants Data Sheet	ITC 17.7 The Proposals must be submitted no later than: Date: 19 January 2021 Time: 11:00 am	ITC 17.7 The Proposals must be submitted no later than: Date: 25 January 2021 Time: 11:00 am Opening of Technical proposal: Date: 25 January, 2021 Time: 12:00 pm
10	Page Number(s): 33 Section 2 Instructions to Consultants Data Sheet	ITC 10.2 Statement of Undertaking is required-Yes [Please refer to paragraph (e) in Form TECH-1]	ITC 10.2 Statement of Undertaking is required-Yes [Please refer to paragraph (f) in Form TECH-1]
11	Page Number(s): 88 Section 7.	5. Client's Input and Counterpart Personnel Points 5.1 to 5.7.	ToR 5. Client's Input and Counterpart Personnel <i>Addition of point</i>

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	Terms of Reference Team Composition		5.8 Office space will be provided by MHSSP.												
12	Page Number(s): 34 ITC Datasheet 14.1.3 for time-based contracts only	<p>The Consultant's Proposal must include <u>the minimum</u> Key Experts' time-input of 540 person-months.</p> <p>For the evaluation and comparison of Proposals only: if a Proposal includes less than the required minimum time-input, the missing time-input (expressed in person-month) is calculated as follows:</p> <p>The missing time-input is multiplied by the highest remuneration rate for a Key Expert in the Consultant's Proposal and added to the total remuneration amount. Proposals that quoted higher than the required minimum of time-input will not be adjusted.</p> <p><i>Total for Non- Key Experts: 222 months;</i></p> <p><i>For Non-Key experts: The consultant may re-appropriate based on their estimate and workplan as per the Scope of Work in the ToR. If Financial Proposal Exceeds this limit, the proposal will be rejected</i></p>	<p>The Consultant's Proposal must include <u>the minimum</u> Key Experts' time-input of 516 person-months.</p> <p>For the evaluation and comparison of Proposals only: if a Proposal includes less than the required minimum time-input, the missing time-input (expressed in person-month) is calculated as follows:</p> <p>The missing time-input is multiplied by the highest remuneration rate for a Key Expert in the Consultant's Proposal and added to the total remuneration amount. Proposals that quoted higher than the required minimum of time-input will not be adjusted.</p> <p><i>Total for Non- Key Experts: 300 person months;</i></p> <p><i>For Non-Key experts: The consultant may re-appropriate based on their estimate and workplan as per the Scope of Work in the ToR.</i></p>												
13	Page Number(s): 97 & 98 Section 7. Terms of Reference 4. Reporting	<p>The selected firm shall submit the following reports on deliverables as per table below to MHSSP as per timelines stipulated below:</p> <table border="1"> <thead> <tr> <th>Sn.</th> <th>Description of Deliverable</th> <th>Proposed Timeline</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td>Submission of the</td> <td>Within 2 Weeks of</td> </tr> </tbody> </table>	Sn.	Description of Deliverable	Proposed Timeline	1.	Submission of the	Within 2 Weeks of	<p>The selected firm shall submit the following reports on deliverables as per table below to MHSSP as per timelines stipulated below:</p> <table border="1"> <thead> <tr> <th>Sn.</th> <th>Description of Deliverable</th> <th>Timeline</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td>Submission of the</td> <td>Within 30 daysfrom</td> </tr> </tbody> </table>	Sn.	Description of Deliverable	Timeline	1.	Submission of the	Within 30 daysfrom
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Amendment No	Section/ Clause/ reference	Existing Clause				Amendment			
	Requirements and Time Schedule for Deliverables		acceptable Inception Report	Contract Signature		acceptable Inception Report, establishing fully functional office, and mobilisation of core team as per the Work Plan.	date Contract Signing		
14	Page Number(s): 147-148 SCC 50.1 (b) Payment terms	Sn.	Description of Deliverable	Proposed Timeline	Payment (% of Contract Amount)	Sn.	Description of Deliverable	Proposed Timeline	Payment (% of Contract Amount)
		1.	Submission of the acceptable Inception Report	Within 2 Weeks of Contract Signature	10%	1.	Submission of the acceptable Inception Report, establishing fully functional office and mobilisation of Team as per the Work Plan	Within 30 days from date Contract Signing	2.5%
		2.	Submission of acceptable quarterly progress report as per the prescribed formats. The quarterly progress	To be submitted within the 3 weeks of ending a quarter	50 (2.5% every quarter for 20 quarters)	2.	Submission of acceptable quarterly progress	To be submitted within the 3 weeks of ending a quarter	50 (2.5% every quarter for 20

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			reports will cover the details of activities undertaken/ progress made under all the all six domains				report as per the prescribed formats. The quarterly progress reports will cover the details of activities undertaken/ progress made under all the all six domains		quarters)
		3	a) On completion and acceptance of deliverables prescribed in Domain 3: D3.1 Phase 1 and D3.2 Phase	As per the Workplan duly considering the interdependencies between Domain 3-6.	5%	3	a) On completion and acceptance of deliverables prescribed in Domain 3: D3.1	As per the Workplan duly considering the interdependencies between Domain 3-6.	5%

Amendment No	Section/ Clause/ reference	Existing Clause			Amendment				
			b) On completion and acceptance of deliverables prescribed in Domain 4:D4.1 Phase 1 and D4.2 Phase		10%		Phase 1 and D3.2 Phase		
			c) On completion and acceptance of deliverables prescribed in Domain 5:D5.1 to D5.6		5%		b) On completion and acceptance of deliverables prescribed in Domain 4:D4.1 Phase 1 and D4.2 Phase		12.5%
							c) On completion and acceptance of deliverables prescribe		7.5%

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			d) On completion and acceptance of deliverables prescribed in Domain 6:D6.1 to D6.2		5%		d in Domain 5:D5.1 to D5.6		
		4.	Submission of acceptable final completion report	During the last month of the contract period	15%		d) On completion and acceptance of deliverables prescribed in Domain 6:D6.1 to D6.2		7.5%
		4.	Submission of acceptable final completion report	During the last month of the contract period	15%				15%