**NATIONAL COMPETITIVE BIDDING**

**FOR**

**Selection of Agency for “****Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities” under Mizoram Health Systems Strengthening Project (MHSSP)**

**(Two-Envelope Bidding Process without e-Procurement)**

**Minutes of Pre-Bid Meeting for Selection of Agency for “Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities in Mizoram”**

**Date: 18.11.2020**

With reference to the above, the proposals were invited for “Selection of Agency for **“Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities”** of Mizoram Health Systems Strengthening Project (MHSSP)”

**Ref No:** *IN-DOHFW-201469-CS-QCBS*

The Pre-Bid meeting was virtually held on scheduled date i.e. 18.11.2020 at 14:00hrs as per below link:

<https://us05web.zoom.us/j/3813680941?pwd=MXZzWDh1ME0yYmdiVmZmejlxM2kxdz09>

1. **Officers present from MHSSP, Department of Health and Family Welfare:**
2. Dr Lalnuntluangi, Deputy Project Director, MHSSP
3. Dr Vanlalchhuangi, Team Assistant, MHSSP
4. **Bidder Representative present:**
5. Dr Kranti Vora, IIPHG
6. Mr Shomik Ray,IIPHD
7. Mr Kapil Dev, IQVIA
8. Mrs Manjari Sharma, IVQIA
9. Mrs Sandra Albert, PHFI
10. Mrs Lindsey Lu-Pon, Qurehealthcare
11. Mr Eric de Belen, Qurehealthcare
12. Mr David Paculdo, Qurehealthcare

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-Bid meeting for** **“Selection of Agency for Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities” under Mizoram Health System Strengthening Project (MHSSP)” held on 18th November 2020**

| **S. No.** | **Reference** | **Existing Clause** | **Clarification requested** | **Clarification** |
| --- | --- | --- | --- | --- |
|  | Ref to page 72- General clarifications | General Clarifications | 1. Please send the RBF Objectives and goals
2. Does agency will work with IPA-designated local clinical experts. Who/what is an IPA?
 | The project intends to strengthen the management capacity and quality of health services in Mizoram.IPA stands for Internal Performance Agreement which at the facility level will be implemented in the form a results-based financing approach to facilities. Clinical competency is a significant component of the quality enhancement approach at the facility level.  |
|  | General Clarifications | General Clarifications | When do you anticipate the QQC dashboard and metrics, and the outlines of the RBF objectives and goals be available for our review? | The timelines for availability of the Quality of Care metrics will likely be in March 2021. The dashboard might take a bit longer to create, we estimate this to be available by June 2021  |
|  | General Clarifications | General Clarifications | Where do we list in-kind contributions from QURE in Tech 6 and in the Financial documents, Model Form1 | It is advisable that the financial bid that you submit will detail the Net amount that your activity will cost. The Net amount is the actual amount that you expect to receive from the project for your services. Indicate in comments in the financial section your eventual financial contribution, or co-financing, however, please ensure that the figures are well understood when opening the financial bid.  |
|  |  General Clarifications | General Clarifications | Could you provide us with the distribution of healthcare institutions and providers in Mizoram:• Number of District Hospitals, CHCs, and Primary Care Clinics in Mizoram• Number of Doctors, by specialization including generalists in hospitals CHCs and primary care clinics• Number of Nurses in hospitals CHCs and primary care clinics• Number of Nurses• Number of Midwives in hospitals CHCs and primary care clinics | Refer to <https://health.mizoram.gov.in/uploads/attachments/2fbfd4cb12116cbb6cc34ddfd282fe42/e-book2018-19.pdf> for health facility details. From this document, number and type of facilities see page 4<https://des.mizoram.gov.in/uploads/attachments/300aed8cf5dc2b20f7c7c4dc05bd2c40/pages-185-abstract-2019-pdf.pdf> page 106 and 107  Refer to Annexure III for other HR list details |
|  | Section 2 Page 33 21.1 Data sheet | The agency must have at least 10 years of experience in the business of similar nature consultancy services in health sector | Request for clarification on definition of “similar nature consultancy services” | Developing and implementing various capacity building activities for health staff at across cadres. This requirement refers specifically to using serially applied Clinical Vignettes as a method for increasing health worker knowledge  |
|  | Section 7 Page 76 Qualification requirements | One local stuff member who will liaise with the PMU on daily matters | Request clarification on whether a staff member is to be deployed permanently in Mizoram | The department would definitely prefer one member from the core team to be deployed in Aizawl during project tenure. The agency may propose the deployment plan to bring efficiency. |
|  | Page 37 Section 2D. Negotiations and Award (30.2) | Expected date for the commencement of the Services: 30th January, 2012 | Does the committee expect to begin contract negotiations on time on 15 January and commencement of the project on 30 January? | Expected date for the commencement of the Services: 30th January, 2021 |
|  | 1 and 28 | Consulting Services for: Selection of Agency for Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities in Mizoram under Mizoram Health System Strengthening Project (MHSSP) Name of the Assignment: Selection of Agency Improving Medical Care Assessment Methods in Health Facilities in Mizoram under Mizoram Health System Strengthening Project (MHSSP) | Please clarify the name to be used for this proposal and whether the purpose is to improve the clinical competencies or improve medical care assessment methods. |  The main purpose of this assignment is to improve clinical competencies of key medical staff. |
|  | 73 (Section 3.7b&f in TOR) | b. The consultant will prepare a self-administeredprovider questionnaire to becompleted by participants, a facilityquestionnaire administered by local field survey teams to be completed by thefacility administration, a log to track casevignettes administration at the health worker and health facility level, and documentation to track the developmentand delivery of the feedbackf. For the duration of the contract, theconsultant will require a subscription,license, and use of an online, web-basedsurvey platform service that will be used to access the vignettes online. It isunderstood that this ongoing subscriptionwill be needed to sustain the project after the tasks are completed herein. | Please clarify whether the assessment will be carried out using paper-based questionnaires or using online platform. | All assessments are planned online and/or through handheld mobile devices.  |
|  | 72, 73 (Section3.7 b in TOR) | b. The consultant will prepare a self-administeredprovider questionnaire to be completed by participants, a facilityquestionnaire administered by local field survey teams to be completed by thefacility administration, a log to track case vignettes administration at the health worker and health facility level, and documentation to track the development and delivery of the feedback. | Please clarify the purpose and subject of developing these questionnaires and the person responsible for keeping the log, maintaining the documentation and collecting the questionnaires for analysis. | These questionnaires are to gather information from individual providers, while maintaining documentation and analyzing data are one of the key elements of this approach.  |
|  | 74 [Tasks(InterventionImplementation) b. underSection 3.7] | Within 3 weeks of receiving all completed and translated case simulations for a site, the consultant will score the vignettes andproduce and return feedback reports to theRBF team at the DoHFW for distribution to the specific facilities | Please clarify whether the feedback is provided post completion of self-administeredQuestionnaires containing the vignettes orinstant feedback needs to be developed for online simulation tool | The idea is that participants will receive individual feedback directly after completing their online tool, or after completing their tool on their handheld device. A summary report of all results disaggregated by variables is expected at the DoHFW for their consumption and onward distribution to the specific facilities.  |
|  | 75 (TOR) | Administration of the clinical vignettes andsubmission of quarterly progress- to besubmitted every quarter (for 16 quarters) | It is assumed that this task will be initiated postdeployment of online tool (6 months) i.e. will start from 9th month and end by 54 months of project completion. Post that 3 weeks are spent on generation of quarterly report and 5 months will be spent on generation of final report. Please clarify | These are the specifications of the assignment. The agency is permitted to submit their reports much sooner than the limit specifications. One of the reasons for providing these metrics is that it takes time to review and consolidate reports and for the DoHFW to merge with the overall quality metric of the specific facilities. The final quality metric is used to pay facilities their ‘quality bonus’.  |
|  | General Clarifications | General Clarifications | We follow GAAP accounting principles and submit our financials to a BoD but do not prepare audited financials. Please suggest how we should proceed. Will an affidavit of our bank balance suffice? | The country audit systems recognized and approved in the home country of the agency shall be accepted for the purpose of proposal submission. The necessary supporting documents shall be sought by the state during evaluation process, if necessary. |
|  | ITC 21.1  | Evaluation Criteria  | Request the authority to relax the quantum of minimum contract value for project experience from INR 2.1 crores to INR 1.5 crores | The clause remains same as in the RFP.  |
|  | Pages 98-99 Section 21 Obligations of the consultant | Conflict of Interestb. Consultant and Affiliates Not to Engage inCertain Activities21.1.3 The Consultant agrees that, during the term of this Contract and after its termination, theConsultant and any entity affiliated with the Consultant, as well as any Sub-consultants and any entity affiliated with such Sub-consultants, shall bedisqualified from providing goods, works or non-consulting services resulting from or directly relatedto the Consultant’s Services for the preparation orimplementation of the project. | Request the authority to please remove referencesof “Affiliates”.Consultant and Affiliates Not to Engage in CertainActivities21.1.3 The Consultant agrees that, during the termof this Contract and after its termination, theConsultant and any entity affiliated with theConsultant, as well as any Sub-consultants and any entity affiliated with such Sub-consultants, shall bedisqualified from providing goods, works or non-consulting services resulting from or directly related to the Consultant’s Services for the preparation or implementation of the project. | The clause remains same as in the RFP. |
|  | New Clause |  | Request the authority to add the 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 Changes in RFP  |

**Amendment-1**

**“Selection of Agency for Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities” under Mizoram Health System Strengthening Project (MHSSP)” held on 18th November 2020**

| **S. No.** | **Reference** | **Existing Clause** | **Now to be read as** |
| --- | --- | --- | --- |
| **1** | Section 2 Page 32-34 Submission, Opening and Evaluation | The consultants “shall not” have the option of submitting their proposals electronically.The Consultant must submit:(a) Technical Proposal: one (1) original and (1) copy in hardcopy along with softcopy in CD. (b) Financial Proposal: one (1) original in hardcopy | **The Proposals must be submitted online through email no later than:**Date: December 16, 2020 12.00 noon Indian Standard Time. Proposals should be submitted through email as per the procedure stated at Annexure II.Online submission through email is mandatory. Technical proposals shall be opened on 16th December 2020, at 1 pm Indian Standard Time. *Consultants who have submitted proposals can view the Proposal Opening through video conference. The link shall be provided to those who have submitted the proposals through email by 12.30 PM on the date of opening.*2.The consultant shall submit the proposals electronically through email as detailed at Annexure II. Proposals submitted through email shall only be considered. In addition to the email submission, consultants shall also submit the hard-true copies as per the procedure detailed in the RFP. The hard-true copies of proposals should reach within last date of email submission plus 10 days.The hard-true copies of proposals without email submission within due date shall not be considered.In case of any discrepancy between the hard copy and email submission, the email submission will be considered as the final. |
| **2** | Section 3 Page 39 Technical proposals | Page limit of 1 page for Power of Attorney  | The page limit of upto 3 pages for the Power of Attorney. |
|  | Page 113-114 23.1 Special Conditions of the contract | Limitation of the Consultant’s Liability towards theClient:(a) Except in the case of gross negligence or willfulmisconduct on the part of the Consultant or on the part of any person or a firm acting on behalf of theConsultant in carrying out the Services, theConsultant, with respect to damage caused by theConsultant to the Client’s property, shall not beliable to the Client:(i) for any indirect or consequential loss or damage;and(ii) for any direct loss or damage that exceeds[insert a multiplier, e.g.: one, two, three] times thetotal value of the Contract;(b) This limitation of liability shall not(i) affect the Consultant’s liability, if any, for damageto Third Parties caused by the Consultant or anyperson or firm acting on behalf of the Consultant incarrying out the Services;(ii) be construed as providing the Consultant withany limitation or exclusion from liability which isprohibited by the Applicable Law in India”. | **“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 the total value (one time) of the Contract**Rest of the clause under this section remains as it is.**  |

**Annexure II**

**Electronic Submission of Proposals:**

In view of COVID19 prevailing situation, proposals shall be accepted through email. Proposals should be submitted mandatorily through email. The procedure for sending and accepting proposals are detailed below:

**Steps 1: Submission of Proposal**

1. The proposal should be sent by email at wb.mhssp@gmail.com
2. The subject of email should mention the following:

Proposal No. IN-DOHFW-201469-CS-QCBS. Titled “Selection of Agency for Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities under Mizoram Health Systems Strengthening Project (MHSSP) “

1. The email should be addressed to the

 Project Director,

 Mizoram Health Systems Strengthening Project,

 Aizwal

 RFP No. IN-DOHFW-201469-CS-QCBS

RFP Title “Selection of Agency for Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities under Mizoram Health Systems Strengthening Project (MHSSP) “

Attention: Proposals not to be opened before **16/12/2020 at 13.00 hrs**

 Sender’s name

 Designation

 Organisation name

 Mobile Number

 Alternate Mobile Number

1. The email should contain the Technical Proposal and Financial Proposal in the prescribed forms as given in the RFP as email attachment in soft copy and password protected. Both Technical Proposal and Financial Proposal should be separate PDF attachments in one email.
2. Please make sure to submit technical proposal & financial proposal as 2 separate attachments in one email. Please ensure Technical and financial proposal should not be in a single attachment.
3. The consultant should send only one email containing proposal for RFP.
4. The proposal should be prepared with A4 size paper and font size of 12 in PDF only.
5. Financial figures of the Financial Proposal should not be given in Technical Proposal or in any part of the email except in the Financial Proposal.
6. Passwords of electronic files of Technical Proposal and Financial Proposal should be different from each other. Passwords should not be mentioned anywhere in these two documents as well as in this email.
7. The Technical Proposal submission form (Form TECH-1) and complete Financial Proposal should be signed and scanned by the authorized representative.
8. The Technical Proposal should be scanned in the order of forms as prescribed in the RFP. The file should be scanned as one PDF, password protected, and size should not be more than 15MB. The password of the Technical proposal should not be shared with anyone.
9. The electronic file of the Technical Proposal should be named as “TechP”+Bidder name in initials+RFP Number. The file type should be PDF only.
10. The Financial Proposal should be scanned separately from the Technical Proposal. This file should be password protected. The file size should not be more than 10MB. The password of this file should be different from the password assigned to the file containing Technical Proposal.
11. The electronic file of the Financial Proposal should be named as “FinP”+Bidder name in initials+RFP Number. The file type should be PDF only.
12. Files should not be corrupt. They should be virus free. They should be password protected. If the Project is not able to open your file, then your Proposal will be rejected.
13. The proposal should reach the designated email of the Project by the date and time specified in the RFP (including corrigendum, if any).

**Step 2: Submission of password for Technical Proposal**

1. Password of the file containing Technical Proposal should be shared on the email ( wb.mhssp@gmail.com )as specified in RFP only. Password should not be shared in any other form and with any officer from the Project.
2. The password of the file containing Technical Proposal should be shared only between 12 Noon to 1 PM on the date of opening of the technical proposal. Password should not be shared before one hour of the designated date and time of opening of the Proposal.
3. The subject of email should mention the following:

Password for Technical Proposal for Proposal No. IN-DOHFW-201469-CS-QCBS. Titled “Selection of Agency for Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities under Mizoram Health Systems Strengthening Project (MHSSP)”. The email should be addressed to the

 Project Director,

 Mizoram Health Systems Strengthening Project,

 Aizwal

 RFP No. IN-DOHFW-201469-CS-QCBS

RFP Title “Selection of Agency for Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities under Mizoram Health Systems Strengthening Project (MHSSP) “

 Password to open the file containing Technical Proposal is - xxxxxxx

 Sender’s name

 Designation

 Organisation name

 Mobile Number

 Alternate Mobile Number

1. Please ensure that you write the correct password in the email. The password should be to open Technical Proposal only.
2. The password to open the file containing Technical Proposal should be sent only from the email which was used to submit the Proposal. Password from any other email will not be accepted.

**Step 3: Opening of the Technical Proposal**

Technical proposals shall be opened on 16th December 2020, at 1 pm Indian Standard Time. Consultants who have submitted the proposal can view the opening through video conference. The link shall be provided to those who have submitted the proposals through email by 12.30 PM on the date of opening.

**Step 5: Opening of Financial Proposal**

1. Date and time of opening of Financial Proposals shall be informed to technically qualified bidders through email on the email address on which proposals were received.
2. Technically qualified bidders will be asked to send the password of the file containing Financial Proposal.
3. Password of the file containing Financial Proposal should be shared on the email wb.mhssp@gmail.com . Password should not be shared in any other form and with any officer from the Project.
4. The password of the file containing Financial Proposal should be shared only within one hour of the of the designated date and time of opening of the Financial Proposal. Password should not be shared before one hour of the designated date and time of opening of the Financial Proposal.
5. The subject of email should mention the following:

Password for Financial Proposal for Proposal No. IN-DOHFW-201469-CS-QCBS. Titled “Selection of Agency for Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities under Mizoram Health Systems Strengthening Project (MHSSP)”.

 6. The email should be addressed to the

 Project Director,

 Mizoram Health Systems Strengthening Project,

 Aizwal

 RFP No. IN-DOHFW-201469-CS-QCBS

RFP Title “Selection of Agency for Improving Clinical Competencies in Key Medical Staff and Medical Care Assessment Methods in Health Facilities under Mizoram Health Systems Strengthening Project (MHSSP) “

 Password to open the file containing Financial Proposal is - zzzzzzzzz

 Sender’s name

 Designation

 Organisation name

 Mobile Number

 Alternate Mobile

1. Please ensure that you write the correct password in the email. The password should be to open Financial Proposal only.
2. If an incorrect password is provided or the file gets corrupted, then the proposal will be rejected.
3. The password to open the file containing Financial Proposal should be sent only from the email which was used to submit the Proposal. Password from any other email will not be accepted.

ANNEXURE III

Number of Government Health facilities in Mizoram

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name of District** | **TERTIARY HEALTHCARE** | **DH** | **SDH** | **CHC** | **PHC** | **UPHC** |
| Aizawl East | 1 | 1 | 0 | 2 | 3 | 3 |
| Aizawl west | 0 | 1 | 1 | 1 | 3 | 3 |
| Champhai | 0 | 1 | 0 | 0 | 5 | 1 |
| Hnahthial | 0 | 1 | 0 | 0 | 5 | 0 |
| Khawzawl | 0 | 1 | 0 | 1 | 4 | 0 |
| Kolasib | 0 | 1 | 0 | 1 | 5 | 0 |
| Lawngtlai | 0 | 1 | 0 | 1 | 6 | 0 |
| Lunglei | 0 | 1 | 1 | 0 | 6 | 2 |
| Mamit | 0 | 1 | 0 | 1 | 10 | 0 |
| Saitual | 0 | 1 | 0 | 1 | 5 | 0 |
| Serchhip | 0 | 1 | 0 | 1 | 5 | 0 |
| Siaha | 0 | 1 | 0 | 0 | 4 | 0 |
| **Total** | **1** | **12** | **2** | **9** | **61** | **9** |

 (DH – District Hospital, SDH – Sub- district Hospital, CHC – Community Health Centre, PHC – Primary Health Centre, UPHC – Urban Primary health Centre)

**Total number of HR in DH, CHC and PHC( This list does not include HR employed under various NHM Programmes)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **District** | **Aizawl East** | **AizawlWest** | **Champhai** | **Hnahthial** | **Khawzawl** | **Kolasib** | **Lawngtlai** | **Lunglei** | **Mamit** | **Saitual** | **Serchhip** | **Siaha** | **Total** |
| No of MBBS Doctor | 15 | 65 | 7 | 7 | 7 | 12 | 12 | 15 | 12 | 8 | 7 | 2 | 169 |
| No of Dental Doctors | 10 | 9 | 1 | 1 | 1 | 3 | 2 | 2 | 1 | 1 | 1 | 1 | 33 |
| No of Ayush Doctors | 10 | 3 | 2 | 2 | 2 | 4 | 4 | 3 | 3 | 2 | 3 | 2 | 40 |
| No of Specialists | 102 | 114 | 10 | 0 | 1 | 9 | 4 | 17 | 7 | 0 | 6 | 7 | 277 |
| No of Nurses | 246 | 323 | 55 | 28 | 27 | 49 | 29 | 62 | 34 | 30 | 47 | 34 | 964 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Community Health Officer | Health supervisor(M) | Health supervisor(F) | Health worker(H) | Health worker (F) |
| 10 | 65 | 63 | 209 | 269 |