PRE-BID CLARIFICATON / AMENDMENT IN RESPONSE TO PRE-BID QUERIES RAISED BY THE PROSPECTIVE BIDDERS IN THE PRE-BID MEETING FOR THE RFP OF DIGITAL DIAGNOSTICS SERVICES FOR SUB-CENTRE AAM [Bid Ref No.: OSH&FWS/SER/2025/ Diagnostics/ SC-HWC]

Queries raised by the prospective bidders on the tender terms & conditions, technical specifications etc. were discussed. Based on the written queries by the prospective bidders, the clarification / amendments as decided by the committee in response to the pre-bid queries are mentioned below:

SI.	Original terms & Condition /	Queries Raised by the	Clarification/ Amendment
	Technical Specification	Prospective Bidders	in response to the Queries
1	Section 3 - Eligibility Criteria (Point no. 3.3), Page 7: The bidder must have executed at least 1 contract in Digital Diagnostics Services using minimum two Point of Care IOT Medical Devices in any Central / State Government Organizations / Govt. Health Facilities in India and also must have experience in successful operation & management of at least 200 subcentres for Govt. Health Facilities in India during the last three years. The contract executed should be of minimum 1 year duration. Details to be furnished in Format T6.	We request you to kindly allow PHCs / CHCs / health centers under smart city mission along with subcenters, as the scope of work and services is similar in nature like Health ATM / Kiosk.	Amended  Section 3 - Eligibility Criteria (Point no. 3.3), Page 7 is amended as:  The bidder must have executed at least 1 contract in Digital Diagnostics Services using minimum two Point of Care IOT Medical Devices in any Central / State Government Organizations / Govt. Health Facilities in India and also must have experience in successful operation & management of at least 200 sub-centres / PHC / UPHCs for Govt. Health Facilities in India during the last three years. The contract executed should be of minimum 1 year duration. Details to be furnished in Format T6.
			Clarification regarding Health ATM / Kiosk: The requirement of the project is for digital diagnostics services in sub-centre AAM using small portable POC devices to be placed inside a kit so that the kit is all the time mobile and can be carried easily by the ANMs in the VHND sessions / screening camps / Door to door NCD sccreening etc. whenever and wherever required. Health ATM / Kiosk is not definitely the requirement

2	Section 4 - Clause No, 4.3.1.2 A (Point No.2): All devices shall be connected to a single Android mobile application.	and Linux based Systems /	of the project which can't be carried by the ANM for the VHND session / Screening Camp including door to door NCD sccreening services. So experience of Health ATM / Kiosk shall not be taken into consideration.  No Change The application shall be handled by ANMs in an anodroid mobile phone only as they are conversant with handling similar android based mobile application like ANMOL in a mobile phone.
3	Section 3 - Eligibility Criteria (Point no. 3.5), Page 7: The bidder should have at least average annual turnover (audited) of Rs.20 Crores during last three financial years, i.e. 2021-22, 2022-23, 2023-24. In case of consortium, the lead member should fulfil the above turnover criteria. Details to be furnished in Format T3.	an average annual turnover of Rs. 20 Crores over the last three financial years. We	No Change
4	Section 4.6 Service Provider's Responsibilities. (Point no. 4.6.4), Page 12: Monitoring and Evaluation: Develop and implement a fool proof monitoring and evaluation system to ensure efficiency in capacity utilization. Key indicators need to be put in place for looking at customer support, devices replacements and volume of utilization. An online monitoring system having access to data to be provided at the office of Mission Director, NHM, Bhubaneswar by the Service Provider. The Service Provider shall also provide all necessary information as required by the Authority from time to time.	evaluation component, as currently outlined, appears to be limited to the basic development of a dashboard. We recommend the inclusion of a comprehensive Centre Management System (CMS) and an Enterprise Resource Planning (ERP) System to ensure effective, streamlined operations and efficient	No Change

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		consumable supplies, ensuring	
		availability for testing and	
		diagnostic purposes. 3.	
		Centralized Dashboard:	
		Provides administrators with a	
		detailed overview of each	
		Health ATM's operational	
		status and performance. 4.	
		Disease Trend Analysis:	
		Analyses data to identify	
		health trends, allowing the	
		_	
		preventive healthcare	
		initiatives. Enterprise Resource	
		Planning (ERP) should have	
		below features: 1. Centralized	
		HR Data Management: ERP	
		systems consolidate employee	
		records, attendance, payroll	
		and performance data in a	
		single, easily accessible	
		platform. 2. Automated Task	
		Assignment: Managers can	
		assign tasks based on role,	
		department or skillset,	
		ensuring clarity and	
		accountability across the	
		organization/Project. 3. Real-	
		Time Progress Tracking: Tasks	
		and activities can be	
		monitored in real time,	
		enabling timely interventions	
		and performance evaluations.	
		l •	
		4. Streamlined Workflow	
		Management: ERP automates	
_	Cooking / Fundamilian Coll.	routine HR workflows	No Observe
5	Section 6 - Evaluation Criteria	We request to consider the	No Change
	(Point no. 3.1.3), Page 19:	experience of supply,	
	i) No of contracts (with minimum	installation and training	
	1 year duration) executed in	including warranty / AMC /	
	operation and management of		
	Digital Diagnostic Services using	medical device in any Central /	
	minimum two Point of Care IOT	State Government	
	devices in any Central / State	Organizations / Govt. Health	
	Government Organizations /	Facilities in India in the last	
	Govt. Health Facilities in India in	three years.	
	the last three years.		
_			

6	Section 6 - Evaluation Criteria	We have noted that the	Amended
	(Point no. 6.1.3), Page 19:  1(ii): Experience in operation and management of Digital Diagnostic Services Contract (with minimum 1 year duration) using minimum two Point of Care IOT devices in health subcentres and HWC of Govt. Health Facilities at any States in India in the last three years: (a) From 201 upto 250 subcentres: 5 (b) From 251 upto 300 subcentres: 10 (c) From 301 upto 350 sub-centres: 15 (d) From 351 upto 400 sub-centres: 20 (d) Above 400 sub-centres: 25	current eligibility criteria mandate experience in the operation and management of at least 200 sub-centres. In order to promote broader participation, including from experienced entities that have successfully managed mediumscale projects in government health setups, we respectfully request that this requirement be reduced to 100 sub-centres. We believe that this revision will encourage a wider range of qualified participants and contribute to the overall success of the project to get competitive bids. Please clarify how the experience of managing of 200 sub-centres is established.	Section 6 - Evaluation Criteria (Point no. 6.1.3), Page 19 is amended as:  1(ii) Experience in operation and management of Digital Diagnostic Services Contract (with minimum 1 year duration) using minimum two Point of Care IOT devices in Sub-centres / PHCs / UPHCs of Govt. Health Facilities at any States in India in the last three years: (a) From 201 upto 250 Subcentres / PHCs / UPHCs: 5 (b) From 251 upto 300 Subcentres / PHcs / UPHCs: 10 (c ) From 301 upto 350 Subcentres / PHcs / UPHCs: 15 (d) From 351 upto 400 Subcentres / PHcs / UPHCs: 20 (e) Above 400 Subcentres / PHcs / UPHCs: 25
7	Section 7.10 (Mobile Application Requirements) and Section 7.11 (Platform Capability), Page 26/27 - "Network and connectivity: WI- Fi, Bluetooth" "Internet Connectivity: 4G and above"	Kindly clarify who will be responsible for providing the Wi-Fi or 4G internet connectivity at the Sub-centres and HWCs. Please confirm if the service provider is expected to arrange and bear the cost of mobile internet connectivity (SIM cards/data plans), or if existing government facility networks will be used.	Clarification The service provider need not have to provide Wi-Fi or 4G internet connectivity. Separate provision for Wi-Fi / 4G connectivity shall be made available with ANMs who will be operating the application in the mobile phone which is integrated with the POC devices
8	Addition in Tender ATC regarding ABDM M3 Compliance.		Clarification Not manadatory. However the application should be capable of linking the ABHA ID.
9	Section 6 : Evaluation Critera	demo as a part of the evaluation process to asess usability, data flow and analytics in real time ensuring clarity beyond documentation.	Clarification As per Clause 6.1.4 of the revised RFP (Section 6-Evaluation Critera) the presentation / demonstartion is a part of the technical evaluation process.
10	EMD	given to NSIC / MSME Udyam	No Change The requirement of the tender is the digital mobile application

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		amount should be reduced.	with integration of many OEM's POC devices. It is not regarding a single OEM product so that NSIC / MSME Udyam certificate shall be applicable. Hence there is no exemption of EMD or any reduction of EMD amount.
11	Turnover Criteria	Is it acceptable if the OEM meets the turnover criteria even if the local channel partner does not?	Clarification As per the eligibility criteria (Clause 3.1), the bidder shall be a sole provider or a consortium. There is no term called OEM mentioned in the eligibility ctiteria. As per turnover Criteria (Clause 3.5), in case of a sole bidder, the bidder shall fulfil the turnover criteria and in case of a consortium bid, the lead bidder in the consortium shall fulfil the turnover criteria.
12	Format-F (Financial bid), Page - 41 : CapeX :- Human Resources [Norm : On Ground Program Coordinator (one for 200 Subcenter), Project Manager (1 for 10 districts) and State Program Coordinator : 1]	As per standard financial classification, human resource-related expenses should not be categorized under Capital Expenditure (Capex). Instead, It should be appropriately classified under Operational Expenditure (Opex). Potential Violation of Tender Fairness and Equity: If a clause allows HR expenses to be part of Capex, it seen as favouring bidders who have structured their cost models inappropriately, thus violating the principles of fair and equal competition under GFR and CVC (Central Vigilance Commission) guidelines. Including human resource in Capex constitutes misclassification of expenditure, which violates Rule 27 (Principles of Financial Propriety) and Rule 132 (Procurement of Services).	No Change Clarification: As also clarified during the pre-bid meeting that the required human resources specified in the RFP are not for operating the devices at the sub-centre AAM / VHND session / Screening Camp / Door to door NCD sccreening etc. Our ANMs shall perform the operation of the POC devices at the field for which training shall have to be provided by the selected service provider. The required HR specified shall be the minimum requirement to cater to the continueous comprehensive maintenance requirement at all the sites (including replacement) during the warranty period, ensure the availability of consumables & training requirement to the ANMs, maintenance / troubleshooting of the integrated application / cloud server and training etc.

10		DI 01 16 1 11 11	Ta. 15
13	Format-F (Financial bid), Page-41: Human Resources [Norm : On Ground Program Coordinator (one for 200 Sub center), Project Manager (1 for 10 districts) and State Program Coordinator : 1]	component under Capital Expenditure (Capex) should be calculated for a period of	As per specification, all POC devices carry comprehensive warranty of 3 years. Hence the
14	Section 7 - Technical Specification of IOT based POC Devices (Point no. 7.1, 7.2, 7.4, 7.6, 7.7, 7.10 - Product Certification), Page 21:  The quoted model should be USFDA (510K/ CGF) / CE Certified from notified body.  The quoted medical device must be registered under CDSCO and submit the license for manufacture to sale or distribute the medical device.	In reference to Section 7 (Technical Specification of IoT-based POC Devices), the tender specifies that product certifications must include USFDA/CE and CDSCO. There are variations in the certification requirement, we request to allow the submission of any one of the certification / licenses i.e., USFDA/CE/CDSCO to neutral the criteria and promote broader participation and inclusivity among eligible bidders. Any of the certificate/license is generally considered sufficient for establishing product quality and regulatory conformity.	Amended Technical Specification of IOT based POC Devices (Point no. 7.1, 7.2, 7.3, 7.4, 7.6, 7.7 underProduct Certification)  The USFDA / CE certification and CDSCO certification of the respective IOC devices as stated above is amended as:  The quoted model of the product should be USFDA (510 k / CFG) or CE certified.  The quoted medical device must be registered under CDSCO and submit the license for manufacture to sale or
15	Section 7 - Technical Specification of IOT based POC Devices 7.3 : Measuring Range : 10 mg/dL to 700 mg/dL	Measuring Range to be amended as : 20 mg/dL to 600 mg/dL	Amended Measuring Range : 20 mg/dL to 600 mg/dL
16	Section 7 - Technical Specification of IOT based POC Devices 7.4 : Measuring range: 2 to 25 g/dL	Measuring Range to be amended as: 0 to 24 g/dL	Amended Measuring range: 2 to 24 g/dL
17	Revision in Financial Bid "Format F	n	Amended The finacial bid format under OPEX has been amended. The OPEX under "Point A" has been revised for 3 years requirement instaed of 2 years. Accordingly the revised requirement of strips for 3

		years are mentioned in the column "No. of Strips / consumables for 3 Years". Similarly Point No. B, C & D has been in added under OPEX for calculation of total amount of OPEX / GST for 6688 subcenter AAM.  The revised RFP incorporating the above revision in financial bid format is enclosed with this
18	Revised RFP	pre-bid clarifiaction.  The revised RFP incorporating the above amendments are enclosed with this pre-bid clarification / amendment and also uploaded in the NHM website (under link: "Tender") with the title: "Revised RFP for Digital Diagnostics Services at Sub-center AAM"
19	Extension of Bid submission & opening date & time	Amended The last date & time of bid submission is extended to 31.5.2025, 3 PM The date of technical bid opening is rescheduled to 31.5.2025, 4 PM
20	Other Informations required for Bank Guarantee (In case EMD to be furnished in BG)	Name of Bank: State Bank of India, Secretariat Branch, Bhubaneswar Name of Savings Bank Account: OSH&FWS - SHS Group A/C IFSC Code: SBIN0010236

N.B: The amendments / clarifications mentioned above are to be treated as amendments / clarifications to the terms & conditions of the above tender reference. All other terms & conditions as mentioned in the tender document remain unchanged.

Sd/

Mission Director NHM, Odisha



#### ODISHA STATE HEALTH & FAMILY WELFARE SOCIETY, ODISHA

# MISSION DIRECTORATE, NATIONAL HEALTH MISSION, ODISHA

# **REQUEST FOR PROPOSAL (Revised)**

#### NATIONAL COMPETITIVE BIDDING

#### **FOR**

Digital Diagnostics Services in Sub-Centre Ayushman Arogya Mandir (AAM) using IOT (Internet of Things) Point of Care (POC) Medical Devices and Integrated Mobile Application

RFP Reference No.: OSH&FWS/SER/2025/ Diagnostics/ SC-HWC

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Section 1

# ODISHA STATE HEALTH & FAMILY WELFARE SOCIETY, ODISHA Annex Building of SIH&FW, Nayapalli, Unit-8, Bhubaneswar - 751012

Website: www.nhmodisha.gov.in e-mail: proc.nhmodisha@gmail.com

## **NOTICE INVITING TENDER (NIT)**

Bid Reference No.: OSH&FWS/SER/2025/ Diagnostics/ SC-HWC Date: 23.4.2025

- I. Odisha State Health & Family Welfare Society (OSH&FWS) invites sealed Tender from eligible service providers for Digital Diagnostic Services in Sub-Centre Ayshman Arogya Mandir (AAM) using IOT (Internet of Things) POC (Point of Care) Medical Devices and Integrated Mobile Platform as per job description given in Section IV of this document.
- 2. This document contains eight sections as follows:
  - I. Section I : Notice inviting Tender
  - II. Section 2: Instruction to Bidder
  - III. Section 3: Eligibility Criteria
  - IV. Section 4: Terms of Reference
  - V. Section 5: Terms & Conditions
  - VI. Section 6: Evaluation Criteria
  - VII. Section 7: Technical Specification of POC Devices
  - VIII. Section 8: Formats
  - IX. Section 9: Annexures

#### 3. Schedule of Events

SI.	Description	Date/Place
1	Date of availability of Tender Document	24.4.2025 to 22.5.2025
2	Website for downloading of Tender Document	www.nhmodisha.gov.in
3	Cost of the Tender Document	Rs. 5,000/-
4	Pre bid Meeting (Date & Time)	1.5.2025, 4 PM
5	Venue for Pre-Bid Meeting / Opening of Tender	Mission Directorate, NHM Annex Building of SIH&FW, Nayapalli, Unit-8, Bhubaneswar - 751012, Odisha
6	Closing Date and Time of Receipt of Tender	Extended: 31.5.2025 up to 3 PM (Address same as mentioned above)
7	Time, Date and Venue of Opening of Technical Bid	Extended: 31.5.2025, 4 PM At Mission Directorate, NHM Annex Building of SIH&FW, Nayapalli, Unit-8, Bhubaneswar - 751012, Odisha

- 4. The tender document may be downloaded from the official website: <a href="www.nhmodisha.gov.in">www.nhmodisha.gov.in</a>
  The bidder downloading the tender document from the website will be required to deposit Rs.5,000/-(non-refundable) in the form of Demand Draft drawn in favour of "Mission Director, NHM" payable at Bhubaneswar while submitting the Tender. Tender without the fee of Rs.5,000/- will not be accepted.
- 5. All prospective bidders are requested to attend the **Pre-bid meeting** either in person or through their authorized representative. No representative is allowed to represent more than one prospective Bidder. The venue, date and time are indicated in Schedule of Events as in Para 3 above.
- 6. Bidders shall ensure that their bids complete in all respects, are sent through Registered post / Courier or dropped in the Tender Box located at Mission Directorate, Annex. Building of SIH&FW, Nayapalli, Unit 8, Bhubaneswar on or before the closing date and time indicated in the Para 3 above. Bids submitted after the prescribed time will be treated as late bid and will not be considered. The bids can also be submitted by Registered Post / Courier. The Bids sent by Registered Post/Courier must reach the above said address on before the closing date & time indicated in Para 3 above, failing which the Bid will be treated as late bid and will not be considered.
- 7. In the event of any of the above mentioned dates being declared a holiday/closed day for the tender inviting authority, the Bids will be received/opened on the next working day at the same time.
- 8. The Bid Documents are not transferable.
- 9. All Bids must be accompanied by Earnest Money Deposit (EMD) amount to Rs.50,00,000/- (Rupees Fifty Lakhs) only in the form of Demand Draft / Banker's Cheque / Bank Guarantee (As per Format Annexure-A) favouring "Mission Director, NHM" payable at Bhubaneswar. Earnest Money Deposit in any other form will not be accepted. Earnest Money Deposit will not earn any interest. Tenders without EMD shall be rejected.

Mission Director
National Health Mission, Odisha

#### **INSTRUCTIONS TO BIDDER**

#### 1. General Instructions

- a. The Bidder should prepare and submit its offer as per instructions given in this section.
- b. The Bids should be complete with all documents dully signed by Authorized personnel. Those submitted by telex, telegramor fax shall not be considered.
- c. The Bids which are for only a portion of the components of the job /service shall not be accepted. The bids should be for all components of the job /service.
- d. The prices shall be guoted in the format as per attached Format F only.
- e. The Bids (technical and financial) shall be submitted (with a covering letter as per Format-T1 before the last date of submission. Late bids shall not be considered.

#### 2. Inspection of Site

The interested bidder may inspect the sites at the respective locations where the services are to be rendered during 10.00 AM to 5.00 PM on all working days till last date of bid submission as given in the Schedule of Events. The tender inviting authority shall not be liable for any expenditure incurred in such inspection for the preparation of the bids.

#### 3. Earnest Money Deposit (EMD)

- a. The bid shall be accompanied by Earnest Money Deposit (EMD) of Rupees Fifty Lakhs in the form of Bank Draft / Bankers cheque / Bank Guarantee (as per Format Annexure-A) from any National / Schedule Bank in favour of "Mission Director, NHM" payable at Bhubaneswar while submitting the Tender.
- b. No Biding entity is exempted from deposit of EMD. Bids submitted without EMD shall not be considered.
- c. The EMD of unsuccessful Bidder will be returned to them without any interest, after conclusion of the resultant agreement. The EMD of the successful Service provider will be returned without any interest after receipt of performance security as per the terms of agreement.
- d. EMD of Bidder may be forfeited without prejudice to other rights of the bid inviting authority subject to the opportunity of representation to the bid inviting authority, if the Bidder withdraws or amends its Bid or impairs or derogates from the Bid in any respect within the period of validity of its Bid or if it comes to notice that the information / documents furnished in its Bid is incorrect, false, misleading or forged. In addition to the aforesaid grounds, the successful Bidder's EMD will also be forfeited without prejudice to other rights of bid inviting authority subject to the opportunity of representation to the bid inviting authority, if it fails to furnish the required performance security within the specified period.

#### 4. Preparation of Bid

The bids shall be made in two separate sealed envelopes as follows:

**I.** The **first envelope** shall be marked in bold letter as "TECHNCIAL BID" which shall be sent with forwarding letter **Format-T1** and shall include the following:

- a. Bid document cost in the shape of Bank draft drawn in favour of "Mission Director, NHM" payable at Bhubaneswar for the amount of non refundable fee, if the Bid documents have been downloaded from web.
- b. Bid Security (EMD) of Rs. 50 Lakhs
- c. Confirmation regarding agreeing to all terms & conditions of the bid including bid & price validity, declaration regarding non-blacklisting / debarment, furnishing of Performance Security in case of award of agreement (Affidavit as per Format-T8)
- d. Original Bid document duly stamped and signed by the authorized personnel in each page along with the Forwarding Letter confirming the performing the assignment as per **Format-T1**
- e. All Formats **T2 T8** with all relevant supporting documents as mentioned in the concerned format
- f. Check list
- **II.** The **second envelope** shall contain the financial proposal and shall be marked in bold letters as "**FINANCIAL BID**". Prices shall be inclusive of all taxes & duties and quoted in the proforma enclosed at **Format-F** as per scope of work / service to be rendered.
- III. Both the envelops (Technical Bid & Financial Bid) shall be put in another outer envelope and shall be sealed and superscripted with "Proposal for Digital Diagnostic Services in Sub-Centre Ayshman Arogya Mandir (AAM) using IOT (Internet of Things) Medical Devices and Integrated Mobile Platform", RFP Reference No.\_\_\_\_ & Due date \_\_\_\_\_.

#### 5. Bid Validity & Contract Period

For the purpose of award of contract, the bids shall remain valid for a period of 180 days from the date of bid submission. The contract shall be executed for a period of "2 years" from the date of signing of contract and hence the prices quoted shall remain valid for the duration of the contract. The contract may be extended for another period of 1 year based on satisfactory performance of the service provider.

#### 6. Bid Submission

The **two envelopes** containing **both technical and the financial bid** shall be put in an **Outer envelope**, which shall be sealed and superscripted with "BID Name & Reference No......due for opening on....."

The offer shall contain no interlineations or overwriting except as necessary to correct errors, in which cases such correction must be initialled by the person or persons signing the Bid. In case of discrepancy in the quoted prices, the price written in words will be taken as valid.

#### 7. Opening of Bids:

The technical bid will be opened at the time & date specified in the schedule. The bidders may attend the bid opening if they so desire.

#### **ELIGIBILITY CRITERIA**

- 3.1 The bidder shall be a sole provider or a consortium (Company/Society/Trust/Partnership Firm). The bidder cannot be an individual (Sole Proprietor). The bidder should be registered in India with relevant act, such as a Company (Companies Act 2013/1956) / Partnership Firm (Indian Partnership Act 1932 / Limited Liability Partnership Act 2008), Society (Societies Registration Act 1860) or a Trust (Indian Trust Act 1882) and its amendments thereof. No bidder can place more than one bid in any form.
- 3.2 Consortium of maximum **2 bidders** (including the Lead member) is allowed. The lead / consortium member must be in the business of Digital Diagnostics Services using Point of Care IOT Medical Devices. In case of consortium the lead member should have at least 51% stake of the consortium and have all legal liabilities. In case of consortium, a duly notarized **consortium agreement** (as per format enclosed at Annexure B) prepared on a non-judicial stamp paper of Rs.100/-) shall have to be submitted in the technical bid. The Clause nos.3.7 & 3.8 shall be applicable to both the members (Lead member as well as consortium member) of the consortium.
- 3.3 The bidder must have executed at least 1 contract in Digital Diagnostics Services using minimum two Point of Care IOT Medical Devices in any Central / State Government Organizations / Govt. Health Facilities in India and also must have experience in successful operation & management of at least 200 sub-centres for Govt. Health Facilities in India during the last three years. The contract executed should be of minimum 1 year duration. Details to be furnished in Format T6
- 3.5 The bidder should have at least average annual turnover (audited) of Rs.20 Crores during last three financial years, i.e. 2021-22, 2022-23, 2023-24. In case of consortium, the lead member should fulfil the above turnover criteria. Details to be furnished in Format T3.
- 3.6 Bidder needs to submit audited Statement of Accounts and Turnover Certificate duly certified by Chartered Accountant. The annual turnover statement must be furnished in the Format-T3 duly supported by audited accounts statement. While calculating turnover, only audited statement shall be considered.
- 3.7 Bidder who has been blacklisted / debarred / banned by any State Government / Central Govt. Organization / State Medical Corporations will not be eligible to participate in the tender during the blacklisting / debarred period (Declaration as per Format-T8)
- 3.8 The bidder who have Poor / Unsatisfactory performance of Services rendered in any projects of the tender inviting authority shall not be eligible to participate in the tender.
- 3.9 The POC devices offered by the bidder must comply to the technical specification of the POC devices as mentioned in Section-7

#### **TERMS OF REFERENCE**

#### 4.1 Background and Rationale

- 4.1.1 During the last few years, Government of Odisha has taken several reform measures for strengthening delivery of healthcare services in lines with Sustainable Development Goals and striving sincerely to achieve Universal Health Coverage (UHC). As part UHC mandate and keeping in view of NHM conditionality with key deliverables, the list of assured diagnostic services have been expanded for all level of public health facilities.
- 4.1.2 The major challenge in rural and non-metro areas is the accessibility of high-quality diagnostics services. This normally happens due to lack of readily available and affordable diagnostic services across rural and non-metro areas.
- 4.1.3 At present, all the diagnostic devices/kits used at VHSND and HWCs are conventional medical devices and it does not have Bluetooth or any other connectivity to record the findings automatically. Taking advantages of these lacunas and manual reporting system, it is observed that many times, the staffs at field level are not putting correct values which lead to wrong reporting of actual field situation. For example, only 4% high risk pregnancies reported as per RCH portal data, which is 52 % as per NFHS-5 Report. Likewise, only 3% pregnant women are found to be severe anaemic as per RCH portal data against 61.8 % as per NFHS 5. As a result, nature and magnitude of the problem with regard to NCD and Maternal Health issues like high-risk pregnancies, hypertension, and diabetics etc. are not reflected correctly.
- 4.1.4 It has decided to address all the challenges by implementing Digital Diagnostics Services for all Sub-centre AAMs which are reliable, affordable, accurate and accessible.
- 4.1.5 The purpose of this RFP is to invite proposal from eligible Service Providers to select most suitable of them to integrate, operate and manage Digital Diagnostic Services in Sub-centre HWCs.
- 4.1.6 In view of the above, digital diagnostic services can be an incredibly valuable tool to improve quality of diagnostic and reporting system at VHSND and SC-AAM for the following reasons:
  - **a. Improved Data Management**: Digital diagnostic services generate Electronic Health Records (EHR), facilitating efficient management and analysis through specialized software platforms. This capability enables the tracking of disease trends, monitoring of outbreaks and facilitates datadriven decision-making processes aimed at enhancing public health outcomes.
  - **b. Real-time Monitoring:** Digital diagnostic services can be utilized to monitor disease outbreaks in real-time, furnishing public health professionals with current information regarding disease trends and enabling swift responses to emerging threats.
  - **c. Improved Accuracy:** Digital diagnostic services can provide real-time, accurate information to various stakeholders, thereby reducing the risk of misdiagnosis and empowering public health professionals to make informed decisions regarding treatment and disease control.

#### 4.2 Expected Benefits for implementing Digital Diagnostic Services in Sub-centres:

- a) No manual entry of diagnostic values.
- b) Real-time tracking of VHND sessions with reporting and dashboard.
- c) Real-time tracking of all OPD testing in HWC.
- d) Diagnostic values could be shared with E-Sanjeevani / other Government portals for teleconsultation services.

- e) IoT enabled point-of-care (POC) devices for testing without the need for a lab technician.
- f) Comprehensive line listing of VHND session and Health & Wellness Centre diagnostic reports in one mobile application.
- g) Considering the man-hours involved and potential data loss, this digital diagnostic system will be highly cost-effective, improve data management, increase efficiency, provide remote access and enhance accuracy; all without imposing any additional financial burden thereby contributing to better public health outcomes.

#### 4.3 Services and Coverage

- 4.3.1 Integration of the Digital Diagnostic Devices
- 4.3.1.1 It has been decided to **integrate IoT based point of care (POC) digital diagnostic devices** for all sub-centres
- 4.3.1.2 The **proposed services** are as follows:

# A. <u>POC Device, Mobile Application, Dashboard, HR for Program Coordination & Customer Support</u>

SI.	Proposed Services	Components		
1	IoT based Point of Care (POC) Medical Devices	Blood Pressure Monitor, Pulse Oximeter, Glucometer, Hemoglobinometer, Digital Weiging Machine, Digital Stethoscope, Fetal Heart Monitor and <u>Urine Analyzer</u> . The basic device should be portable IOT based Point of Care digital device, lightweight, compact in size and adequately packed in a bag. The total weight including accessories should not increase by more than 6 kg. All necessary accessories for the devices should be provided accordingly.		
2	Single Mobile Application	All necessary tests should be conducted by multiple individual devices for different parameters; all devices shall be connected to a single Android mobile application. The platform should have the capability to add or remove integrated devices as required by the government.		
3	Web-based Dashboard	A web-based real-time dashboard with clinical insights, granting appropriate access levels based on stakeholders' roles. The dashboard must include cumulative reports with utilization details (such as the usage of strips, VHND sessions with location tracking, and other operational parameters) of each sub-center.		
4	HR-Program Coordination & Customer Support	Dedicated on-ground program coordinator, program managers to manage all sub-centers for troubleshooting, consumable requirements, hardware replacements and other on-ground issues for smooth management and operations of the project. Support should be available from 9 am to 5 pm on all government working days.  a) On-ground Program Co-coordinators: One for 200 Sub-centers. b) Project Managers: One for 10 districts c) State Program Coordinator: One		
5	Software Features	<ul> <li>a) Ability to integrate additional devices if needed</li> <li>b) Ability to integrate to existing HIMS/Government Portals</li> <li>c) Ability to integrate and provide Telemedicine services</li> <li>d) Ability to integrate with ANMOL applications</li> </ul>		

#### B. Consumables:

#### Approx. No. of Consumables per Health Sub-Centre for Two Years

Diseases / Tests	Population Approx. <b>5,000 / Health</b> <b>Sub-Cent</b> re	Expected no. Test strips <u>per</u> <u>Month per Health Sub-</u> <u>centre including VHND</u> Sessions	Approx. No. of Test strips / Three Years / Health Sub- centre
Diabetes / Glucose (Portable IOT based Point of Care device digital Glucometer)		100 (Glucose Strips) for Glucometer	100*36=3600 (Glucose)
Anaemia / Hemogobin (Portable IOT based Point of Care device digital Hemoglobinometer)		100 (Hb Strips) for Hemoglobinometer	100*36=3600 (Hb)
Urine Analysis (Portable IOT based Point of Care device Urine Analyzer)		75 (Urine Dipstick) for Urine Analyzer	75*36= 2700 (Urine Dipstick)

# 4.3.2 Activity Flow and Responsibility Matrix [Service Provider (SP) , Tender Inviting Authority (TIA) & District Authority (DA)]

Type of Activity	TIA	DA	SP
1.Selection of Service Provider	✓		
2. Signing of Contract	<b>√</b>		
3. Acceptance of Supply order			<b>√</b>
4. Allocation of Fund	<b>√</b>		
5. Payment to Service Provider		<b>√</b>	
Supply & Installation of Digital Diagnostics Services –     Hardware			<b>√</b>
7. Supply & Installation of Digital Diagnostic Services – Software			✓
8. Sub-centres operations and management		✓	
9. Providing ANMs/HW(M/F) or other eligible paramedics professional for the project		<b>√</b>	
10. On Site Training to all Paramedics (District/ Block Level)			✓
11. On Site Regular monitoring for trouble shooting and hand holding support			✓
12. Weekly Consolidated Report to stakeholders			✓
13. Customer Care Support			✓
14. Maintenance and Replacements			✓
15. Procurement of Consumables		✓	
16. Supply of Consumables			<b>√</b>
17. Monitoring and Evaluation			✓

18. Standard Operating Procedures and Protocols for Digital		<b>√</b>
Diagnostic Services for Sub-centres		
19. Overall Monitoring and Supervision	<b>√</b>	
20. Upgradation and Accreditation of Sub-centres	✓	

#### 4.4 Scope of Work

- 4.4.1 The Service Provider shall manage the integration, operations and management of Digital Diagnostic Services in Sub-centres.
- 4.4.2 The Service Provider shall **supply the IoT based POC Medical devices** which are to be **integrated in the single mobile application platform** to provide **real time data** for better monitoring and help
  the stakeholders to make evidence based public health decisions.
- 4.4.3 The usage of IoT-based POC medical devices for VHND includes Blood Pressure Monitors, Pulse Oximeters, Glucometers, Hemoglobinometers, Digital Weighing Scale, Digital Stethoscope, Fetal Heart Monitor and Urine Analyser.
- 4.4.4 Service Provider shall recruit and train qualified manpower required for customer support and ensure that the past performance, conduct and track record of personnel recruited for this project are clean.
  - Service Provider shall schedule and plan the training for the respective Healthcare workers to ensure proper usage of IoT-based POC medical devices.
- 4.4.5 In addition to above specific activities, the Service Provider shall develop and implement appropriate control mechanism to ensure:
  - a) Optimal use of the devices on regular basis
  - b) Proper selection and training of human resources for customer support
  - c) Transparent and efficient project delivery to all sub-centres
  - d) Continuous performance monitoring and evaluation
- 4.4.6 The service provider shall provide the manpower which includes On-ground program coordinators, customer support and project management.
- 4.4.7 The service provider shall ensure the compliance of calibration and quality of the IoT based medical devices and its software.
- 4.4.8 The service provider shall provide the consolidated reports on weekly and monthly basis to the respective government stakeholders.
- 4.4.9 The service provider should help the government stakeholders for any technical support for integration with respective Governments platforms as per the requirement of the mentioned project.
- 4.4.10 The service provider should add or remove the devices if needed without interrupting the existing operations.
- 4.4.11 The service provider should ensure that during replacement or maintenance of the devices, the existing operations should not interrupt.
- 4.4.12 Technical specifications of IoT based POC medical devices and software is given in **Section-7**. **The** service provider's mobile application platform should possess the capability to seamlessly

**integrate the existing Point of Care devices**, subject to the government authorities providing the necessary Software Development Kit (SDK) from the respective existing vendors. The government authorities will ensure the continuous technical support from the existing vendors for providing the SDK to the service provider throughout the project period.

4.4.13 The service provider shall prepare detailed Standard Operating Procedures (SoPs) / protocol and submit it to the Authority for approval. The Authority / Government reserve the right to prescribe additional/new operational requirements at any time during the currency of the contract.

#### 4.5 Expected Output

- 4.5.1 **Enhanced Data Management**: Implementation of systems to optimize data storage, retrieval and processing.
- 4.5.2 **Elimination of Manual Data Entry**: Automation of processes to ensure accuracy and efficiency in capturing diagnostic values.
- 4.5.3 **Real-Time Monitoring of OPS and VHND Sessions**: Utilization of systems enabling immediate tracking and reporting of all Outpatient Department Services (OPS) and Village Health and Nutrition Days (VHND) sessions through dynamic dashboards.
- 4.5.4 **Integration of IoT-Enabled Advanced Medical Devices**: Incorporation of interconnected medical devices into a **unified platform** to enhance accessibility and streamline healthcare delivery.
- 4.5.5 **Reduction of Data Loss and Enhancement of Public Health Outcomes**: Implementation of measures to minimize data loss, thereby contributing to improved overall public health outcomes through more robust data-driven decision-making processes.
- 4.6 Service Provider's Responsibilities
- 4.6.1 **Supply & Installation of Hardware and Software:** The Service Provider is responsible for the delivery of hardware, software and consumables / reagents as per the project requirement to all the sub-centres.
- 4.6.2 <u>Schedule of Implementation</u>: The Service Provider shall provide detailed plan for smooth transition of operations and services including schedule of implementation and handing over with timelines. The service provider has to **complete the entire process** <u>within 6 (six) months</u> from the date of signing of the Contract.
- 4.6.3 **Training to Paramedics:** The service provider shall schedule and implement the one-time on-site training for all the paramedics.
- 4.6.4 **Monitoring and Evaluation**: Develop and implement a fool proof monitoring and evaluation system to ensure efficiency in capacity utilization. Key indicators need to be put in place for looking at customer support, devices replacements and volume of utilization. An online monitoring system having access to data to be provided at the office of Mission Director, NHM, Bhubaneswar by the Service Provider. The Service Provider shall also provide all necessary information as required by the Authority from time to time.
- 4.6.5 **Procurement of IOT POC Device & Mobile Phone**: The service provider shall be reponsible for procurement of IOT POC devices & Mobile Phone as per technical specification, the details of which are mentioned at Section 7. All the IOT based POC devices procured for which CAPEX is paid, shall be the property of Government of Odisha.
- 4.6.6 **Software Support:** The Service Provider is expected to provide all necessary software at no extra

cost other than price as quoted in the Financial Bid to manage the Services as per the scope of work. All data generated during the contract period shall be the property of Government of Odisha.

4.6.7 **Manpower for various Services:** The Service Provider at each district shall provide at least one field coordinator to respond, attend and explain the progress to District Collector/ CDMO for coordination / resolution of complaints, if any. Service Provider must keep following roles and responsibilities of manpower as given below:

SI.	Position	Education, Roles and Responsibilities	
1	On-Ground Program Coordinators (One for every 200 sub health centers)	<ul> <li>Education Qualification &amp; Experience: MSW/BCA/BBA/Any graduate with experience in Public Health and Development Sectors</li> <li>Supporting Health Workers with Digital Diagnostic Devices: The onground program coordinator is responsible for providing comprehensive and ongoing support to health workers in operating digital diagnostic devices.</li> <li>Attending Support Calls from Health Workers: The on-ground program coordinator is responsible for addressing support calls from health workers and resolving any queries they may have.</li> </ul>	
		Conducting Maintenance Checks of Devices: The on-ground program coordinator is required to perform quality and maintenance checks of digital diagnostic devices on a periodic basis.	
		Reporting Consumable Availability: The on-ground program coordinator must collect reports on consumable availability and report them to the Project Manager (PM).	
		Making Regular Field Visits: The on-ground program coordinator shall make frequent field visits to understand any issues or problems faced and escalate them to the PM.	
		• Escalating Software Connectivity Issues: The on-ground program coordinator must escalate any software connectivity issues experienced by health workers to the PM.	
		Checking and Replacing Faulty Devices: The on-ground program coordinator is responsible for checking and replacing any faulty devices.	
2.	Project Managers (PM) (One for 10 districts)	<ul> <li>Education Qualification &amp; Experience: MBA/MPH with at least 3 years experience in Public Health and Developmental Sector</li> <li>Placing Orders for Consumables: The PM is the designated point of contact responsible for placing orders for consumables when there is a depletion of test strips and coordinating their delivery.</li> <li>Maintaining Records and Handling Complaints: The PM must maintain records of any complaints received from the field and address them promptly.</li> <li>Conducting Regular Feedback Calls: The PM is required to conduct regular feedback calls with personnel on the ground to gather insights and address any issues.</li> <li>Coordinating with Vendors or Internal Tech Team: The PM must coordinate with vendors or the internal technical team for any support needed regarding the project.</li> </ul>	

	Collaboration with On-Ground Program Coordinator: The PM must collaborate with the Tech/Ops team or contact Government authorities to support the On-Ground Program Coordinator as required.
State Programme 3 Coordinator (1)	<ul> <li>Education Qualification &amp; Experience: MBA/MPH with at least 7 years experience in the field of Public Health and Developmental Sectors.</li> <li>Program Planning and Implementation</li> <li>Team Management</li> <li>Build and maintain relationships with key stakeholders</li> <li>Establish monitoring and evaluation mechanisms to assess program effectiveness</li> </ul>

- 4.6.8 Service Provider shall be responsible for the payment to its staffs for this project.
- 4.7 State Government Responsibilities:
- 4.7.1 **Overall Monitoring and Supervision:** The government shall establish different committees at both state and district levels with appropriate delegation, to ensure the smooth implementation, monitoring, supervision and management of the project "Digital Diagnostic Services in Sub-Center Health & Wellness Centers in Odisha."
- 4.7.2 **Upgradation and Accreditation of Facilities:** The government shall take responsibility for the necessary upgradation and accreditation of health facilities in the project area to optimize the benefits of Digital Diagnostic Services.
- 4.7.3 **Delegation of Power:** The government shall authorize or empower the service provider to carry out necessary tasks under the purview of this assignment and to act as a Nodal Service.
- 4.7.4 **Allocation of Funds:** The government shall allocate funds towards various tasks or activities under the project as per mutually agreed terms and conditions.
- 4.7.5 **Provision for Space and Infrastructure:** The government shall provide necessary space and infrastructure as per agreed terms and conditions.
- 4.7.6 **Liaison with Other Departments and Agencies:** The government shall facilitate liaison with other departments or authorities critical to the functioning of software and operations, such as procurement, district administration, IT department, and state authorities.
- 4.7.7 **Payment to Service Provider:** Ensure timely release of payment against all valid claims towards CAPEX and OPEX submitted by the Agency in the prescribed manner as per the terms and conditions of the contract.
- 4.7.8 Establish and empower a dedicated customer support lead by project manager of service provider for monitoring of this Project on day to day basis, which shall work under the overall supervision and control of the Mission Director, NHM, Odisha. This Cell will act as an interface between the department and other stakeholders/parties and perform the following functions:
  - i) Ensuring seamless coordination between the Government and the Service Provider in effective and efficient implementation of the project as per the agreement.
  - ii) Proactive role in strategic and operational planning of activities that would enhance the value of the services, both existing & potential, and effective monitoring of the outputs & outcomes of the project activities.

- iii) Protecting the interests of the Government in consultation with the Service Provider duly ensuring that all major policy and operational decisions relating to the human resources, procurement, financial management, management information system etc. (limited to Odisha operations) of the Service Provider are shared with MD, NHM, Odisha.
- iv) Ensuring timely release of funds to the Service Provider and their utilization in accordance with the agreement and follow-up action thereof.
- v) Ensuring proper upkeep and maintenance of assets that are purchased with the Government funds that are under the control of the Service Provider for delivery of services.
- vi) Anticipate and alert the Government of any problems that might have a direct impact on the quality ofservices.
- vii) Ensuring all the Government expenditures under the project are within and as per the provisions of the Agreement.
- viii) Submission of specified periodical reports to department on Physical and operational performance. Coordination with department and other authorities at district/institution or state level for smooth functioning of the project.

#### **TERMS AND CONDITIONS**

#### 1. Signing of Contract

The bid inviting authority shall issue the Notice for Award of Contract to the successful bidder within the bid validity period and the successful bidder will be required to sign and submit the contract unconditionally within 15 days of receipt of such communication.

#### 2. Duration of the Contract (Period of Engagement) & Modification to the Contract

The contract shall be valid for a period of **2 years** from the date of signing of contract by the bid inviting authority and it could be cancelled at any time after providing an opportunity of hearing by the bid inviting authority, in case the Service provider does not follow the rules, regulations and terms and condition of the contract. The contract **may be extended for another period of 1 year** based on satisfactory performance of the service provider.

The contract when executed by the parties shall constitute the entire contract between the parties in connection with the jobs / services and shall be binding upon the parties. Modification, if any, to the contract shall be in writing and with the consent of the parties.

#### 3. Performance Security

The successful bidder shall furnish a performance security in the shape of a Demand Draft/Bank Guarantee issued by a Nationalized / Scheduled Bank in favour of Tender Inviting Authority for an amount equal to 5% of the Yearly contract value. The Bank guarantee shall be as per proforma at "Annexure \_\_\_\_" and remain valid for a period, which is six months beyond the date of expiry of the contract. This shall be submitted within 15 days of receiving the Notice for Award of Contract, failing which the EMD may be forfeited and the contract may be cancelled:

- a) If the successful bidder violates any of the terms and conditions of contract, the Performance Security shall be liable for forfeiture, wholly or partly, as decided by the Purchaser and the contract may also be cancelled.
- b) The Purchaser will release the Performance Security without any interest to the firm / contractor on successful completion of contractual obligations.

#### 4. Compliance of Minimum Wages Act and other statutory requirements

The bidder shall comply with all the provisions of Minimum Wages Act and other applicable labour laws. The bidder shall also comply with all other statutory provision including but not limited to provisions regarding medical education and eligibility criteria of human resources used by the bidder for providing the services, biomedical waste management, bio-safety, occupational and environmental safety.

Legal liability to the extent of reporting of images for each reported case extends to the service provider. However overall legal responsibility of provision of medical care lies with the bid inviting authority / public health facility. The Service provider shall maintain confidentiality of medical records and shall make adequate arrangement for cyber security.

#### 5. Income Tax Deduction at Source

Income tax deduction at source shall be made at the prescribed rates from the successful bidder's bills. The deducted amount will be reflected in the requisite Form, which will be issued at the end of the financial year.

#### 6. Delivery, Payment and its Periodicity

The delivery & payment mechanism shall be **decentralized**. The **IOT based POC devices** packed (with adequate slot for keeping each POC device with accessories) in a briefcase kit shall have to be delivered by the service provider at the district headquarter of all districts. Similarly the **test strips / consumables** based on the **quarterly requirement** of sub-centers of each district shall have to be delivered at the concerned district headquarter on a **quarterly basis** based on periodic requirement of the district.

The payment shall be made at **each district headquarter level** by the Chief District Medical Officer / Director of the concerned health institution. The payment towards **one time CAPEX** (IOT based POC devices) & **quarterly basis OPEX** (Test Strips / Consumables) will be made through **e-payment** for all invoices raised in the manner described below. The payment will be subject to TDS as per Income Tax Rules and other statutory deductions as per applicable laws. The **payment processing mechanism** is mentioned below:

- a) Payment shall be made at the District level by the concerned DHHs, the processing of which shall be initiated at the District Program Management Unit (DPMU).
- b) 80% of payments towards Capex bill shall be made at the district headquarter based on the receipt and stock entry at the district level. The district shall distribute the IOT based POC devices briefcase kit to the concerned Sub centers. Balance 20% payment shall be made based on completion of the training at district / block level to ANM / CHO.
- c) Similarly, the bills towards OPEX are to be submitted by the Service Provider on a quarterly basis based on the actual no. of strips supplied to the districts as per requirement. The district shall supply & distribute the same to the concerned sub centre. 100% payments of strips / consumables supplied on a quarterly basis shall be made to the service provider based on actual no. of strips / consumables supplied. The service provider shall also provide a consolidated statement details regarding no. of tests carried out (Sub centerwise) on aquarterly basis generated through the online dashboard application.
- d) After verification of bill, it shall be certified by the Nodal Officer of the concerned district for payment.
- e) The payment should be made within 30 days of receipt of bill by the concerned district authority.

#### 7. Damages for Mishap/Injury

The procurer shall not be responsible for damages of any kind or for any mishap/injury/accident caused to any personnel/property of the successful bidder while performing duty in the procurer's / consignee's premises. All liabilities, legal or monetary, arising in that eventuality shall be borne by firm/ contractor.

#### 8. Termination of Contract

The procurer may terminate the contract, if the successful bidder withdraws its tender after its acceptance or fails to submit the required Performance Securities for the initial contract and or fails to fulfil any other contractual obligations. In that event, the procurer will have the right to procure the same goods / equipment from next eligible bidder and the extra expenditure on this account shall be recoverable from the defaulter. The earnest money and the performance

security deposited by the defaulter shall also be recovered to pay the balance amount of extra expenditure incurred by the purchaser.

After completion of the tenure of contract, the service provider will be allowed to vacate the space within a period of 15 days, in all the facilities where provider was providing the services.

#### 9. Arbitration

- a. If dispute or difference of any kind shall arise between the procurer and the service provider in connection with or relating to the contract, the parties shall make every effort to resolve the same amicably by mutual consultations.
- b. If the parties fail to resolve their dispute or difference by such mutual consultations within thirty days of commencement of consultations, then either the procurer or the service provider may give notice to the other party of its intention to commence arbitration, as hereinafter provided. The applicable arbitration procedure will be as per the Arbitration and Conciliation Act, 1996 of India. In that event, the dispute or difference shall be referred to the sole arbitration of an officer to be appointed by the Mission Director, National Health Mission, Odisha as the arbitrator. If the arbitrator to whom the matter is initially referred is transferred or vacates his /her office or is unable to act for any reason, he / she shall be replaced by another person appointed by the Mission Director, National Health Mission Odisha to act as Arbitrator. Such person shall be entitled to proceed with the matter from the stage at which it was left by his /her predecessor. The award of the provision that the Arbitrator shall give reasoned award in case the amount of claim in reference exceeds Rupees One Lac (Rs.1,00,000/-)
- c. Work under the contract shall, notwithstanding the existence of any such dispute or difference, continue during arbitration proceedings and no payment due or payable by the Procurer or the service provider shall be withheld on account of such proceedings unless such payments are the direct subject of the arbitration.
- d. Reference to arbitration shall be a condition precedent to any other action at law.
- e. Venue of Arbitration: The venue of arbitration shall be at **Bhubaneswar**.

#### 10. General Terms & Conditions

- a. Commencement & Completion of Service: The Service provider shall commence the proposed service within the 120 days of signing of the agreement & complete the entire imlementation within 180 days of signing of contract.
- b. The procurer shall finalize the Standard Operating Procedures (SOPs) for the services to be followed by the service provider.
- c. With regard to the doubtful observations, a repeat investigation will be carried out at the cost of the procurer.
- d. All the operational cost within the declared scope of work including the cost of deployment of the personnel will be borne by the service provider.

#### 11. Applicable Law and Jurisdiction of Court

The contract shall be governed by and interpreted in accordance with the laws of India for the time being in force. The Court located at the place of issue of contract shall have jurisdiction to decide any dispute arising out of in respect of the contract. It is specifically agreed that no other Court shall have any jurisdiction in the matter.

#### **EVALUATION CRITERIA**

#### 6.1 Evaluation of Technical Proposals

- 6.1.1 In the first stage, Technical Bid shall be opened and the eligibility shall be assessed as per the set criteria given in **Section 3**.
- 6.1.2 Technical Proposal of those bidders shall be considered for technical evaluation that qualifies the eligibility criteria as mentioned in Section 3. Technical Proposal will be evaluated on the basis of bidder's experience, financial capability, technical specification and presentation. Only those bidders whose score on evaluation of technical proposal is more than or equal to seventy (70) out of the total technical score of one hundred (100) shall be considered for their Financial Bid Opening.
- 6.1.3 Technical Proposal of all the Applicants will be evaluated based on appropriate marking system. The categories for marking and their respective weightage are as under:

SI.	CRITERIA	MAXIMUM MARKS
	EXPERIENCE OF THE BIDDER	
	<ul> <li>i) No of contracts (with minimum 1 year duration) executed in operation and management of Digital Diagnostic Services using minimum two Point of Care IOT devices in any Central / State Government Organizations / Govt. Health Facilities in India in the last three years.</li> <li>(a) 2 Contracts: 5</li> <li>(b) 3 Contracts: 10</li> <li>(c) Above 3 Contracts: 15</li> </ul>	15
1	ii) Experience in operation and management of Digital Diagnostic Services Contract (with minimum 1 year duration) using minimum two Point of Care IOT devices in Sub-centres / PHCs / UPHCs of Govt. Health Facilities at any States in India in the last three years:  (a) From 201 upto 250 subcentres / PHCs / UPHCs: 5 (b) From 251 upto 300 subcentres / PHCs / UPHCs: 10 (c) From 301 upto 350 subcentres / PHCs / UPHCs: 15 (d) From 351 upto 400 subcentres / PHCs / UPHCs: 20 (e) Above 400 subcentres / PHCs / UPHCs: 25	25
	iii) *Experience in operation and management of Digital Diagnostic Service by <b>integrating number of Point of Care IOT devices</b> in a <b>single contract</b> (with minimum 1 year duration)	
	(a) Execution of single contract by integrating 3 Point of Care IOT devices : 5	
	(b) Execution of single contract by integrating 4 Point of Care IOT devices : 10	15
	(c) Execution of single contract by integrating 5 or more Point of Care IOT devices: 15	
	*The single contract with highest number of POC device shall be taken into account for award of contract.	
	iv) Awards and Recognition: Awards and Recognition – Any government projects executed by the agency as mentioned in Sl.1 (i) have been recognized and have secured National and State level awards  [(a) 1 Award: 2.5  (b) 2 Awards and more: 5]	5

	2	i) Project Implementation Plan including transition plan, approach, methodology, innovations, POC devices and its integration, manpower deployment, evaluation and monitoring, timeline  ii) Quality, Scalability and Adaptability of the proposed single mobile application software and IoT Medical devices	10
	3	FINANCIALSTRENGTH - Avg. Annual Turnover (Rs.)  >20 ≤ 25 crores = 10 marks,  > 25 ≤ 30 crores = 15 marks,  > Rs.30 Crores = 20 marks	20
	4	TECHNICAL PRESENTATION (BEFORE THE EVALUATION COMMITTEE)	10
-		TOTAL	100

- 6.1.4 All eligible bidders (if qualified as per eligibility criteria) shall be required to make a PowerPoint Presentations up to **15 minutes**, before opening of Financial Proposals, to demonstrate their credentials before the Evaluation Committee and to submit hard copies during the presentation. The presentation shall broadly cover the following aspects:
- 6.1.4.1 Brief Company profile, local presence, associates, major clients & projects etc.
- 6.1.4.2 Experience and capabilities of conducting similar assignments in Sub health Centres
- 6.1.4.3 Understanding of assignment alongwith methodology indicating broad roadmap with demonstration of their application and POC Kit.
- 6.1.4.4 Timeline with Gantt Chat
- 6.1.4.5 Risks and proposed risks mitigating measures
- 6.1.4.6 Proposed Personnel alongwithTeam Leader and Manpower commitment.

  The time and venue for the presentation shall be intimated to the Applicants.
- 6.1.5 In the case of a consortium applicant, technical scoring under "Experience" and "Financial Strength" shall be conducted separately. Financial strength will only be considered for the <u>lead member</u>, while technical experience can be taken <u>combinely</u>.

#### 6.2 **Evaluation of Financial Proposal**:

- 6.2.3 Financial bid of only those bidders whose technical score (as per the technical evaluation) is above 70 (seventy) shall be considered for financial bid opening.
- 6.2.4 Selected Bidders will finally be ranked according to their combined technical (Tb) and financial (Cb) scores as follows:
  - Bb = [(0.7) \* Tb] + [(0.3) x (Cmin / Cb \*100)]
  - Where, Bb = overall combined score of bidder under consideration (calculated up to two decimal points)
  - Tb = Technical score of the bidder under consideration
  - Cb= Financial bid value of the bidder under consideration
  - Cmin = Lowest financial bid value among the financial proposals under consideration
- 6.2.5 The d Bidder having the **highest combined score** shall be awarded the contract.

#### **Technical Specification of IOT based POC Devices**

#### 7.1 DIGITAL BLOOD PRESSURE MEASUREMENT INSTRUMENT:

PARAMETERS	SPECIFICATIONS
Туре	Upper Arm
Display	LCD
Date and Time	Yes
Connectivity	Bluetooth
Battery	Yes
Number of Batteries Required	4
Function	Automatic
Pressure Measurement Range	0-280 mmHg (Systolic pressure: 60-260mmHg, Diastolic Pressure: 40 to 200mmHg
Minimum Pulse Measurement Range	30 to 50 beats/min
Maximum Pulse Measurement Range	180-199 beats/min
Pressure Measurement Accuracy	±3 to 5 mmHg
Other	Indicates on Low Battery, automatic switch-off
Clinical Parameters	Blood Pressure , Pulse
Measurement Method	Oscillometric
Product Certification	The quoted model should be USFDA (510K/CFG) / CE certified
Manufacturer Quality Standards CDSCO	<ul> <li>The manufacturer of the quoted product should have ISO 13485 certificate issued from a notified body or ICMED 13485 (with or without plus) certificate issued from certification bodies accredited by NABCB / Nationally Recognized Accreditation Board under IAF MLA.</li> <li>The quoted medical device must be registered under CDSCO and submit the license for manufacture to sale or distribute the medical device.</li> </ul>
Comprehensive Warranty	3 Years

#### 7.2 DIGITAL PULSE OXIMETER

PARAMETERS	SPECIFICATIONS
Connectivity	Bluetooth

Battery	Yes
Battery Level Indication	Yes
Product Certification	The quoted model should be USFDA (510K/CFG) / CE certified.
Manufacturer Quality Standards CDSCO	The manufacturer of the quoted product should have ISO 13485 certificate issued from a notified body or ICMED 13485 (with or without plus) certificate issued from certification bodies accredited by NABCB / Nationally Recognized Accreditation Board under IAF MLA.  The quoted medical device must be registered under CDSCO and submit the license for manufacture to sale or distribute the medical device.
Product Type	Portable
Others	Auto-Shutoff Function
Display	LCD/ OLED
Clinical Parameters	Oxygen Saturation Levels, Pulse Rate, Perfusion Index (Pi)Measures Oxygen Concentration (SpO2) in the blood range 70 - 100% (Accuracy: +/- 2%) and Pulse Rate Range 30 - 250 bpm (Accuracy: +/- 2bpm)
Comprehensive Warranty	3 Years

#### 7.3 DIGITAL BLOOD GLUCOMETER:

PARAMETERS	SPECIFICATIONS
Connectivity	Bluetooth
Display	Digital / Display on Mobile
Measuring Source	STRIP
Glucose Measuring Range/DI	10 mg/dL to 700 mg/dL
Reading Time (In S)	5- 10 sec
Sample Quantity/ Volume	Less than equal to 0.5 μL/ 0.6 μL
Operating Temperature Range, °C	5 to 45
Clinical Parameters	FBS, PPBS, RBS TESTS
Self life of Gluco Strips	Self-life of Glucostrips from the date of manufacture should be at least 24 months.  Shelf life of Glucostrips after first opening of the strip pack should be 6 months or higher.
Battery	YES
Product Certification	The quoted model should be USFDA (510K/CFG) / CE certified. The Quoted model of the Glucometer and its strip should comply with ISO 15197:2013 standards (In vitro diagnostics test systems-Requirements for blood-glucose monitoring systems for self testing in managing mellitus) issued from Certification Bodies accredited as per ISO/IEC 17025 standard. Such Certification Bodies may be Govt. Labs recognized by BIS or accredited to NABL or National Institute of Biological (NIB) etc.

CDSCO	The quoted medical device must be registered under CDSCO and submit the license for manufacture to sale or distribute the medical device.
Manufacturer Quality Standards	The manufacturer of the quoted product should have ISO 13485 certificate issued from a notified body or ICMED 13485 (with or without plus) certificate issued from certification bodies accredited by NABCB / Nationally Recognized Accreditation Board under IAF MLA.
Accuracy	Should have Accuracy: ±15% of glucose concentrations greater than equal to 100mg/dL.
Reproducibility/Precision	Acceptance criteria related to accuracy criteria of ISO 15197:2013. Criterion A (CV less than equal to 5% at glucose concentrations greater than equal to 100mg/dL).
Comprehensive Warranty	3 Years

#### 7.4 DIGITAL HEMOGLOBINOMETER

PARAMETERS	SPECIFICATIONS
Connectivity	Bluetooth
Measurement Type	Invasive
Measuring Source	STRIP/ micro Cuvette
Accuracy	< 3%-5% CV
Measuring Range	2 to 25 g/dL
Test Time	30-60 seconds
Blood Volume	~ 8-15μL
Sample type	Capillary, venous or arterial whole blood.
Auto-calibration	Auto/Self calibration should be available. The Hb meter should be factory calibrated as per the recommendations/ guidelines of International Council for Standardization in Haematology (ICSH)
Operating Temperature	5 to 50 ° C
Error Check	Inbuilt process error algorithims
Battery	Yes
Clinical Parameters	Hb level
Self Life of (STRIP/ Cuvette	Shelf life for storage should be at least 1 year with Open vial stability for cuvette /strip of at least 6 month.
Product Certification	The quoted model of the product should be USFDA approved (510 k / CFG) OR CE Certified
Manufacturer Quality Standards	The manufacturer of the quoted product should have ISO 13485 certificate issued from a notified body or ICMED 13485 (with or without plus) certificate issued from certification bodies accredited by NABCB / Nationally Recognized Accreditation Board under IAF MLA.
CDSCO	The quoted medical device must be registered under CDSCO and submit the license for manufacture to sale or distribute the medical device.
Comprehensive Warranty	3 Years

#### 7.5 DIGITAL WEIGHING SCALE:

PARAMETERS	SPECIFICATIONS
Connectivity	Bluetooth
Maximum User Weight	180 kg / 400lb
Display	LED / LCD
Model Approval	The digital weighing scale should have Model Approval from Legal meteorology Department and manufacturer should have valid manufacturing License issued from legal metrology.
Battery	Yes
Indication	Low Battery Indication
Sensors	High Precision strain gauge sensors
Other	Step power on/auto power-off
Clinical parameters	Body weight &BMI and upto 10-13 Key Body Composition Analysis
Conversion	KG/LB/ST
Comprehensive Warranty	3 Years

#### 7.6 DIGITAL STETHOSCOPE

PARAMETERS	SPECIFICATIONS
Product Certification	<ul> <li>The manufacturer of the quoted product should have ISO 13485 certificate issued from a notified body or ICMED 13485 (with or without plus) certificate issued from certification bodies accredited by NABCB / Nationally Recognized Accreditation Board under IAF MLA.</li> <li>The quoted medical device must be registered under CDSCO and submit the license for manufacture to sale or distribute the medical device.</li> <li>The quote model should be USFDA(510k/ CFG) / CE certified</li> </ul>
Connectivity	Bluetooth
Measuring Frequency Range	Heart Sounds 20Hz to 500hz; Lung Sound 20Hz to 500Hz
Type of Battery	Lithium Ion-RECHARGEABLE
Others	16 X Amplification with Noise Cancellation, Speaker and Headphone Compatibility
Power Adapter Available	Yes
Comprehensive Warranty	3 Years

## 7.7 Digital Fetal Heart Monitor

Features	Specifications
Connectivity	Bluetooth
Working mode	Continuous Doppler
Measurement Range	50-230bpm

Accuracy	±2bpm
Working Frequency	2.0MHz - 3.0MHz
Battery	Yes
Certifications	<ul> <li>The manufacturer of the quoted product should have ISO 13485 certificate issued from a notified body or ICMED 13485 (with or without plus) certificate issued from certification bodies accredited by NABCB / Nationally Recognized Accreditation Board under IAF MLA.</li> <li>The quoted medical device must be registered under CDSCO and submit the license for manufacture to sale or distribute the medical device.</li> <li>The quote model should be USFDA(510k/CFG) / CE certified</li> </ul>
Comprehensive Warranty	3 Years

## 7.10. Digital Urine Analyzer (Al Enabled)

Oliveia al Decemana	The contract and have to destinate the contract at the contract of
Clinical Purpose	The urine analyzer is designed to automate the testing and analysis of urine samples, supporting early detection, diagnosis, and monitoring of various diseases and health conditions.
Intended Users	The device is suitable for operation by semi-skilled personnel, health workers, volunteers, paramedical staff, and clinicians with minimal training
Assay Method	Image analysis using AI-enabled computer vision
Test Duration	Up to 2 minutes per test, including patient on boarding and report generation
Sample Type	Fresh urine sample (collected in a sterile container)
Throughput	Approximately 60 samples per hour (may vary by model)
Test Strip Compatibility	Compatible with multi-parameter urine test strips (10, 11, or 14 parameters)
Connectivity:	Wi-Fi, Bluetooth, USB, Ethernet
Data Storage	Local storage with optional cloud synchronization
Result Display	On-screen or via a connected Android mobile app or tablet
Accuracy	<ul> <li>Colorimetric Accuracy: ±1 color block compared to the reference standard under controlled lighting conditions</li> <li>Reproducibility: ≥95% consistency in repeat measurements</li> <li>Laboratory Matching: ≥90–95% correlation with lab results</li> </ul>
User Interface	Android mobile or tablet-based user interface
Software and Communication	<ul> <li>Offline Functionality: Supports testing without internet connectivity</li> <li>Bluetooth Connectivity: Enables seamless data transfer to smart phones or tablets</li> <li>Patient On boarding: Local language support for patient registration and history collection</li> <li>API Integration: Open API for external system integration</li> <li>QR Code Scanning: For test strip and urine container tracking to ensure accuracy</li> <li>Referral Feature: Allows tracking of patient referrals</li> <li>Printer Support: Compatible with thermal printers for customized report printing</li> </ul>

Data Analytics	<ul> <li>QR Code Generation: Automatically generates QR codes per patient to streamline workflow</li> <li>IoT-Enabled: Supports real-time monitoring and remote data access for faster treatment decisions</li> <li>Dashboard: Provides an interactive, real-time dashboard with geo-tracking and multi-user access</li> <li>Export Features: Download data in Excel or PDF formats, filtered by patient status, location, gender, and age group</li> <li>Impact Dashboard: Displays impact analysis over user-defined timeframes</li> </ul>
PHYSICAL CHARACTERISTICS	<ul> <li>Dimensions: Size: 9.6 cm x 3.6 cm</li> <li>Weight: Less than 250 grams</li> <li>Portability: Includes a protective carry case for enhanced portability</li> </ul>
Power Requirements	<ul> <li>Battery: Rechargeable with a minimum backup of 8 hours continuous use</li> <li>Charging: Type-C charging cable included</li> <li>Power Supply: DC 5V or 12V (via adapter or battery)</li> </ul>
Operating Conditions	Temperature: 15°C to 45°C     Humidity: 15% to 90% (under ideal conditions)
Certifications and Compliance for both Urine analyzer and Urine Test Strips	<ul> <li>The manufacturer of the quoted product should have ISO 13485 certificate issued from a notified body or ICMED 13485 (with or without plus) certificate issued from certification bodies accredited by NABCB / Nationally Recognized Accreditation Board under IAF MLA</li> <li>The quoted medical device must be registered under CDSCO and submit the license for manufacture to sale or distribute the medical device.</li> <li>Validation: Verified by NABL-accredited labs, hospitals, or other authorized bodies with documented proof of measurement accuracy</li> </ul>
Comprehensive Warranty	3 Years

#### **7.11 MOBILE**

PARAMETERS	SPECIFICATIONS
OS	Android
Display	6.65" HD +Display
RAM	Minimum 4GB or more
Display	Touch LCD
Network and connectivity	WIFI, Bluetooth
Memory	64 GB or more
Battery	Rechargeable lithium battery
Comprehensive Warranty	3 Years

## 7.8 Rapid Test Kits\*/ Consumables:

Α	Test Strips*
1	Glucose Strips for Glucometer
2	Hemoglobin Strips for Hemoglobino meter
3	Urine Dipstrips for Urine Analyzer

В	Consumables
1	Urine Collection Container (PVC Sterlized 30-40 ml.)

\*The above-mentioned tests should be able available in Android platform

#### 7.9 Carry Bag:

- a) Customized, Portable, light in weight and Compact in size
- b) Shall easily accommodate all the POC devices.
- c) The total weight with accessories should not be increase by 6 Kg

#### 7.10 MOBILE APPLICATION REQUIRMENT

- a) Operating System: Android
- b) Single Mobile Application for Multiple Points of Care Devices
- c) All necessary tests should be conducted by multiple individual devices for different parameters, connected in a single Android mobile platform.
- d) Data captured directly through Bluetooth, Micro USB, or Audio Jack connected Medical Devices
- e) Digital Report Delivery via SMS, WhatsApp or Email
- f) Error Prevention Algorithms to detect abnormal readings
- g) Internet Connectivity: 4G and above
- h) Application should operate in offline mode
- i) White Labeling of Application

#### 7.11 PLATFORM CAPABILITY

- a) Plug-and-play solutions should be available, and the platform must be open to upgrading various devices such as Wearables, Patches, and Sensors according to future requirements.
- b) Error check algorithms –The application must incorporate algorithms to detect and rectify errors during the testing process of point-of-care devices.
- c) The platform should possess the capability to upgrade devices seamlessly without interrupting ongoing operations.
- d) The service provider's platform must be able to integrate existing Point of Care devices. Necessary SDKs will be provided by government authorities from respective vendors, with continuous technical support for the provided SDKs available throughout the project period.
- e) Integration capability with a WhatsApp bot should be facilitated if required.
- f) Weekly, monthly, and annual reports should be transmitted via WhatsApp or SMS.
- g) Tele-consultation plug-in should be included.
- h) Historical report generation should be supported.
- i) Cloud-based security measures should ensure data safety, with easy retrieval and backup systems in place.
- j) The platform should comply with HIPAA regulations.
- k) Continuous online training support should be provided.
- 1) A dashboard for Population Health Analytics should be included.
- m) Customized reports should be generated as required.
- n) The platform must have the ability to integrate with the ANMOL application and other relevant applications.
- o) The platform must be capable of integrating with existing HIMS/Government Portals.

#### 8 HUMAN RESOURCES

The following dedicated human resources required from Service Provide:

- i. On -Ground Program Coordinators (one for 200 sub centers)
- ii. Project Managers (one for 10 districts)
- iii. State Program Coordinator: 1

#### 9 CUSTOMER SUPPORT:

Bidder should submit Escalation matrix and Customer support work flow

# FORMATS FOR SUBMISSION OF PROPOSAL (TECHNICAL & FINANCIAL BID)

#### Formats of the tender



RFP Reference No: OSH&FWS/SER/2025/ Diagnostics/ SC-HWC

Digital Diagnostic Services in Sub-Centre Ayushman Arogya Mandir (AAM) through IOT (Internet of Things) Point of Care (POC) Medical Devices and Integrated Mobile Application

**TECHNICAL BID** 

National Health Mission, Odisha

National Health Mission, Odisha Annex Building of SIHFW, Nayapalli, Unit -8, Bhubaneswar-751012

## **CHECK LIST**

(To be submitted in *Technical Bid Envelop*)

The documents have to be arranged serially as per the order mentioned in checklist for ease of scrutiny.

SI. No	Item	Whether included Yes / No	Page No.
А	Commercial Documents		
1	Format (Check List)		
2	Bid Document Cost of Rs.5,000/- as DD		
3	The Earnest Money Deposit(s) of Rs. 50 Lakhs as DD / Banker's Cheque / BG (as per Annexur A)		
4	Format –T1 (Forwarding Letter for Technical Bid)		
5	Format –T2 (Particulars of the Bidder)		
6	Format –T3 (Annual Turnover Statement)		
7	Copies of the annual audited statement / Annual Report for 2021-22. 2022-23, 2023-24 (Provisional statement of account shall not be considered)		
8	Format-T6 Experience in operation and management of digital diagnostics services (using minimum two point of care iot devices) contracts in any central / state government organizations / govt. Health facilities in india successfully completed during last three years		
9	Copies of the Contract / Work Order in support of the information provided in Format- T6		
10	Copies of the User certificate from the organization where similar work had been executed as mentioned in <b>Format-T6</b>		
11	Format –T7 (Approach & methodologyfor this project)		
12	Format –T8 (Declaration Affidavit on Stamp Paper (notarized) of Rs.100/-		
13	In case of Consortium bid, Consortium Agreement (as per format Annexure C) on a stamp paper (notarized) of Rs.100/-		
14	Copies of the Income Tax Return for past three financial years		
15	Copy of the Registration Certificate of the Firm		
16	Copy of the EPF Certificate		
17	Copy of the ESI Certificate		
18	Copy of the GST registration certificate		
19	Copy of PAN		

SI. No	Item	Whether included Yes / No	Page No.
В	Technical Documents		
1	Format-T4 (Manufacturer / Importer Authorization to bidder for each of the quoted POC device (for Item : Mobile Phone, it is not required)		
2	Format-T5 (Parawise Compliance of Technical Specification)		
3	Copy of Leaflets / Technical Brochures / Product Data Sheets of the proposed POC device mentioned in Format-T5		
4	Copy of ISO 13485 / ICMED 1345 Certificate of the Manufacturer of the concerned POC device model as per technical specification		
5	Copy of CE / USFDA certificate of the Manufacturer of the concerned POC device as per technical specification		
6	Copy of the CDSCO license of manufacture of the concerned POC device as per technical specification		
7	Model Approval from Legal meteorology Department and manufacturer should have valid manufacturing License issued from legal metrology (In case of digital weighing scale)		

Note: The Price Bid with price schedule be submitted in a Separate Envelop marked as "Price Bid"

#### Format T1

(To be furnished in the Technical Bid envelop)

#### **TECHNICAL TENDER SUBMISSION FORM**

(On the letterhead of the Organization)

[Location, Date]

To

Mission Director, National Health Mission, Odisha Annex Building of SIHFW, Nayapalli, Unit -8, Bhubaneswar-751012, Odisha

Sub.: Tender Enquiry No.: OSH&FWS/SER/2025/ Diagnostics/ SC-HWC

Dear Madam / Sir.

We, the undersigned do hereby offer to provide **Digital Diagnostic Services in Sub-Centre Ayshman Arogya Mandir (AAM)** using **IOT (Internet of Things) Medical Devices and Integrated Mobile Platform**. We are submitting our bids, which include this Technical Bid and a Commercial Bid sealed in separate envelopes

We accept all the tender terms & conditions of the tender under reference. We hereby declare that all the information and statements made in this bid are true and accept that any of our misrepresentations contained in it may lead to our disqualification.

Our proposal shall be binding upon us for a period for a period of 180 days from the date of opening of the bid, subject to the modifications resulting from Contract negotiations you may subsequently carry out with us to accept our tender. We undertake to carry out the work as per the terms and conditions of this tender document.

We hereby declare that my firm/company has not been debarred / blacklisted by any Government / Public Sector Undertaking / State Medical Corporation or convicted in any Court of Law across India or declared Bankrupt or insolvent. I further certify that I am the competent authority in my organization, authorized to make this declaration.

I/We hereby agree that the Tender Inviting Authority can forfeit the Earnest Money Deposit and or Performance Security Deposit and blacklist me/us for a period of 3 years if any information furnished by us proved to be false at the time of inspection / verification and not complying with the Tender terms & conditions.

We understand you are not bound to accept any bid you receive.

Yours sincerely,

Authorized Signatory [In full and initials]:	
Name and Title of Signatory:	
Name of Organization:	
Address:	
(Organization Seal)	

## Format T2

(To be furnished in the Technical Bid envelop) (On the letterhead of the Organization **DETAILS OF THE BIDDER** 

GENE	RAL INFORMATION ABOUT	THE BIDDER	
1	Pl. mention whether partipated as a <b>Sole Bidder</b> or <b>Consortium</b>		
	Name of the Bidder (Lead bidder in case of Consortium)		
2	Registered address of the bidder		
2	State	District	
	Telephone No.	Fax	
	Email	Website	
	Name of the Consortium Bidder 1 (in case of consortium bid only)	in coste	
3	Registered address of the consortium bidder 1		
	State		
	Telephone No.		
	Email	Website	
	Name of the Consortium Bidder 2 (in case of consortium bid only)		
4	Registered address of the consortium bidder 2		
	State		
	Telephone No.		
	Email	Website	
Contac	et Person Details		
	Name	Designation	
5	Telephone No.	Mobile No.	
	Email	Website	
Comm	unication Address		
	Address		
3	State	District	
	Telephone No.	Fax	
	Email	Website	

Type o	of the Firm (Pleas	se 🗆 relevant bo	x)					
	Private Ltd.		Public Lt	d.		LLP		
4	Partnership		Society			Other	rs, specify	
	Registration	on No. & Date	of Registra	tion.				
Nature	of Business (Ple	ase□ relevant b	ox)	T				
5	М	anufacturer			Importer			
	Author	rized Distributo	r					
Key pe	ersonnel Details (				g Partners etc.	.)		
	in case of Direc	etors, DIN Nos.	are require	d				
6	Name				Designation			
	Name				Designation			
7	Whether any cr its promoters in		s registered	l against th	e company or	any of	Yes / No	
8	Other relevant	Information					·	
9	GST Registration  Furnish the cop		gistration (	certificate				
10	PAN:							
		rtificate / Certif	icate of Inc	corporation	of the bidder	(Lead	bidder in cas	se of consortium)
11	(furnish the cop	<i>yy)</i>						
12	Bank Details of EMD/Payment a. Name of the	for supply if an		•	ish the Bank I	Details	as mentioned	l below for return of
	b. Name of the Account & Full address of the : Branch concerned							
		o. of the bidder	:					
	d. IFS Code	of the Bank:						
Date		Office Seal				the Aut	nature of bidder / shorized natory	

## Format T-3

## **Annual Turnover Statement**

(In the letterhead of the Chartered Accountant)

The Annual Turnover for the last 3(three) financial years of M/s\_\_\_

	are gi	ven below and certified that the statement is
true and co	orrect.	
Sl.No.	Financial Year	Turnover in (Rs.)
		both in figures & words
1	2021-22	
2	2022-23	
3	2023-24	
	Average Annual Turnover (Rs.)	
Date:		
		Signature of Auditor/
Place:		<b>Chartered Accountant</b>
		(Name in Capital)
Seal		
		Membership No.:
		UDIN No. :

- N.B: 1) In case of a sole bidder, the annual turnover statement should also be supported by copies of audited annual statement of the last three financial years / Annual Report and the turnover figures mentioned above should be highlighted there.
  - 2) In case of consortium bid, the annual turnover statement of <u>Lead Member</u> shall have to be furnished supported by <u>copies of audited annual statement of the last three</u> <u>financial years / Annual Report</u> and the turnover figures mentioned above should be highlighted there

#### Format – T4 (To be furnished with the Technical bid envelop) MANUFACTURER'S AUTHORISATION FORMAT

(In case the bidder is **not the Manufacturer** of **the POC devices** and is the authorized Importer / Distributor of Manufacturer)

<u>(Format - T4 is to be submitted separately for each POC devices based on the manufacturer of the concerned POC device.</u>

Not required for the item: Mobile Phone.

To Mission Director, Odisha National Health Mission. Annex Building of SIHFW, Nayapalli, Unit-8, Bhubaneswar-751012 Tender No. Dated for . Ref:: 1. We ...... (name of the Manufacturer) are the original manufacturers of the above equipment having registered office at ...... (full address with telephone number/fax number & email ID and website), having factories at \_\_\_\_\_ and \_\_\_\_\_, do hereby authorize (Importer / Distributor) to submit bids and subsequently negotiate and sign the contract with you against the above bid no. 2. We also hereby undertake to provide full guarantee/warrantee /CMC/AMC as agreed by the bidder in the event the bidder is changed as the dealers or the bidder fails to provide satisfactory after sales and service during such period of Comprehensive warranty/CMC/AMC and to supply all the spares / reagents / consumables for 6 years. 3. We also hereby declare that we have the capacity to manufacture and supply, install and commission the quantity of the equipments mentioned in the bid within the stipulated time. (Name) for and on behalf of M/s.\_\_\_ Date: (Name of manufacturers) Place: Seal Note: This letter of authority should be on the **letterhead of the manufacturing concern** and should be signed by a person competent and having the power of attorney to bind the manufacturer.

# Format – T5 (To be furnished with the Technical bid) PARAWISE COMPLIANCE TO TECHNICAL SPECIFICATION OF THE PRODUCT(S) OFFERED

[Furnish <u>parawise compliance</u> for <u>each POC device</u> in a tabular form (as per the format mentioned below), where the technical specification (parawise) as per bid should be mentioned in the left column & bidder's compliance at the right with mention of page no. of the product catalogue / product data sheet].

the product eatalogue / product data	sheetj.	
Name of the IOT based POC Device	ce:	
Make :	Model No.:	
(add separate sheets	depending upon the space requirement)	
Bid Specification (Para wise)	*Bidder's Compliance – Para wise	**Page No. of the technical brochure where the compliance is mentioned
IOT based POC device <b>highli attached</b> in support of the information	s / Product Data Sheets of the Model of ghting the features of the product of mation provided above.  page no(s) in the format as mentioned above.	ffered, must be
Signature of the Bidder		
Name:		
Date:		
Place:		
	Seal	

## Format – T6

(To be submitted in Technical Bid Envelop)

## EXPERIENCE IN OPERATION AND MANAGEMENT OF DIGITAL DIAGNOSTICS SERVICES (USING MINIMUM TWO POINT OF CARE IOT DEVICES) CONTRACTS IN ANY CENTRAL / STATE GOVERNMENT ORGANIZATIONS / GOVT. HEALTH FACILITIES IN INDIA SUCCESSFULLY COMPLETED DURING LAST THREE YEARS

#### A. Details of No. of Similar Contracts Executed

SI.	Assignment Contract No. & Date	*Name of the Organization	Description of work/services provided	No. of Point of Care (POC) IOT devices used	No. of Sub- Centres in Govt. Health Facilities Covered	Contract Price (Rs.) of assignment	Date of commencement	Date of completion/ Ongoing	** Was the assignment satisfactorily completed

Note: Attach extra sheet for above Performa if required.

Signature of Authorized Signatory

Name & Designation:

Date: Seal

Place:

<sup>\*</sup>Attach Photocopies of the contract / work order of the assignments mentioned above

<sup>\*\*</sup> Attach the users' certificates regarding satisfactory completion of assignments as mentioned above

### Format -T7

(To be submitted in Technical Bid Envelop)

#### DESCRIPTION OF APPROACH & METHODOLOGY STATEMENT

DESCRIPTION OF APPROACH, METHODOLOGY STATEMENT [Technical approach, methodology and work plan are key components of the Technical Proposal. In this Section, bidder should explain their understanding of the scope and objectives of the assignment, approach to the services, methodology for carrying out the activities and obtaining the expected output and the degree of detail of such output. Further, it should highlight the problems to be addressed and their importance, and explain the technical approach to be adopted to address them. It is suggested to present the required information divided into following *four sections*]

A. Understanding of Scope, Objectives and Completeness of response :
 Please explain your understanding of the scope and objectives of the assignment based on the Terms

of Reference (ToR), the technical approach and the methodology you would adopt for implementing the tasks to deliver the expected output(s) and the degree of detail of such output. *Please do not repeat/copy the ToR here.* 

- B. The details strategy regarding integration of the POC devices with the proposed single mobile application software:
- C. Key Personnel Deployment Strategy:

The bidder should propose and justify the structure and composition of the team and should enlist the main activities under the assignment in respect of the personnel responsible for it.

D. Timeline (in Gnatt Chat)

Authorized Signatory/Signature [In full and initials]:

Name and Title of Signatory:

(Organization Seal)

## Format -T8

## **DECLARATION BY BIDDER**

(To be submitted in Technical Bid Envelop)

[Affidavit before Executive Magistrate / Notary Public on a Rs.100/- non judicial stamp paper]

Signature of the bidder:
Date:
Name & Address of the Firm:
Seal
Notary Signature & Seal

## Format - F

## **FINANCIAL BID**

(To be submitted in the letterhead of the bidder in the **financial bid envelop**)

## 1. CAPEX

В.

C.

D.

A. Cost per POC Device Kit:

	Components of POC device Kit with transporation cost (to	A. Total Cost for One POC
	district headquarter hospital of each district), Human resource	device Kit
	cost for warranty & maintenance support services	(Inclusive of 3 years warranty)
	as per the scope of work and services mentioned in Section	(exclusive of GST)
	4)	
	• IoT based POC Medical Devices as per Technical	
	Specification with 3 years comprehensive warranty	
	(Blood Pressure Monitor, Pulse Oximeter,	Rs/- per kit
	Glucometer, Hemoglobinometer, Digital	_
	Stethoscope, Fetal Heart Monitor & Urine Analyser)	In words:
	Mobile Phone as per technical specification	(exclusive of GST)
	• Single Android mobile application for integration of all	
	POC based IOT devices preloaded in the mobile phone	
	Briefcase / Carry Bag Kit with adequate slots for safely	
	keeping all the above POC devices and accessories.	
	Web-based Dashboard	
	Human Resources for warranty & maintenance service	
	[Norm : On Ground Program Coordinator (one for 200	
	Sub center), Project Manager (1 for 10 districts) and	
	State Program Coordinator : 1]	
	(Note: There are 6688 sub centres and 30 districts in the	
	State and the human resources to be deployed based on	
	the above norm, the cost of which shall have to be	
	factored into the Capex Cost)	
Rs GS To	otal Cost (exclusive of GST) of POC devices Kit for 6688 Sub of the cost of the cost of the cost of the cost of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST) of POC devices Kit for 6688 Sub cost (inclusive of GST)	•
17.2	· <del></del>	
* T	he total cost (exclusive of GST) shall be considered for evaluation	

#### 2. OPEX\*

- **A.** Test Strips & Consumables: Following are the estimated requirements for <u>each health subcenter</u> for <u>three years</u>.
  - Glucose Strips for Glucometer: 3600
  - Hemoglobin Strips for Hemoglobinometer: 3600
  - Urine Dipstick Strips for Urine Analyzer: 2700

The bidder shall quote their price of OPEX by taking into account the supply of Strips / consumables to all districts headquarter hospitals of Odisha on a quarterly basis (as per requirement based on the above assumption) as per the rate quoted in the format below:

SI.	Strip Name	No. of Strips / consumables for each Subcenter AAM for 3 Years	*Unit Rate per strip / consumable (In Rs.) (exclusive of GST)	**Total Cost of Strip / Consumable for each Subcenter AAM for Three Years (exclusive of GST) (In Rs.)
		a	b	c = a x b
1	Glucose Strips	3600		
2	Hemoglobin Strips	3600		
3	Urine Dipstick Strips	2700		
4	Urine Collection Container	2700		
	Total Cost of Stips / Consu	mables for 3 years	(exclusive of GST)	

<sup>\*</sup> Unit Rate per one strip / consumable to be quoted (Not unit Pack) must include the transportation cost at the district headquarter hospitals of each district.

В.	*Total Cost (exclusive of GST) of Strips / Consumables for 6688 Sub center AAM [(A) x 6688)]: Rs
C.	GST @ on total cost mentioned at B above: Rs
<b>D.</b>	Total Cost (inclusive of GST) of Strips / Consumables for 6688 Sub center AAMs (B +C):  Rs  te total cost (exclusive of GST) shall be considered for evaluation
<u>To</u> su	e: al Cost for evaluation: The Grand Total Cost [total Cost of CAPEX eith 3 years warranty (exclusive of GST) for 668 center AAM + total Cost of OPEX for 3 years (exclusive of GST) for 6688 sub cebter AAM] shall betaken taken incount for evaluation to arrive at the final cost for evaluation.  Signature of Authorized signatory  Name & Designation:
	Date: Office Seal Place:

<sup>\*\*</sup> The total cost of Stips / Consumables <u>estimated</u> for 3 years (exclusive of GST) shall be <u>considered for evaluation purpose only</u>. However, payment shall be done as per atual no. of test strips / consumable supplied based on unit rate of strip / consumable.

## SECTION – 9

## **ANNEXURES**

#### Annexure-A

#### **BANK GUARANTEE FORM FOR EMD**

[The Bank shall fill in this Bank Guarantee Form in accordance with the instructions indicated.]

To

The Mission Director, National Health Mission, Odisha

Whereas (insert the name of the bidder) (hereinafter called the "Bidder") has submitted its proposal dated (insert date) for Digital Diagnostics Services in Sub-Center AAM (hereinafter called the "Proposal") against the RFP (Insert RFP reference number) issued by Mission Director, National Health Mission - Odisha (hereinafter called "Authority").

Know all persons by these presents that we (insert name of the bank) of (insert address of the bank) (Hereinafter called the "Bank") having our registered office at (insert regd. office address of bank) are bound unto <insert the name and address of the procuring authority> (hereinafter called the "Authority") in the sum of (insert guarantee amount) for which payment will and truly to be made to the said Authority, the Bank binds itself, its successors and assigns by these presents.

Sealed with the Common Seal of the said Bank thisday of20
The conditions of this obligation are:
If the Bidder withdraws or amends, impairs or derogates from the tender in any respect within the period of validity of this Bid.  If the Bidder having been notified of the acceptance of his Bid by the Authority during the period of its validity: - Fails or refuses to furnish the performance security for the due performance of the contract. or Fails or refuses to accept/execute the contract. or If it comes to notice that the information/documents furnished in its tender is incorrect, false, misleading or forged
We undertake to pay the Authority the above amount upon receipt of its first written demand, without the Authority having to substantiate its demand, provided that in its demand the Authority will note that the amount claimed by it is due to it owing to the occurrence of one or both the two conditions, specifying the occurrence condition(s).
This guarantee will remain in force up to
Our
Signature of the Authorised Officer of the Bank Name and Designation of the Officer Seal. Name & Address of the Bank and the Branch
Seal, Name & Address of the Bank and the Branci

## **Annexure-B**

## Format for Consortium Agreement (On stamp paper of Rs.100/- to be purchased in the name of executants companies or as required by the

jurisdiction in which executed)
THIS Consortium Agreement executed on this
the "Lead Member" which expression shall include its successors); and  M/s
The Lead Member, the Second Member shall collectively hereinafter be called as the "Consortium Members" for the purpose of submitting a proposal (hereinafter called as "Proposal") to Odisha State Health & Family Welfare Society (hereinafter called "OSH&FWS") in response to OSH&FWS's Request for Proposal Document (hereinafter called as "RFP" Document) no
AND WHEREAS this RFP document stipulates that a Consortium of maximum two organizations, meeting the requirements stipulated in the RFP document may submit a proposal signed by Lead Member of the Consortium Members so as to legally bind all the Members of the Consortium who will be jointly and severally liable for the performance and all obligations there under to OSH&FWS. A duly signed Consortium Agreement shall be attached to the Proposal.
NOW THIS AGREMENT WITNESSETH AS UNDER:
In consideration of the above premises all the Parties to this Consortium Agreement do hereby agree as follows:
1. M/sshall act as Lead Member for and on behalf of Consortium Members. The said Consortium Members further declare and confirm that we shall jointly and severally be bound and shall be fully responsible unto OSH&FWS for the successful performance of the obligations under the Request for Proposal (RFP) and resulting Agreement(s) submitted / executed by the Lead Member in the event of the selection of Consortium as Agency.
2. That M/s which is the Lead Member of the Consortium shall invest and have at least 51% stake in the Consortium for the contract Period as specified in the RFP document
3. In case of any breach of the stipulations of the RFP Document by the Lead member, Consortium Members along with the Lead Member do hereby agree to be fully responsible to carry out all the obligations and responsibilities under the RFP and resulting Agreement(s).
4. If OSH&FWS suffers any loss or damage on account of any breach in the stipulation of the Agreements to be entered into by the Consortium Members, upon its selection as Agency pursuant to RFP (the "Agreements") or any shortfall in the performance of the Transaction or in meeting the performances guaranteed as per the RFP and the Agreements, the Consortium Members hereby jointly and severally undertake to promptly make good such loss or damages caused to OSH&FWS on its demand without any demur or contest. It shall not be necessary or obligatory for OSH&FWS to proceed against the Prime

5. The financial liability of the Consortium Members to the OSH&FWS, with respect to any of the claims arising out of the performance or non-performance of obligations under the RFP and the resulting

Agreement(s) shall not be limited so as to restrict or limit the liabilities of any of the Members and the

Members shall be jointly and severally liable to OSH&FWS.

Bidder before proceeding against or dealing with the other Member(s).

- 7. It is expressly agreed by the Members that the sharing of responsibilities and obligations amongst the Members shall not in any way be a limitation of joint and several responsibilities and liabilities of the Members to the OSH&FWS. It is clearly understood that the Prime Bidder shall ensure performance under the Agreements and if one or more Consortium Members fail to perform its / their respective obligations under the Agreement(s), the same shall be deemed to be a default by all the Consortium Members.
- 8. It is also understood by all Consortium Members that the RFP Document stipulates various obligations as well as terms and conditions related to the Transaction during Proposal stage or thereafter during the subsistence of the RFP documents i.e. the Agreements.
- 9. This Consortium Agreement shall be construed and interpreted in accordance with the laws of India and the Courts of Bhubaneswar shall have the exclusive jurisdiction in all matters arising there under.
  - If an invitation is issued by OSH&FWS for becoming Agency, we the Consortium Members do hereby agree that we shall be jointly and severally responsible for furnishing the Bank Security. It is also hereby agreed that Lead Member shall, on behalf of the Consortium submit the EMD in the form of DD/Banker's Cheque / Bank Guarantee drawn in favour of Mission Director, National Health Mission payable at Bhubaneswar (hereinafter called as "EMD" from a Nationalized/Scheduled Commercial Bank for the value and in the currency as specified by OSH&FWS.
- 10. It is further agreed that this Consortium Agreement shall be irrevocable and shall continue to be enforceable till the same is discharged by OSH&FWS. It shall be effective from the date first mentioned above for all purposes and intents.
- 11. The responsibilities of all the members of the Consortium for this Project would be as stated in the table below:

Member of Consortium	Responsibilities
Lead Member	
Second Member	

IN WITNESS WHEREOF, the Members to the Consortium Agreement have through their authorized representatives executed these presents and affixed common seal of their companies, on the day, month and year first mentioned above.

1. Common Seal of	For and on behalf of <b>Lead Member</b>
has been affixed in my/our presence pursuant	M/s
	(Signature of authorized representative)
WITNESS	
1(Signature) Name Designation	
2(Signature) Name Designation	

## **Annexure-C**

## **CONTRACT FORMAT**

(to be executed by the selected Service Provider)

The Mission Director National Health Mission, Odisha
Contract No Dated
This is in continuation to this office's Notification for Award of contract No Dated.
Name & address of the Service Provider:
Reference: (i) Tender Enquiry Document No
THIS AGREEMENT made the Day of 2025 between (name of tender inviting authority (hereinafter called the Procurer) of one part and (Name of service provider) (Hereinafter called the Service Provider) of the other part:
WHEREAS the Procurer is desirous that certain services should be provided by the Service Provider, via (brief description of services) and the Procurer has accepted a tender submitted by the Service Provider for the Services as per the schedule of prices mentioned in the list enclosed (Hereinafter called the Contract Price),
NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:
1. The following documents of the above cited tender enquiry document no. shall be deemed to form a part of and be read and constructed as integral part of this Agreement, viz.:
(i) Terms of Reference

In consideration of the payments to be made by the Procurer the Service Provider hereby covenants to provide the services for the specified equipments in conformity in all respects with

Procurer's Notification of Award.

Terms and Conditions;

Location of Services;

Scope of Work; Technical Specification

the provisions of the Contract.

(ii)

(iii)

(iv)

(v) (vi)

2.

<ol> <li>The Procurer hereby covenants to pay the Service Provider in consideration of the serv Contract Price or such other sum as may become payable under the provisions of the Co the times and in the manner prescribed in the Contract.</li> </ol>					
4.	The performance bank guarantee valid till[(till the date), 4 months after expiry of tenure of the contract] for an amount of Rs shall be furnished in the prescribed format given in the TE document within a period of 15 (fifteen) days of issue of Notice for Award of Contract failing which the EMD shall be forfeited.				
5.	Payment terms: The payment of services will be made against the bills raised to the Procurer by the Service Provider as per the payment terms of the tender enquiry no. cited above after checking of documents duly certified by the designated official. The payment will be made in Indian Rupees.				
6.	6. Paying Authority: The payment shall be made by the concerned District Headquarter Hospital.				
7. Detail terms & Conditions (to be specified as per the RFP reference no. cited above)					
(Signature, name and address of authorized official)					
For a	For and on behalf of Procurer				
Recei	Received and accepted this contract				
(Signature, name and address of the Service Provider's executive duly authorized to sign on behalf of the Service Provider)					
For a	For and on behalf of Service Provider				
(Nam	(Name and address of the Service Provider)				
(Seal of the provider)					
Date:					
Place :					

## **Annexure-D**

## FORMAT FOR BANK GUARANTEE FOR PERFORMANCE SECURITY

(to be furnished by the selected Service Provider at the time of signing of contract)

То

The Mission Director National Health Mission, Odisha			
WHEREAS	(Name and address of the Service Provider) (Hereinafter		
called "service provider" has undertaken, in pursuance of contract No			
furnish you with a bank go	en stipulated by you in the said contract that the service provider shall uarantee by a scheduled commercial bank recognized by you for the sum for compliance with its obligations in accordance with the contract;		
AND WHEREAS we have agr	eed to give such a bank guarantee on behalf of the service provider;		
service provider, up to a to figures), and we undertake be in default under the cor	by affirm that we are guarantors and responsible to you, on behalf of the otal of		
We hereby waive the necepresenting us with the demand	essity of your demanding the said debt from the service provider before and.		
performed there under or the service provider shall in	nange or addition to or other modification of the terms of the contract to be of any of the contract documents which may be made between you and any way release us from any liability under this guarantee and we hereby ange, addition or modification.		
_	lid up to months [(40 months: Max. contract Period 36 he date of signing of contract i.e. up to(Indicate date)		
(Signature with date of the a	authorized officer of the Bank)		
Name and designation of the			
Seal, name & address of the	Bank and address of the Branch		