Government of Odisha,

Department of Health & Family Welfare.

Directorate of Medical Education & Training, Odisha

Heads of Department Building, Unit-V, Bhubaneswar-751 001, Dist-Khordha

CORRIGENDUM TO

REQUEST FOR PROPOSAL
For Integration of Ambulance Services
For

Golden Hour Management in Trauma Patients in the State

NOTICE INVITING PROPOSAL

**DIRECTORATE OF MEDICAL EDUCATION & TRAINING, ODISHA
HEADS OF DEPARTMENT BUILDING
UNIT-V, BHUBANESWAR, DIST-KHORDHA
Phone: 0674-2394255**

RFP No. 12288   **Dated:07.09.2019**

PROPOSALS ARE INVITED FROM ELIGIBLE PARTIES FOR SELECTION OF AGENCY FOR INTEGRATION OF AMBULANCES FOR GOLDEN HOUR MANAGEMENT IN TRAUMA PATIENTS IN THE STATE.

1	Period of Availability of RFP Document	**From 08.09.2019 to 23.09.2019** **Downloadable from website: (www.dmetodisha.gov.in)** **Document is available only on above website in the News & Event Section, no physical availability of document for selling.**
2	Date, Time and Venue of Pre- Proposal Conference	**Date: 17.09.2019 Time: 02.30 Hrs,** **Place Conference Hall,** **Directorate of Medical Education & Training, Odisha,**
3	Bid Processing Fee	**Rs. 2000 /- (Rupees Two Thousand) only (Excluding GST) Non-Refundable**
4	Earnest Money Deposit (EMD)/Bid- Security	**Rs. 200000 /- (Rupees Two Lakhs) Only Refundable**
5	Last date for submission of complete Proposal	**Date: 26.09.2019 upto 05.00 P.M.** **Address: The Director, Medical Education & Training, Odisha Heads of Department Building,** **Unit-V, Bhubaneswar, Dist-Khordha** ***(Proposals shall be received through Speed Post/ Registered post / Courier)***
6	Date, time and place of opening of Proposal & Presentation.	**a)Technical Proposal (Part A & Part B) opening on 03.10.2019 at 02.30 P.M.** **b) Date of Presentation & Financial Proposal (Part C) opening shall be communicated separately to the eligible bidders.** **c) The proposals shall be opened at Conference Hall, Directorate of Medical Education & Training, Odisha, Heads of Department Building, Unit-V, Bhubaneswar, Dist-Khordha**

Director, Medical Education & Training, Odisha

Tender Description: RFP FOR SELECTION OF AGENCY FOR INTEGRATION OF AMBULANCE SERVICES FOR GOLDEN HOUR MANAGEMENT
Tender No: Memo No: RFP No. 12288 Dated: 07.09.2019

Sr. No.	RFP Document (Clause and Page no)	Content of RFP requiring clarification(s)	Clarification Requested by different Bidders	Clarifications / Modifications made by the TIA
1	30	Scope of Services Make available Emergency Specialists doctors at the centralized call centre for ambulance services for online consultation by emergency medical technician or doctor on board, whenever required	Will the doctors be required to be available in the call center round the clock or they need to be available on call.	Yes
2	30	Scope of Services Make available Emergency Specialists doctors at the centralized call centre for ambulance services for online consultation by emergency medical technician or doctor on board, whenever required	What is the qualification and experience required for emergency specialists?	Post graduation in the emergency medicine
3	32	Integrated Ambulance Response Workflow Call diffrentiation of non-emergency v/s emergency	1. Who will do it? 2. Are any criteria defined to decide whether this is emergency case? 3. Sometimes it is very difficult to decide only from phone information without seeing the patient call whether it is an emergency case or otherwise 4. In view of above, any non-emergency case turns put be emergency case, what will be the medico-legal liability for the service provider?	Remove Call differentiation of non-emergency v/s emergency
4	Technology Solution Requirements - 33	The proposed solution should have required redundancy to provide 99.99% uptime (52.6 minutes downtime per year).	Suggest to keep 99.5% as there may me required down time for updates and issues	Modify: The proposed solution should have required redundancy to provide 99.5% uptime with not more than 30mins at a stretch

5	ANNEXURE-12: SCOPE OF WORK (SOW)	The technology platform should store the data of resources and provide online registration and renewal process for ambulances and clinical establishments for both government and private	Kindly specify the exact process of online registration and renewal Will there be any fees for registration and renewal	Remove this point
6	ANNEXURE-12: SCOPE OF WORK (SOW)	To develop an integrated workflow based technology platform with computer telephony integration, computer aided dispatch of ambulances and ability to log calls with GIS based GPRS integrated vehicle monitoring system	Is the new integrated service supposed to dispatch ambulances	Yes
7	ANNEXURE-12: SCOPE OF WORK (SOW)	The Ambulance Integrator will track the patient from incident of reporting, transportation in ambulance, admission to the hospital, inter hospital transfers and its discharge from the hospital.	How would be the integration with 108, NGO Ambulance, Government ambulance happen. They would have their own systems. Would the new integrated service access 108, NGO Ambulance, Government ambulance systems OR Data needs to be fetched from 108, NGO Ambulance, Government ambulance systems. If yes, what are the data to be fetched On which number will the emrgency calls land	Selected agency will define the specifications of GPS device and communication protocol
8	ANNEXURE-12: SCOPE OF WORK (SOW)	The Service Provider is required to develop a technology platform to automate workflows and integrate diverse systems used by all stakeholders.	Kindly clarify the key expectations of the workflow automation and which diverse systems to be integrated	Diverse system would be existing 108 Ambulance Dispatch System and similar

9	ANNEXURE-12: SCOPE OF WORK (SOW)	Mapping and defining of strategic positioning of the ambulances with route maps, motorable points, nearest catch points in case of non-motorable locations. The Service Provider shall source these documents/ information.	Kindly specify from which agency this information can be stored. Kindly specify in the processes where route maps need to be created. With 1400 ambulances, and multiple govt and private hospitals, the number of route maps will be very huge.	The dept will provide motorable points depending on the vulnerable areas to successful Bidders.
10	ANNEXURE-12: SCOPE OF WORK (SOW)	The service provider should have a BCP in place to ensure call centre is operational for a week time during any untoward incidents or natural calamities.	Should the DR site for BCP be within the state, outside the state. If outside state, how many kms away should be the DR site.	Government will define the location of DR site. The BCP should be for around 50-60% capacity.
11	ANNEXURE-12: SCOPE OF WORK (SOW)	Hospital data and bed availability, infrastructure like TCF, ICCU, Neuro Dept, Other Dept etc.	Who is going to provide the data	Dept will provide the data to successful Bidders.
12	ANNEXURE-12: SCOPE OF WORK (SOW)	Ambulance Integrator will develop an app for ambulance driver/staff to establish a real time communication system with them	Kindly confirm the functionalities required in the app	The function would include communication from the Ambulance about its status i.e. Start, on scene, board, hospital-in, hospital-out, clear, on-road and off-road
13	ANNEXURE-12: SCOPE OF WORK (SOW)	The System Integrator will coordinate with specified private ambulance operators and assist them in integrating it with their technology platform.	What is the scope of integartion. Will the private ambulance operator have their own system which needs to be integrated OR the bidder need to onboard the private operator on his technology platform	The bidder need to onboard the private operator on his technology platform
14	ANNEXURE-12: SCOPE OF WORK (SOW)	The application shall support multi lingual interface	What are multilingual languages whch need to be supported	Odiya, Hindi, English

15	page No. 5 Intructions to applicant point No. 1.3	Should have minimum two year of experience as on the last date of bid submission in successful operation and management the trauma patients in transportation to a Trauma Care Facility (TCF), coordination with call centers in forwarding the call to ambulances, training to first responders, stakeholders, medical and paramedical staff, maintaining a registry of details of patients like time of occurrence of incident, time taken to reach the Trauma Care Centre, outcome of the patient and discharge of patient etc.	Would the experience for 108 ambulances considered for the same?	Yes
16	Page No. 6 Point No. 1.8.2 Part B (Technical proposal	Details of manpower (positions and reporting structure) to be engaged at each level (i.e. field operation, and project management) and their role and responsibility	Do we need to provide the details of all manpower of the organisation?	Yes
17	Page No. 7 point No. 1.8.7	The Proposal shall be typed or written in indelible ink and shall be signed by the authorized representative of the applicant. Power of Attorney for signing of bid: The bidder should submit a Power of Attorney as per the format at Annexure-8 authorizing the signatory of the bid to commit on behalf the bidder.	Please provide POA for company or single entity as the POA format annexure 8 is for POA for consortium. Please provide the value of stamp paper.	The bidder should format the POA. The value of stamp paper would be Rs. 100.

18	Page No. 14 ANNEXURE 1: ORGANISATION PROFILE	Details of current commitments and contracts successfully executed for any Government Agency. To be furnished in the format given below along with the copy of Letter of Award/ Work Order/ Letter of Satisfaction.	Please provide the format for the same as no format is enclosed.	Modify: Details of current commitments and contracts successfully executed for any Government Agency. To be furnished along with the copy of Letter of Award/ Work Order/ Letter of Satisfaction.
19	Page No. 16 ANNEXURE 3: FINANCIAL PROPOSAL	We submit the Schedule of Rate as appended herewith.	Please provide the format for the same as no format is enclosed.	The bidder should format the Schedule of Rate.
20	Ambulance response system ==page -29	Addition to 108 Ambulances , there will be Government,private and NGOambulances	Can we get the fleet size ,make and model,RTO documentations of the other segment of vehicles pertaining to private,government and NG'Os.Who is responsible for there maintenance?	Owner of the ambulance is responsible for its maintenance.
21	31	Make available Emergency Specialists doctors at the centralized call center for ambulance services for online consultation by emergency medical technician or doctor on board, whenever required. Nos. of doctors shall be adequate enough to handle the operational load.	1. Qualification of specialist doctors is not mentioned. 2. Number of doctors required per shift is not mentioned. Need clarity.	Qualification of the doctors will be MBBS or above. (3+1 Doctors should be appointed.)
22	30	Recruit and train qualified manpower required for operation and maintenance of all services including call center operation, transportation and other operations or activities as per recognized norm duly approved by the Government.	1. Is there a need to hire additional call centre staff ??If yes. Please mention the number of call centre executive required per shift. 2. Qualification of call centre needs to be specified.	Modify: Recruit and train qualified manpower required for operation and maintenance of all services including call center operation, transportation and other operations or activities.

23	Pg-3, About ongoing services	All CAPEX for 108 is borne by govt. of Odisha.	CAPEX for Golden hour management for setting up Contact center and Data center (Hardware, Software, License, GPS tracker, Tacking software license, recurring charges etc) who will provide.	Government will provide Capex
24	Pg-3, Background, Point no:4	Singel centralized call center and single toll free number	What would be the toll free number, is it related to 108. 112 toll free number is being setup by Police deparatment. All calls related to any emergency will be routed through 112. In that case how the call will be routed to this toll free number or this toll free numbe will be independent one.	Government will share the number in due course
25	Pg-3, Background, Point no:6	SOA based technology platform	What is SOA? Kindly define SOA & detailed scope of SOA?	Service-oriented architecture is a style of software design where services are provided to the other components by application components, through a communication protocol over a network. The basic principles of service-oriented architecture are independent of vendors, products and technologies
26	Pg-36, Payment/ Reimbursement		If free for the user, what is the mode of reimbursement to the service provider or ambulance integrator?	Ambulance integrator will be reimburse for its monthly expenses
27	Pg-36, Payment/ Reimbursement		What is the reimbursement model for the call center?Is it per seat per shift?	Ambulance integrator will be reimburse for its monthly expenses

			Where is the call center? What is the number of seats?	Government will define the location of Call center. Bidder will define the number of seats
28				
29			What are the SLAs?Is there any penalty provision? If yes what are the penalty parameters?	SLAs and penalty provision will be shared with the successful bidder
30	Pg-30,31. Scope of Services,Approch for Ambulance integration	Establish and operate GPS based Automatic Vehicle Location Tracking System for all ambulances .Ambulance Integrator will create technical document and SOP for API for integration of GPS devices installed in ambulances with the Ambulance location tracking system. Ambulance Integrator share technical data sheet of GPS devices that are compatible with their system (The GPS device should be AIS 140 approved)	Ambulances Running in IPTHHS project are equipped with GPS devices, are those GPS device will be integrated with proposed soulution or there would be separate set of GPS device to be fixed in all ambulances?GPS device in operation in IPTHHS may not compliant with AIS-140, is it necessary for AIS-140 compliant device is mandatory?If AIS-140 devices are required in that case is it required to fix all GPS devices from Same Make & same brand for holistic approch?	AIS-140 is Mandatory
31	Pg-8, State Govt. responsibility	Facilitate mapping of all ambulances across the state of Odisha Facilitate mapping of all trauma centres and hospitals in the state of Odisha	Facilitate Mapping means only providing Ambulance & Trauma center data or Govt. will hold end to end responsibility of Mapping of Ambualance & Trauma centers in to the new solution?	Yes

32	Pg-18, Point no:4,b, Cosideration	The mode of payment shall be as specified below: The payment shall be made quarterly on assessment of performances by the Committee concerned.	Which payment will be made quarterly? Is it OPEX or CAPEX after assesment of performance?	Modify: The payment shall be made monthly on assessment of performances by the Committee concerned
33	Pg-30, Scope of Service, Point no:1	The Applicant is required to submit a detailed plan for proper integration of call center operation to address both jurisdictional and technical issues.	Kindly elaborate Jurisdictional and Technical issue pertaining to Golden hour management	The jurisdiction shall be State of Odisha and relating to Integration of Ambulances for Golden Hour Management.
34	Pg-30, Scope of Service, Point no:4	All necessary IT infrastructure & systems, communication systems, hardware, software and licenses to operate and manage integrated call center shall be proposed and procured by the applicant.	Who will be provide CAPEX for establishment of Solution	Government will provide Capex for establishment of solution
35	Pg-30, Scope of Service, Point no:6	The bidder needs to Install IT and communication infrastructure, if any, required for the integrated callcenter including vehicle tracking, call management, performance monitoring and reporting. Computertelephony integration with the ability to log calls with GIS and GPRS integrated ambulance-monitoringsystem should also be installed.	Who will be provide CAPEX for establishment of Solution?Who will Provide GPS device cost of Private ambulances, will the Private Ambulance owner will provide the cost of device or Department will provide GPS device cost for all.	Government will provide Capex for establishment of solutionGovernment will provide GPS device cost as Capex

36	Pg-30, Scope of Service, Point no:7	The Ambulance Integrator is required to set up and run the call center with adequate capacity in commensuration with workload.	What is meaning of adequate capacity? How to assess Adequate capacity? Is there any trend data? Who will provide data to assess Adequate capacity?	Current data on acicidents occurred in Odisha is 11500 and 5000 Fatalities per year.
37	Pg-30, Scope of Service, Point no:8	The Service Provider is required to setup and run a centralized Call Centre with optimal seating capacity required for smooth functioning.	What is Optimal seating capacity? How to asses Optimal Seating capacity. For assesment, call flow & trend data are minimum required accordingly assesment can be done for Optimal capacity of call center.	Call centre capacity will be defined by the bidder concerned. {For 300 Calls / Day 3 persons +1 leave reserved (Total 4 Persons)}
38	Pg-30, Scope of Service, Point no:16	Mapping and defining of strategic positioning of the ambulances with route maps, motorable points, nearest catch points in case of non-motorable locations. The Service Provider shall source these documents/ information.	Is there any departmental data available as a base data, accordingly rest data can be sourced?	Data will be shared to successful bidders.
39	Pg-30, Scope of Service, Point no:18, sub-point-3	Transparent, efficient and cost-effective procurement	where is the procurement involved in the project Kindly elaborate.	The agency will procure on behalf of government
40	Pg-30, Scope of Service, Point no:20	The service provider should have a BCP in place to ensure call centre is operational for a week time during any untoward incidents or natural calamities.	Kindly elaoborate the detailed scope of BCP department is expecting? Is it similar to Disaster recovery site only or fully functional 2nd line operation including Disaster recovery site.	It is referring to Disaster Recovery site.

41	Pg-31, Approch for Ambulance integration, Point no:2	Hospital data and bed availability, infrastructure like TCF, ICCU, Neuro Dept, Other Dept. etc.	Hospital data & bed availbility and infrastructure availability will be a one time activity during application integration or this is dynamic (can be changed accordign to need) or this is required as real time availabilty of information related to facility available/bed available. This is required high level integration with Trauma centers.	Real time availability of the bed should be coordinated manually while intimating the TCF of patient arrival.
42	Pg-31, Approch for Ambulance integration, Point no:3	During mapping process, health and suitability of the ambulance to be integrated in the system (as per National Ambulance Code - AIS 125) will be checked.	Who will check & authorize compliant of AIS-125 of Private ambulances. As on date most of Private ambulances are non-compliant with AIS-125.	Agency will check and intimate State Management Committee.
43	Pg-31, Approch for Ambulance integration, Point no:8	The System Integrator will coordinate with specified private ambulance operators and assist them in integrating it with their technology platform.	If Private Ambulance Operator agree to integrate his technology with new solution and there is CAPEX involved to integrate. Who will borne the cost of CAPEX & Integration.	The agency will procure on behalf of government
44	Pg-34, Technology Solution Requirement, Point no:3	The proposed solution should have required redundancy to provide 99.99% uptime (52.6 minutes downtime per year).	The Uptime mentioned in RFP is for Call center availability or Entire Solution? What is the measurment parameter to evaluate availability of Solution? Is there any Penalty parameter if the service level goes below 99.99%? What would be the penalty if so?	Modify: The proposed solution should have required redundancy to provide 99.5% uptime

45	Pg-34, Technology Solution Requirement, Point no:5	Scalability, manageability must be present in the solution to handle huge data volumes. As part of future requirements other emergency services and citizen centric services such as Fire Brigade, Traffic Management System, Insurance and reimbursement etc. may be integrated.	Integration with other entities like, fire brigade, Traffic Management system, Insurance would be API level integration or anything more required Kindly elaborate?	API level integration
46	Pg-31, Technology Solution Requirement, Point no:6	The applicant should follow security principles such as "defense in depth"; for numerous defense mechanisms ("layers") in place, designed so that an attacker has to defeat multiple mechanisms to performa successful attack. Multi-layer security must be employed starting with networks, perimeter, DMZ, Data Centre, applications and databases. This principle may also require that the bidder provisions for securitycomponents from different vendors so that even if the equipment from one OEM is unable to detect theattack the other OEM will have a probability of detecting it.	Is the security expectaion is related to DC & DR only or it is related to all the levels like, Web portal & Mobile app level?Kindly elaborate the security expectation. Is there any reference of any security frameworks?	Security expectations are related to all aspects which include DC, DR, Web Portal and Mobile. The security principles to be followed should include ISO 27001, IT-Act 2000, and NIST framework for cyber security.

47	Pg-34, Technology Solution Requirement, Point no:8	Latest version of industry best practices such as ISO 27001, ISO 20000, ISO 22301, IT Act, NCSP, NCIICP, DSCI-Privacy Framework and CoBIT5 should be followed by the bidder for the project.	There are several security framework & best practice are mentioned in Technology Solution requirements out of which need to be followed, kindly specify. IT act-2000 (India) to be followed or any Intenationational cyber law to be followed kindly specify. It it required only to follow the best practices or frameworks or need to have obtain certification ? Who will be pay for the certification?	Modify: Latest version of industry best practices such as ISO 27001, IT Act 2000 and NIST framework for cyber security should be followed by the bidder for the project.
48	Pg-34, Technology Solution Requirement, Point no:10	Data Confidentiality: Encryption is the mechanism that is used to provide data confidentiality. If required data shall be sent/transmitted in encrypted form through SSL (Secure Socket Layer). SSL shall be enabled for accessing the applications through internet	For Encryption SSL secutity mechanism & certificate is required from Certificate authorities & in who's name certificate to be obtainied, who will provide the certificate fees & number of license required. Is it required only for external communication out side Data center, through mobile App etc?	Certificate will be in the name of the government. Certificate fees will be part of Capex. SSL Certificate will be required for each Web Portal. SSL will be required for external communication outside Data Center.
49	Pg-34, Technology Solution Requirement, Point no:14	Interoperability of applications from different vendors is required at all levels	Define the term interoperability? It is Hardwared based interoperability or Software technology based interoperability. Kindly specify.	Interoperability between software technology

50	Pg-34, Technology Solution Requirement, Point no:20 & 21	The key elements such as servers and network devices for hosting applications and providing connectivity will be hosted in third party Cloud Service Provider (CSP) Data Centre

The CSP Data Centre should be hosted in India | Critical components to be hosted in CSP Data center as SAAS, who will be pay for the SAAS charges? | Modify: The key elements such as servers and network devices for hosting applications and providing connectivity will be hosted in the Data Centre. |
51	Pg-35, Technology Solution Requirement, Point no:23	System shall provide a browser based user interface supported by standard web browsers and shall not require installation of any specific client side software except GIS Map application	In RFP it is metioned that solution to be incorporated with SSL secutiry certification for encryption. For accessing portal from any browser SSL certificate installation is required. Is this a deviation of the Point mentioned this clause?	No, SSL is used for HTTPS access by the client
52	Pg-35, Technology Solution Requirement, Point no:26	The application shall support multi lingual interface	which are the Language to be supported Kindly specify?	English, Hindi, Odiya
53	Pg-35, Technology Solution Requirement, Point no:31	It would be advisable to adopt open non-proprietary standards that are generic and extensible (to cover future requirements)	Kindly elaborate the term Open Non-proprietary standars are generic and extensible.	Standards should be flexible to integrate current and future requirements
54	Technology Solution Requirement

Page-34 | The proposed solution should have required redundancy to provide 99.99% uptime (52.6 minutes downtime per year). | Maintaining the minimum uptime as 99.99% would be tough as the redundancy need to be set up which incur more cost. Request to consider minimum uptime of 95.5% | Modify: The proposed solution should have required redundancy to provide 99.5% uptime with not more than 30mins at a stretch |

55	Scope of Services Page-30	The Applicant is required to submit a detailed plan for proper integration of call center operation to address both jurisdictional and technical issues.	Need more clarity on jurisdictional and technical issues	The jurisdiction shall be State of Odisha and relating to Integration of Ambulances for Golden Hour Management.
56	Ambulance Integration ProcessPage-31	Ambulance integrator will input all data of Hospitals and Ambulance in the System. The technology platform will integrate with the abulance registration and renewal process so that the ambulance data is automatically updated in the system	Please provide more clarity on ambulance registration and renewal process & its integration	Remove this point
57	Data shared with stakeholders through one technology platform Page-33	Billing/Claim shown in diagram under data shared with stakeholders through one technology platform	Please provide details on the billing/claim to be shared with patient, callcenter, ambulance, hospital, health department, insurance/reimbursement	The specifications of the data to be shared with stakeholders will be provide to the successful bidder
58	General	Is there any specific number for the call center for patient to Dial? Kindly provide details	Need support of the government authorities to help the selected bidder deal with telecom service provider for the project	This will be intimated later to successful Bidder.
59	Annexure-3 Page-16	Financial Proposal	Schedule of Rate/BOQ format/ price quote format is not given. Kindly provide the format.	The bidder should format the Schedule of Rate.

Sd/DMET, Odisha