



**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**

REQUEST FOR PROPOSAL

For

Services of an Executing Agency

For

**Golden Hour Management in Trauma
Patients in the State**

Clarification on pre-bid queries on selection of agency for Golden Hour Management

Sl.No	(Clause and Page number)	Content of RFP requiring clarification(s)	Clarification Requested	Clarified by the TIA (Tender Inviting Authority)
1	1.8.3 Page no. 5	The applicant must submit the Financial Proposal basing on the Scope of Work as per Annexure-12 .	Request Tender Inviting Authority representing Govt. of Odisha to give format of Financial proposal, clearly outlining the cost heads to avoid ambiguity amongst the Bidders.	There is no format for Financial Proposal. The Bidder shall outline the cost heads basing on the Scope of Work
2	7.5 Page No. 8	Performance Security equivalent to 7% of the annual value of the contract	We request the Authority to kindly consider 5% of Annual Contract value.	Agreed. Performance Security equivalent to 5% of the annual value of the contract
3	Monitoring and Evaluation Page 9	Service Provider shall provide access to online data to facilitate online monitoring on a continuous basis. Service Provider shall also give login rights to the designated officials of DME&T, Odisha and H & FW Department for online monitoring and evaluation. Service Provider shall also provide hardware and software, if required, at the office of DME&T, Odisha for online monitoring of the services	This depends on receiving the real-time case data of each emergency call. Government to facilitate getting this data from other service providers like 108 operator etc.	No change
4	ANNEXURE-12: SCOPE OF WORK (SOW),Point No -3 Page 30	The Agency shall develop mechanism to involve the ambulances of private hospitals within the existing rules in force or may suggest any guiding rule that need to be notified by Govt. for implementation.	Please provide details about the support from GoO in private hospital ambulance deployment • Suggestion of a guiding rule that it should also have penalties if private ambulance does not oblige?	The Agency shall develop mechanism to involve the ambulances of private hospitals and also suggest any guiding rule that need to be notified by Govt. for implementation.
5	ANNEXURE-12: SCOPE OF WORK (SOW),Point No -8 Page 30	The Agency shall act as gate keeper for 108 ambulances.	This depends on receiving the GPS real time data from the existing 108-service provider. GoO to facilitate the same.	It will be facilitated.

6	ANNEXURE-12: SCOPE OF WORK (SOW),Point No -7 Page 30	The Agency shall coordinate with the existing call centers for 108 ambulances by forwarding the call from patient to all ambulance, alerting the nearest TCF staff more specifically the hospital & doctor-in-charge of TCF regarding reaching of a patient.	<ul style="list-style-type: none"> • Where can the call be received at? Do we have to set up a new call center? What should be the number of seats to be allocated for the new call center? Kindly Clarify • GOO to facilitate real time data transfer to PMU to alert TCF staff Does pre-arrival intimation to TCF have a set format? • GOO may kindly provide list of the doctors in charge of TCF along with the contact numbers 	The existing call centers for 108 ambulances & list of the doctors in charge of TCF along with the contact numbers shall be provided to the successful bidders at the time of award of work order. Mechanism may be developed by selected agency to coordinate the treatment of patients.
7	ANNEXURE-12: SCOPE OF WORK (SOW),Point No -2 Page 30	A Project Management Unit shall be set up and will function as the main secretariat for supervision, regulation and implementation of work.	What is the minimum size of team expected in PMU? If SLAs are delivered, can the PMU size be ignored?	As may be decided appropriate by the selected agency.
8	ANNEXURE-12: SCOPE OF WORK (SOW),Point No -5 Page 30	The Agency shall develop the mechanism for maintenance of a detail state registry of care taken for trauma patients.	Can GOO share the details of the registry contents?	At present there is no register. It will be developed. GOI has started an online data base.
9	ANNEXURE-12: SCOPE OF WORK (SOW),Point No -6 Page 30	The Agency shall assist in identification of the first responders, and all stakeholders for training.	The first responder training fee to be borne by GOO	The Bidder shall outline the cost of training for first responders and all stakeholders in Financial Proposal
10	ANNEXURE-12: SCOPE OF WORK (SOW),Point No -8 Page 30	The Agency shall act as gate keeper for 108 ambulances.	Please explain and quantify gate keeper role for 108	Gate keeper & limited to only coordination for transport & treatment of trauma patients.
11	ANNEXURE-12: SCOPE OF WORK (SOW),Point No -9 Page 30	The Agency shall make regular audit & submit the data regarding, the outcome of each trauma patient.	Audit measures the deviation from the set standards, can GOO provide expected standards and share?	Audit is of data only regarding to trauma patients.

12	ANNEXURE-12: Page 30	General	Can RFP be revised to measurable deliverables to PMU?	It can be revised, if required.
13	ANNEXURE-12: SCOPE OF WORK (SOW),Point No -10 Page 30	Any other responsibility to be vested upon the Agency, as per proposal to be submitted by the Director, Medical Education & Training, Odisha.	Agency shall not be forced to abide by any extra responsibility however if authority feel the need of any extra responsibility to be carried out by the agency than this has to be on mutually agreed terms and same should be reimbursed to the agency if it attracts extra cost.	This has to be on mutually agreed terms and same should be reimbursed to the agency if it attracts extra cost.