

NATIONAL HEALTH MISSION Government of Meghalaya

DHS/NHM/HS/59/2023-2024 (III) 26.06.2023

### "SELECTION OF A SUITABLE AGENCY/FIRM/CONTRACTOR FOR RE-DESIGNING, CONSTRUCTING AND EQUIPPING 5 HEALTH FACILITIES INTO FULLY FUNCTIONAL FIRST REFERRAL UNIT (FRUs) IN MEGHALAYA"

Responses to the Pre-bid and written queries raised by Agencies

Date of Pre- Bid Conference: 20<sup>th</sup> June, 2023 at 11:00 AM

#### Attendance:

- 1. The Additional Director of Health Services (MCH&FW) NHM Meghalaya Dr R Allya
- 2. The Joint Director cum State Nodal Officer, FRU, DHS (MI) Meghalaya Dr L Mylliem Umlong
- 3. The Executive Engineer, Health Engineering Wing, Meghalaya Shillong R.A. Wanniang
- 4. The State Programme Manager, NHM Meghalaya, Shillong Smt. Ibamonlong Nongrbri
- 5. State Coordination Officer, State Blood Cell, NHM, Meghalaya Dr. R. Momin
- 6. Procurement Manager, MHSSP, Meghalaya, Shillong Smt Mamta Rai
- 7. The Public Health Engineering Consultant, NHM & MHSSP Meghalaya Shri Kyrshan Dhar
- 8. The State Procurement Officer, MMDSL, Meghalaya, Shillong Shri Bryan Don
- 9. Health Engineering Manager, MHSSP, Meghalaya, Shillong Shri A. Tariang.

#### Vendor's Attendance:

- 1. Hemant Kr Chopra, Self Northeast Quality Product
- 2. Anthony Lyngdoh, Elke Drug Distributor.
- 3. Deepak Surana, Arengh Medical Supplier,
- 4. Nari Singh, Sandor.

SN	Clause No. & Page No.	Original Clause in RFP	Change Requested/Clarification required	NHM Response		
1.	Clause 2.26.8 Sl No. 1 Page No 27	The Bidder has experience in health-related construction and designing works in minimum last three (3) years, prior to the bid submission deadline in private or public sector	If the Bidder is a firm, Will the Construction experience of the bidder or its constituent's partner shall be counted in general construction experience?	Yes. But also refer to th note at Page 28 on the allocation of marks		
2.	Clause 2.26.8 SI No. 5 Page No 28 And substantially completed as a prime contractor, joint venture member, management contractor or sub- contractor in last five years		If the Bidder or its constituents' partners have part of the similar scope of work mentioned in the tender, will it be counted under the mentioned clause?	As responded above		
3.	Page No 28	General	If We calculate the minimum marks for all the criteria it doesn't add up to the 75 out of 100, which will disqualify an eligible bidder.	The Minimum Marks h been revised to 60 out 100. Please refer to th Amendment		
4.	Clause 6.1 and 6.2 Pg No 29	<ul> <li>6.1 Total technical score of the Bidders shall be calculated based on the score adding each score obtained under each of the parameters mentioned herein above. The minimum marks to qualify shall be 75 out of 100 marks (the "Minimum Technical Score"). The Bidders shall be assigned a mark and the Bidder who score 75 and above shall be considered as technically qualified bidder (the "Qualified Bidder").</li> <li>6.2 Financial bid shall be opened only for the</li> </ul>	Clause 6.1 and 6.2 contradicts itself as minimum marks to qualify shall be 75 out of 100 but the financial bid will only be opened for bidder scoring 80 and above	Kindly read Clause 6.1 and Clause 6.2 as Minimum Marks to 60. Please refer to the Amendment		

Directorate of Health Services, Health Complex, Upper New Colony, Laitumkhrah, Shillong - 793003 Phone: (0364) 2504532 Email: nrhmmegh@gmail.com 🛄 www.nrhmmeghalaya.nic.in 🛛 👫 Nhm Meghalaya 🛛 😏 @iecbccnhmmegh 🛛 😐 IECBCC NHM Meghalaya



# NATIONAL HEALTH MISSION Government of Meghalaya

		Bidder who obtains 80 and above in technical qualifications as stated above.			
5.	Clause 2.26.8, SI No. 5 Page No 28	A minimum number of two similar contracts (as per scope of work) that have been satisfactorily and substantially completed as a prime contractor, joint venture member, management contractor or sub- contractor in last five years [FY 17-18 to FY 22-23] prior to bid submission	Is repetitive as the points for construction related experience and supply related experience are already in SI No.1 and SI. No. 2.	SI. No 1, SI. No 2 and SI. 5 are all exclusive of each other	
6.		2. TECHNICAL CHARACTERISTICS 2) The system should have more than 20000 Digital Channels & on the siteto higher number of channels (preferable).	Different manufacturers use misleading formulas for digital channels calculation which varies from model to model & bears no proven clinical significance. Physical channels are the more authenticated way to analyze actual ultrasound system performance, so please amend this point for wider participation.	No change	
		2. TECHNICAL CHARACTERISTICS 5) The system should have a very high frame rate of 700 frames per second or more. Please specify frame rate in triplex mode.	Please omit this point. Frame rate varies & depends upon scan area, probe, exam type & other several factors which can be manipulated by adjusting different imaging parameters. Also, due to architectural design difference we don't have a provision to display frame rate on any of our systems. So please omit for wider participation from reputable ultrasound manufacturers.	Accepted. The same is no longer applicable. Please refer to the Amendment.	
		2. TECHNICAL CHARACTERISTICS 6) The system should have Harmonic imaging for hard to image patients. The system shall support Tissue Harmonic Imaging capability on phased, linear, 3D and curved array transducers.	Please omit 3D imaging for wider participation.	No Change	
		2. TECHNICAL CHARACTERISTICS 10) System should have disc of at least 500 GB or more.	System should have disc of at least 128 GB or more. Please amend for wider participation.	No Change	
0		2. TECHNICAL CHARACTERISTICS 15) System should have 19" HD display with tilt and swivel Facility along with alphanumeric keyboard with illuminating keys and status function.	Please omit this point due to duplication. Please omit as monitor size required is already mentioned in point no. 25.	Accepted. The same is no longer applicable. Please refer to the Amendment.	
1		2. TECHNICAL CHARACTERISTICS 23) It should have all auto mode like PW auto trace Auto IMT Auto NT Auto EF Auto Bladder Auto B line Auto pleural Line Auto OB.	Please omit as it seems company specific.	Accepted. The same is no longer applicable. Please refer to the Amendment.	
2	<u>Item No. 01: ULTRA</u> <u>SOUND MACHINE WITH</u> <u>3 PROBE</u> Page No 59	2. TECHNICAL CHARACTERISTICS 24) Somoy special features SCR-zoom HPRF B mode panoramic Colour Panoramic Vis-Needle Contrast imaging with TIC MFI MFI time Mix mode in contrast Freehand 3D Advance 3d/4d option (like S-Live, S-Live Silhouette, S-Depth, Auto Face, AVC follicle, Freevue Stress echo, GLS ECG.	Please omit this point for wider participation.	Accepted. The same is no longer applicable. Please refer to the Amendment.	

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Office of Mission Director, National Health Mission Directorate of Health Services, Health Complex, Upper New Colony, Laitumkhrah, Shillong - 793003 Phone: (0364) 2504532 Email: nrhmmegh@gmail.com



## NATIONAL HEALTH MISSION Government of Meghalaya

13		25) It should have minimum 21.5 inch medical grade monitor and 13.3 inch highly sensitive	grade monitor and 10.5 inch highly sensitive touch panel. Please amend for	No change		
	_	touch panel.	wider participation.			
14		2. TECHNICAL CHARACTERISTICS 26) It should have backlight keyboard Minimum	It should have backlight sanitizable keyboard Minimum 3 or more probe port.	No chango		
14		4 probe port.	Please amend for wider participation.			
	_		<u> </u>	<u> </u>		
			Probes should be drop safe & broadband			
		2. TECHNICAL CHARACTERISTICS	width convex 1 to 7 MHz (+/- 2 MHz) TVS			
. –		28) Probes should be broadband width Convex	3 to 10 MHz (+/- 2 MHz) Linear 4-16			
L5		1 to 7 MHz TVS 3 to 15 MHz	MHz (+/- 2 MHz). Please amend	No change		
		Linear 4-16 MHz(P11 Elite)	frequency range as Transducer frequency			
			ranges slightly varies from manufacturer			
	_		to manufacturer.			
		2. TECHNICAL CHARACTERISTICS				
		29) It should have Modern AI features S-Fetus	Please omit as it seems company specific.			
16		(Automatically identify and classify the fetal		No change		
		biometry structure just like a human brain and				
	_	takes 98% accurate measurements).				
			1. The system should have splash			
			resistant and sanitizable console for easy			
			cleanability - To prevent system from			
			liquid ingress and for infection control in			
			busy hospital environment			
			2. System must have fast start up to			
			scanning in less than 35 seconds from off			
			condition Quick boot up is very much	1. Not accepted		
17			required for handling critical and	2. Added		
			emergency situations in busy hospital	3. Not accepted		
			environment			
			3. Transducers should be sturdy, drop			
			safe & sanitizable - As the system will be			
			used in busy hospital environment,			
			chances of accidental fall of probe			
			increases which are expensive and not			
			covered under physical damage warranty.			
	Specifications for	1. Eye pieces 5x, 10x one pair each	1. Eye pieces 15X instead of 5X			
18	Binocular Microscope	2. Spare lamps - Halogen 6 numbers to be	2. Spare Halogen lamps are not required	Accepted. Please refer to		
	Pane No 79	supplied with each microscope	due to modern days LED based systems.	the Amendment.		
				The Department will take		
			Who will be responsible to take necessary	the responsibility as and		
19	General	General	permits for setting up the Blood Storage	when required.		
			Units.			
	1			Kindly provide only the		
				unit cost for each of the		
20	General	General	It will be helpful to have the quantities	equipment. The quantities		
			provided for equipment	will be finalized at a later		
				stage.		
			1	It is expected that the		
				bidder makes their		
				assessment basis their		
				visit and understanding of		
			Kindly provide the number of beds and	the overall requirement		
21	General	General	other list of items required in the facilities	adhering to the FRU and		
			other list of items required in the facilities			
				other provided guidelines		
				in the tender document		

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NATIONAL HEALTH MISSION

# Government of Meghalaya

				and submit the same in their Technical Proposal
22	General	General	Can the bidder submit the cost of other equipment that may be necessary to complete the entire set up for Blood Storage Unit, etc that is not listed in the tender document?	Yes. However, the same should only be submitted as a list of optional equipment. The Department will however factor the cost of only the listed equipment provided in the tender document for qualification
23	-	Additional point to the <b>1.4 General Scope of</b> Work	SI no 8.	SI no 8. • OT table requirement - 2 nos • Labour Bed requirement- 3 nos *This will be applicable to all the CHC facilities highlighted in this tender.

### OTHER DISCUSSED POINTS:

- 1. The vendors were asked to visit the site at their own expenses and do a thorough assessment before bidding for this tender. They were asked to send an email, so that the MO's of the respective facilities can be notified in advance by the department.
- 2. No further queries will be reverted post 6:00 PM of 20<sup>th</sup> June, 2023.
- 3. The department will look into extending the timeline for submission subject to approval from the Mission Director.

OPPAR\_

Ramkumar S, IAS Mission Director National Health Mission

The document is digitally approved. Hence signature is not needed. Office of Mission Director, National Health Mission Directorate of Health Services, Health Complex, Upper New Colony, Laitumkhrah, Shillong - 793003 Phone: (0364) 2504532 Email: nrhmmegh@gmail.com

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TOR FOR RE-D	onference Room (NHM Office) ( DATE: 20th June 2023 ME :- 11:00 AM TENDANCE SHEET	PHONE NO		25890 19676		16550658az			Sollsentt6	5111606806		
FIRM/CONTRAC TIONAL FIRST R	VENUE: Conference Room (NHM Office) & also Via Zoom DATE: 20th June 2023 TIME :- 11:00 AM ATTENDANCE SHEET	ORGANIZATION	Health & Family Welfare Department	Health & Family Welfare Department	Health & Family Welfare Department	Health & Family Welfare Department	Health & Family Welfare Department	Health & Family Welfare Department	Health & Family Welfare Department	Health & Family Welfare Department	Health & Family Welfare Department	NHM.
I "SELECTION OF A SUITABLE AGENCY/I HEALTH FACILITIES INTO FULLY FUNC	27	DESIGNATION	The Director of Health Services (MCH&FW) Cum Jt. MD – NHM	Dr. L. Wylliew Umboy The Joint Director cum State Nodal Officer, FRU, DHS (MI)	The Joint Director cum State Nodal Officer, RCH, DHS (MCH&FW).	The Executive Engineer, Health Engineering Wing	The State Programme Manager, NHM	The State Procurement Officer, MMDSL	The Public Health Engineering Consultant, NHM & MHSSP	Procurement Manager, MHSSP	Health Engineering Manager, MHSSP	State brock cell, NHKL,
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