



**Govt. of Bihar  
Department of Health  
State Health Society, Bihar  
Pariwar Kalyan Bhawan, Sheikhpura, Patna-800014**



**NOTICE INVITING TENDER**

**NATIONAL RURAL TELE-MEDICINE AYUSH NETWORK  
(NARTAN)**

(At 38 District Hospitals & 212 Primary Health Centres (PHCs)  
and one central unit at Patna)

## Contents

<b>Part I. Background &amp; Project Description</b> of the system -----	3-6
<b>Part II Technical details</b> of the proposed system-----	7-9
<b>Part III. Financial details</b> of the proposed system-----	10-10
<b>PART-IV Methodology &amp; Criteria</b> for Bid evaluation-----	11-13
<b>Part V. General conditions</b> of the Tender-----	14-16
<b>Annexures</b> -----	17-26

## PART-I

### Background

Bihar is the third largest populated State in the country with more than 90 million people. In an effort to minimize the gap in the health sector in the State of Bihar and to promote the benefits of healing to a patient in the natural way under the AYUSH system of medicine, a Project is proposed to cover the 212 Primary Health Centers (PHCs) and 38 District Hospitals and one central unit at Patna to setup and manage Tele-Medicine Solution for online consultations. The project, to be cohabitated in the PHCs are aimed to act as the next generation delivery points of AYUSH stream of medication for overall healthcare services delivery to the rural citizens in remote locations in the State of Bihar. The primary objective of these centers is to deliver preventive and primary healthcare solutions for long term relief for patients in rural areas of the State, which will enable the state to achieve the following objectives:

- To provide Quality healthcare virtually at the doorstep of the rural citizen.
- Up-gradation of the infrastructure of the PHCs in Bihar
- To enhance the capacity of existing healthcare mechanisms in rural Bihar.
- Shall act as a support system in propagating and participating in the State/National Health Programs
- Demonstrate the viability of the healthcare model both in terms of financial as well as social deliverables from the Government to the citizen.
- An effective primary & preventive healthcare service delivery by building in required capacity into the front line paramedical staff and thereby bring in the desired accountability into the public healthcare system.
- A cost effective and efficient healthcare service provisioning and a vibrant pro-citizen approach.
- Accountability for every single patient.
- A Point of Presence (PoP) for near perfect healthcare mapping in planned clusters. Patient information being captured at the source through the online electronic medical record module.

## **Project Description**

### **NATIONAL RURAL TELE-MEDICINE AYUSH NETWORK**

State Health Society Bihar is implementing the National Rural Health Mission (NRHM) goals to carry out necessary strengthening in the basic health care delivery system. The Goal of the Mission is to improve the availability and access to quality health care by people, especially for those residing in rural areas. As part of its overall mandate of ensuring accessibility to good quality healthcare and to meet the overall demand of good quality of AYUSH treatment on Additional Primary Health Centre is the basic structural and functional unit of health services.. With the growing population of India and especially Bihar, pressure on the PHCs and District Hospitals has increased tremendously. Due to this, people in the rural areas will access the health care services at nearby centres as envisioned by the Government. Through this project Ministry of Health and Family Welfare aims to reduce the pressure on the secondary nodes of health care provisioning. The PHCs will be provisioned with

- Basic infrastructure
- Tele-Diagnostic Kit
- Computer system equipped with multimedia components to undertake audiovideo consultation.
- Medical Record Management System to ensure that each patient and consultation is accounted for.
- Tamper proof prescription mechanism.
- Suitable connectivity options for secured data transfer.
- Deployment of trained manpower and management
- Creation of referral system for specialist/expert consultation
- Promotion of AYUSH system of preventive and curative care

The 212 PHCs in 38 District of the state will be connected to the respective District Hospitals where they can consult with the doctors. A separate hub for consultation will also be setup State level unit/Hospital. The project proposes to create a network of Telemedicine Centers by connecting the remote PHCs to the consultation hospitals at the district level and by utilizing the paramedical human resources. The objective of the project is to enable primary and preventive healthcare in the region besides creating awareness among rural citizens on various health hazards, hygiene, communicable diseases and controlling outbreak of epidemics etc.

## Scope of Work

The selected bidder is expected to established NARTAN at 212 PHC's and 38 District hospitals spread across 38 districts and one central unit at Patna and maintenance of NARTAN for online consultation initially for 3 years.

### **(1) Establishment of NARTAN**

The bidder is required to set up the telemedicine software at Telemedicine room ( 2 rooms to be provided by SHSB) with the equipments given in the **Annexure 5** at 212 Primary Health Centers (PHCs) and 38 District Hospitals and one central unit at Patna to setup and manage Tele-Medicine Solution for online consultations as per **Annexure 6**. After establishment, the Assets of NARTAN will be regarded as the "**Property of Government of Bihar**".

#### **Intellectual Property Rights**

- 1. The service provider shall indemnify SHSB against all third-party claims of infringement of copyright, patent, trademark or industrial design rights arising from use of the Goods or any part thereof in India.**
- 2. Application Software developed by TSP for providing the services shall be fully owned by the TSP. All the data generated during the services will be owned by SHSB as per the stated policy of government of Bihar. TSP will have to provide the reading tool for accessing the data.**
- 3. While passing on the rights (license) of using any software/software tool, the service provider shall ensure that such rights are inclusive of the use of that software for development in addition to deployment.**
- 4. The software licenses supplied by TSP shall be genuine, perpetual, full use and should provide patches, fixes, security updates directly from the OEM at no additional cost to the SHSB for the entire period of contract. All the licenses and support should be in the name of Government of Bihar from the date of procurement**
- 5. In the event of any claim asserted by a third party of infringement of copyright, patent, trademark or industrial design rights arising from the use of the Goods or any part thereof in India, the service provider shall act expeditiously to extinguish such claim. If the service provider fails to comply and SHSB is required to pay compensation to a third party resulting from such infringement, the service provider shall be directly responsible for such compensation including all expenses, court costs and lawyer fees in those cases. SHSB shall give notice to the service provider of such claim, if it is made, without delay.**

## **(2) Running and Maintenance of NARTAN**

- (a)** The same bidder is responsible for running and maintenance of above established NARTAN software initially for 1+2 years as per **Annexure 7**. The running and maintenance cost include CMC coverage up to 3 years.
- (b)** The bidder is required to submit a Revenue generation flow after completion of 1<sup>st</sup> year, for next 2 years, on 50:50 sharing basis to bidder and government of Bihar as per **Annexure 8**.

### **Tele-consultation room(to be provided by SHSB)**

- **Patient engagement facilities (internal decorate, electricity, furniture, bed, scopes etc.)**
- **Telemedicine Platform**
- **Selective medical and medico-IT equipments, preferably IT compatible, with interface to Telemedicine and/or other software / hardware**
- **Computer hardware/software platform (PC, switch, etc.) and IT electronic equipments** *Zone 1 Zone 2 Zone 3*
- **Connectivity/bandwidth requirements (Leased line, Broadband, Wireless etc)**
- **Point-to-Point video-conferencing system (may be portable)**
- **Following Medical test and services should be provided by the Vendor at PHC for tele-consultation of the patient**
  1. **Temperature Measurement**
  2. **Sputum examination**
  3. **Pulse measurement**
  4. **BP measurement**
  5. **Pulmonary Function Respiration examination**
  6. **Blood Glucose examination and monitoring**
  7. **Peripheral Smear examination**
  8. **ECG**
  9. **Digital Stethoscope**
  10. **Digital Transmission of X-ray**
  11. **Digital Transmission of Histo Pathology (Telepathology)**
  12. **ENT Set.**
  13. **Skin Images**

## PART-II Technical Bid

### Minimum Eligibility Criteria along with the list of documents to be submitted in Cover 'X' (Technical Bid)

Bidders should meet the following criteria to be eligible for bidding for NARTAN

Sealed proposals are invited from interested NGOs / Companies / Institutions /consortium of organization/ Agencies as Total Service Providers (TSPs) for establishing and managing rural healthcare access points using Information and Communication Technologies. To serve the underserved areas and communities better, the Government of Bihar plans to establish a network of stationary Tele-AYUSH centers – at the 251 locations (one central unit, 38 districts and 212 PHCs) in the State of the State. Interested organizations should fulfill the following eligibility criteria:

1. The NGOs / Companies / Institutions /consortium of organization/ Agencies should be an entity registered in India on which all laws of the land are applicable and should have been in business for the past 4 years as of 31<sup>st</sup> March 2011. NGOs / Companies / Institutions / Agencies should attach the certificate of incorporation as proof.
2. The NGOs / Companies / Institutions /consortium of organization/ Agencies should have technology Platform that is compatible with the Indian Public Communication Platforms and Protocols
3. The NGOs / Companies / Institutions/consortium of organization/ Agencies should have 3 years experience in implementation of similar nature works in Bihar or having implemented similar projects in India.
4. Establishment and management of minimum twenty "Live" telemedicine centers in rural areas during the last 1 to 2 years as a Total Solutions Provider with any State Government/**Central Government/PSUs**/Funding Agency/International Agencies in India.
5. Experience in dealing with Central/State governments/PSU's/International Funding Agency and familiarity with Government procedures, evaluation, review and audit.
6. Demonstrated capability in building, setting up and management of ICT infrastructure and networks.

7. TSP overall should have managed a minimum of 10,000 consultations using the Telemedicine platform. (Relevant documents must be attached)
8. Proposal should be submitted from a single vendor/ (consortium of organization) only. The NGOs / Companies / Institutions / Agencies should have minimum 3 years of experience in providing ICT related products/services (e.g. Application software / managing ICT infrastructure / operations etc.) to the Healthcare sector including minimum 2 years experience in integration/implementation/managing the Telemedicine/ Tele-health related products/services.
  - a. Work Orders / Client Certificate confirming year and area of activity should be attached
  - b. Audited and Certified Balance Sheet & Profit/Loss Account of last 3 Financial Years (2008-09 ; 2009 – 10; 2010 – 11) must be attached.
  - c. The Agency/Organization shall produce the satisfactory completion of works certificate in reference to the clients they have worked for.
9. NGOs / Companies / Institutions /consortium of organization/ Agencies should have turnover of Average of 3 years **Rs.30 crores** or more as on March 31, 2011. A certificate from the Chartered Account must be attached as a proof.
10. NGOs / Companies / Institutions / Agencies should not be under a declaration of ineligibility for corrupt and fraudulent practices issued by any of the Central or State Government Departments.
  - a. Undertaking (Self Certification) that the NGOs / Companies / Institutions / Agencies is never been engaged in any corrupt and fraudulent practices and has never been blacklisted by any Central /State Government Departments.
11. NGOs / Companies / Institutions / Agencies should not have violated / infringement of any Indian or foreign trademark, patent, registered design or other intellectual property rights.
  - a. Undertaking (Self Certification) that the NGOs / Companies / Institutions / Agencies should not have violated / infringement of any Indian or foreign trademark, patent, registered design or other intellectual property rights.
  - b. Bidders shall submit an affidavit sworn before First Class Magistrate stating that “the company has not been blacklisted/de-registered/barred by the Central Govt. /Bihar State Govt. or SHSB
- 12 Bidders will be required to deposit a demand draft (refundable) of Rs 50,000 (Fifty Thousand only) as EMD favoring Executive Director, State Health Society, Bihar.



**Note:-**

- (i) Non fulfillment of any of the above eligibility criteria shall lead to disqualification of the tender.
- (ii) Kindly note that all the required documents and papers are to be submitted in the cover of technical bid by stipulated date. In no case or circumstance any opportunity shall be provided to any bidder to submit required documents, once the technical bid is opened. Non submission of any of the required documents/ papers will render the bid disqualified.

**Submission Requirements** : Interested eligible NGOs / Companies / Institutions /consortium of organization / Agencies, wishing to bid, may submit their tender in a large envelop marked "**Tender bid for NARTAN Ayush**" This large envelop will contain two separate sealed envelops—one marked as **Cover 'X' for technical bid** and another marked as **Cover 'Y' for financial bid**

**NOTE:**

1. Bidders are required to submit EMD.
2. Technical bids not accompanied by earnest money or any of the above mentioned documents shall be rejected.
3. Documents in languages other than English must include a translation of all certificates into English in addition to the original untranslated documents. Bidders shall submit an affidavit in technical bid stating that "the NGOs / Companies / Institutions / Agencies has not been blacklisted/de-registered/barred by Govt. of Bihar and/or by SHSB" or process of such or any other penal action has been initiated against them by the Bihar state Govt. or SHSB. If at any stage it comes to the notice of SHSB from any sources that company has concealed the facts, the SHSB reserves the right to verify it and if it is found that the company has really concealed the facts, the Earnest money shall be forfeited and legal proceedings against the company shall be initiated as per law.
4. Documents such as Power of Attorney, Resolution of Board by which the bidder has been authorized to sign the bid documents should be enclosed with the tender and should also be produced for attending the meeting of opening of the bid. Unsigned bid is liable to be rejected.
5. All the annexure are properly filled and certified.

**In case of Consortium of Organisation the following Points are to be taken into account**

- **The Lead bidder of consortium should have been in IT business for at least 4 years as on 31<sup>st</sup> March 2011, the bidder in case of consortium must attach its certificate of Incorporation as proof.**
- **The detail of all the members of consortium and a copy of consortium agreement must be provided.**
- **The lead bidder is responsible for any dispute/ fine/ misconduct.**

### PART-III Financial Bid

#### Cover 'Y' (Financial Bid):

**Financial bid shall be given strictly in the following format in two copies sealed in two separate envelop marked as "First Copy" and "Second Copy". The "Second Copy" will be opened and the "First Copy" shall be kept unopened in safe custody for future reference. In case any discrepancy arises, the "First Copy" will govern and shall be taken as final.**

Format for Financial Bid is for the following work:-

Sl No	Brief Description of Work	Relevant Annexure
A	Establishment of Telemedicine Solution at 212 PHCs, 38 district hospitals and one central unit and	5 and 6
B	Running & Maintenance of above mentioned centers primarily for 3 Years	7
C	Total A +B	
D	Revenue Generation Flow	8

Note- Decision will be made as per Part IV and Annexure 8 will be considered only after one year as directed by SHSB.

#### **NOTE:**

- 1. In case of discrepancy in "In figure" price and "In words" price, then "In words" price would prevail.***
- 2. In case of non submission of any one of the above, financial bid will not be considered.***
- 3. Rate quoted shall be inclusive of Sales tax, VAT, Service Tax or other taxes levied or leviable as the case may be and freight, insurance and supply up to proposed unit.***
- 4. Financial bid should be typewritten and every correction and interlineations in the bid should be attested with full signature by the tenderer, failing which the bid will be ineligible.***
- 5. Each page of the financial bid should be duly signed by the tenderer affixing the office seal.***

Bidders are required to submit their technical bid (Cover 'X') along with a cover letter / application by the bidder indicating the details of the documents submitted with relevant page number.

## PART-IV Methodology & Criteria for Bid evaluation

The Bidder with the highest total Score shall be called for negotiation for award of the contract. Calculation of total Score using "Quality cum Cost Basis"(QCB) with 70% weightage to TS and 30% weightage to Financial Score (FS). SHSB will form an evaluation Committee or it may be done by Technical Committee/ Task Force which will evaluate the proposals submitted by the bidders for a detailed scrutiny. During evaluation of proposals, SHSB, may, at its discretion, ask the bidders for clarification of their Technical Proposals. Only those proposals meeting the above Eligibility criteria will be evaluated as per the criteria mentioned below.

### Technical Bid Evaluation

Sr. No.	Criteria	Max Points	Point system
<b>1</b>	<b>Profile of the Bidder</b>	<b>10</b>	
	No. of years of IT operation in India	<b>3</b>	4 years – 1 points
			4-6 years – 2 points
			>6 years – 3 points
	Average Turnover of firm/Lead Bidder of the consortium for last 3 years.(as per Audited P& L)	<b>7</b>	30 crores - 1 points
			30-100 crores – 3 points
			100-150crores – 5 points
			>150 crores – 7 points
<b>2</b>	<b>Past Experience</b>	<b>25</b>	
	Experience in providing ICT related products/services (e.g. Application software/managing ICT infrastructure/operations etc.) to the Healthcare sector	<b>10</b>	1 project – 1 points
			2 projects – 2 points
			3 projects – 3 points
			4 projects – 4 points
			5 projects – 5 points
			6 projects – 6 points
			7 projects – 7 points
			8 project – 8 points
			9 projects – 9 points
			>=10 project – 10 points
	No. of Telemedicine Stations / Nodes developed by Vendor for telemedicine projects.	<b>10</b>	20 nodes– 2 points
			21-50 nodes– 4 points
			51-75 nodes – 6 points
			75-100 nodes– 8 points
			>=100 nodes – 10 points
	No. of Projects executed & currently running in the state of Bihar. (Minimum project value of 1 Crore Rupees)	<b>5</b>	1 project – 1 points
			2 projects – 2 points
			3 projects – 3 points
			4 projects – 4 points
			>=5 projects – 5 points

<b>3</b>	<b>Profile of Proposed Resources</b>	<b>5</b>	
	Profile of Proposed Resources Required for Completing the Specified Work in RFP. (As per Annexure 10)	<b>5</b>	Committee will evaluate the Annexure submitted by the bidders
<b>4</b>	<b>Technical Approach and Methodology</b>	<b>20</b>	
	Understanding of TOR and responsibility	<b>10</b>	Committee will evaluate the Technical Approach and Methodology from the paper submitted by the bidders Annexure submitted by the bidders
	Approach and Methodology Bill of Material, device specifications	<b>10</b>	
	Total	<b>60</b>	

### Technical Presentation Evaluation

On the prescribed date and time, the bidder shall make a technical presentation covering following key areas which will carry **10 Marks** out of the total Technical score for that bidder:

1. Understanding of Scope of Work
2. Approach & Methodology
3. Software solution design and Network Architecture
4. Implementation Strategy
5. Manpower / Resource deployment
6. Project Plan / Timelines
7. Bill of Material, Network Design, etc.
8. Specification of Medical Equipments proposed

Total Score will be evaluated by adding the scores obtained in evaluation of Technical Bid and Technical Presentation.

	<b>Maximum Score</b>	<b>Score obtained</b>
Technical Bid Evaluation	60	
Technical Presentation	10	
Total Score obtained out of 70 (Ts)		

Technical Evaluation will be assigned a Technical score (Ts) out of a maximum of 70 points. Bidders with Technical score of 45 and above out of 70 will qualify for the evaluation in the Technical Demonstration

### **Commercial/Financial Bid Evaluation:**

The Commercial/Financial bid of those bidders who qualify in the technical evaluation shall be opened. All other Commercial bids shall not be opened. The Commercial bids of the technically qualified bidders shall be evaluated as per the evaluation criteria mentioned below:

The lowest evaluated Financial Proposal (Fmin) as per SI no C of **PART-III** will be given the maximum financial score (Fn) of 30 points. The Normalised financial scores (Fn) of the other Financial Proposals will be computed as per formula for determining the financial scores given below:

$$\mathbf{Fn = 30 \times Fmin / Fb}$$

**Where,** Fn = normalized finance score for the bidder under consideration

Fb = absolute financial score for the bidder under consideration

Fmin = minimum absolute financial score obtained by any bidder

**The Bidder with highest (Ts + Fn) will be selected**

**In case the the highest bidder refuse to accept the offer then, the bidder with next highest total will be called for at the rates quoted by the highest Bidder.**

## PART-V

### General Conditions of the bid

#### Tender conditions

- a) The contract will be applicable for **3 year** from the date of award of the contract.
- b) The selected Company will be immediately informed about the final award. In case, the selected Company declines to take-up the task at the quoted and approved rates, it would be barred from participating in any tender floated by the State Health Society Bihar. The tender/performance security money of the said firm shall also be forfeited.
- c) Each successful bidder will have to furnish a suitable Performance Security **of 5% of the bid value of estimated order at the time of awarding the contract, for** the period of the contract.
- d) If the bidder fails to furnish the required performance security within the specified period after the award of the contract or refuses/denies to sign the rate contract, the EMD shall be forfeited and the bidder shall be disqualified/blacklisted/banned for a period of 5 years for participating in any tender of SHSB.
- e) Non-fulfillment of any of conditions of the contract shall lead to disqualification of the firm for a period of 5 years from participating in any tender of SHSB. This shall be put on the SHSB website for general notice also.
- f) The tenderer shall give an undertaking that all the statements made and submitted by him are true to his knowledge and any information subsequently found incorrect or false will mean automatic cancellation of the tender and tenderer will be liable for penal action as will be deed fit.
- g) The SHSB would make a rate contract of NARTAN as per the advertised details with the successful bidder. The SPO (Ayush) shall place the work order as per the specifications. As soon as the agency receives the work order, they will have to visit the locations where NARTAN is proposed to be established. On the basis of work order and visits the successful bidder is required to prepare an implementation program within 30 days of issue of work order. Then the bidder is require to take work & site handover from the concerned Civil Surgeon for implementation of NARTAN node. The bidder is required to complete the site establishment and establishment of telemedicine kits appointment of unit operator on node within 2 months from the date of site handover getting the approval from Civil Surgeon. After establishment of each node is to be verified
  - At state level by executing video conferencing
  - Physical verification at site inventory by state representativeAfter verification of each node 70 % payment on node basis may be made to the bidder and the balance payment may be made at full completion of the project and verification of inventory register at site. In no case any advance payment shall be made to any of the supplier.

h) The establishment shall be ensured within 2 months from handover from Civil Surgeon otherwise penalty will be leveled for delayed supply (0.5% per month subject to maximum of 10% of bill amount of delayed supply) which shall be deducted from the bill/Performance Security Money.

i) Failure to comply with the above condition or furnishing of any incorrect or incomplete information will make the tender liable for rejection.

**Refund of Earnest Money Deposit:**

The EMD submitted by unsuccessful bidders shall be returned to them without any interest whatsoever, within 30 to 60 days after conclusion of the contract with successful bidder. The EMD submitted by successful bidders shall be returned to them after the successful bidder deposits the performance security according to conditions stipulated in the bid document.

**Refund of Performance Security:**

If the supplier duly performs and completes the contract in all respect, the performance security shall be returned the supplier without any interest, within 30 to 60 days of completion of all such obligations under the contract.

**Jurisdiction of any dispute:**

If any dispute or difference of any kind what so ever arises between the purchaser and supplier in connection with or arising out of the contract, the parties shall first make every effort to resolve amicably such dispute or difference by way of mutual consultation and/or under "The Arbitration and Conciliation Act 1996" and for the said purpose the Secretary Health/Executive Director, SHSB shall be the sole arbitrator in the matter. If the parties fail to resolve their dispute or difference by such mutual consultation or under the Arbitration and Conciliation Act 1996, the case shall be subject to the jurisdiction of Patna (Bihar) only.

**Pre-bid meeting of interested bidders** is scheduled on **2 January 2012 at 11:00 AM** in Conference Hall, State Health Society Bihar, Pariwar Kalyan Bhawan, Sheikhpura, Patna-800014. Bidders seeking clarification on the bid document shall submit written query/queries (3 days) three days prior to the Pre-bid meeting date. Pre-bid amendments, if any, will be floated on the SHSB website -<http://statehealthsocietybihar.org> under tender information section.

#### **Deadline for Submission of Bids-**

The technical and financial bids, in separate sealed envelopes may be sent, addressed to **“The Executive Director, State Health Society Bihar, Pariwar Kalyan Bhawan, Sheikhpura, Patna-800 014”**. This must reach the office of the undersigned latest by **3:00 P.M. on or before 24<sup>th</sup> February 2012** through Registered/Speed Post. Bids received after this deadline, would not be entertained. **No bid will be accepted directly or by hand.** SHSB will not be responsible for postal delay. In the event of the specified deadline of submission of bid being declared a holiday, the bid shall be received on the next working day.

#### **Opening of Bids**

Technical bid shall be opened at **4 PM on 24<sup>th</sup> February 2012** in the presence of bidders or their authorized representatives who desire to be present. Participating authorized representatives must bring authority letter of the company with them. Without authority letter from the company the representative will not be allowed to participate in the meeting. After opening of the bids, all opened bids shall be evaluated by a committee. Financial bid of only those bidders will be opened whose technical bid is found eligible by the Technical Core Committee. Financial Bid will be opened in the presence of bidders and the date of opening of financial bid will be informed to the Technically Qualified bidders.

**Display of qualified/disqualified bidder on SHSB website:** Bidders should visit SHSB website-<http://statehealthsocietybihar.org> regularly for information regarding status on qualification/disqualification of their bid and for other related information.

The decision of the State Health Society Bihar shall be final, and no enquiries, or application for review, shall be entertained. **The State Health Society Bihar reserves the right to amend any of the conditions, if required or cancel or reject all or any bid/tender without assigning any reason.**

For details, please contact at 09473191942 or [ayushbhs09@gmail.com](mailto:ayushbhs09@gmail.com)

**Sanjay Kumar, I.A.S.**



Executive Director

**Annexure 1: Application for Empanelment for National Rural Telemedicine Ayush Network**

To,  
The Executive Director,  
State Health Society, Bihar,  
Parivar Kalyan Bhawan, Shekhpura, Patna- 14

Ref:- Proposal for National Rural Telemedicine Ayush Network for 250 Nodes in Bihar

Dear Sir,  
Having examined the Proposal document relating to the Proposal notice, terms & conditions and scope of work etc, and having understood the provisions and requirements relating to the empanelment and all other factors governing the project, we hereby submit our application for the empanelment in accordance with prescribed terms and conditions and confirm our acceptance.

We further confirm that-

- i. We have successfully carried out various project/orders of similar nature and we have sufficient experience and financial strength in handling assign works of this nature.
- ii. We have sufficient qualified manpower and necessary IT infrastructure to execute the assigned work.

**Name of the Applicant Agency/Institution/Firm:**

**Signature of Authorized Representative:**

**Designation of Authorised Representative:**

**Seal & Date**

**ANNEXURE 2: APPLICANT AGENCY/INSTITUTION/FIRM'S PROFILE**

Name of the Agency/Institution/Firm	Name of Associated Agency/Institution/Firm, if any
Address of Head Office	Contact Person
Year of Establishment	Number of Offices (India and Bihar)
Financial Turnover* in last three year (Rs. In Lakhs) Year 2010-11  Year 2009-10  Year 2008-09  Average annual turnover for above three financial years: *Audited Statement to be enclosed	
Net worth of Agency/Institution/Firm (Positive/Negative)	
Working Capital: (in lakhs):	
Experience in similar assignment: -Number of years: -Total assignments: -Similar assignments in last 3 years:	
Any award of felicitation received :	
Any other relevant details:	

**Name of the Applicant Agency/Institution/Firm:****Signature of Authorized Representative:****Designation of Authorised Representative:****Seal & Date**

**ANNEXURE 3: DETAILS OF RELEVANT SERVICES CARRIED OUT IN THE LAST TWO YEAR WITH BEST ILLUSTRATE QUALIFICATION**

The following information should be provided in the format below for each reference assignment for which you are legally contracted by the client stated below.

Assignment Name :	State:
Location within country:	
Name of the Client:	
Brief Description of Project/Assignment:	
Contact Details (Telephone, Mobile No. & e-mail) of clients:	

\*(Certificate from employer regarding experience should be furnished).

**Name of the Applicant Agency/Institution/Firm:**

**Signature of Authorized Representative:**

**Designation of Authorised Representative:**

**Seal & Date**

**ANNEXURE 4: DECLARATION (Affidavit)**

To,  
The Executive Director,  
State Health Society, Bihar,  
Parivar Kalyan Bhawan, Shekhpura, Patna- 14

Ref :- Proposal for National Rural Telemedicine Ayush Network for 250 nodes in Bihar.

Dear Sir,

I/W..... hereby confirm that our agency/institution/firm has not been banned or blacklisted by any Government Department/Agencies/Public sector units.

**Name of the Applicant Agency/Institution/Firm:**

**Signature of Authorized Representative:**

**Designation of Authorized Representative:**

**Seal & Date**

## Annexure 5

**Capital Expenditure at State level unit**

(including one year running and maintenance charge)

S No	Particulars	Quantity	Unit Cost	Amount
1	<b>Telemedicine solution</b>	1		
2	<b>Telemedicine Server Platform (Note 1)</b>	1		
3	<b>Desktop computer and accessories (Note 2)</b>	5		
4	<b>Peripherals</b>	1		
	Laser Printer,4- port USB Hub			
	Network Devices- 8 port 10/100mbps switch and patch cables			
	2 KVA On-line UPS			
5	<b>IP Video Conferencing Kit</b>			
	512 Kbps IP based VC unit			
	32" LCD TV (with wall mounting kit)	5		
6	<b>Connectivity device (either of them)</b>	1		
	ISDN Modem(with NT)			
	ADSL/2+/CDMA/PSTN Modem			
	VSAT SkyIP unit			
	Wi-MAX CPE			
	Fiber Optic CPE			
7	<b>2/4 module router with items in S.N. 5</b>			
8	<b>Telemedicine clinet software development</b>			
	(1) Interactive Telemedicine Clinet software (with interactive connect to telemedicine server)			
9	<b>Tranning Cost (5 doctors and 5 pharmachist)</b>			
	<b>Installation &amp; establishment Cost(Interiors ,Electricals and Furniture, hardware &amp; software)</b>			
10				
11	<b>Add any other item in the list if necessary</b>			
12	<b>Power Backup</b>			
13	<b>Insurance charges</b>			
	<b>Total Cost (Ayush A.1)</b>			

**NOTE**

- 1 . 2x Dual Core Intel Xeon 3.2 GHz 4096 MB RAM , DVD -RW Drive , dual 10/100/1000 APPROPRIATE 3rd Party software (AV)  
**OPERATING SYSTEM**  
2. WINDOWS 2003 R2 STANDARD Server ,MS OFFICE Standard , MS SQL SERVER  
**OR** REDHAT ENTERPRISE LINUX 5 Standard , PostgreSQL  
3 .INTEGRATED GRAPHICS CARD  
4 .KEY BOARD & MOUSE  
5.17 INCH TFT LCD MONITOR  
6.ON BOARD RAID Controller and Hot-swap disks  
2x36 GB SCSI/SAS RAID -1 FOR OS  
4X300 GB SCSI /SAS RAID-6

**NOTE**

- 2 (1) Intel Core2,2.4GHz(or equivalent 1024 MB RAM ,400 GB HDD ,DVD ROM DRIVE 10/100 NIC  
(2) APPROPRIATE 3RD PARTY SOFTWARE ( AV DATA BASE)  
(3) WINDOWS XP Professional MS OFFICE Standard  
(4) Hardware accelerator Graphics Card (dedicated 256 MB onboard RAM)  
(5) KEYBOARD AND MOUSE  
(6) 17 INCH TFT LCD monitor  
(7) WEB CAMERA  
(8) Microphone ,Stereo speakers and Headset

Annexure  
6

**Capital Expenditure at each 212 PHC & 38 District level**

S No	Particulars	Quantity	Unit Cost	Amount
1	<b>Desktop</b>	1		
2	<b>Medical devices as per Annexure 9</b>	1		
3	<b>Peripherals</b>			
	Laser Printer,4- port USB Hub with scanner	1		
	Network Devices- 8 port 10/100mbps switch and patch cables			
	1 KVA On-line UPS	1		
4	<b>IP Video Conferencing Kit</b>			
	128 Kbps IP based VC unit			
5	<b>Telemedicine Software instalation</b>	1		
	Interactive Telemedicine Clinet software (with interactive connect to telemedicine server)			
6	<b>Connectivity device (either of them)</b>	1		
	ISDN Modem(with NT)			
	ADSL/2+/CDMA/PSTN Modem			
	VSAT SkyIP unit			
	Wi-MAX CPE			
	Fiber Optic CPE			
7	<b>2/4 module router with items in S.N. 6 (Optional)</b>			
8	<b>Installation &amp; establishment Cost(Interiors ,Electricals and Furniture, hardware &amp; software)</b>			
9	<b>Tranning Cost (Ayush doctors, pharmachist and unit operator)</b>			
10	<b>Add any other item in the list if necessary</b>			
11	<b>Power Backup</b>	1		
12	<b>Insurance charges</b>	1		
	<b>Total Cost (Ayush A.2)</b>			

- Note 1
- (1) Intel Core2,2.4GHz(or equivalent 1024 MB RAM ,400 GB HDD ,DVD ROM DRIVE 10/100 NIC
  - (2) APPROPRIATE 3RD PARTY SOFTWARE ( AV DATA BASE)
  - (3) WINDOWS XP Professional MS OFFICE Standard
  - (4) Hardware accelerator Graphics Card (dedicated 256 MB onboard RAM)
  - (5) KEYBOARD AND MOUSE
  - (6) 17 INCH TFT LCD monitor
  - (7) WEB CAMERA
  - (8) Microphone ,Stereo speakers and Headset

Annexure  
7

**Operational Expenses of the Project (to State, districts and PHCs)**

S No	Particulars	Quantity		Year 1	Year 2	Year 3
		State level	District level			
1	Project Manager	1	-			
2	Technical Assitance	3	-			
3	Ayush Doctors (to be provided by SHSB)		250	N/A	N/A	N/A
4	Unit Operator		250			
5	512 kbps data bandwidth	1	250			
6	Travelling cost (Manager & technical Assistant)	1	-			
7	Stationary (Consumables like paper, cartridges)	1	250			
8	Maintainance of Computer, UPS & Kit	1	250	N/A		
9	Licence cost for audio-video conference	5	250	N/A		
10	AMC for Computer & UPS	2	250	N/A		
11	Fuel for Genset	1	-			
12	Rent	1	-			
13	Insurance	1	250			
14	Electricity for Central Unit	1	-			
15	Add any other item in the list if necessary		-			
<b>Total each year</b>						

S No	Particulars	Amount
Annex 5	Total Cost (Ayush A.1)	
Annex 6	Total Cost (Ayush A.2)	
Annex 7	Total Cost (Ayush B)	
	<b>Grand Total</b>	

**Gross Total in Words**

^ Bidders should consider the Esclation clouse for 3 years.

Annexure 8

**Revenue Generation Flow**

S.N.	Particulars	Cost	Patients/ Days	Revenue	At 250 nodes	Total Revenue in a year	
1	E.C.G.						
2	Rapid Test						
3	Value Added Services(i.e information about)						
	Railways						
	Examination						
	Results						
	Competitive exams						
	Job Vacancy						
	Government Schemes						
	Hospitals						
4	Private Health Provider						
5	Earning through Referral for						
<b>Grand Total</b>							

Note- 1. Assuming 300 days in a Year

2. Gross Total Revenue is divided in 50:50 ratio with bidder and state government



## **Annexure 9 Medical Equipment Minimum Specifications at nodes**

### **X- Ray Digitizer / Scanner**

A scanner is indispensable equipment for our Telemedicine Project. We drew certain guidelines for selecting the appropriate scanner for our application like:

- a) Twain Compliance
- b) Minimum optical resolution of 1200 dpi (Vertical resolution of 2400dpi)
- c) Color CCD
- d) USB 1.1 or higher Interface.

### **Tele-Pathology System**

A Telepathology microscope with Digital camera with the following features is required for recording and sending the ECG of patients:

- 360 degrees Rotatable
- Magnification 40x to 1000x.
- Objective: RIF Plan Infinity corrected 4x, 10x, 40x & 100x.
- Eyepiece: W.F. 10x / 22mm focusable paired with eye guards.
- Certifications.
- 4.0 mega pixels Digital video camera.
- Lens with 4x Zoom. Interface USB 2.0.

### **Tele-ECG**

A PC-based electronic Electrocardiogram with the following features is required for recording and sending the ECG of patients:

- 12 Leads standard as it provides spatial information about the heart's electrical activity in 3 approximately orthogonal directions: Right Left Superior Inferior Anterior Posterior.
- Input Impedance should be greater than 4 MM and ECG CMRR should be greater than 100dB.
- Standard PC serial / Parallel / USB port Interface.

Windows based software for acquisition, review and storage Standard SDK for incorporation in other softwares.

### **Digital Stethoscope**

A PC-based ( Stethoscope for digitized Heart and lung sounds with following features: -:

- Simultaneous phonocardiogram creation.
- Internal software filters to modify the sound as needed.
- Memberace diameter 4.5 cm (minimum).

Frequency Range: 40 Hz - 2000 Hz.

## ANNEXURE 10.

### Part 1: Key Personnel

Using the format below, please provide the summary information on the profiles you propose to include for evaluation and the roles they are expected to play in the project:

S. No.	Proposed Role	No. of Resources	Area Of Expertise	Key Responsibilities

It is also required to submit the resume of Key Personnel. The profile for a single member must not exceed two pages.

### Part 2: Terms of Reference for Unit Operator.

Please provide detailed professional profile of the staff proposed to be appointed at Nodes. The profile for a single staff member must not exceed two pages.