

DISTRICT MINERAL FOUNDATION : KEONJHAR

(2nd Floor, DRDA Building, Keonjhar - 758001)

(Email: dmfkeonjhar@gmail.com)

No. 113 /DMF

Date: 24/01/2019

REQUEST FOR PROPOSAL

In continuation to this office advertisement No. 1742 dated 15.12.2018 sealed proposals are invited from the eligible reputed and qualified Agencies/organisations for "Establishment and management of Patient Facilitation Centre at SCB Medical College and Hospital, Cuttack' under DMF, Keonjhar. The detailed terms and conditions along with the RFP documents can be downloaded from the district website www.kendujhar.nic.in .

The Proposal complete in all respect should reach the undersigned on or before 14 /02 /2019 upto 5 PM and will be opened on 15 /02 /2019 at 11:00 Hours in the presence of the committee constituted for the purpose.

The undersigned reserves the right to reject or cancel any or all the tenders without assigning any reason thereof.


Collector-cum-Chairman & Managing
Trustee, D.M.F. Keonjhar

Not to be published:

Memo No. 114 (2)/DMF.

Date: 24/01/2019

Copy to the District Correspondent, ...SAMBAD..... & DHARITRI.... of Keonjhar district for information and necessary action. They are requested to publish the advertisement in their esteemed dailies, immediately within minimum size and submit bill as per Govt. approved rate with complimentary copies for early payment of bills.


Collector-cum-Chairman & Managing
Trustee, D.M.F. Keonjhar

Memo No. 115 /DMF.

Date: 24/01/2019

Copy to District Informatics Officer, NIC, District Unit, Keonjhar for information and necessary action. He is requested to upload the document in the district website, immediately for information of the public.


Collector-cum-Chairman & Managing
Trustee, D.M.F. Keonjhar

RFP Number: 07/DMF

Date: 24/01/2019

REQUEST FOR PROPOSAL (RFP)
FOR THE
SELECTION OF AN AGENCY FOR 'ESTABLISHMENT AND MANAGEMENT OF
PATIENT FACILITATION CENTRE AT SCB MEDICAL COLLEGE AND HOSPITAL,
CUTTACK' UNDER DISTRICT MINERAL FOUNDATION (DMF), KEONJHAR

Issuer:

District Collector cum Chairperson and Managing Trustee,

District Mineral Foundation (DMF), Keonjhar

Government of Odisha

Phone: 06766-255401

Email: dm-keonjhar@nic.in

Address for Communication & Submission of Documents during Tender Period:

District Collector cum Chairperson and Managing Trustee,

District Mineral Foundation (DMF), Keonjhar

Second Floor,

District Rural Development Agency (DRDA), Keonjhar

Keonjhar – 758001

Email: dmfkeonjhar@gmail.com

DISCLAIMER

The information contained in this Request for Proposal (hereinafter referred to either as 'TENDER') document provided to the Bidders, by the District Mineral Foundation, Keonjhar, hereinafter referred to as DMF, or any of their employees or advisors, is provided to the Bidder(s) on the terms and conditions set out in this TENDER document and all other terms and conditions subject to which such information is provided.

The purpose of this TENDER document is to provide the Bidder(s) with information to implement the following assignment: '**ESTABLISHMENT AND MANAGEMENT OF PATIENT FACILITATION CENTRE AT SCB MEDICAL COLLEGE AND HOSPITAL, CUTTACK UNDER DISTRICT MINERAL FOUNDATION (DMF), KEONJHAR**'. This TENDER document does not purport to contain all the information each Bidder may require. This TENDER document may not be appropriate for all persons, and it is not possible for the DMF, their employees or advisors to consider the business/investment objectives, financial situation and particular needs of each Bidder who reads or uses this TENDER document.

Each Bidder should conduct its own investigations and analysis and should check the accuracy, reliability and completeness of the information in this TENDER document and wherever necessary obtain independent advice from appropriate sources. DMF, their employees and advisors make no representation or warranty and shall incur no liability under any law, statute, rules or regulations as to the accuracy, reliability or completeness of the TENDER document.

DMF may, in its absolute discretion, but without being under any obligation to do so, update, amend or supplement the information in this TENDER document.

Section 1: Letter of Invitation (LoI)

District Collector cum Chairperson and Managing Trustee,
District Mineral Foundation (DMF), Keonjhar
Government of Odisha

Address:

District Collector cum Chairperson and Managing Trustee,
District Mineral Foundation (DMF), Keonjhar
Second Floor,
District Rural Development Agency (DRDA), Keonjhar
Keonjhar – 758001
Email: dmfkeonjhar@gmail.com

SUBJECT: Selection of an Agency for 'Establishment and Management of Patient Facilitation Centre at SCB Medical College and Hospital, Cuttack' under District Mineral Foundation (DMF), Keonjhar

The District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar invites proposals from reputed agencies for 'Establishment and Management of Patient Facilitation Centre at SCB Medical College and Hospital, Cuttack' under DMF, Keonjhar.

The Agency will be selected based on Quality Based Selection (QBS) criteria described in this RFP.

The RFP comprises the following sections:

- Section 1 - Letter of Invitation (LoI)
- Section 2 - Definitions
- Section 3 - Factsheet
- Section 4 - Background and the need for a PFC
- Section 5 - Terms of Reference
- Section 6 - Instructions to applicant Agencies
- Section 7 - Technical Proposal - Standard Forms


District Collector cum Chairperson and Managing Trustee,
District Mineral Foundation,
Keonjhar

Section 2: Definitions

- a) "DMF" means the District Mineral Foundation, Keonjhar.
- b) "Client" is the District Collector cum Chairperson and Managing Trustee, DMF, Keonjhar, Government of Odisha.
- c) "PFC" means the Patient Facilitation Centre, which is a facility to be established in SCB Medical College and Hospital, that shall guide and provide handholding support to IPD patients referred from Keonjhar district.
- d) "AAC" means the Attendant Accommodation Centre, which is a facility to be established within walking distance of SCB Medical College and Hospital, that shall provide accommodation and food (daily allowance) for a maximum of two attendants/ IPD patient referred from Keonjhar district.
- e) "NHM" means the National Health Mission of the Govt. of Odisha.
- f) "IPD" means the In-Patient Department.
- g) "CDM & PHO" means the Chief District Medical & Public Health Officer of Keonjhar district.
- h) "Agencies" means entities or persons that may provide or provides the Services to the Client under the Contract.
- i) "Day" means calendar day.
- j) "Instructions to applicant Agencies" means the document which provides interested Agencies with the information needed to prepare their respective Proposals.
- k) "LOI" (Section 1 of the RFP) means the 'Letter of Invitation' being sent by the Client.
- l) "Personnel" means professionals and support staff provided by the selected Agency and assigned to perform the Services or any part thereof.
- m) "Proposal" means Pre-Qualification Documents, Technical Proposal and Financial Proposal.
- n) "RFP" means the Request for Proposal circulated by the Client for the selection of an Agency.
- o) "Assignment / job" means the work to be performed by the selected Agency pursuant to the Contract.
- p) "DPEP" means the Detailed Project Execution Plan to be submitted by the selected Agency to CDM & PHO pursuant to the Contract.
- q) "Terms of Reference" (TOR) means the information included in the RFP which explains the objectives, scope of work, activities, tasks to be performed, respective responsibilities of the Client and the selected Agency.

Section 3: Factsheet

Request for Proposal (RFP) document made available to the applicants	25 th January, 2019
Date of Pre-bid meeting	30 th January, 2019 (11:00 Hrs)
Last date for receiving queries	4 th February, 2019 (by 17:00 Hrs)
Response to queries	7 th February, 2019
Last date for receipt of Proposals (Sealed Envelope)	14 th February, 2019 (by 17:00 Hrs)
Opening of Proposals received within the stipulated date	15 th February, 2019 (11:00 Hrs)
Technical Presentation	20 th February, 2019
Letter of Award	To be intimated to the selected Agency
Project Start Date	To be intimated to the selected Agency
Cost of Tender (Demand Draft)	INR 5,000 (Rupees Five Thousand Only)
Earnest Money Deposit (EMD) (Demand Draft)	INR 50,000 (Rupees Fifty Thousand Only)
Performance Bank Guarantee	INR 5,00,000 (Rupees Five Lakhs Only)
Method of Selection	Quality Based Selection (QBS)
Contact Details	District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar Second Floor, District Rural Development Agency (DRDA), Keonjhar Keonjhar – 758001 Email: dmfkeonjhar@gmail.com

Note:

1. The Client reserves the right to change any schedule. Please visit the website www.keonjhar.nic.in regularly for the same.
2. Proposals must be submitted before the date, time and venue mentioned in the Factsheet through Speed/Registered Post or by hand. Proposals that are received after the deadline will not be considered.

Section 4: Background and the need for a PFC

Keonjhar is an administrative district of Odisha state. The district comprises of 5.3 per cent of Odisha's landmass with about 4.24 per cent of the population of the state. The district has abundant mineral resources and large forest reserves. Despite the vast natural resources, the district continues to be socio-economically backward. The poverty Head Count Ratio (HCR) of the district is 47 per cent.

More than 85 per cent of the population of the district live in rural areas. The district has high proportion of Scheduled Caste (SC) and Scheduled Tribe (ST) population, of which SC accounts for 11.6 per cent and ST accounts for 45.5 per cent (2011 Census). Traditionally, these tribal and forest dwelling communities were dependent on subsistence shifting agriculture and various forest produces for their livelihood. However, rapid degradation of land and forests over the last few decades, due to mining and other anthropogenic reasons, has severely affected their lives.

In Keonjhar district, there are 60 nos. of Primary Health Centres (PHCs), 17 nos. of Community Health Centres (CHCs), 2 numbers of Sub-Divisional Headquarter Hospitals and one District Headquarter Hospital. According to the Annual Health Survey Report 2011-12¹, Keonjhar has a Maternal Mortality Rate of 212 for 1,00,000 live births, while the Neonatal Mortality Rate is 42 per 1000 live births.

In the year 2015-16, the number of reported deaths in the district was 306. Out of this about 68% was from *Known Chronic* diseases. In the same year, the total number of OPD consultations in the DHH, SDHs and CHCs were 164703, 100280 and 448404 respectively. During 2015-16, the per day per institution OP consultations was 549, 167 and 88 at DHH, SDH and CHC.

In the year 2015-16, the total number of IPD admissions in the DHH, SDHs and CHCs were 35809, 34031 and 51252 respectively. The IPD admissions per day at DHH were 98, while the figures were 47 per SDH, and 8 per CHC respectively. It has also been observed that government hospitals accounted for about 97% of OPDs and 99% of IPD admissions out of the total OPD and IPD admission in the district.

In the year 2015-16, the OP to IP conversion was about 22% in the DHH, 34% in the SDHs and about 11% in the CHCs. As far as conduct of general surgeries in the year 2015-16 was concerned, about 1640 nos. of major surgeries and 2454 nos. of minor surgeries were conducted in the DHH. Therefore, on an average 6 major surgeries and 8 minor surgeries were conducted at the DHH daily. In the same year, about 704 major surgeries and 362 minor surgeries were conducted in the SDHs. In the CHCs, about 83 major surgeries and 3026 nos. of minor surgeries were conducted.

It has also been observed that about 50% of the patient flow in the DHH is from within Kendujhar town, while about 45% of the patient flow is from within the district other than the district town.

In the year 2015-16, a total of 532 cases/month were referred from DHH to other districts, primarily to SCB Hospital, Cuttack. The top five specialities for which patients were referred out of the district were Cardiology (31%), Gynaecology and Obstetrics (15%), Urology/Nephrology (13%), General / Internal Medicine (11%) and Neurology (9%). The top five specialities of referrals accounts close to 80% of total referrals.

Observing the huge footfall in the SDHs, it can be reasonably assumed that a substantial number of patients are referred to other districts, or SCB, Cuttack. Hence, the average number of referrals from the district, both from DHH and SDHs, might be close to 25-30/day (approx.).

The mobility support for these referral are arranged through the 108 ambulance support. However, in some cases, patients are trapped and duped into undergoing expensive treatments at private hospitals

¹http://health.odisha.gov.in/OAHP/District_Profile/Keonjhar.pdf

causing great economic hardship to them. Moreover, due to the poor socio-economic background and low literacy levels, the patients encounter problems varying from accommodation and food to lack of knowledge in navigating through the overwhelming campus of SCB Medical College and Hospital. Given that the patients and their attendants would already be under severe trauma due to serious medical conditions, the need of the hour is a facilitation centre that can take care of their logistical needs during their admission and period of treatment at SCB Medical College and Hospital, Cuttack.

Hence, District Mineral Foundation has decided to open a Patient Facilitation Centre in SCB Medical College and Hospital, Cuttack for all the IPD patients who are referred from Govt. hospitals (DHH/SDHs) in Keonjhar district.

Section 5: Terms of Reference

A. Description

Tertiary health care is highly specialized medical treatment that is provided to patients over a period of time and usually involves complex medical procedures performed by medical specialists. For the people of Keonjhar, the nearest government hospital that provides affordable tertiary care in state-of-art facilities is the Srirama Chandra Bhanja Medical College and Hospital (hereinafter referred to as 'SCB MCH') at Cuttack which is around 200 km away. Estimates suggest that nearly 20 cases are referred daily from the District Headquarters Hospital at Keonjhar to SCB MCH. In addition to these, about 10 cases are referred daily from the SDHs at Champua and Anandapur.

B. Definition of a Patient Facilitation Centre

The Patient Facilitation Centre (PFC) is a facility proposed to be established at SCB, Cuttack that shall guide and provide logistical and handholding support to in-patients (IPDs) from Keonjhar and two of their attendants during the course of their treatment at SCB MCH. The patients are to be necessarily referred from either the DHH, Keonjhar or the SDH at Anandapur and Champua.

The PFC shall comprise of two units.

- i) Patient Facilitation Centre at SCB MCH – It will comprise of a team who will guide and provide handholding support to the patients. The PFC at SCB MCH will be operational 24 hours a day throughout the year.
- ii) Attendant Accommodation Centre (AAC) – It will provide overnight accommodation, and food (daily allowance) for a maximum of two attendants per patient. It will be located within walking distance of the SCB MCH.

C. Project Objectives

1. To provide logistical and handholding support to the in-patients for availing of health services during their treatment at SCB MCH
2. To provide accommodation and food (daily allowance) for a maximum of two attendants accompanying the in-patients (IPDs), for the duration of the treatment
3. To provide various associated services during and post treatment of the in-patient (IPDs)

D. Services to be provided at the Patient Facilitation Centre at SCB MCH by the selected Agency

1. Track the patient after being referred from DHH/SDHs till the time of arrival at Cuttack
2. On arrival at Cuttack, receive the referred patient at SCB MCH
3. Escort and guide the patient in preparing the requisite paperwork, in-patient/casualty registration, etc.
4. Admit the patient in appropriate in-patient (IPD) ward/department.
5. Coordinate with doctors in charge, or paramedics in the ward/department.
6. Help the patient access investigations / tests, laboratory services, diagnostics, medicines (from Jan Aushadhi / Nirmaya stores), blood bank, ambulance services, etc.
7. Help the patient in availing of benefits under various insurance schemes such as
 - i. Rastriya Swasthya Bima Yojana
 - ii. Biju Swasthya Kalyan Yojana
 - iii. Biju Krushak Kalyan Yojana
 - iv. Any other, if eligible.
8. Help the patient in their discharge formalities, provide medico-legal support, arrange hearse under Mahaprayan scheme (if needed), and ensure access to financial support from Harishchandra Yojana
9. Ensure the safe return of the patients back to Keonjhar
10. Coordinate with DHH/SDHs with respect to the patient inflow and outflow from PFC and regularly update their status to concerned DHH/SDHs
11. Any other related services.

E. Services to be provided at the Attendant Accommodation Centre by the selected Agency

1. Over-night accommodation for the attendants (maximum 2 nos. per patient)
2. Provision of food (daily allowances) for the attendants during the stay

F. Infrastructure to be established at the Patient Facilitation Centre at SCB MCH, Cuttack by the selected Agency

Fully furnished pre-fabricated/portable office, within SCB campus consisting of lights, fans, almirah, tables, chairs, laptops, printer, mobile phones, and other related necessities

G. Infrastructure/facilities at Attendant Accommodation Centre (AAC) at Cuttack by the selected Agency

The plinth area of the AAC should be a minimum of 5500 square feet. The AAC should conform to the following standards:

- a. It should preferably be contained in a building, built of brick and mortar, adequately lighted and properly ventilated and affording effective protection from all kinds of weather
- b. The AAC should be situated within walking distance of the SCB MCH
- c. The flooring should be of cement or tiles and the ceiling should not be less than 3 metres high from the floor

In addition it should have the following facilities / amenities:

1. One male dormitory for 50 attendants with single beds (minimum 2500 square feet)
2. One female dormitory for 50 attendants with single beds (minimum 2500 square feet)
3. 10 seated urinal, 5-seated Indian toilet, and 5-seated bathroom for male attendants
4. 10 seated Indian urinal-cum-toilet, and 5 seated bathroom for female attendants
5. 100 locker boxes for keeping of personal belongings by the attendants
6. Dressing room for female attendants (minimum 100 square feet)
7. One office room (minimum 200 square feet) with tables, chairs, desktop computer, and other related necessities
8. One angled rack stand- five shelves (for office room)
9. Open space of about 500 square feet for drying clothes
10. CCTV cameras in the male dormitory area, female dormitory area, office room, outside the building, and in common areas, stored locally for a minimum of 90 days and available for viewing to authorized representative of the selected Agency/client only.
11. Two fire extinguishers at appropriate locations
12. Location guide maps of SCB MCH and Cuttack city
13. Telephone directory of SCB and Keonjhar DHH/SDHs
14. Safe drinking water facility
15. Two stand-by Power Backup (Inverter) System
16. First aid kit

H. Functioning of the Patient Facilitation Centre

1. The PFC at SCB MCH should operate for 24 hours a day, throughout the year

2. Seven PFC Coordinators should be stationed at SCB MCH, in three shifts. The number of Coordinators present in a particular shift should be finalized based on average foot fall during each shift.
3. Two mobile numbers should be kept operational 24*7, for any assistance required by the patients
4. Patient information/case records should be maintained in a format finalized by the office of the CDM & PHO
5. Complaint box and complaint register should be maintained

I. Functioning of the Attendant Accommodation Centre (AAC)

1. The AAC should provide accommodation to a maximum of 50 male attendants and 50 female attendants, at any point of time
2. The accommodation at the AAC should be available from 6 PM – 10 AM only. At other times, the AAC should be restricted for public/attendants
3. Attendant fooding allowance should be provided (@ ₹ 200/attendant/day) in cash every morning
4. Two mobile numbers should be kept operational 24*7, for any assistance required by the attendants
5. Security guards (4 nos.), Sanitation worker-cum-Housekeeper (2 nos.) should be engaged by the Agency running the AAC
6. Services such as security should be outsourced. However, sanitation worker and housekeeping staff should preferably be hired directly.
7. Complaint box and complaint register should be maintained at a common area

J. Steps in Project Implementation

Sl. No	Step	Responsibility
1	Selection of the Agency for project implementation	Client
2	Identification of location and preparation of DPEP (Detailed Project Execution Plan)	Agency
3	Approval of location and DPEP	Client
4	Procurement of necessary equipment, instruments and furniture by the Agency on due approval of client	Agency
5	Installation of furniture, equipment, etc.	Agency
6	Approval for project initiation	Client
7	Execution of the project	Agency
8	Fund release to the selected Agency on submission of bills (monthly)	Client

9	Review and monitoring of the project (monthly)	Client
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K. Scope of Work

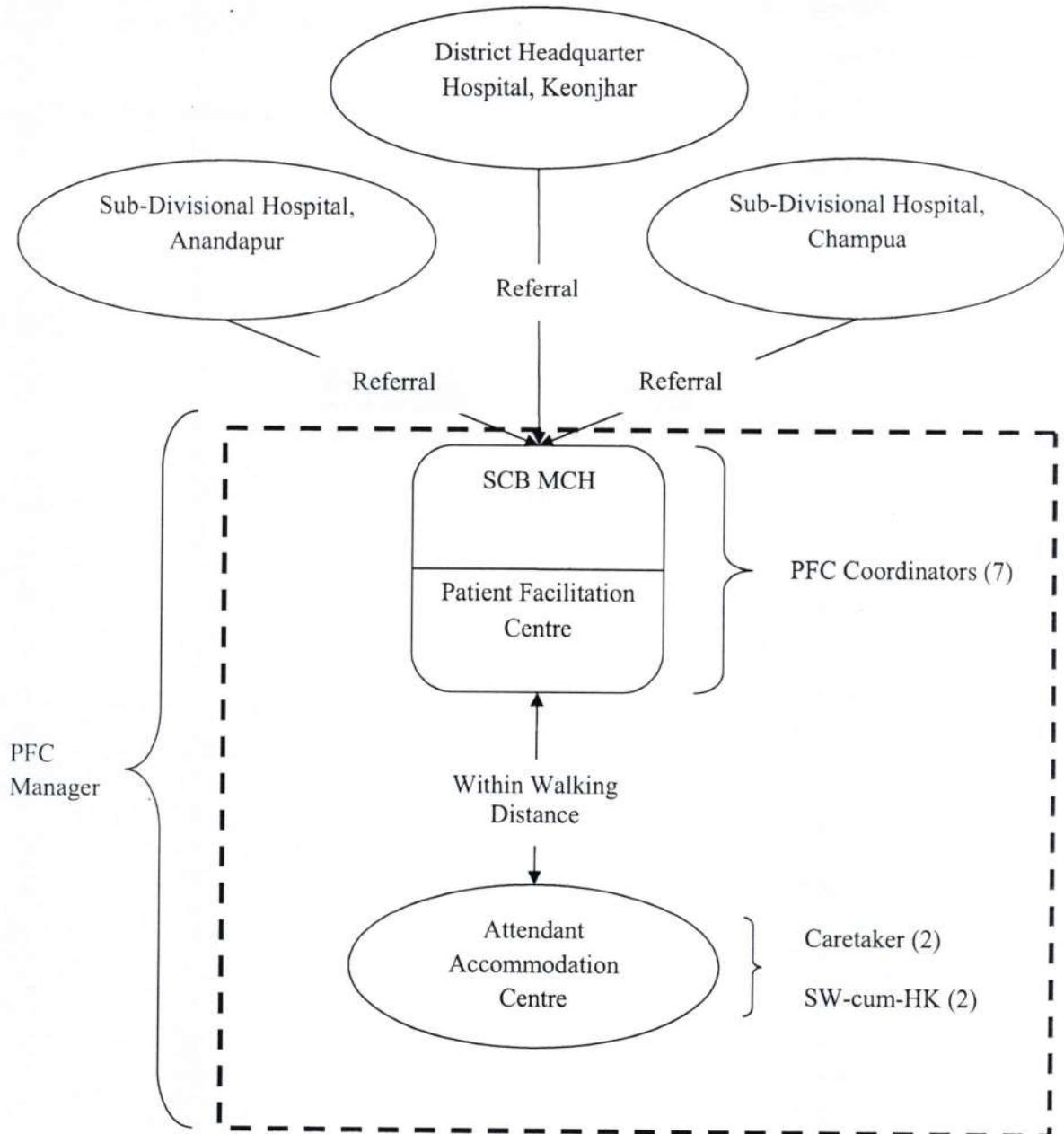
1. Ensure that all the 'Project Objectives', 'Services to be provided in the PFC', 'Services to be provided in the AAC', 'Functioning of the PFC', and 'Functioning of the AAC' as mentioned in Section 5 (C), Section 5(D), Section 5 (E), Section 5 (H), and Section 5 (I) are met.
2. Formulate a Detailed Project Execution Plan (DPEP) for the establishment and operationalization of the PFC. The DPEP should include details regarding:
 - i. Location / space for establishment of PFC&AAC and recruitment of PFC&AAC staff
 - ii. Training modules and plan for training the PFC&AAC staff
 - iii. Standard Operating Procedures (SOP) for day to day operation to ensure proper functioning of the PFC&AAC
 - iv. SOP for different emergency scenarios
 - v. Copy of approvals / permissions required under relevant statutes and rules.
 - vi. Formats for registers, MIS and other related documentation. The format, content, frequency and circulation of the MIS should be decided in consultation with the office of the CDM & PHO.
 - vii. Implementation schedules for placement of personnel, adoption/development of MIS, and other deliverables under this project
3. Execute the approved Detailed Project Execution Plan (DPEP)
4. Maintain and enforce a geo-tagged attendance system for all the personnel hired under this project
5. Provide regular updates to the Client through the assigned point of contact in the office of the CDM & PHO
6. Ensure proper documentation and record keeping of the patients/attendants in the PFC&AAC
7. Undertake annual financial planning of the project, submit necessary bills for release of funds and submit Utilisation Certificates for the fund spent
8. Submit monthly, quarterly and annual Progress Reports to the office of the CDM & PHO
9. Undertake periodic appraisal of the project execution status and take/suggest corrective steps
10. Identify critical gaps in existing health service delivery and recommend any improvements/additions required to amplify the impact of the project to the client
11. Attend all meetings as required by the DMF and/or the office of the CDM & PHO related to progress and assessment of the program

12. Take feedback from the patients and the attendants, act on the complaints/feedback received and take corrective measures
13. Any other relevant work as directed by the Client

L. Project Duration

The duration of the contract will be for **three** year and may be extended for a further period of 2 years, subject to satisfactory performance as determined by the Client.

M. Institutional Arrangement



N. Role and Responsibilities

1. Responsibility of CDM & PHO

Health & Family Welfare (H&FW) Department represented by the Chief District Medical and Public Health Officer (CDM & PHO) will be the nodal department having overall responsibility for the project. It will have the following responsibilities:

- Ensure necessary approvals / permissions for establishing & running the PFC from authorities at SCB MCH
- Sign an agreement with the selected Agency for project execution.
- Approve the location and Detailed Project Execution Plan (DPEP)
- Check and verify the HR and infrastructural facilities available at the PFC, and provide approval for project initiation upon satisfactory adherence to the conditions of the signed agreement
- Refer the patients to SCB MCH along with relevant documents and case records
- Prepare referral cards for the patients and hand it over to the referred patients
- Coordinate with the PFC regarding the referred patients
- Ensure quality services at the PFC through periodic inspections
- Coordinate with the PFC Manager in collecting information about the number of patients referred, patients outflow, contact details, address if possible (where contact number is not available), their referral card number, and any other relevant information
- Ensure the availability and maintenance of equipments, instruments and furniture, through periodic repairs
- Verify and forward bills that are submitted by the selected Agency to DMF for payment
- Review and monitor the execution of the project
- Evaluate the outputs/outcomes of the project

2. Responsibility of DMF

The responsibilities of DMF are as follows:

- Selection of Agency for project implementation through this RFP
- Facilitate the signing of Memorandum of Understanding (MoU) between CDM & PHO and selected agency
- Scrutiny and release of funds to the concerned Agency as per actual bills submitted and stipulated norms

O. Monitoring and Evaluation

Monthly review will be conducted at Keonjhar HQ, by the office of the CDM & PHO and officials from NHM to monitor the implementation of the project. The NGO should submit the progress report on monthly basis in the desired format as per given schedule to the office of the CDM & PHO.

Quarterly review will be held in Cuttack by a team deputed by CDM & PHO comprising of Hospital Manager (s), officials from NHM, etc. to assess the services provided at the PFC and AAC, and the compliance of the selected Agency to the Scope of Work.

Yearly Audit will be conducted in order to monitor and evaluate the PFC. The Audit will be carried out after the end of each year (after project initiation). The audit should take feedback from patients benefiting from this project, inspect the PFC (i.e. the AAC) for cleanliness and security; check the geo-tagged attendance of the staffs, inspect the video recording of the CCTV cameras, and other related tasks.

The yearly audit will be carried out by an evaluation committee comprising of the following:

- | | | | |
|----|---|---|----------|
| 1. | District Collector-cum-Managing Trustee, DMF | - | Chairman |
| 2. | PD, DRDA-cum-Chief Executive, DMF | - | Member |
| 3. | CDM & PHO, H&FW, Keonjhar (or representative) | - | Convener |
| 4. | DPM, NHM, Keonjhar | - | Member |
| 5. | Hospital Manager, DHH, Keonjhar | - | Member |
| 6. | Representative from PMU, DMF | - | Member |

The final evaluation will be carried out at the end of the project (i.e. 3 years) and will consider the following aspects in addition to those addressed in the yearly audit:

- (i) The project's achievement with respect to the objectives
- (ii) The effectiveness of the PFC for service delivery as envisioned
- (iii) Suitability of the Agency, with regard to extension of the contract
- (iv) Lessons learned and recommendations

The final evaluation will be carried out by a committee constituted for the purpose by the District Collector cum Management Trustee of DMF Keonjhar.

NOTE:

All assets, equipments and tools procured under the project will be property of the office of the CDM & PHO and the Agency will have no right over it.

P. Team Composition

Following are the minimum team deployment for the program:

Sl. No.	Location	Position	Number of resources
1.	PFC	Project Manager	1
2.	PFC	PFC Coordinator	7 (working in three shifts)
3.	AAC	Caretaker (Male)	1
4.	AAC	Caretaker (Female)	1
5.	AAC	Sanitation Worker-cum-Housekeeper (Male)	1
6.	AAC	Sanitation Worker-cum-Housekeeper (Female)	1

Q. Job Description of Personnel

Project Manager (PM)

Deployment: Full Time

Qualification and Experience Required:

Matrix of Qualification and Experience Combination for Project Manager			
Sl. No	Qualification Required	Experience Required (No. of years)	Remarks
1	MBBS Doctor	NIL	
2	AYUSH Doctor	2	Should preferably have previous experience of working with rural/tribal communities
3	PG in Public Health/ Hospital Administration/Hospital Management or equivalent	3	Should preferably have previous experience of working with rural/tribal communities
4	MBA or PG in Rural Development/Rural Management / Social Work or equivalent.	5	Should have at least 3 years of experience in health related projects

Desired qualities of the Project Manager:

1. Must be in the age group 22-45 years
2. Competency in usage of IT tools including proficiency in MS Office suite
3. Strong oral and writing skills in Odia and English with effective documentation skills.
4. Preferably have working knowledge of accounts and book-keeping

Specific responsibilities:

1. Responsible for overall functioning and implementation of the PFC & AAC
2. Build and maintain a high performing team of PFC Coordinators, Caretakers and other personnel hired under this project

3. Ensure that the deliverables under 'Scope of Work' as mentioned in Section 5 (K) are satisfied in a timely manner
4. Supervise all referrals and assign cases to the PFC Coordinators in an efficient manner
5. Coordinate between DHH/SDH and SCB MCH on the flow of patients through PFC
6. Disburse monthly salaries to the hired personnel, within the first week of the following month
7. Submit daily and monthly reports in the prescribed formats to office of the CDM & PHO
8. Manage day-to-day operations of the PFC & AAC by coordinating with all stakeholders and personnel hired under the project
9. Record day-to-day expenditure and submit monthly bills to office of the CDM & PHO for reimbursement
10. Arrange logistics of supplies, material, and consumables
11. Be present at the PFC at SCB MCH for at least five hours every day, which should be planned in way that two shifts of PFC Coordinators can be overseen. However, he/she is expected to be present in at least one night shift/week.
12. Be present in the AAC for at least three hours every day to oversee the cleanliness, security and comfort of the attendants
13. Conduct review meetings of PFC personnel for assessing progress and further action/activities
14. Report to the Client or the Authorized representative of the Client and act as a formal channel of communication between the selected Agency and the office of the CDM & PHO
15. Identify, assess gaps and address them if possible or highlight them to the office of the CDM & PHO
16. Any other relevant work that may be directed by the Client

PFC Coordinator

Deployment: Full Time

Qualification:

1. Minimum 3 years of professional experience
2. Graduate or equivalent degree
3. Previous experience of coordinating health projects or experience in handling government health schemes/hospitals will be preferred

Desired qualities of the PFC Coordinator :

1. Must be in the age group 23-35 years
2. Must have adequate computer skills especially MS Office Suite
3. Must have excellent communication skills in Odia and working knowledge of English
4. Should preferably have previous experience of working with tribal/rural communities

Specific responsibilities:

1. Contact the patient/ patient's attendants; keep track of their departure/arrival time from Keonjhar to Cuttack, number of attendants, etc. over phone
2. Receive the patients, collect original referral card from patient / patient's attendants, intimate referral card and other details to PFC Manager
3. Intimate the officials of the referred hospital about the referred patient
4. Coordinate with the hospital authorities for necessary arrangement
5. Follow all the necessary step of admission procedure and liaison between doctor/ hospital staff and the patient/ patient's attendants including requisite paperwork, registration, fixing of appointment, etc.

6. Collect photocopies of necessary documents from patients/ patient's attendants and submit it to the PFC Manager for required documentation
7. Assist the patient in all investigations, diagnostics, availing of medicines, blood, reports, etc.
8. Assist the patient in availing of insurance benefits, hearse (if needed), and other financial services
9. Coordinate with PFC Manager on follow-up of admitted IP patients every day, and share necessary information in prescribed formats
10. Ensure safe / smooth discharge of patients by following all the official and required procedures/formalities and arrange transportation (ambulance/others)
11. Provide list of attendant per patient needing accommodation facility to Project Manager daily
12. Any other relevant work that may be directed by the Client

Caretaker

Deployment: Full Time

Qualification:

1. +2 with Certificate in Housekeeping Operation/Front Office Operation from reputed institution
2. Minimum 3 years of professional experience

Desired qualities of the Caretaker :

1. Must be in the age group 22-35 years
2. Must have adequate computer skills especially MS Office Suite
3. Must have excellent communication skills in Odia

Specific responsibilities:

1. Overall in charge of the AAC. He/she will be the supervisor for the staff posted in the AAC.
2. Collect list of attendants per patient admitted from the Project Manager daily
3. Ensure safe, secure and clean accommodation for the attendants
4. Distribute food (daily allowance) to the attendants every morning
5. Oversee the cleanliness & ensure hygiene practices at AAC
6. Oversee the security arrangements and CCTV footage
7. Ensure all registers related to the operations of the NRCs are updated and maintained in hard and soft copies. Generate and submit necessary reports, sheets, etc. when required by Project Manager or Client
8. Ensure smooth logistical arrangements of all consumables and supplies for cleaning, and other related tasks
9. Report to PFC Manager for smooth running of the AAC

Sanitation Worker – cum- Housekeeper:

Deployment: Full Time

Specific responsibilities:

1. Maintain clean & hygienic environment in the AAC
2. Sweep and mop the AAC once daily with appropriate disinfectant under the supervision of the Caretaker
3. Disinfect the toilets once daily with 0.5% active chlorine solution
4. Wash the bed sheets, and pillow cover every alternate day
5. Wash of curtains and mosquito nets once every fortnight
6. Any other related task that may be assigned

R. Leaves for Staff / Personnel Hired in the Project

The staff/personnel hired under this project are expected to be self-motivated to achieve the objectives of the project. Considering the criticality and nature of the services provided, and to ensure that essential healthcare delivery system is not affected / disrupted, the leaves granted to the staff/personnel in this project should be regulated with the following consideration:

1. There should be at least one day holiday granted every week for all personnel/staff. However, the selected Agency will adjust the holiday, based on the needs of the project and the availability of staff
2. The staff may avail of Casual Leave (CL) of upto 24 days per year and Sick Leave (SL) for 4 days per year. Leave availed/available will be calculated on a pro-rata basis. For availing Casual Leave (CL), prior permission has to be taken which may be granted based on the HR situation and work load. Sick Leaves (SL) should be granted only if accompanied by a valid medical certificate
3. Apart from the leave/weekly holiday discussed above, every other holiday, including government holidays, national/state/local holidays, and religious/cultural holidays, should be working day for all the personnel/staff hired under this project
4. If the Project Manager is on leave, then a Project Coordinator/Caretaker should be made the *i/c Project Manager* for that period

S. Hiring of Outsourcing Agencies

Security services should be outsourced to professional security management agencies.

Section 6: Instruction to applicant Agencies

- 1.1 The District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar will select an Agency, in accordance with the method of selection specified below:

Name of the Client: District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar

Method of selection: Pre-Qualification of eligible applicant Agencies followed by Quality Based Selection [QBS]

- 1.2 Interested applicant Agencies are invited to submit a Proposal, for the assignment named below:

Name of the Project: 'Selection of an Agency for Establishment and Management of Patient Facilitation Centre at SCB Medical College and Hospital, Cuttack' under DMF, Keonjhar.

The detailed scope of the project has been described in the Terms of Reference in Section 5.

- 1.3 **The Proposal submission address is:**

District Collector cum Chairperson and Managing Trustee,
District Mineral Foundation (DMF), Keonjhar
Second Floor,
District Rural Development Agency (DRDA), Keonjhar
Keonjhar – 758001
Email: dmfkeonjhar@gmail.com

- 1.4 The Proposal (comprising of Pre Qualification documents, Technical Proposal and Financial Proposal) must be submitted by hand or by registered/speed post, which should be received by the Client, no later than the following date and time:

Date: 14 / 02 / 2019 Time: 17:00 hrs

- 1.5 The Proposal, technical presentation, and any clarifications provided by the applicant Agencies along with the Terms of Reference provided in the RFP will be the basis for selection and ultimately for a signed Contract with the selected Agency.

- 1.6 **Applicant Clarifications:**

- The Client shall invite queries from applicant Agencies as per the details mentioned in the Fact Sheet of this document.
- The Applicants must ensure that their queries should reach DMF, Keonjhar, on or before last date mentioned in Fact Sheet of this document only through the e-mail of the Client i.e. dmfkeonjhar@gmail.com
- The queries should necessarily be submitted in the following format:

Section/Page No.	Content of RFP requiring clarification	Change/clarification requested	Remarks

- d) Client shall not be responsible for ensuring that the Applicant's queries have been received by them.
- e) Any requests for clarifications post the indicated date and time may not be entertained by the Client.
- f) The purpose of query clarification is to provide the Applicants with information regarding the RFP, project requirements, and opportunity to seek clarification regarding any aspect of the RFP and the project.
- g) However, the Client reserves the right to hold or re-schedule the process.

Responses to Queries and Issue of Corrigendum:

- a) The Authorized Representative of the Client will endeavour to provide timely response to the queries. However, no representation or warranty as to the completeness or accuracy of any response made in good faith, nor does undertake to answer all the queries that have been posed by the Applicants.
 - b) At any time prior to the last date for receipt of Proposals, the Client may, for any reason, whether at its own initiative or in response to a clarification requested by a prospective Applicant, modify the RFP Document by a corrigendum.
 - c) The Corrigendum (if any) & clarifications to the queries from all Applicants will be uploaded on the website <http://kendujhar.nic.in>. Any such corrigendum shall be deemed to be incorporated into this RFP.
 - d) In order to provide prospective Applicants reasonable time for taking the corrigendum into account, the Client may discretionally extend the last date for the receipt of Proposals.
 - e) The Client's representative is: Project Director, District Rural Development Agency (DRDA) cum Chief Executive, District Mineral Foundation, Keonjhar.
- 1.7 Applicant Agencies shall bear all costs associated with the preparation and submission of their proposals and contract negotiation. The Client is not bound to accept any proposal, and reserves the right to annul the selection process at any time prior to Contract award, without thereby incurring any liability to the applicant Agencies.

1.8 Conflict of Interest:

- a) Client requires that the selected Agency shall perform the required services, provide professional, objective, and impartial advice and at all times hold the Client's interests paramount, strictly avoid conflicts of interest with other assignments or their own interests and act without any consideration for future work. Without limitation on the generality of the foregoing, the agencies, and any of their affiliates, shall be considered to have a conflict of interest and shall not be engaged, under any of the circumstances set forth below:

Conflicting Relationships:

- b) Applicant Agencies (including its Personnel and Sub-Agencies) that has a business or family relationship with a member of the Client's staff who is directly or indirectly involved in any part of (i) the preparation of the Terms of Reference of the Assignment, (ii) the selection process for such Assignment, or (iii) supervision of the Contract, may not be awarded a Contract, unless the conflict stemming from this relationship has been resolved in a manner acceptable to the Client throughout the selection process and the execution of the Contract.
- c) Applicant Agencies have an obligation to disclose any situation of actual or potential conflict that impacts their capacity to serve the best interest of the Client, or that may reasonably be perceived as having this effect. Failure to disclose said situations may lead to the disqualification of the applicant / selected Agency or the termination of its Contract.

- d) No Agency or current employees of the Client shall work as Agency under their own ministries, departments or agencies.

1.9 Unfair Advantage

If an applicant Agency could derive a competitive advantage from having provided other services related to the assignment in question, the Client shall make available to all other applicant Agencies together with this RFP all information that would in that respect give such applicant Agency any competitive advantage over competing applicant Agencies.

1.10 Fraud and Corruption

It is required that applicant Agencies participating in the project adhere to the highest ethical standards, both during the selection process and throughout the execution of the contract.

The Client:

a) Defines the terms set forth below as follows:

- i. "corrupt practice" means the offering, giving, receiving, or soliciting, directly or indirectly, of anything of value to influence the action of a public official or members of the Evaluation Committee, in the selection process or in contract execution;
- ii. "fraudulent practice" means a misrepresentation or omission of facts in order to influence a selection process or the execution of a contract;
- iii. "collusive practices" means a scheme or arrangement between two or more applicant Agencies with or without the knowledge of the Client, designed to establish prices at artificial, non-competitive levels;
- iv. "coercive practices" means harming or threatening to harm, directly or indirectly, persons or their property to influence their participation in a procurement process, or affect the execution of a contract;

b) will reject a proposal for award, if it determines that the Agency recommended for award has, directly or through an agent, engaged in corrupt, fraudulent, collusive or coercive practices in competing for the contract in question;

Applicant Agencies should be aware of the provisions on fraud and corruption stated in the specific clauses in the Contract.

Applicant Agencies shall furnish information on commissions and gratuities, if any, paid or to be paid to agents relating to this proposal and during execution of the assignment if the applicant Agency is awarded the Contract.

1.11 Only one Proposal

An applicant Agency may only submit one proposal. If an applicant Agency submits or participates in more than one proposal, all such proposals shall be disqualified.

1.12 Proposal Validity

Proposals must remain valid for 90 days after the submission date. During this period, applicant Agencies shall maintain the availability of Professional staff nominated in the Proposal and fully commit to their financial proposal, unchanged. The Client will make its best effort to complete negotiations within this period. Should the need arise; however, the Client may request applicant Agencies to extend the validity period of their proposals. Applicant Agencies who agree to such extension shall confirm that they maintain the availability of the Professional staff nominated in the Proposal, unchanged, or in their

confirmation of extension of validity of the Proposal, applicant Agencies could submit new staff in replacement, who would be considered in the final evaluation for contract award. Applicant Agencies who do not agree, have the right to refuse to extend the validity of their Proposals, under such circumstances, the Client shall not consider such proposal for further evaluation.

1.13 Preparation of Proposals:

- a) The Proposal as well as all related correspondence exchanged by the applicant Agencies and the Client, shall be written in English.
- b) In preparing their Proposal, applicant Agencies are expected to examine in detail the documents comprising the RFP. Material deficiencies in providing the information requested may result in rejection of a Proposal.

The Proposal consists of three parts (i) Pre-Qualification documents (ii) Technical Proposal (iii) Financial Proposal.

1.14 Pre-Qualification Documents

The Technical Proposals of only those applicant Agencies who meet the pre-qualification criteria in the table below will be opened. **Applicant Agencies failing to meet these criteria or not submitting requisite proof for supporting pre-qualification criteria are liable to be rejected summarily.** Applicant Agencies should fill the Pre-Qualification Form which is included in Section 7 of this RFP. The filled up Pre Qualification Form and the supporting documents should be enclosed in a separate envelope marked as 'Pre Qualification Documents'.

S.No	Basic Requirement	Specific Requirement	Documents Required
1.	Legal Entity	The Agency should be a not-for-profit organization registered under <ul style="list-style-type: none"> • Societies' Registration Act 1860 • Indian Trust Act 1882 • Companies Act 1956 	<ul style="list-style-type: none"> • Certificate of incorporation • Registration Certificate • PAN No. • GST No.
2.	Operation	The Agency should have been in operation for the past three (3) years as on 31/03/18 and filed ITRs for the last 3 FYs	Last three FY's Audited Financial Statement duly signed by a Chartered Accountant
3.	Financial Capacity	The Agency should have an average annual turnover of at least Rupees 100 lakhs over the last three FYs (15-16, 16-17 & 17-18). This must be the individual Agency's turnover and not that of group companies/organizations.	Average Annual Turnover Statement
4.	Consortium	No consortium / JVs / associations / subcontracting shall be allowed under this project.	Declaration of submitting as independent Agency from the Authorized Signatory

5.	Blacklist	The Agency should not have been blacklisted by any Central / State Government Ministry in India or Public Sector Undertakings or any Government Agencies.	Undertaking by the Authorised Signatory
6.	Experience	The Agency should have prior experience in working on health projects	Copies of Work Orders/ Sanction Orders/ MOUs/ Engagement Letters/ Completion Certificates or equivalent documentary evidence should be provided as proof
7.	Authorized Representative	A Power of Attorney/ Board Resolution in the name of the person signing the proposal	Original Power of Attorney or Board Resolution Copy
8.	Cost of Tender/ Tender Fee	The Agency should furnish a Tender Fee of ₹5,000 (Rupees Five Thousand Only), in the form of Demand Draft in favour of <i>The District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar</i> , and payable at <i>Keonjhar</i> .	Original Demand Draft
9.	Earned Money Deposit (EMD)	The Agency should furnish an EMD of ₹50,000 (Rupees Fifty Thousand Only), in the form of Demand Draft in favour of <i>The District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar</i> , and payable at <i>Keonjhar</i> .	Original Demand Draft

NOTE: The copies of documents submitted towards Pre-qualification criteria are to be substantiated through production of originals, if and when required.

1.15 Technical Proposal Format and Content

Applicant Agencies are required to fill the **Tech Forms**. The filled up Tech Forms (in Section 7) should be enclosed in a separate envelope along with all necessary/supporting documents to justify the claims. The supporting documents have to be produced in original by the applicant Agencies, if and when demanded by the Client. Submission of the wrong type of Technical Proposal will result in the Proposal being deemed non-responsive.

The formats of the Technical Proposal (in Section 7) to be submitted are:

- a) Tech Form 1: Technical Evaluation Form
- b) Tech Form 2: Letter of Proposal Submission
- c) Tech Form 3: Applicant Agency's Organization and Experience
- d) Tech Form 4: Description of Approach, Methodology and Work Plan for Performing the Assignment

- e) Tech Form 5: Team Composition and Task Assignments
- f) Tech Form 6: Curriculum Vitae (CV) of proposed staff
- g) Tech Form 7: Undertaking regarding any Conflicting Activities and Declaration thereof

The Technical Proposal shall not include any financial information. A Technical Proposal containing financial information shall be declared non responsive.

1.16 Financial Proposals

The Financial Proposal shall be prepared using the attached Fin Form (in Section 8). The financial proposal shall not include any conditions attached to it and any such conditional financial proposal shall be rejected.

1.17 Tender Fee, Earnest Money Deposit (EMD) and Performance Guarantee

Tender Fee

Tender Fee of Rupees Five Thousand (₹5,000), in the form of Demand Draft (DD) drawn in favour of "District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar" and payable at Keonjhar, must be submitted along with the Proposal. Proposals not accompanied by Tender Fee shall be rejected as non-responsive.

1.18 Earnest Money Deposit

An Earnest Money Deposit (EMD) of Rupees Fifty Thousand (₹ 50,000), in the form of Demand Draft (DD) drawn in favour of "District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar" and payable at Keonjhar, must be submitted along with the Proposal. Proposals not accompanied by Tender Fee and EMD shall be rejected as non-responsive. No interest shall be payable by the Client for the sum deposited as EMD and no bank guarantee will be accepted in lieu of the EMD. The EMD of the successful and unsuccessful bidders would be returned within one month of signing of the contract.

The EMD shall be forfeited by the applicant Agencies in the following events:

- a) If Proposal is withdrawn during the validity period or any extension agreed by the applicant Agencies thereof.
- b) If the Proposal is varied or modified in a manner not acceptable to the Client after opening of Proposal during the validity period or any extension thereof.
- c) If the applicant Agencies tries to influence the evaluation process.
- d) If the selected Agency withdraws its proposal during negotiations.

1.19 Performance Bank Guarantee

The selected Agency shall be required to furnish a Performance Bank Guarantee of ₹ 2,00,000/- (Rupees Five Lakhs Only) in the form of an unconditional and irrevocable bank guarantee from a Nationalized/Scheduled bank in India in favour of "District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar" for the entire period of contract with 90 days claim period. The bank guarantee must be submitted after award of contract but before signing of contract. The successful bidder must renew the bank guarantee on same terms and conditions for the period up to contract including extension period, if any. Performance Bank Guarantee would be returned only after successful completion of tasks assigned to them and only after adjusting/recovering any dues recoverable/payable from/by the selected Agency on any account under the contract. On submission of

this performance guarantee and after signing of the contract, demand draft submitted towards EMD would be returned in original. The format for the Performance Bank Guarantee is provided in Annexure I.

1.20 Submission, receipt and opening of proposals

- a) The Proposals (Pre-Qualification, Technical Proposal and Financial Proposal) shall contain no interlineations or overwriting, except as necessary to correct errors made by the applicant Agencies themselves. The under signee person for the proposal must provide his initial beside such corrections. Submission letters for the Technical Proposal and Financial Proposals should respectively be in the format specified.
- b) An authorized representative of the applicant Agency shall initial all pages of the original Pre-Qualification, Technical and Financial Proposals. The authorization shall be in the form of a written power of attorney accompanying the Technical and Financial Proposals or in any other form demonstrating that the representative has been duly authorized to sign.
- c) The Pre Qualification form and all documents (listed in 1.14) including the Tender Fee, EMD, declaration of submission as independent agency and power of attorney shall be placed in a separate sealed envelope clearly marked "PRE QUALIFICATION DOCUMENTS". The Technical Proposal including all the Tech Forms and supporting documents (listed in 1.15) shall be placed in a separate sealed envelope clearly marked "TECHNICAL PROPOSAL". Similarly, the Financial Proposal including the Fin Form (described in 1.16) shall be placed in a separate sealed envelope clearly marked "FINANCIAL PROPOSAL" All the three sealed envelopes shall be placed in an outer envelope and sealed. This outer envelope shall bear the submission address and shall be clearly marked "DO NOT OPEN, EXCEPT IN PRESENCE OF THE OFFICIAL APPOINTED, BEFORE 11 :00 hrs ON 15/02 /2019". The Client shall not be responsible for misplacement, loss or premature opening if the outer envelope is not sealed and/or marked as stipulated. This circumstance may also be deemed as fit case for Proposal rejection. If the Proposal is not submitted in separate sealed envelopes duly marked as indicated above, this will constitute grounds for declaring the Proposal non-responsive.
- d) The Proposals must be sent to the address indicated and received by the Client no later than the time and the date of submission, or any extension to this date in accordance with corrigendum. Any proposal received by the Client after the deadline for submission shall be returned unopened.
- e) From the time the Proposals are opened to the time the Contract is awarded, the applicant Agencies should not contact the Client on any matter related to its Technical and/or Financial Proposal. Any effort by applicant Agencies to influence the Client in the examination, evaluation, ranking of Proposals, and recommendation for award of Contract may result in the rejection of the applicant Agencies' Proposal.

1.21 Evaluation of Technical Proposal

- a) An Evaluation Committee (EC) will be constituted by the Client for the purpose of evaluating the proposals.
- b) In the first stage of evaluation, only responsive proposals which satisfy the Pre-Qualification Criteria shall be further taken up for evaluation. A Proposal shall be rejected if it is found deficient as per the requirements indicated.
- c) The EC shall then evaluate the Technical Proposals on the basis of their responsiveness to the Terms of Reference and by applying the evaluation criteria, sub-criteria specified in the Table below.
- d) The Evaluation Committee while evaluating the Technical Proposals shall have no access to the Financial Proposals until the technical evaluation is concluded and the competent authority accepts the recommendation.
- e) Agencies shall also make a presentation before the Evaluation Committee, which will be evaluated.
- f) Each responsive Proposal will be given a technical score.

- g) A Proposal shall be rejected at this stage if it does not respond to important aspects of the RFP and particularly the Terms of Reference or if it fails to achieve the minimum technical score indicated below.

Criteria, sub-criteria, and points system for the Evaluation of Technical Proposals:

Sl.	Evaluation Criteria	Supporting Form	Max. Marks
1.	Turnover	Average Annual Turnover Statement	6
1.1	Average annual turnover of the last three financial years, i.e. , 2015-16, 2016-17, 2017-18 <u>Scoring criteria</u> (Rs. 1 crore – 1.49 crores = 1 marks; Rs. 1.5 crores – 1.99 crores = 2 marks; Rs. 2 crores – 2.49 crores = 3 marks; Rs. 2.5 crores – 2.99 crores = 4 marks; Rs. 3 crores – 3.49 crores = 5 marks and Rs. 3.5 + crores = 6 marks)		6
2.	Experience		18
2.1	Experience in management of Urban PHC / PHC / bedded hospital / Clinics established under the Clinical Establishment Act in partnership with Govt. / other development agency (Marks awarded will be dependent on the summation of years of experience in individual projects, i.e. $Y = Y1 + Y2 + Y3 + \dots + Yn$) <u>Scoring criteria</u> $Y < 4.99$ = 0 marks $5 < Y < 9.99$ = 2 marks $10 < Y < 14.99$ = 4 marks $Y > 15 +$ = 6 marks		6
2.2	Experience in working on health project with the office of the CDMO / NHM at district level (Marks awarded will be dependent on the summation of years of experience in individual projects, i.e. $Y = Y1 + Y2 + Y3 + \dots + Yn$) <u>Scoring criteria</u> $Y < 4.99$ = 0 marks $5 < Y < 9.99$ = 2 marks $10 < Y < 14.99$ = 4 marks $Y > 15 +$ = 6 marks	Tech Form 3	6

Sl.	Evaluation Criteria	Supporting Form	Max. Marks
2.3	Experience in managing dormitory/hostel/Maa Gruha/NRC or any other overnight / similar facility (Marks awarded will be dependent on the summation of years of experience in individual projects, i.e. $Y = Y1 + Y2 + Y3 + \dots + Yn$) <u>Scoring criteria</u> Y < 4.99 = 0 marks 5 < Y < 9.99 = 2 marks 10 < Y < 14.99 = 4 marks Y > 15 + = 6 marks		6
3	Personnel	Tech Form 5 & Tech Form 6	16
3.1	Project Manager (1)		3.5
3.2	PFC Coordinator (7)		10.5
3.3	Caretaker (2)		2
4	Presentation of Approach, Methodology and Work Plan before the evaluation committee	Tech Form 4	10
Total Marks			50

*Experiences prior to 2010-11 FY will not be entertained; hence those need not be claimed.

Note: The minimum qualifying mark is: 30 (60%).

1.22 Evaluation of Financial Proposal

- a) The Financial Proposal is only a declaration of acceptance of the proposed budget (including Management Fee) by the applicant Agencies and is non-evaluative in nature.
- b) Financial Proposals of only those applicant Agencies who are technically qualified (i.e. obtain minimum 60% in Technical Evaluation) shall be opened.

1.23 Final Selection of Agency

All applicant Agencies who are technically qualified (i.e. obtain minimum 60% in Technical Evaluation) shall be ranked on the basis of marks obtained in the Technical Evaluation and the Agency scoring the highest marks will be selected by the Client.

1.24 Expected date and address for contract negotiations

Date to be communicated later.

Address:

District Collector cum Chairperson and Managing Trustee,
District Mineral Foundation (DMF), Keonjhar
Second Floor,
District Rural Development Agency (DRDA), Keonjhar
Keonjhar – 758001
Email: dmfkeonjhar@gmail.com

Expected date and place for commencement of services

To be communicated later.

1.25 Negotiations

Negotiations will be held at the address indicated above. The invited Agency will, as a pre-requisite for attendance at the negotiations, confirm availability of all Professional staff. Failure in satisfying such requirements may result in the Client proceeding to negotiate with the next-ranked Agency. Representatives conducting negotiations on behalf of the Agency must have written authority to negotiate and conclude a Contract.

a) Technical Negotiations

Negotiations will include a discussion of the Technical Proposal including the proposed technical approach and methodology, work plan, organization and staffing, and any suggestions made by the selected Agency to improve the Terms of Reference. The Client and the selected Agency will finalize the Terms of Reference, staffing schedule, work schedule, and reporting. These documents will then be incorporated in the Contract as "Description of Services". Special attention will be paid to clearly defining the inputs and facilities required from the Client to ensure satisfactory implementation of the assignment. The Client shall prepare minutes of negotiations which will be signed by the Client and the selected Agency.

b) Financial Negotiations

After the technical negotiations are over, financial negotiations will be carried out in order to discuss any changes in financials due to change in scope of work or due to clarification on any aspect of the technical proposal during the technical negotiations. Under ordinary circumstances, the financial negotiation shall not result in any increase in the proposed budget. However, in case of exceptional reasons/circumstances, the client may consider an increase/modification in the budget.

c) Conclusions of Negotiations

Negotiations will conclude with a review of the draft Contract. To complete negotiations the Client and the selected Agency will initial the agreed Contract. If negotiations fail, the Client will invite the next-ranked Agency to negotiate a Contract.

1.26 Award of Contract

- a) After completing negotiations the Client shall issue a Letter of Intent to the selected Agency, and promptly notify all applicant Agencies who have submitted proposals about the decision taken.
- b) The selected Agency will sign the contract after fulfilling all the formalities/pre-conditions including submission of the Performance Bank Guarantee within seven (7) working days of issuance of the Letter of Intent.

1.27 Confidentiality

Information relating to evaluation of Proposals and recommendations concerning awards shall not be disclosed to the applicant Agencies who submitted the Proposals or to other persons not officially concerned with the process, until the publication of the award of Contract. The undue use by any Agency of confidential information related to the process may result in the rejection of its Proposal.

Section 7: Standard Forms

Pre-Qualification Form 1

S.No	Basic Requirement	Specific Requirement	Documents Required	Document Submitted (Yes/No)
1.	Legal Entity	The Agency should be a not-for-profit organization registered under <ul style="list-style-type: none"> Societies' Registration Act 1860 Indian Trust Act 1882 Companies Act 1956 	<ul style="list-style-type: none"> Certificate of incorporation Registration Certificate PAN No. GST No. 	
2.	Operation	The Agency should have been in operation for the past three years as on 31/03/18 and filed ITRs for the last 3 FYs	Last three FY's Audited Financial Statement duly signed by a Chartered Accountant	
3.	Financial Capacity	The Agency should have an average annual turnover of at least 100 lakhs over the last three FYs (15-16, 16-17 & 17-18). This must be the individual Agency's turnover and not that of group companies/organizations.	Average Annual Turnover Statement (Supporting form 'Pre-Qualification Form 2')	
4.	Consortium	No consortium / JVs / associations / subcontracting shall be allowed under this project	Declaration of submitting as independent Agency from the Authorized Signatory (Supporting form 'Pre-Qualification Form 3')	
5.	Blacklist	The Agency should not have been blacklisted by any Central / State Government Ministry in India or Public Sector Undertakings or any Government Agencies	Undertaking by the Authorised Signatory (Supporting form 'Pre-Qualification Form 4')	
6.	Experience	The Agency should have prior experience in working on health projects	Copies of Work Orders/ Sanction Orders/ MOUs/ Engagement Letters/ Completion Certificates or equivalent documentary evidence should be provided as proof	
7.	Authorized Representative	A Power of Attorney/ Board Resolution in the name of the person signing the proposal	Original Power of Attorney or Board Resolution Copy	

8.	Cost of Tender/ Tender Fee	The Agency should furnish a Tender Fee of ₹5,000 (Rupees Five Thousand Only), in the form of Demand Draft in favour of <i>The District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar</i> , and payable at <i>Keonjhar</i> .	Original Demand Draft	
9.	Earned Money Deposit (EMD)	The Agency should furnish an EMD of ₹50,000 (Rupees Fifty Thousand Only), in the form of Demand Draft in favour of <i>The District Collector cum Chairperson and Managing Trustee, District Mineral Foundation (DMF), Keonjhar</i> , and payable at <i>Keonjhar</i> .	Original Demand Draft	

Note: All claims should be substantiated through production of supporting documents. All supporting documents should have the period of execution, along with details of the project components, partners, etc. clearly highlighted.

Pre-Qualification Form 2

AVERAGE ANNUAL TURNOVER STATEMENT

The Average Annual Turnover statement of <name of the organisation>, at<address of the organisation>, for the last three financial year are given below and certified that the statement is true and correct.

Sl. No.	Financial Year	Turnover in lakhs (₹)
1	2015-16	
2	2016-17	
3	2017-18	
4	Average annual turnover statement	

Date:

Signature of Chartered Accountants

Place:

Seal:

Membership No:

Note:

1. To be issued in the letter head of the Chartered Accountant
2. The annual average turnover statement will be invalid without the membership number of the Chartered Accountant

Pre-Qualification Form 3

NON-CONSORTIUM DECLARATION

We,<name of the Organisation>, having our registered office at , <HQ address of the Organisation> hereby declare that we are submitting this proposal in reference to the Request for Proposal for the "Selection of an Agency for 'Establishment and Management of Patient Facilitation Centre at SCB Medical College and Hospital, Cuttack' under District Mineral Foundation (DMF), Keonjhar.

We declare that we are submitting this proposal as an independent agency, and not as a part of any consortium/Joint Venture/Associations.

We also acknowledge that in case of misrepresentation of the information, our proposal / contract shall be rejected / terminated at any stage by the client, which shall be binding on us. Any loss or damage to the client, on this count will be compensated by us.

Date:

Authorised Signature

Place:

Name and Title of Signatory

Seal:

Note:

1. To be issued in the letter head of the Organisation

Pre-Qualification Form 4

NON-BLACKLIST UNDERTAKING

We,<name of the Organisation>, having our registered office at , <HQ address of the Organisation> hereby declare that we are submitting this proposal in reference to the Request for Proposal for the “Selection of an Agency for ‘Establishment and Management of Patient Facilitation Centre at SCB Medical College and Hospital, Cuttack’ under District Mineral Foundation (DMF), Keonjhar.

We declare that we have not been blacklisted by any Ministry / Department / Public Sector Undertaking or any other agency of the Central/State Government.

We declare that there are no proceedings, disputes or enquiries pending against us in connection with cheating, misappropriation of funds or exploitation of beneficiary.

We also acknowledge that in case of misrepresentation of the information, our proposal / contract shall be rejected / terminated at any stage by the client, which shall be binding on us. Any loss or damage to the client, on this count will be compensated by us.

Date: Authorised Signature
Place: Name and Title of Signatory
Seal:

Note:

1. To be issued on the letter head of the Organisation

Technical Proposal Forms

Tech Form 1: Technical Evaluation Form

Sl.	Evaluation Criteria	Supporting Tech Form													
1.	Turnover	Average Annual Turnover Statement													
1.1	<p>Average annual turnover of the last three financial years, i.e. , 2015-16, 2016-17, 2017-18</p> <p><u>Scoring criteria</u></p> <p>(Rs. 1 crore – 1.49 crores = 1 marks; Rs. 1.5 crores – 1.99 crores = 2 marks; Rs. 2 crores – 2.49 crores = 3 marks; Rs. 2.5 crores – 2.99 crores = 4 marks; Rs. 3 crores – 3.49 crores = 5 marks and Rs. 3.5 + crores = 6 marks)</p>		<i>[Provide average annual turnover for the last three financial years]</i>												
2.	Experience	Tech Form 3													
2.1	<p>Experience in management of Urban PHC / PHC / bedded hospital / Clinics established under the Clinical Establishment Act in partnership with Govt. / other development agency</p> <p>(Marks awarded will be dependent on the summation of years of experience in individual projects, i.e. $Y = Y1 + Y2 + Y3 + \dots + Yn$)</p> <p><u>Scoring criteria</u></p> <p>$Y < 4.99$ = 0 marks $5 < Y < 9.99$ = 2 marks $10 < Y < 14.99$ = 4 marks $Y > 15 +$ = 6 marks</p>		<table border="1"> <thead> <tr> <th><i>Project name</i></th> <th><i>No. of Years</i></th> </tr> </thead> <tbody> <tr> <td><i>Project 1</i></td> <td><i>Y1</i></td> </tr> <tr> <td><i>Project 2</i></td> <td><i>Y2</i></td> </tr> <tr> <td><i>Project 3</i></td> <td><i>Y3</i></td> </tr> <tr> <td>....</td> <td>....</td> </tr> <tr> <td><i>Project (n)</i></td> <td><i>Y(n)</i></td> </tr> </tbody> </table>	<i>Project name</i>	<i>No. of Years</i>	<i>Project 1</i>	<i>Y1</i>	<i>Project 2</i>	<i>Y2</i>	<i>Project 3</i>	<i>Y3</i>	<i>Project (n)</i>	<i>Y(n)</i>
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<i>Project 2</i>	<i>Y2</i>														
<i>Project 3</i>	<i>Y3</i>														
....														
<i>Project (n)</i>	<i>Y(n)</i>														
2.2	<p>Experience in working on health project with the office of the CDMO / NHM at district level</p> <p>(Marks awarded will be dependent on the summation of years of experience in individual projects, i.e. $Y = Y1 + Y2 + Y3 + \dots + Yn$)</p> <p><u>Scoring criteria</u></p> <p>$Y < 4.99$ = 0 marks $5 < Y < 9.99$ = 2 marks $10 < Y < 14.99$ = 4 marks $Y > 15 +$ = 6 marks</p>	<table border="1"> <thead> <tr> <th><i>Project name</i></th> <th><i>No. of Years</i></th> </tr> </thead> <tbody> <tr> <td><i>Project 1</i></td> <td><i>Y1</i></td> </tr> <tr> <td><i>Project 2</i></td> <td><i>Y2</i></td> </tr> <tr> <td><i>Project 3</i></td> <td><i>Y3</i></td> </tr> <tr> <td>....</td> <td>....</td> </tr> <tr> <td><i>Project (n)</i></td> <td><i>Y(n)</i></td> </tr> </tbody> </table>	<i>Project name</i>	<i>No. of Years</i>	<i>Project 1</i>	<i>Y1</i>	<i>Project 2</i>	<i>Y2</i>	<i>Project 3</i>	<i>Y3</i>	<i>Project (n)</i>	<i>Y(n)</i>	
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<i>Project 3</i>	<i>Y3</i>														
....														
<i>Project (n)</i>	<i>Y(n)</i>														

Sl.	Evaluation Criteria	Supporting Tech Form		
2.3	Experience in managing dormitory/hostel/Maa Gruha/NRC or any other overnight /similar facility (Marks awarded will be dependent on the summation of years of experience in individual projects, i.e. $Y = Y1 + Y2 + Y3 + \dots + Yn$) <u>Scoring criteria</u> Y < 4.99 = 0 marks 5 < Y < 9.99 = 2 marks 10 < Y < 14.99 = 4 marks Y > 15 + = 6 marks		<i>Project name</i>	<i>No. of Years</i>
			<i>Project 1</i>	<i>Y1</i>
			<i>Project 2</i>	<i>Y2</i>
			<i>Project 3</i>	<i>Y3</i>
			<i>....</i>	<i>....</i>
			<i>Project (n)</i>	<i>Y(n)</i>
3	Personnel	Tech Form 5 and Tech Form 6		
3.1	Project Manager (1)		<i>No. of CVs meeting all eligibility requirements</i>	
3.2	PFC Coordinator (7)		<i>No. of CVs meeting all eligibility requirements</i>	
3.3	Caretaker (2)		<i>No. of CVs meeting all eligibility requirements</i>	
4	Presentation of Approach, Methodology and Work Plan before the evaluation committee	Tech Form 4		

Note: All claims should be substantiated through production of supporting documents. All supporting documents should have the period of execution, along with details of the project components clearly highlighted.

Tech Form 2: Letter of Proposal Submission

To,

The District Collector cum Chairperson and Managing Trustee,

District Mineral Foundation (DMF), Keonjhar

Dear Sir,

We, the undersigned, offer to execute the assignment - '**Establishment and Management of Patient Facilitation Centre at SCB Medical College and Hospital, Cuttack**' under District Mineral Foundation (DMF), Keonjhar in accordance with your Request for Proposal dated _____. We are hereby submitting our Proposal, which includes the Pre-Qualification Documents, Technical Proposal and Financial Proposal, sealed in separate envelopes.

We hereby declare that all the information and statements made in this Proposal are true and accept that any misinterpretation contained in it may lead to our disqualification. Our Proposal is binding upon us and subject to the modifications resulting from Contract negotiations.

We undertake, if our Proposal is accepted, to initiate the services related to the assignment not later than the date indicated.

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

We remain,

Yours sincerely,

Authorized Signature [*In full and initials*]: _____

Name and Title of Signatory: _____

Name of Agency: _____

Address: _____

Location: _____ Date: _____

Tech Form 3 – Applicant Agency’s Organization and Experience

A – Agency’s Organization

[Provide here a brief description of the Agency’s background including ownership details, date and place of registration, objectives, etc. Provide an outline of experience/assignments of similar nature including name of assignment, duration, contract amount, client details, staff involved, tasks carried out, etc. Apart from this, also provide details and supporting information/documents under the Pre-qualification criteria and Evaluation criteria].

Note 1: Information provided in this form should sufficiently support/justify the criteria of the Technical Qualification Form.

Note 2: All the claims should be substantiated through production of supporting documents. All supporting documents should have the period of execution, along with details of the project components clearly highlighted.

Tech Form 4 – Description of Approach, Methodology and Work Plan for Performing the Assignment

[Technical approach, methodology and work plan are key components of the Technical Proposal. You are suggested to present your Technical Proposal divided into the following three chapters:

- a) Technical Approach and Methodology,*
- b) Work Plan, and*
- c) Organisation and Staffing]*

- a) **Technical Approach and Methodology:** In this chapter, you should explain your understanding of the 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. You should highlight the problems being addressed and their importance, and explain the technical approach you should adopt to address them. You should also explain the methodologies you propose to adopt and highlight the compatibility of those methodologies with the proposed approach.
- b) **Work Plan:** In this chapter, you should propose the main activities of the assignment, their content and duration, phasing and interrelations, milestones (including interim approvals by the Client), and delivery dates. The proposed work plan should be consistent with the technical approach and methodology, **showing understanding of the TOR** and ability to translate and implement **each of the objectives, services and care to be provided, and scope of work** into a feasible working plan. A list of the final documents, including reports, drawings, and tables to be delivered as final output, should be included here. The work plan should be consistent with the Work Schedule.
- c) **Organization and Staffing:** In this chapter, you should propose the structure and composition of your team. You should list the main disciplines of the assignment, the key expert responsible, and proposed staff. The details of these resources shall be given in Tech Form – 4.

Note 1: Information provided in the form should correspond to the Technical Presentation.

Note 2: All the claims should be substantiated through production of supporting documents.

Tech Form 5 – Team Composition and Task Assignments

Professional Staff			
Name of Staff	Area of Expertise	Position Assigned	Task Assigned

Note 1: Information provided in the form should correspond to Key Personnel criteria of the Technical Qualification form.

Note 2: All the claims should be substantiated through production of supporting documents.

Tech Form 6 - Curriculum Vitae (CV) of Proposed Staff

1.	Proposed Position			
2.	Name of Agency:			
3.	Name of Staff:			
4.	Date of Birth			
5.	Education			
	Name of Institution	Degree(s) or Diploma(s) obtained:	Date	
6.	Membership in Professional Associations/ Trainings attended			
7.	Languages			
	Language	Reading	Speaking	Writing
	English			
	Odia			
	Hindi			
	Any other			
8.	Employment Record:			
	FROM :			TO:
	EMPLOYER			
	POSITION/S HELD			
	FROM:			TO:
	EMPLOYER			
	POSITION/S HELD			
	FROM:			TO:
	EMPLOYER			
	POSITION/S HELD			
9.	Work Undertaken that Best Illustrates Capacity to Handle the Tasks Assigned			
	Name of assignment or project:			
	Year:			
	Location:			

Client:	
Main project features:	
•	
Position/s held:	
Activities performed:	
•	
Name of assignment or project:	
Year:	
Location:	
Client:	
Main project features:	
•	
Position/s held:	
Activities performed:	
•	

10. Certification

I, the undersigned, certify that to the best of my knowledge and belief, this CV correctly describes me, my qualifications, and my experience. I understand that any wilful misstatement described herein may lead to my disqualification or dismissal, if engaged.

Signature _____

Note 1: Information provided in the form should correspond to the Key Personnel Criteria of the Technical Qualification form.

Note 2: All the claims should be substantiated through production of supporting documents.

Tech Form 7 – Undertaking Regarding any Conflicting Activities and Declaration Thereof

Are there any activities carried out by your Agency which are of conflicting nature as mentioned in para 1.8 of section 6. If yes, please furnish details of any such activities.

If no, please certify,

[We hereby declare that our Agency has not indulged in any such activities which can be termed as the conflicting activities under para 1.8 of the section 6. We also acknowledge that in case of misrepresentation of the information, our proposals /contract shall be rejected / terminated by the Client which shall be binding on us.]

Authorized Signature [In full and initials]:

Name and Title of Signatory:

Name of Agency:

Address:

Section 8

Fin Form

[Location, Date]

To,

District Collector cum
Chairperson and Managing Trustee,
District Mineral Foundation (DMF), Keonjhar

Dear Sir,

We, the undersigned, offer to provide services for the assignment '**Establishment and Management of Patient Facilitation Centre at SCB Medical College and Hospital, Cuttack**' under District Mineral Foundation (DMF), Keonjhar' in accordance with your Request for Proposal (RFP) dated _____ and our Technical Proposal.

We fully accept the proposed budget (including the Management Fee) in the RFP. The proposed budget (including the Management Fee) shall be binding upon us subject to the modifications resulting from Contract negotiations, up to expiration of the validity period of the Proposal.

We understand that the management fee will be released on the yearly audit as specified in Section 5 (O) of the RFP documents.

We hereby certify that we have taken steps to ensure that no person acting for us or on our behalf will engage in bribery. We undertake that, in competing for (and, if the award is made to us, in executing) the above contract, we will strictly observe the laws against fraud and corruption in force in India namely "Prevention of Corruption Act, 1988".

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

We remain,

Yours sincerely,

Authorized Signature [In full and initials]: _____

Name and Title of Signatory: _____

Name of Agency: _____

Address: _____

ANNEXURE- I

DRAFT PERFORMANCE BANK GUARANTEE

(To be issued by a Bank _____)

This deed of Guarantee executed at _____ by _____ (Name of the Bank) having its Head/Registered Office at _____ (hereinafter referred to as "the Guarantor") which expression shall unless it be repugnant to the subject or context thereof include its heirs, executors, administrators, successors and assigns.

In favour of **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** having its office at (Keonjhar) (hereinafter called DMF, Keonjhar, which expression shall unless it be repugnant to the subject or context thereof include its heirs, executors, administrators, successors and assigns);

Whereas _____, an organisation registered/formed under _____ (specify the applicable law) and having its registered office at _____ (hereinafter referred to as the Agency) has been, consequent to conduct and completion of a competitive bidding process in accordance with the Request for Proposal (RFP) document No. _____ dated _____ issued by **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar**, selected for the Agreement by Collector & Chairperson cum Managing Trustee, DMF Keonjhar as more specifically defined in the aforementioned Document including statement of work and the Agreement executed between the **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** and Agency .

The Agreement requires the Agency to furnish an unconditional and irrevocable Bank Guarantee for an amount of ₹ _____/- Rupees _____ only) by way of security for guaranteeing the due and faithful compliance of its obligations under the Agreement.

Whereas, the Agency approached the Guarantor and the Guarantor has agreed to provide a Guarantee being these presents.

Now this Deed witnessed that in consideration of the premises, we, _____ Bank hereby guarantee as follows:

1. The Agency shall implement the project- '**Establishment and Management of Patient Facilitation Centre at SCB Medical College and Hospital, Cuttack under District Mineral Foundation (DMF), Keonjhar**' in accordance with the term and subject to the conditions of the Agreement and fulfil its obligations there under
2. We, the Guarantor, shall, without demur, pay to **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** an amount not exceeding ₹ _____ (Rupees _____ only) within 7 (seven) days of receipt of a written demand from **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** stating that the Agency has failed to fulfil its obligations as stated in Clause 1 above.
3. The above payment shall be made by us without any reference to the Agency or any other person and irrespective of whether the claim of the **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** is disputed by the Agency or not.

4. The Guarantee shall come into effect from _____ (Start Date) and shall continue to be in full force and effect till the earlier of its expiry at 1700 hours Indian Standard Time on _____ (Expiry Date) (both dates inclusive) or till the receipt of a claim, from the **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** under this Guarantee, which is one month after the expiry of performance guarantee, whichever is earlier. Any demand received by the Guarantor from **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** prior to the Expiry Date shall survive the expiry of this Guarantee till such time that all the moneys payable under this Guarantee by the Guarantor to **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar**.
5. In order to give effect to this Guarantee, **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** shall be entitled to treat the Guarantor as the principal debtor and the obligations of the Guarantor shall not be affected by any variations in the terms and conditions of the Agreement or other documents by **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** or by the extension of time of performance granted to the Agency or any postponement for any time of the power exercisable by **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** against the Agency or forebear or enforce any of the terms and conditions of the Agreement and we shall not be relieved from our obligations under this Guarantee on account of any such variation extension forbearance or omission on the part of **Collector & Chairperson cum Managing Trustee, District Mineral Foundation, Keonjhar** to the Agency to give such matter or thing whatsoever which under the law relating to sureties would but for this provision have effect of so relieving us.
6. The Guarantee shall be irrevocable and shall remain in full force and effect until all our Obligations under this guarantee are duly discharged.
7. The Guarantor has power to issue this guarantee and the undersigned is duly authorized to execute this Guarantee pursuant to the power granted under _____.

In witness, whereof the Guarantor has set its hands hereunto on the day, month and year first here-in-above written.

Signed and Delivered by _____ Bank by the hand of Shri _____ its _____ and authorized office.

Authorised Signatory _____ Bank

ANNEXURE- II

BUDGET & FUND FLOW

1. ABSTRACT OF BUDGET

Cost of operationalising PFC (Over three years)					
Sl. No	Item	Costs in 1st Year (in ₹)	Cost in 2 nd Year	Cost in 3 rd Year	Remarks
1	Capital Cost	12,96,150			
2	Personnel Cost	43,44,000	47,78,400	52,56,240	10% increment in subsequent year
3	Running Cost	82,60,000	82,60,000	82,60,000	
4	Management Fee	9,45,300	9,77,880	10,13,718	7.5 % of (Personnel Cost + Running Cost)
TOTAL		1,48,45,450	1,40,16,281	1,45,29,960	4,33,91,691

*Management fee will be based on actual recurring expenditure incurred

2. CAPITAL COST

Sl. No.	Item	Quantity	Price/Unit	Total Cost
1	Bed	100	3,000	3,00,000
2	Mattress	100	1,000	1,00,000
3	Pillow	100	100	10,000
4	Bed sheet	120	200	24,000
5	Pillow cover	120	30	3,600
6	Mosquito nets	100	300	30,000
7	Storage Boxes (with chain & lock)	100	750	75,000
8	Minor Repair/Installation at AAC	2	1,00,000	2,00,000
9	Chairs for AAC	6	400	2,400
10	Table for AAC	1	2,500	2,500
11	RO filter for AAC	2	15,000	30,000
12	Power backup for AAC (Inverter + Battery Unit)	2	80,000	1,60,000
13	CCTV camera arrangement for AAC	2	30,000	60,000
14	Fans for AAC	20	1,200	24,000
15	LED Lights for AAC	20	100	2,000
16	Steel Bucket and Mug (Medium Size)	15	500	7,500
17	Steel Bucket and Mug (Large Size)	10	850	8,500
18	Plastic Dustbins	15	150	2,250
19	First Aid Kit	3	500	1,500
20	Mobile Phones	4	1,500	6,000
21	Laptop for PFC	1	30,000	30,000
22	Table for PFC	1	2,500	2,500
23	Chairs for PFC	6	400	2,400
24	Desktop Computer for AAC	1	30,000	30,000
25	Tablet Computers	4	8,000	32,000
26	Printer cum Scanner	2	20,000	40,000
27	Fire Extinguisher	2	5,000	10,000
28	Washing Machine (8 kg, Automatic)	2	30,000	60,000
29	Miscellaneous	2	20,000	40,000
TOTAL				12,96,150

3. DETAILED PERSONNEL COST

Sl. no.	Item	Cost Estimate per month	Annual Costs (in ₹)
i	Project Manager (1)	60,000	7,20,000
ii	PFC Coordinator (7)	2,10,000	25,20,000
iii	Caretaker (Male – 1)	20,000	2,40,000
iv	Caretaker (Female – 1)	20,000	2,40,000
v	Sanitation Worker-cum- Housekeeper (Male – 1)	10,000	1,20,000
vi	Sanitation Worker-cum-Housekeeper (Female – 1)	10,000	1,20,000
vii	Security Guards (Male – 2, Female - 2)	32,000	3,84,000
Total		3,62,000	43,44,000

4. DETAILED RUNNING COST

Sl. no.	Item	Cost Estimate per month	Annual Costs (in ₹)
i	Rent allowance for AAC (including electricity & water charges)	50,000	6,00,000
ii	Food allowance (@ ₹ 200/attendant – 100 nos.)	6,00,000	72,00,000
iii	Consumables (toiletries, detergents, etc)	10,000	1,20,000
iv	Maintenance Cost	10,000	1,20,000
v	Establishment Cost	10,000	1,20,000
vi	Annual Maintenance Cost		1,00,000
Sub-total			82,60,000

5. FUND FLOW MECHANISM

